As a student at the Keck School of Medicine of USC, you are held to all policies and procedures outlined in the Student Handbook. These policies and procedures may be revised from time-to-time and as a condition of being admitted as a student, you agree to be bound by policies and procedures that may be revised during your tenure as a student.
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Overview of the Keck School

- Who’s Who in the School of Medicine
- Student Affairs Committee
- Student Performance Committee
- Committee on Performance, Professionalism, and Promotion
- Student Officers
## WHO'S WHO IN THE SCHOOL OF MEDICINE

### Dean’s Office Administration (KAM 500)

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Phone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carmen Puliafito, MD, MBA</td>
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</tr>
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</tr>
</tbody>
</table>

### Educational Affairs (KAM 218)

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Phone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

### Office of Student Affairs (KAM 100B)

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Phone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
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<tr>
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<tr>
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</tbody>
</table>
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Jason Murillo  
Assistant Director  
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STUDENT AFFAIRS COMMITTEE

A. Charge
1. The Student Affairs Committee shall consider and evaluate all matters dealing with student affairs, including financial aid, student housing, student recreation, and shall assist the Senior Associate Dean for Student and Educational Affairs (or responsible administrator) in the area of student affairs.
2. The Committee may establish subcommittees it deems necessary.

B. Membership
1. The Chair is nominated by the Senior Associate Dean for Student and Educational Affairs and confirmed by the Vice Dean for Medical Education.
2. Voting Members of the Student Affairs Committee include:
   a. The Chair
   b. Five faculty members from basic science and clinical departments
   c. Eight medical student members elected from each class
3. Ex officio, non-voting members include:
   a. The Senior Associate Dean for Student and Educational Affairs, the Assistant Dean for Student Affairs, and the Assistant Dean for Diversity
   b. Other faculty or staff at the discretion of the Chair

C. Actions
1. The Committee will meet regularly throughout the year.
2. The Committee will define the institutional standards for professional behavior and create a procedure for adjudicating violations of those standards.
3. The Committee may initiate an inquiry into student mistreatment to address a formal complaint or on its own if a pattern of mistreatment is suspected.
4. Findings and recommendations of the Committee will be reported to the Senior Associate Dean for Student and Educational Affairs and Vice Dean for Education for their consideration in any official action.

STUDENT PERFORMANCE COMMITTEE

A. Charge
1. The Year I/II Student Performance Committee has the responsibility and authority to evaluate academic and student professional conduct in Years I and II, determine adherence to school performance expectations, make recommendations for remediation, and decide eligibility for promotion.
2. All actions of the Committee are advisory to the Dean, or his/her designee, who makes the final decision.
3. All information pertaining to student performance, including information of a non-academic and personal nature, which is presented at the Committee meetings, and all deliberations and details of Committee voting are strictly confidential and are not discussed outside the Committee. Actions of the Committee may be disclosed by the Committee Chair as appropriate.

B. Membership
1. The Committee Chair is nominated by the Senior Associate Dean for Student and Educational Affairs and confirmed by the Vice Dean for Medical Education.
2. Voting members of the Year I/II Student Performance Committee include:
   a. The Chair or Co-chair (or approved alternate) from each Year I and II system committee
   b. The Directors or Co-directors of ICM & PPM
3. Ex officio, non-voting members include:
   a. The Associate and Assistant Deans for Admissions, Curriculum, Diversity, Student Affairs, and Educational Affairs;
   b. Representative(s) from the Department of Medical Education;
   c. Other faculty or staff as deemed appropriate by the Chair.
C. **Actions**

1. The Committee will meet regularly throughout the year to monitor students’ performance on examinations and other assignments.
2. The Committee will review students’ behavior and professional development.
3. The Committee will monitor students’ satisfactory academic progress and review any requests for extension of time.
4. Meetings may be called for special problems within three weeks of their being brought to the attention of the Senior Associate Dean for Student and Educational Affairs. A student whose record will be considered at a special meeting will be given notice of the meeting at least five (5) days before it is held.
5. At the end of the academic year (or earlier in some cases) the Committee will make one of the following recommendations to the Dean for each student:
   a. Promotion
   b. Academic or Professional Behavior Probation
   c. Remedial work which may include a make-up examination
   d. Repeating part of or the entire year of instruction
   e. Suspension
   f. Dismissal (see “Procedure for Dismissal”)
   g. Leave of Absence
6. For regular business of the Committee a simple majority vote of the membership; must be present to vote and a simple majority vote is required for a motion to pass. For dismissal, two-thirds of the membership must be present to vote. Affirmative votes by two-thirds of those members present are necessary for dismissal.

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**COMMITTEE ON PERFORMANCE, PROFESSIONALISM AND PROMOTION**

A. **Charge**

1. The academic performance and student professional conduct of all third and fourth year students is reviewed regularly throughout the year by the Committee on Performance, Professionalism and Promotion. The Committee has the responsibility and authority to evaluate overall student performance in Years III and IV, determine adherence to school performance expectations, make recommendations for remediation, and decide eligibility for promotion and graduation.
2. All actions of the Committee are advisory to the Dean, or his/her designee, who makes the final decision.
3. All information pertaining to student performance, including information of a non-academic and personal nature, which is presented at the Committee meetings, and all deliberations and details of Committee voting are strictly confidential and are not discussed outside the Committee. Actions of the Committee may be disclosed by the Committee Chair as appropriate.

B. **Membership**

1. The Committee Chair is nominated by the Senior Associate Dean for Student and Educational Affairs and confirmed by the Vice Dean for Medical Education
2. Voting members of the Committee on Performance, Professionalism and Promotion include: the Clerkship Director or one of the co-clerkship directors in the Departments of Family Medicine, Medicine, Surgery, Obstetrics/Gynecology, Pediatrics, Psychiatry and Neurology, or their designees.
3. *Ex officio*, non-voting members include:
   a. The Associate and Assistant Deans for Admissions, Curriculum, Diversity, Student Affairs, and Educational Affairs;
   b. Representative(s) from the Department of Medical Education;
   c. Other faculty or staff as deemed appropriate by the Chair.

C. **Actions**

1. The Committee will meet regularly throughout the year to monitor students’ performance. The Committee addresses issues involving academic performance and student professional conduct.
2. Meetings may be called for special problems within three weeks of their being brought to the attention of the Senior Associate Dean for Student and Educational Affairs. A student whose record will be considered at a special meeting will be given notice of the meeting at least five (5) days before it is held. The
Committee gives special attention to students who are or appear likely to become deficient in graduation requirements.

3. The Committee will monitor students’ satisfactory academic progress and review any requests for extension of time.

4. Following review of student performance, the Committee makes one of the following recommendations to the Dean:
   a. Eligibility for graduation
   b. Academic or Professional Behavior Probation
   c. Suspension
   d. Dismissal
   e. Remedial work, which may include repeating the year to make up the deficiency (in so doing, a repeat of prior satisfactory clerkships may also be required).
   f. Other action, as deemed indicated by a student’s circumstances.

6. For regular business of the Committee a simple majority vote of the membership; must be present to vote and a simple majority vote is required for a motion to pass. For dismissal, two-thirds of the membership must be present to vote. Affirmative votes by two-thirds of those members present are necessary for dismissal.

STUDENT OFFICERS

ASSOCIATED STUDENTS OF THE SCHOOL OF MEDICINE (ASSM)

- **Co-Presidents (MSII, MSIII/IV)** - Act as liaison between the ASSM and Faculty and Administration of USC and the Community. Represents ASSM in all business and social functions. Calls regular or special meetings of ASSM and Student Council. Act as presiding officer(s) of the ASSM Student Council. Appoints student members to Faculty Committees, except as provided by future bylaws of the Student Council. Develops a strategic plan for ASSM for the academic year and facilitate its enactment over the course of the year. Authors and delivers a monthly progress report to the Senior Associate Dean for Student and Educational Affairs, the Vice Dean of Education, and the Dean. Develops and maintains relationships with student leaders of all USC graduate programs.

- **MedGames Chairperson (2)** - Works with other California Medical Schools to coordinate MedGames. Also works with the co-presidents and treasurer to secure funding and sponsorship.

- **Non-Travel Treasurer** - Acts as presiding officer of the Finance Committee. Member of the ASSM Student Council and reports to the Student Council the proceedings of the Finance Committee. Reports all business transacted by the Student Council to the Dean’s office at least once a semester. Budgets and coordinates the disbursement of student group funding for the academic year. Maintain the USC Credit Union Discretionary Funds Account for ASSM. Develops fundraising programs for ASSM to augment funds provided by GPSS.

- **Secretary** - Records minutes at all ASSM meetings and provides copies to all voting members; posts minutes one week following meetings. Arranges locations of all ASSM meetings; notifies members of meetings. Publicly posts all ASSM general meeting announcements, election announcements, deadlines, etc. Acts as master calendar keeper of all ASSM activity dates and times. Informs organizations of their voting rights at the beginning of the school year, and performs other general secretarial duties as needed. Designs and coordinates the biweekly Keck School of Medicine of USC Central Line Newsletter outlining all activities on campus each week and concurrently report those activities to the Student Affairs office to be added to the school calendar.

- **Vice President of Social Affairs** - Acts as presiding officer of the Coordination Committee. Coordinates all social and cultural activities of the medical school including, but not limited to, Roofless and Kecktacular. Works with the appropriate Pharmacy, Law and Business School representatives in coordinating joint activities.

- **Travel Treasurer** - Acts as a member of the Finance Committee. Member of the ASSM Student Council and reports to the Student Council the proceedings of the Finance Committee. Reports all business transacted by the Student Council to the Dean’s office at least once a semester. Creates a travel budget allotting the maximum possible reimbursement per student for conference attendance. Processes all travel reimbursement applications.

- **Vice President of University Affairs (6)** - Works with three other students to represent Keck every month at the Graduate and Professional Student Senate (GPSS) meetings, one of the primary ways for the student body’s voice to be heard by the entire university. In addition, will act as liaison and inform the Keck community of GPSS events.

- **Webmaster** - Maintains, updates, and upgrades the ASSM Website. Regulates, maintains, and updates the USC Marketplace (uscmarketplace.com) on a weekly basis. Collects and updates ASSM Student Group e-mail addresses and websites into an up-to-date database for use by the school administration and student body.
CLASS OFFICERS

- **Class Co-Presidents/ASSM Class Delegates (2)** – Organizes class officers, assess their progress and field concerns. Holds Class Officer meetings. Responsible for responding to student feedback and concerns, especially immediate concerns (i.e.: Comprehensive Exams, etc.). Attends all ASSM meetings. Oversees facility management: printers, webcasting, TV’s in lecture hall, PowerPoint printing, student lounge improvements, and MDL improvements. Works on obtaining new resources for students and ensuring that student needs are met. Plans large class events and works with social chair on large scale events. Works with the class’s CFO to build funds for the graduation party during your fourth year.

- **Class Financial Officer** – Works with class presidents and the ASSM treasurer to develop a budget for the class and requests funding from GSG and ASSM. Responsible for filing all reimbursements for class officers. Serves as direct liaison between the class and the Office of Financial Aid and its representatives. Periodically assesses the class’s financial aid concerns and communicates these with the office and any pertinent administrators to formulate solutions. Communicates financial aid deadlines, fields student complaints, and helps students understand their financial aid positions. Helps presidents with corporate sponsorships and GSG funding.

- **Curriculum Representatives (2)** – The student curriculum committee representatives attend monthly curriculum and medical education committee meetings with the administrative faculty of the Office of Curriculum and the course directors of each system. Student representatives encourage feedback from classmates regarding the overall organization of each system after it has been completed and the fairness of the exam. This feedback is then reported to the Curriculum Committee. Communicates any major changes or issues discussed in the curriculum meeting with class officers and classmates.

- **Ethics Representatives (2)** – Works with classmates to uphold the honor code. Will meet with fellow class representatives if an honor code violation has potentially occurred. In addition, oversees class elections to ensure their integrity. Responsible for informing students if there are specific moral, ethical, or behavioral complaints on behalf of faculty and students. Must periodically poll the class to determine if there are any complaints or concerns. Plans ethical, moral, or other debates, speakers, or presentations for the class (e.g. debating physician ethical responsibilities or educating the class on ethical issues that may arise during Years III and IV).

- **ICM Student Chair** – Facilitates student-faculty and student-led ICM sessions and attends all ICM meetings. Develops innovative programs in ICM (i.e.: Sports Medicine tour of USC Football, ICM Awards). Responds to student interests and concerns (i.e.: Family Medicine Department Cuts, OSCE feedback and complaints).

- **PPM Student Chair** – Facilitates student-faculty and student-led PPM sessions and attends all PPM meetings. Develops innovative programs to enhance the PPM experience (i.e.: Business Curriculum, PPM Awards). Responds to student interests and concerns. Help field concerns from PPM groups that may not be very active.

- **Professionalism & Humanities Chair** – Plans events and lead discussions that promote an appreciation of the arts and humanities and the important role they play in the development of well-rounded professionals.

- **Research Chair** – Coordinates Student Research Information, establishing research opportunities for students and informing classmates about student research. Creates a report each semester of student research at Keck. Helps with research funding; allocating and publishing student funding resources every semester. Also, works on RSP development.

- **Secretary** – Responsible for working with the ASSM Secretary on the Central Line Newsletter. Takes minutes at class meetings. Helps advertise class and ASSM events.

- **Social Chairs (2)** – Works with ASSM social chairs and with class presidents planning large-scale events, including class and charity fundraisers (i.e. Year I outings, prom, charity formals, etc.). Plans and organizes weekly or bi-weekly events for class, and market these events to the class. Works to “branch out” student events to be more inclusive of the diverse student interests of the class. This includes interests like intramural sports, bar nights, bowling nights, chess competitions, Foosball tournaments, restaurant outings, etc.

- **Student Health Representatives (2, only Year II class)** – Serve as student body representatives to the Eric Cohen Student Health Center. The students provide feedback and suggestions regarding programs and services provided by the health center and serve as a member of the Student Health Center Steering Committee.

Although students who hold these positions are elected by their peers, they serve with the approval of the Senior Associate Dean for Student and Educational Affairs. If at any time it is determined that they are not acting in a professional manner and/or fulfilling their obligations they will be removed from their position.
USC Policies

- University Equal Opportunity Policy
- University Policy on Accommodations for Students with Disabilities
- University Policy on Obligation for Payment
- Family Education Rights and Privacy Act (FERPA)
- University Policy on Time Limit for Degree Completion
- University Policy on Alcohol and Other Drugs
- Pets on University Property
- Access to LAC+USC Medical Center - Historic Hospital Building
UNIVERSITY EQUAL OPPORTUNITY POLICY

The University of Southern California is an equal opportunity employer and educator. Proudly pluralistic and firmly committed to providing equal opportunity for outstanding men and women of every race, creed and background, the University of Southern California strives to build a community in which each person respects the rights of other people to live, work and learn in peace and dignity, be proud of who and what they are, and to have equal opportunity to realize their full potential as individuals and members of society. To this end, the university places great emphasis on those values and virtues that bind us together as human beings and members of the Trojan Family. The university enthusiastically supports this policy in its entirety, and expects that every person associated with the university will give continuing support to its implementation.

The university is committed to complying with all applicable laws and governmental regulations at the federal, state and local levels that prohibit discrimination against, or which mandate that special consideration be given to, students and applicants for admission, or faculty, staff and applicants for employment, on the basis of race, color, national origin, ancestry, religion, gender, sexual orientation, age, physical disability, mental disability, marital status, veteran status, genetic information, or any other characteristic that may be specified in such laws and regulations. This policy also shall apply to the administration of any of the university’s educational programs and activities. Gender includes both the actual sex of an individual and that person’s gender identity, appearance or behavior, whether or not that identity, appearance or behavior is traditionally associated with that person’s sex at birth. An otherwise qualified individual must not be discriminated against or excluded from admission, employment or participation in educational programs and activities solely by reason of his or her disability. This policy applies to all of the university’s educational programs and activities including admissions, and all personnel actions including but not limited to recruiting, hiring, promotion, demotion, compensation, benefits, transfers, layoffs, return from layoff, provision of leaves, training, education, tuition assistance and other programs. In addition, an otherwise qualified individual must not be discriminated against in, or excluded from, admissions, participation in educational programs and activities, or employment solely due to his or her disability.

University policies and procedures will ensure that students and student applicants with a disability will not, on the basis of a disability, be denied full and equal access to and enjoyment of academic and co-curricular programs or activities or otherwise be subjected to discrimination under programs or activities offered by the university. For more information on accommodations for any student or student applicant with a disability, contact the Office of Disability Services and Programs, (213) 740-0776.

The university seeks compliance with all statutes prohibiting discrimination in education, including Title VI and Title VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and the Americans with Disabilities Act of 1990 which respectively prohibit discrimination. This good faith effort to comply is made even when such laws and regulations conflict with each other.

The university will make reasonable accommodations for qualified individuals with known disabilities unless doing so would result in an undue hardship. Further information is available from Human Resources Administration at uschr@usc.edu or (213) 821-8111.

The Disabled/Veterans Affirmative Action Plan may be reviewed by employees and applicants upon request. For further information or to make an appointment during regular business hours, contact OED (see below).

Questions regarding the application of the various rules and regulations concerning equal employment opportunity, affirmative action, and non-discrimination should also be addressed to OED (see below). The university’s Title IX Coordinator, ADA Coordinator, and AgeDA Coordinator is Jody Shipper, Executive Director of the OED, University Park Campus, Los Angeles, California 90089.

Responsible Office: Office of Equity and Diversity (OED), usc.edu/dept/hr/equity_diversity, oed@usc.edu, (213) 740-5086
UNIVERSITY POLICY ON ACCOMMODATIONS FOR STUDENTS WITH DISABILITIES

The University of Southern California is committed to full compliance with the Rehabilitation Act (Section 504) and the Americans with Disabilities Act Amendments Act (ADAAA). As part of the implementation of this law, the university will continue to provide reasonable accommodation for academically qualified students with disabilities so that they can participate fully in the university’s educational programs and activities. Although USC is not required by law to change the “fundamental nature or essential curricular components of its programs in order to accommodate the needs of disabled students,” the university will provide reasonable academic accommodation. It is the specific responsibility of the university administration and all faculty serving in a teaching capacity to ensure the university’s compliance with this policy.

The general definition of a student with a disability is any person who has “a physical or mental impairment which substantially limits one or more of such person’s major life activities,” and any person who has “a history of, or is regarded as having, such an impairment.” Reasonable academic and physical accommodations include but are not limited to: extended time on examinations; advance notice regarding booklists for visually impaired and some learning disabled students; use of academic aides in the classroom such as note-takers and sign language interpreters; accessibility for students who use wheelchairs and those with mobility impairments; and need for special classroom furniture or special equipment in the classroom.

Procedures for Obtaining Accommodations
Students with disabilities are encouraged to contact Disability Services and Programs (DSP) prior to or during the first week of class attendance or as early in the semester as possible. The office will work with the course instructor and his or her department, and the student to arrange for reasonable accommodations. It is the student’s responsibility to provide documentation verifying disability in a timely way.

See sait.usc.edu/academicsupport/centerprograms/dsp/home_index.html for documentation guidelines, policies and procedures.

Academic Accommodations
Students seeking academic accommodations due to a disability should make the request to the course instructor prior to or during the first week of class attendance or as early in the semester as possible. Course instructors should require that a student present verification of documentation of a disability from Disability Services and Programs if academic accommodations are requested.

For assistance in how to provide reasonable accommodations for a particular disability, course instructors are encouraged to consult with the staff at DSP. Students requesting academic accommodations must have verification of disability.

Grievance Procedures
Detailed information about processing a grievance is found in a brochure available in the Disability Services and Programs office, STU 301.

UNIVERSITY POLICY ON OBLIGATION FOR PAYMENT

Request for registration constitutes a legal financial obligation to which you will be held liable if you do not follow the proper procedure to change or cancel your registration through the Office of Academic Records and Registrar. You must receive written confirmation (the Registration Confirmation form) to verify that your requested change has been made.

By registering, you agree to be held responsible for all tuition and fees, including, but not limited to, payments denied by student loan lenders, agencies of the United States government and agencies of foreign governments. Tuition and fees for all students, including those whose tuition has been deferred, become an obligation in accordance with the provisions of the Withdrawal Refund Policy as follows. Tuition and fees are due, in full, by the settlement deadline. Failure to make payments of any indebtedness to the university when due, including but not limited to tuition, deferred tuition, housing, student loans, lab fees and USCard, is considered sufficient cause, until the debt
is settled with the university, to (1) bar the student from classes and examinations; (2) withhold diploma, scholastic certificate or transcripts; (3) bar the student from university housing; (4) suspend all university services and privileges; (5) suspend the student; (6) assign the student to a collection agency (students who have been assigned to an outside collection agency may be required to pay in advance for all future registrations and services); and (7) report the student to a credit bureau. This policy will be equally enforced against debts discharged through bankruptcy.

Permission to cancel enrollment does not constitute, nor shall it be construed as, a waiver by the university of a student’s financial obligation. You are still responsible for all outstanding debts and contracts with the university. Furthermore, a student must not have any delinquent financial obligations to USC at the time classes begin or his or her registration may be revoked.

The Dean, Vice Dean for Medical Education, and Senior Associate Dean for Student and Educational Affairs are responsible for the administration of this policy. Any request for any exception to the policy must be presented to the Senior Associate Dean for Student and Educational Affairs in writing.

**FAMILY EDUCATION RIGHTS AND PRIVACY ACT (FERPA)**

The University of Southern California maintains the privacy of student education records and allows students the right to inspect their education records as stated in the university’s Student Education Records policy, consistent with the requirements of the Family Educational Rights and Privacy Act of 1974 (FERPA). The entire text of the university’s policy is located in the Office of the General Counsel, Office of the Vice President for Student Affairs and the Registrar’s Office.

Faculty and staff who request access to student academic records in order to execute their normal duties must first review the information found on the FERPA Website and complete the tutorial before access will be granted. Students wishing to review or seeking to amend their education records should submit a written request to the university office in which the record is maintained. At the discretion of university officials, USC may release certain information classified as directory information unless the student requests that such information not be released.

Students wishing to restrict release of directory information may do so by completing the appropriate form provided by the Registrar’s Office (Trojan Hall 101). Such requests remain in effect for the academic year. Students wishing only to have their information withheld from the online USC Student Directory should contact the Registrar’s Office (Trojan Hall 101).

Recognizing that many students wish to share information from their educational records with their parents and family members, USC has developed an online system that will accomplish the following:

- allow students to grant their parents access to education and medical records in one step;
- allow parents to view elements of the education records that are available in USC’s central student information system.

Students may log in to my.usc.edu and click on OASIS, USC’s Web-based student information system, and use the “Establish Guest Access” feature to grant others permission to education and medical records. Parents who wish to gain access to information from the education records of their son or daughter will not be provided the information unless the student has granted access through OASIS or has completed the appropriate release form authorizing the university to release specific information from their education records to approved individuals. If students grant access through OASIS, parents and family members may access education records information online through the OASIS for Guests Website.

(Taken from USC’s Office of Academic Records and Registrar’s FERPA Policy, usc.edu/ferpa)
UNIVERSITY POLICY ON TIME LIMIT FOR DEGREE COMPLETION

Students must maintain satisfactory progress toward their stated degree objective at all times. Progress is measured from the beginning of the first course at USC applied toward a specified degree, and all requirements for that degree must be completed within a specified time. The maximum time limit allowed for each degree is considerably greater than what is needed to complete all requirements.

Students who have exceeded the time limit for completing their degree program will not be permitted any further registrations. If granted an extension of time, the dean or his/her designee of the degree-conferring unit will permit registration for the specified period of extension.

UNIVERSITY POLICY ON ALCOHOL AND OTHER DRUGS

The illegal or abusive use of alcohol and/or other drugs by students, faculty or staff adversely affects USC’s commitment to provide an environment of excellence in teaching, research and learning. As members of the USC community, we all share in the responsibility for creating and maintaining a healthy and productive environment for work and study alike. With this responsibility comes the obligation to be involved in preventing problems caused by the abuse of alcohol, tobacco and other drugs.

USC’s comprehensive approach to addressing substance abuse emphasizes:

- Taking effective steps to create and maintain a drug-free workplace and educational environment for students, faculty and staff.
- Providing continual prevention, education and counseling services along with referrals to off-campus treatment facilities as appropriate.
- Encouraging individuals who are experiencing problems associated with alcohol and/or other drugs or chemical dependency to seek assessment, counseling and/or treatment voluntarily with the understanding that this assistance is confidential and will not be used against them.

(Taken from USC Drug-Free – Prevention, Education and Counseling Services along with University Policies and Procedures for Preserving a Drug-Free Workplace and Study Environment – hereafter referred to as USC Drug-Free.)

ALCOHOL POLICY

With this approach in mind, the university has expectations concerning alcohol use on campus which directly correspond to California and Los Angeles laws and ordinances and include, but are not limited to, the following provisions:

1. The purchase, possession, or consumption of any alcoholic beverages (including beer and wine) by any person under the age of 21 is prohibited.
2. Alcoholic beverages will not be provided to individuals under 21 years of age.
3. The selling, either directly or indirectly, of alcoholic beverages (including beer and wine) except under the authority of a California Alcoholic Beverage Control Board license is prohibited. This includes selling cups, mixes, ice, tickets for admission, required donations, etc.
4. The serving of alcohol to an intoxicated person or to the point of intoxication is prohibited.
5. The manufacture, use or provision of a false state identification card, driver’s license, or certification of birth or baptism is prohibited.
6. The act(s) of being drunk and disorderly in public view, including on public sidewalks and walkways, is prohibited.
7. The consumption of alcoholic beverages in a public place (unless licensed for consumption of alcohol on the premises) is prohibited. This includes a prohibition of alcoholic beverages in public areas of academic facilities, recreation fields, university housing corridors and lounges.
8. Operating a motor vehicle, bicycle, skates, or scooters while under the influence of alcohol is prohibited.
9. The possession of an alcoholic beverage in any open container in a motor vehicle, or while operating a bicycle, skates, skateboard, or scooter is prohibited regardless of who is driving and whether one is intoxicated (taken from USC Drug-Free).
10. Behavior that is disruptive or abusive to others as a result of using intoxicants.
ALCOHOL AND EVENT PLANNING
Since the consumption of alcoholic beverages is prohibited (unless licensed for consumption of alcohol on the premises), any event being sponsored or hosted by a campus individual, university-recognized group, department, or office, must get approval to serve alcohol. All student organizations must have permission to serve alcohol at their events. The Office of Fraternity and Sorority Leadership Development must approve requests to serve alcohol for all organizations within the Asian Greek Council, the Interfraternity Council, the Multi-Cultural Greek Council, the National Pan-hellenic Council, the Panhellenic Council and the Professional Fraternity Council. All other student organizations should contact the Office of Campus Activities for additional information. Approval must be obtained for all events on campus within any university-owned property. For approval and copies of the detailed protocol on serving alcohol on campus, call:

- Campus Activities, Ronald Tutor Campus Center 330, (213) 740-5693
- Office of Fraternity and Sorority Leadership Development, Student Union 200, (213) 740-2080
- USC Hospitality, Davidson Conference Center, (213) 740-6285

DRUG POLICY
The university’s policy is to conform to all applicable laws and follows the current stance of the medical and mental health professions regarding the use of other psychoactive substances including stimulants, depressants, narcotics, inhalants and hallucinogens including marijuana.

The university expects all students and student groups to comply with all local, state and federal laws. It is the responsibility of each individual to be aware of, and abide by, all federal, state and local ordinances and university regulations. Current laws provide for severe penalties for violations which may result in criminal records (taken from USC Drug-Free).

TOBACCO POLICY
The use of tobacco is prohibited in all enclosed buildings, facilities and university vehicles. See Smoke-free Campus.

VIOLATION OF ALCOHOL AND DRUG POLICY
Student involvement in underage consumption of alcohol or the manufacture, use, possession, distribution or sale of illicit drugs is a matter of concern to the university and will subject a student so involved to disciplinary action by the university. Dependent on the nature of the violation, university sanctions may include educational intervention, mandated community reparations, suspension, or expulsion aside from or in addition to prosecution under applicable state and federal laws. University action may be taken whether or not independent action is taken by civil authorities.

IF YOU NEED HELP
There are many well-documented risks associated with the use of alcohol and other drugs, affecting not only the individual user, but also his or her family, friends and roommates. Alcohol abuse is frequently a factor in cases of assault on campus. Other problems associated with alcohol and other drug abuse include poor academic or job performance; relationship difficulties, including sexual dysfunction; a tendency toward verbal and physical violence; financial stress; injuries or accidents; and violations of the law such as driving under the influence and willfully destroying property.

Members of the university community are encouraged to seek assistance and/or support for themselves or others through any of the following resources:

- Student Counseling Services, (213) 740-7711
- Office for Wellness and Health Promotion, (213) 740-4777
- Engemann Student Health Center, (213) 740-9355
- Alcoholics Anonymous, University Religious Center 205, trojanrecovery@gmail.com

For more information regarding USC Drug-Free, visit policies.usc.edu/p2admOpBus/drugfree.html.
PETS ON UNIVERSITY PROPERTY

Students are prohibited from bringing pets into any USC building, including, but not limited to, classrooms, work areas, housing and research areas. Dogs walked on campus must be kept on a leash and must be picked up after, in accordance with Los Angeles sanitation requirements.

This policy does not apply to animals used as a disability-aid or animals associated with research.

ACCESS TO LAC+USC MEDICAL CENTER - HISTORIC HOSPITAL BUILDING

Pursuant to LAC+USC Medical’s Center’s transition from the historic General Hospital to the new “Replacement Facility” buildings, several terms and conditions were established to accommodate the overall campus space needs. The agreement with the regulatory agencies allows the use of the basement thru 4th floors of General Hospital providing there is enforcement of unauthorized access to floors 5 thru 19.

The “Building Re-use Plan” was approved by the Department of Health Services in conjunction with various regulatory agencies to ensure the safety and well-being of the occupants. Factors considered in this plan were the protection of all personnel and the ability to provide a comfortable working environment for the faculty and staff assigned to the building.

**Access to the 5th thru 19th floors of General Hospital is restricted to authorized personnel only.** This policy to all USC Faculty, Residents/Interns and Medical Students. Any unauthorized person/s found trespassing will be reported to the Los Angeles County Sheriff’s Department which could lead to civil penalties and sanctions by the University. Additionally, sanctions by the Keck School of Medicine can include probation and/or dismissal from the medical school.
• Curriculum Overview
• Evaluation Policies
• Examination Policy
• Grades and Grading Policy
• Evaluation Appeal Process
• Promotion Requirements
• United States Medical Licensing Examinations
• Good Academic Standing
• Satisfactory Academic Progress
• Leave of Absence Policies and Procedures
• Absence Policies
• Policy on the Assessment of Student Performance by Faculty Healthcare Providers
• Scheduling Policy for Years III/IV
• Site Assignment Policy
• Medical Student Time Requirements for Clinical and Educational Activities
• OSCA and OSCE Student Instructions and Information
• Academic Probation, Dismissal, and Appeal Process
• Medical Student Performance Evaluation (MSPE)
• Awards
• Graduation Requirements
• Record Retention Policy
CURRICULUM

Year I
- Introduction to Clinical Medicine (ICM)
- Professionalism and the Practice of Medicine (PPM)
- Foundations of Medical Sciences (FMS)
- Systems - Skin, Hematology, Neurosciences, Musculoskeletal (Classes of 2015-2017)
- Systems - GI/Liver, Reproduction, Neurosciences (Class of 2018)

Year II
- Introduction to Clinical Medicine (ICM)
- Professionalism and the Practice of Medicine (PPM) Selective
- Business of Medicine (BOM) (Class of 2015 only)
- Systems - Cardiovascular, Renal, Respiratory, Endocrine, Reproduction, GI/Liver (Classes 2015-2017)
- Systems - Cardiovascular, Renal, Respiratory, Musculoskeletal, Skin, Hematology, Endocrine (Class of 2018)
- Integrated Case Study

Year III/IV
- Required Clerkships - Family Medicine, Internal Medicine, Internal Medicine Sub-Internship, Obstetrics/Gynecology, Pediatrics, Psychiatry, Neurology, Surgery, Surgical Subspecialty, Intersessions I and II
- Selectives
- Electives
- Required Examinations - Clinical Performance Examination (CPX), USMLE Step 1 and Step 2 CK and CS

Selectives
Sixteen weeks of selectives are required in the third and fourth year. All selectives are exactly four continuous weeks. Students must take one acute care selective (ICU and emergency medicine selectives), one medicine or pediatrics subspecialty selective, and two additional selectives (all other selectives).

Acute care selectives are available only to fourth-year students who have completed all core clerkships. Prerequisites for other selectives vary. Please check the information sheets posted in the course catalogue for additional information. Selectives may not be repeated for credit.

Electives
Sixteen weeks of electives are required in the third and fourth year. Electives must be a minimum of two continuous weeks and a maximum of four total weeks, with the exception of research. Research electives must be a minimum of four continuous weeks and a maximum of eight weeks. Electives may include the following:
- Additional selectives
- Rotations listed as electives in the course catalogue
- Research
- Away rotations
- International rotations

Students in dual-degree programs will receive elective credit for their joint-degree coursework. MD/MBA students will receive 8 weeks of elective credit and MD/MPH (4-year program) students will receive 6 weeks of elective credit.

Clinical Coursework
A minimum of 20 weeks of selectives and electives must be clinical coursework. Most rotations offered fulfill this requirement. Examples of rotations that are not are clinical courses include, but are not limited to, Clinical Informatics, Health Policy and Economics, Independent Study Anatomy, Narrative Medicine, and Research. If you have questions about whether a course will count toward this requirement, please contact Student Affairs.

Intersessions I and II
In Year III, two one-week intersession courses are required. The purpose of these courses is to enable learners to pause, reflect, and consolidate the many and varied clinical experiences that they encounter in their third year of
medical school; to promote advanced clinical skills, professional development, health policy formulation and ethical decision-making, patient safety; and to further prepare students for the residency application process.

**Required Scholarly Project**

“Every physician is a scientist. A patient presents with signs and symptoms, a hypothesis is generated as to the possible cause, diagnostic measurements are purely reflective of the methods employed to test your hypothesis. Based on the results, you conclude the best form of treatment.”

**What is the RSP?**

The Required Scholarly Project is designed to provide medical students the opportunity to become engaged in hypothesis-driven research to promote analytical thinking skills and ultimately, physician leaders. The aim of the RSP is to expose students to the process of scientific inquiry, teaching them how to formulate an answerable question and the requisite methodology in seeking appropriate answers. Each student undertakes a faculty mentored research project in a discipline of his or her choice. Viable disciplines encompass a wide spectrum to include: biomedical research, from discovery to application and healthcare, i.e., basic science, clinical, educational, behavioral science, health services, community and epidemiological activities. The RSP is interwoven with the curriculum, which includes didactic instruction on topics such as study design and biostatistics. The RSP is a longitudinal experience throughout all four years of medical school, with successful completion being required for graduation. Students with projects deemed meritorious by the RSP steering committee will receive “Distinction in Research” recognition at graduation.

**How does it benefit students, Keck and patients?**

Analytical thinking skills are crucial to the practice of medicine. The RSP will serve to foster the development of original, independent and critical-thinking skills. Additionally, the RSP will contribute to the Keck mission and vision; to improve the quality of life for individuals and society by promoting health, preventing and curing disease, advancing biomedical research and educating tomorrow's physicians and scientists as we strive to become among the top private research medical schools in the nation. Hence, fulfillment of the RSP will result in physicians with better analytical skills leading to better patient care and treatment and fuel future discoveries.

**2014-2015 Schedule**

<table>
<thead>
<tr>
<th>School Year</th>
<th>RSP Activities</th>
<th>Milestones</th>
<th>Timeline/Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>Clinical Translational Research (CTR) Modules</td>
<td>Selection of mentor and project</td>
<td>To apply for most external summer research fellowships should be completed by January or February; to apply for KSOM/Saban fellowships by mid-March; if not doing summer research, ideally by June to submit proposal by August</td>
</tr>
</tbody>
</table>
| II          | Execution of Required Scholarly Project (summer start recommended, not mandatory) | • Submission of RSP proposal/progress update  
• Progress Report  
• Abstract Submission  
• Poster template  
• Annual Spring Forum | • August 4, 2014  
• December 1, 2014  
• March 13, 2015  
• March 27, 2015  
• April 7, 2015 (12-5 pm) |
| III         | Continuation of RSP Scholarly Activities Clerkships | Research Activities Report (RAR)  
• 1st submission  
• 2nd update  
• 3rd update | • September 26, 2014  
• January 23, 2015  
• April 24, 2015 |
| IV          | Research Elective (Optional) | • Paper outline including literature review  
• Final write-up of RSP, (12-15 pages) | • December 1, 2014  
• February 27, 2015 |
**Humanities, Ethics, Arts, and the Law (HEAL)**

This four-year integrated curriculum begins with collaborative discourse about ethical problems to help students learn to identify, analyze and resolve clinical ethical problems. This exercise is followed by interim skill building/maintenance and by instructor facilitated discussion of videotaped ethics cases.

In Year II, the program focuses on ethical discernment and action in simulated settings and the study of the human dimensions of medicine. Students also learn from the humanities about patients as persons. Year III is devoted to ethics education by clinical role models and encompasses instruction in the core clerkships by ethical standard-bearers. During Intersessions, the HEAL curriculum includes a series of sessions that focus on contemporary health care and the physician-in-society. The goal of the sessions is to provide students with the experience of integrating the principles, methods and bedside issues included in Years I-III of the program. Students practice applying the micro-level (individual/clinical) decisions to the ethical dilemmas and policy issues that face physicians at the mezzo-level (health care organizations), and to the macro-level (profession as a whole, state and nation). Topics include issues of professionalism; allocation of resources; and the economics, organization and societal oversight of health care.

**EVALUATION POLICIES**

The KSOM Physician-Citizen-Scientist curriculum is a competency-based curriculum. It is desired that our physician graduates be inspired and able to make original contributions as skilled clinicians, as scientists advancing the field of medicine, and as compassionate citizens improving health and healthcare delivery locally and globally. Upon completion of the four-year course of medical training, the graduating student will be able to:

1. **Medical Knowledge:** Demonstrate knowledge of established and evolving biomedical, clinical, epidemiological, and social-behavioral sciences, and apply this knowledge in real and simulated patient care settings.
2. **Patient Care:** Provide patient care that is compassionate, appropriate, and effective for the prevention and treatment of health problems and the promotion of health including demonstrating
   a. Basic clinical skills of history taking, physical examination, presentation and documentation;
   b. Clinical reasoning including appropriate selection and interpretation of clinical procedures and diagnostic tests; and
   c. Patient care activities in real and simulated settings, e.g., patient education, and performance of designated technical skills
3. **Interpersonal and Communication Skills:**
   a. Listen and communicate clearly with patients, families, and health care team members using effective nonverbal, verbal, and writing skills.
   b. Collaborate effectively with others in the classroom, clinical setting, and community at large.
4. **Ethical Judgment:**
   a. Identify ethical principles and apply them to medical practice and research, the business of medicine, and health policy.
   b. Demonstrate adherence to ethical principles.
   c. Identify alternative resolutions of ethical dilemmas
5. **Professionalism:**
   a. Demonstrate a commitment to excellence in carrying out professional responsibilities.
   b. Act with altruism, honor and integrity in professional life.
   c. Demonstrate accountability for one’s own actions
   d. Act in a respectful manner toward patients, faculty, colleagues and staff.
   e. Discuss the activities required for maintenance of emotional, physical, and mental health
6. **Lifelong Learning and Experience-Based Improvement:**
   a. Identify and perform appropriate learning activities.
   b. Identify strengths, deficiencies, and limits in one’s own knowledge and expertise.
   c. Set and accomplish learning and improvement goals.
   d. Incorporate formative feedback and evaluation into daily practice.
   e. Complete ongoing self-evaluation and life-long learning activities to improve patient care.
7. **Community and Systems-Based Practice:**
   a. Demonstrate knowledge of the social and community contexts of health care and respond effectively to the
many factors that influence health, disease, and disability.
b. Discuss issues in the health care system including health disparities, population-based care, advocacy, health policy, health care quality, technology and resource utilization and patient safety.
c. Effectively develop, implement, and present a community-based project.

8. Scholarship:
a. Conduct a focused literature search, critically appraise the medical literature, and apply best evidence to research questions and patient health problems.
b. Apply clinical research studies and clinical translational research to patient care.
c. Develop appropriate research questions for a scholarly project.
d. Conduct a research project in a manner that respects the rights of human subjects.
e. Effectively communicate research findings with colleagues.

Faculty assigns an overall Summary Evaluation of student performance for each component of the curriculum. Written, narrative evaluations of students' performance are required for ICM, PPM, required clerkships, selectives and electives. These are entered verbatim into the student's permanent file and in the Medical Student Performance Evaluation (MSPE) which accompanies applications for residency. Students may not be evaluated by a family member for ICM, PPM, clerkships, selectives or electives. Additional information regarding faculty supervision and evaluation can be found in the Faculty Handbook, Section 3-G Personal Conflicts of Interest. For clarification please contact the Office of Student Affairs.

Numerical and letter grades are not awarded and students are not ranked. Notwithstanding awards or honors (e.g., Alpha Omega Alpha) that mention class standing as a criterion for selection, KSOM neither maintains nor reports a grade point average or class ranking for medical students. To determine eligibility for awards based on academic performance, the School may prepare a temporary analysis of eligible students' performance; however, this analysis is not a part of a student's official school record. The transcript and other records of performance are used to determine suitability for election to Alpha Omega Alpha, (the medical honor society), and other School and University honors and awards.

YEAR I/II EXAMINATION POLICY

A. Year I/II Examination Administration

Students should arrive to the assigned examination room on time. No electronic devices may be used during an examination with the exception of calculators that will be provided by the Curriculum Office if needed. PDAs, laptops, and calculators may not be brought into the examination areas. Cell phones and pagers must be turned off and left with a proctor. No backpacks, notes or papers of any kind are allowed in the testing area, unless otherwise instructed. Any student found with unauthorized items in the examination area will be subject to dismissal from the examination (failure) and may be subject to additional disciplinary measures. Hats with brims or bills (such as baseball caps) as well as hoods on hooded sweatshirts may not be worn during an exam. Students are expected to conduct themselves at all times in accordance with the Code of Professional Behavior.

During an examination and during breaks, there should be no discussion between students, regardless of discussion content. Breaks may be taken for restroom or refreshment purposes (in the examination area only) and the number of breaks during an examination may be limited. During a break, students should restrict their activities to the area near the examination room; they may not leave the examination area. Students must make an effort to avoid even the appearance of any breach in examination security. Any student suspicious that cheating is occurring during an exam should immediately alert a proctor.

After a student has completed an examination, he/she should quietly leave the examination area and avoid discussion with other students still working on the examination. If necessary, proctors may ask students to leave the examination area.

Once a student begins an examination, it is not possible to grant an excused absence for that particular examination. The grade for the attempted examination will stand as the final grade.
Once examination grades are generated, students will be notified that grades are ready and cutoffs for passing each examination. Students failing a system, course, or comprehensive examination will be notified by the Curriculum Office via email.

B. Competency Examinations
1. In general, one or more competency examinations are administered for each system/section of the curriculum taught in Years I and II. Competency examinations will emphasize primarily the content being taught during a given system, but an understanding of previously taught materials will be reinforced as the year progresses, so that examinations are cumulative.
2. System faculty, in consultation with the Examination Development Committee, develop the system examinations.
3. Each system committee determines criteria for passing competency examinations, and uses these criteria to evaluate each student’s overall performance in the system. In general, less than satisfactory performance in only one component of a system with multiple examinations will not result in a grade of unsatisfactory for the system/section; in this situation, the Student Performance Committee may suggest remedial work for the student to address the deficiency.
4. Students not successful on a competency examination will be given one make-up examination.

C. Year I Comprehensive Examination
1. Year I concludes with a comprehensive written examination. This examination will include content and analysis encompassing all of the systems presented prior to the comprehensive exam and development of clinical skills.
2. The Examination Development Committee and system chairs will develop this examination. The Examination Development Committee will review student performance and transmit its recommendations for passing to the Year I/II Student Performance Committee.
3. Students must demonstrate competency in Foundations in Medical Sciences and the Year I systems and must complete all Year I ICM required activities, milestones, and course and instructor evaluations before they can take the Year I Comprehensive Examination. In some instances, the Senior Associate Dean for Student and Educational Affairs may allow a student to take the Year I Comprehensive examination prior to completing late or make-up examinations. This is decided on a case-by-case basis and dependent upon an individual student situation.
4. Students not successful on the Comprehensive Examination will be given one make-up comprehensive examination.

D. Post-examination Feedback
An informal feedback session is held after all examinations except the Comprehensive Examination. The purpose of the session is for students to check their answers against the exam key and to provide feedback to the system chair regarding questionable answers. Feedback sessions enhance learning and understanding of the curriculum: all students are encouraged to participate in this experience. Students will be scheduled for feedback in the examination area as soon as possible during the next academic system and will be able to review their examination in study mode. Review of an examination in study mode includes the student’s original examination with the student’s answer and the correct answer highlighted. At that time, students will be able to provide electronic feedback by question to the system chair. Students may only submit feedback to the faculty regarding items on the examination during this feedback session.

During feedback, students can only check their own exam answers, not anyone else's exam - even if asked to do so by another student. This is for exam privacy and security reasons. Checking an exam other than your own is a violation of the Code of Professional Behavior. Students must leave all bags, purses, cell phones, and materials in their MDLs.

No copies, reconstructions or notes of any sort are to be made of examination items or answer keys at any time, including during the initial examination administration, feedback and post-feedback review sessions; to do so will be considered a violation of the Code of Professional Behavior.

Once the exam has been reviewed and feedback has been submitted electronically, students must leave the examination room. Students are not allowed to return to the examination room or to wait with other students if
they have finished feedback. Students must leave the examination room and wait outside for their colleagues. When time is called, the exam will automatically shut down. Students needing more time to review the exam will need to make an appointment with the Curriculum Office for an additional feedback session in the weeks following an examination at a time when classes are not scheduled.

E. Review of Previously Taken Examinations
After an examination and the initial feedback session have been completed, students will be allowed to review examinations in the Curriculum Office by appointment only. Please contact the Curriculum Office at curroff@usc.edu or (323) 442-1763 to schedule a convenient time when classes are not scheduled. The following restrictions apply:

1. In accordance with the Code of Professional Behavior, examination questions are not to be copied or transmitted to another person in any manner. Students will not be allowed to bring notebooks, papers, or backpacks while reviewing exams.
2. Curriculum Office staff will require 24 hour notice to retrieve an examination for review. The staff also can deny a request for exam review. If denied, the student will be told the reason for the denial.
3. The Curriculum Office cannot retrieve examinations for review periods immediately preceding another examination period, and requests for review during these periods will be denied.
4. Examinations will be available for review for up to four weeks following the initial administration of a specific examination, except the Neurosciences midterm and Neurosciences final system exams which have a two-week review limit.
5. Review of systems examinations prior to the Comprehensive examination will not be allowed EXCEPT as listed in #4 above.
6. The times available to review examinations will be determined by the Curriculum Office.
7. There is no review of the Comprehensive examination.

Due to the limited window of opportunity to review an exam, students who feel their performance may have been marginal or failing should take advantage of this time for review since there will be no other time for review of examinations. Exceptions are students who are in academic difficulty and need to review examinations with the Learning Specialist. Academic difficulty refers to students who have failed an exam and are required to take a makeup. Review of examinations with the Learning Specialist is at the discretion of the Learning Specialist. The Learning Specialist will contact the Curriculum Office to make arrangements for a copy of the student’s examination.

F. Late Examinations
1. A student who is unable to take a scheduled examination for any reason must immediately notify the Office of Student Affairs at (323) 442-2553 as soon as circumstances preventing the examination become known. The student must correspond directly with either the Assistant Dean for Student Affairs or the Senior Associate Dean for Student and Educational Affairs to discuss the reason for the absence either in person or via email or phone.
2. If a student requests more than two late exams in an academic year they may be placed on an administrative leave of absence for the remainder of that academic year. If a student is placed on administrative leave the student can appeal to the appropriate performance committee for the opportunity to take additional late examinations.
3. Illness on Examination Day – A physician’s certificate as to the nature of the illness, or other documentation depending on the nature of the problem, will be required for the student’s file. Students missing an examination due to illness are expected to see a physician on or before the day of the examination, and per KSOM Student Handbook, provide documentation of same. Medical excuse notes may only be signed by USC Student Health physicians, non-family member physicians or other appropriate healthcare providers. The final determination of the validity of the excuse will be made by the Senior Associate Dean for Student and Educational Affairs or the Assistant Dean for Student Affairs. An evaluation of “Incomplete” will be entered on the student record until such time as the examination is taken.
4. Students with serious illness or another catastrophic conflict that prevents taking an examination as scheduled may be rescheduled to take an examination. Rescheduling is not guaranteed, and is subject to approval by the Senior Associate Dean for Student and Educational Affairs or the Assistant Dean for Student Affairs. Only the Senior Associate Dean for Student and Educational Affairs or the Assistant Dean for Student Affairs may grant approval for examination delay.
5. Requests for a late examination should be submitted in writing as soon as extenuating circumstances are known. Failure to act in a timely manner will generally cause requests to be denied. Requests for a late examination submitted after an examination has begun will not be granted.

6. “Not ready to take the examination” is not an acceptable justification for delaying an examination.

7. Late or postponed examinations (due to excused absence from regularly scheduled examination dates) are administered by the Curriculum Office within one week of the original exam (scheduled breaks excepted). The Curriculum Office sets the date and time of the late exam.

G. Make-up Examinations

1. Students who do not pass an examination on the first attempt will be scheduled for a make-up examination by the Curriculum Office.

2. Students will be allowed one make-up examination per system.

3. Year I make-up examinations may be administered during winter break, spring break or summer for FMS I and II. Makeup exams for FMS III, GI/Liver, Reproduction, and Neurosciences will be administered in the summer. Year II make-up exams will be administered as follows: Cardiovascular, Renal and Respiratory systems during the first week of the Spring semester; Endocrine, GI/Liver and Reproduction the Integrated Cases section.

4. Make-up examinations for the Year I Comprehensive Examination will be administered during June and early-July.

5. The exact timing of make-up exams will be determined by the Curriculum Office working in conjunction with the Office of Student Affairs and the Student Performance Committee.

6. The make-up examinations schedule may only be changed by the Curriculum Office, not by an individual student or faculty member. Any student with academic difficulty MUST NOT make any summer plans until all grades have been received.

7. Any student who does not attend a scheduled makeup exam on a date scheduled by the Curriculum Office will receive a grade of “Fail” on that exam and will need to appear before the Student Performance Committee to request approval to repeat the academic year.

YEAR III/IV EXAMINATION POLICY

Year III/IV Examination Administration

All Year III/IV clerkship required learning activities and course/faculty evaluations must be completed by specified due date to be eligible to take a subject and/or clerkship exam.

Students will not be permitted to use written notes, to make written notes, or to record in any way the contents of a test book. Calculators, watches with communication or computer memory capability, electronic paging devices, recording/filming/communication devices, radios, cell phones, and other mechanical or electronic devices are may not be brought into the examination areas. Hats with brims or bills (such as baseball caps) as well as hoods on hooded sweatshirts may not be worn during an exam. Any student found with unauthorized items in the examination area will be subject to dismissal from the examination (failure) and may be subject to additional disciplinary measures. Students are expected to conduct themselves at all times in accordance with the Code of Professional Behavior.

During an examination and during breaks, there should be no discussion between students, regardless of discussion content. Breaks may be taken for restroom purposes (in the examination area only) and the number of breaks during an examination may be limited. During a break, students should restrict their activities to the area near the examination room. Students must make an effort to avoid even the appearance of any breach in examination security. Any student suspicious that cheating is occurring during an exam should immediately alert a proctor.

After a student has completed an examination, s/he must return the exam to a proctor (refers to paper subject exams), quietly leave the examination area and avoid discussion with other students still working on the examination. If necessary, proctors may ask students to leave the examination area. Exams may not be removed from the testing area.

Once a student begins an examination, it is not possible to grant an excused absence for that particular examination.
The grade for the attempted examination will stand as the final grade. Students failing a clerkship will be notified by the Clerkship.

**Missed Examinations**

Any unexcused failure to take a scheduled examination – either the original exam, a late exam, or a make-up exam – will result in an evaluation of “Fail” and a score of “zero” will be recorded as the grade for that exam.

**GRADES AND GRADING POLICY**

**Years I/II Grades:** P=Pass; F=Fail; I=Incomplete; E=Exempt; F/P=Fail/Pass

The Keck School of Medicine has an integrated systems-based curriculum throughout the first two years of medical school and students are graded on a Pass/Fail basis. The grade Exempt is awarded to students who are deemed by the Student Performance Committee to have met a course’s requirements by means other than taking the course and receiving a grade.

For the purpose of transcript representation, the Introduction to Clinical Medicine (ICM) and Professionalism and the Practice of Medicine (PPM), PPM Selectives, and Business of Medicine (only Class of 2015) courses are not measured in weeks, ICM and PPM courses progress continuously throughout the year. PPM Selectives and Business of Medicine (only Class of 2015) courses have a specific number of sessions throughout a semester. The Comprehensive Exam given at the end of Year I is also not measured in weeks.

All students repeating segments of the curriculum on which they have been previously examined who do not pass the first examination in the repeated segment will be allowed a makeup examination, but failure to pass on the first exam attempt will be noted on the transcript.

**How Evaluations are Processed and Recorded**

Following each examination during the first two years of medical school, the Curriculum Office will conduct a feedback session during which students will have the opportunity to review correct answers for the examination and submit written comments for review by the System Chair. The System Chair will review student comments and may choose to modify scoring for individual items. Student’s written comments and the System Chair’s decision may lead to additional modifications to scoring. Additionally, the System Chair and/or faculty may choose to provide written feedback in response to student comments to an individual student or to the entire class.

Introduction to Clinical Medicine (ICM) and Professionalism and the Practice of Medicine (PPM) final evaluations are reviewed with individual instructors at the end of the course in each academic year. Evaluations must be approved and signed by a faculty member and are due from the Course Director within six (6) weeks of the completion of the course. The Course Director is responsible for reviewing the narrative evaluations of all students and will submit them to the Office of Student Affairs. The ICM evaluation is recorded in the permanent student record and will be included in the MSPE. The PPM evaluation is recorded in the permanent student record and is considered in the evaluation of professionalism that is included in Appendix C of the MSPE. PPM Selectives and Business of Medicine (BOM) courses (only Class of 2015) are evaluated by attendance, assignments, and required presentations. The Course Directors will submit documentation to the Office of Student Affairs.

**Fail Evaluations (Year I/II)**

If a student receives a grade of fail in ICM, PPM, or BOM (only Class of 2015), s/he is not promotable, and determination of status (dismissal, permission to repeat the entire academic year, permission to repeat only the ICM or PPM course, or other determination) will be made by the Student Performance Committee. The grade of fail and the written evaluation will be recorded in the student's file, and the grade will be entered on the transcript. Upon successful completion of the repeated course, the make-up grade will also be recorded on the transcript and in the student’s file. The official record will contain both the comments of the unsatisfactory grade of fail and the comments of the satisfactory make-up evaluation.
**Year III/IV Grades:**

**Required Clerkships: H=Honors; HP=High Pass; P=Pass; F=Fail; I=Incomplete; F/P=Fail/Pass**

The following courses are Required Clerkships:
- Family Medicine
- Internal Medicine
- Internal Medicine Sub-Internship
- Neurology
- Obstetrics/Gynecology
- Pediatrics
- Psychiatry
- Surgery
- Surgical Subspecialty

**Intersessions I and II: P=Pass; F=Fail**

**Selective/Elective Clerkships: CR=Credit; NC=No Credit; I=Incomplete**

**GRADING POLICY FOR REQUIRED CLERKSHIPS**

**How Evaluations are Processed and Recorded**

Certified evaluations are due within six (6) weeks of the completion of the required clerkship, and four (4) weeks of the completion of a Selective or Elective. Clerkship Directors or Preceptors are responsible for compiling comments from attending physicians, preceptor, faculty, and residents. The evaluation and written comments are recorded verbatim in the permanent student record and will be included in the MSPE.

**Grade of Fail**

A grade of Fail will be given in the following situations and will be discussed with the student at the close of the clerkship:
1. Failure to demonstrate minimal competence based on overall clerkship performance.
2. Any unprofessional behavior as outlined in the Student Handbook or other published curricular materials, e.g., KSOM Code of Professional Behavior.
3. Failure to resolve a grade of Incomplete by the stated deadline.

If a student receives a grade of Fail, the student must repeat the clerkship. The student may be required to repeat only the component of the clerkship that he/she failed, at the discretion of the clerkship director. The conditions for make-up are prescribed by the individual department.

Students who have a grade of Fail may not petition nor participate in electives away from USC. Previously scheduled electives at hospitals not affiliated with the School of Medicine will not be permitted until make-up work has been successfully completed.

If a student fails two or more clerkships, the student will be required to repeat the year.

For students who are required to repeat a required clerkship to correct a failing grade two separate instances of the clerkship will be listed on the transcript and in the MSPE. When remedial work is completed, a grade of Fail will remain on the student’s transcript along with the subsequent passing grade, and become a part of the student’s permanent record. The official record will contain both the comments associated with the unsatisfactory grade and the comments associated with the satisfactory make-up evaluation.

**Grading System**

The clinical performance component of the clerkship will represent at least 50% of the student’s grade.
The designations for final clerkship grades are Honors, High Pass, Pass and Fail. In general, individual faculty or residents will not assign any of the above grades; only the clerkship directors will assign one of the designations listed above. Therefore, internal clerkship evaluation forms will not have these designations.

The grading policy for each clerkship must be clearly described and distributed to the students at the orientation to the clerkship. The grading policy should place accurate, appropriate significance on the clinical performance of students and enable students to demonstrate acquisition of required knowledge, skills and professional behavior and attitudes. Ideally, the criteria will be described with sufficient clarity and detail that students will readily understand the behavioral basis for each of the possible final clerkship grades. Questions concerning evaluation procedures should be directed to the clerkship director.

Honors, High Pass and Pass criteria will be delineated by each clerkship. The highest grade a student can earn is Pass if a student fails to complete any required assignment that is due prior to the final day of the clerkship and the student has not been previously excused by the clerkship director or medical student educator (MSE). If the uncompleted work represents a significant portion of the clerkship requirements the student may receive an overall grade of Fail. This policy reflects the high priority that we place on professionalism; failure to complete assignments in a timely manner clearly demonstrates a lack of professionalism.

**Grade of Incomplete**

Incomplete is not a final grade but rather a designation that can be used if a student has been excused for an absence, or if a student has been excused from completing a required component of the clerkship. Any missing work or clinical assignments must be completed at the earliest possible date as determined by the clerkship director with an attempt not to exceed six weeks after the end of the clerkship. The student should not be given longer than six months to complete any outstanding work. This deadline can only be extended by the Senior Associate Dean for Student and Educational Affairs or the Assistant Dean for Student Affairs. The deadline and requirements to be completed to advance the grade of Incomplete to a passing grade must be clearly defined and listed on the clerkship evaluation form that is submitted to the Office of Student Affairs. If the outstanding work is not completed by the deadline the Incomplete will become a Fail and appear as part of the permanent transcript.

**OSCE and Subject Exam Remediation Process**

The Objective Structured Clinical Examination (OSCE) is a way to assess the student’s clinical skills in a standardized and summative fashion in a high-stakes setting. The OSCE score is a composite of performance in History Taking, Physical Examination (when relevant) and Communication (Patient-Physician Interaction) skills during standardized patient encounters. The scores are not a direct translation of the proportion of actions needed to be taken but rather an overall representation of the student’s competency in the management of the patient. Each clerkship has different criteria for identifying students in need of OSCE remediation based on the type of encounter, the difficulty of cases, and the differential importance given to the skills domains. Once a student is identified as needing remediation, the following steps need to be taken:

1. The student is responsible for scheduling an appointment with the Clinical Skills Education and Evaluation Center to complete a self-reflection exercise within a week of being notified about the need for remediation.
2. The student is responsible for submitting the completed self-reflection exercise to the Clerkship Director of the respective clerkship.
3. An individualized remediation plan (based on a review of the student's clinical performance and the self-reflection exercise results) will be devised by the Clerkship Director and agreed upon by the student. The type of remediation plan may include but is not limited to: completion of computerized clinical cases, clinical skills evaluation by an attending on subsequent clerkships, or one-on-one feedback session with the Clerkship Director or other faculty from the clerkship where the student was identified as needing remediation.

Note: The OSCE score is only one component of the clerkship grade. OSCE remediation is intended to provide the student with the means to strengthen his/her clinical skills, and to improve performance on subsequent OSCEs, the CPX, and Step 2 CS.
If a student scores below the 10th percentile on a USMLE subject exam, he/she is required to meet with the clerkship director. Failure to do so will result in not receiving graduation credit for the clerkship which may impact eligibility for promotion to Year IV.

**GRADING POLICY FOR SELECTIVES/ELECTIVES**

**Grading System**

The designations for final selective/elective grades are Credit and No Credit. In general, individual faculty or residents will not assign any of the above grades; only the selective/elective directors will assign one of the designations listed above.

The grading policy for each selective/elective must be clearly described and distributed to the students at the orientation to the selective/elective. The grading policy should place accurate, appropriate significance on the clinical performance of students and enable students to demonstrate acquisition of required knowledge, skills and professional behavior and attitudes. Questions concerning evaluation procedures should be directed to the selective/elective director.

**Grade of Incomplete**

Incomplete is not a final grade but rather a designation that can be used if a student has been excused for an absence, or if a student has been excused from completing a required component of the selective/elective. Any missing work or clinical assignments must be completed at the earliest possible date as determined by the selective/elective director with an attempt not to exceed six weeks after the end of the selective/elective. The student should not be given longer than six months to complete any outstanding work. This deadline can only be extended by the Senior Associate Dean for Student and Educational Affairs or the Assistant Dean for Student Affairs. The deadline and requirements to be completed to advance the grade of Incomplete to a passing grade must be clearly defined and listed on the selective/elective evaluation form that is submitted to the Office of Student Affairs. If the outstanding work is not completed by the deadline the Incomplete will become a No Credit and appear as part of the permanent transcript.

**Grade of No Credit**

A grade of No Credit will be given in the following situations:

1. Failure to demonstrate minimal competence based on overall selective/elective performance.
2. Any unprofessional behavior as outlined in the Student Handbook or other published curricular materials, e.g., KSOM Code of Professional Behavior.
3. Failure to resolve a grade of Incomplete by the stated deadline.

A grade of No Credit will remain on the student’s transcript and become a part of the student’s permanent record. If a student receives a grade of No Credit, the student will not receive graduate credit for the selective/elective.

**EVALUATION APPEAL PROCESS**

**Reasons for Appeal**

- An appeal may be made only on the basis of **Procedural Irregularity** - documented error in, or divergence from, the prescribed or customary process of evaluating and grading students; or **Extenuating Circumstances** - severe and documented situations which were beyond the student’s control and which prevented the student from performing in a manner truly reflective of his/her knowledge and skills. Appeals will be acted upon favorably only when real, clear and convincing evidence is presented to suggest that application of the policy is inappropriate in particular circumstances.
- Grade was assigned in an erroneous manner.
YEARS I and II

Appeal of Evaluations

Students wishing to raise questions about system examinations administered during the first two years of medical school must do so in writing during the scheduled feedback session held immediately after the examinations. Following review of student comments, decisions made by the System Chair are final.

It is important that students discuss any difference of opinion they may have regarding their ICM or PPM grade or the content of their evaluation with the ICM/PPM Course Director. Only the ICM/PPM Course Director has the authority to change the grade or the content. A student should not discuss his/her evaluation with any course faculty without the consent of the ICM/PPM Course Director. If the student is still dissatisfied after discussing the evaluation with the ICM/PPM Course Director, he/she should submit a written appeal to the ICM/PPM Course Director. The matter must also be reported to the Office of Student Affairs. **Appeals must be initiated within six (6) weeks of the receipt of the evaluation.** A student who is still dissatisfied with their evaluation after receiving a response from the ICM/PPM Course Director may submit a written appeal to the Vice Dean for Medical Education. The Vice Dean for Medical Education will issue a final decision in writing to the student. There is no appeal of the Vice Dean’s decision.

YEARS III AND IV

Appeal of Evaluations

It is important that students discuss any difference of opinion they may have regarding the content of their evaluation with the Clerkship Director or Selective/Elective Preceptor. Only the Clerkship Director or Selective/Elective Preceptor has the authority to change the content. A student should not discuss his/her evaluation with any clerkship faculty, preceptors, or residents. If the student is still dissatisfied after discussing the evaluation with the Clerkship Director or Selective/Elective Preceptor, he/she should submit a written appeal to the Clerkship Director or Selective/Elective Preceptor. If the matter is not resolved the student may submit a written appeal to the Department Chair and report the matter to the Office of Student Affairs. **Appeals must be initiated within six (6) weeks of the receipt of the evaluation.** A student who is still dissatisfied with his/her evaluation after receiving a response from the Department Chair may submit a written appeal to the Vice Dean for Medical Education. The Vice Dean for Medical Education will issue a final decision in writing to the student. There is no appeal of the Vice Dean’s decision.

PROMOTION REQUIREMENTS

Promotion to Year II

1. The Student Performance Committee will review all students’ performances at the end of Year I to determine eligibility for promotion.
2. For promotion to Year II, students must:
   a) Pass all competency examinations (or make-up examinations, if eligible) from the Foundations of Medical Sciences I, II, III; GI/Liver; Reproduction; and Neurosciences systems.
   b) Satisfactorily complete all requirements for Year I Introduction to Clinical Medicine.
   c) Satisfactorily complete all requirements for Year I Professionalism and the Practice of Medicine.
   d) Satisfactorily complete the Clinical Translational Research (CTR) assignments.
   e) Satisfactorily complete the Literature Search Assignment.
   f) Pass the Year I Comprehensive Examination.
3. The Year I/II Student Performance Committee has established limits on the amount of remedial work that is considered feasible for a student who has experienced failing scores throughout the year. Although the Committee will consider each student's situation individually, normally any student who does not pass 15 weeks or more of the curriculum on the first attempt will be ineligible for make-up examinations and will be ineligible for promotion to Year II.
4. In Year I, and subject to Student Performance Committee approval, a student will normally be eligible for a make-up examination, subject to the guidelines in section three, if an examination is not passed on the first attempt. If a student passes the make-up exam, a grade of “P” will be recorded on the student’s transcript. If a student does not pass this make-up exam, a grade of “F” will be recorded on the student’s transcript. Occasionally, at the discretion of the Student Performance Committee, a student may be offered a second make-up examination. If the student passes the second make up examination, the grade noted on the transcript will be F/P. If the second make up examination is not passed, the student will be ineligible for promotion to Year II. If a student takes more than one make up exam in a given academic year, the fact of sitting for the make-up exams will be noted in the student’s MSPE whether or not the student passes the examination(s).

5. When the Student Performance Committee determines that a student has failed to demonstrate sufficient progress as outlined above, the committee may recommend remedial work, repeating the year of instruction in part, or in its entirety, dismissal, leave of absence, or other action.

6. Any student ineligible for promotion may be dismissed from the Keck School of Medicine.

Promotion to Year III
1. The Student Performance Committee will review all students’ performances at the end of Year II to determine eligibility for promotion.

2. For promotion to Year III, students must:
   a. Pass all competency examinations (or make-up examinations, if eligible) from the Cardiovascular, Renal, Respiratory, Endocrine/Metabolic, Reproduction, and G.I./Liver Systems.
   b. Satisfactorily complete all requirements from Integrated Cases.
   c. Satisfactorily complete all requirements for Year II Introduction to Clinical Medicine, including passing the Year II comprehensive examination of clinical skills.
   d. Satisfactorily complete the Business of Medicine (only Class of 2015) and PPM Selective.
   e. Satisfactorily complete the Year II component of the Required Scholarly Project.
   f. Satisfactorily complete the evidence-based medicine workshop and assignments.
   g. Take the USMLE Step 1 examination.

3. The Year I/II Student Performance Committee has established limits on the amount of remedial work that is considered feasible for a student who has experienced failing scores throughout the year. Although the Committee will consider each student's situation individually, normally any student who exceeds the limits outlined below will not be permitted to do make-up work to be eligible for promotion. If a Year II student fails three or more exams on the first attempt, the student will be ineligible for further make-up exams and will not be eligible for promotion to Year III.

4. In Year II, and subject to Student Performance Committee approval, a student will normally be eligible for a make-up examination, subject to the guidelines in section three, if an examination is not passed on the first attempt. If a student passes the make-up exam, a grade of “P” will be recorded on the student’s transcript. If a student does not pass this make-up exam, a grade of “F” will be recorded on the student’s transcript. Occasionally, at the discretion of the Student Performance Committee, a student may be offered a second make-up examination. If the student passes the second make-up examination the grade noted on the transcript will be F/P. If the second make-up examination is not passed, the student will be ineligible for promotion to Year III. If a student takes more than one make-up exam in a given academic year, the fact of sitting for the make-up exams will be noted in the student’s MSPE whether or not the student passes the examination(s).

5. When the Student Performance Committee determines that a student has failed to demonstrate sufficient progress as outlined above, the committee may recommend remedial work, repeating the year of instruction in part, or in its entirety, dismissal, leave of absence, or other action.

6. Any student ineligible for promotion may be dismissed from the Keck School of Medicine.

Promotion to Year IV
1. The Committee on Performance, Professionalism, and Promotion will review all students’ performances at the end of Year III to determine eligibility for promotion.

2. For promotion to Year IV, students must:
   a) Successfully pass all Year III required clerkships (including Intersessions I and II) or have special approval from the Senior Associate Dean for Student and Educational Affairs to delay a Year III required clerkship to Year IV.
   b) Pass USMLE Step 1.

3. When the Committee on Performance, Professionalism, and Promotion determines that a student has failed to
demonstrate sufficient progress as outlined above, the committee may recommend remedial work, repeating the year of instruction in part, or in its entirety, dismissal, leave of absence, or other action.

4. Any student ineligible for promotion may be dismissed from the Keck School of Medicine.

A student is allowed only one repeat of an academic year during his/her enrollment at the Keck School of Medicine of USC.

UNITED STATES MEDICAL LICENSING EXAMINATIONS (USMLE)

Three Steps of the United States Medical Licensing Examination (USMLE) are required for licensure in the United States. The USMLE program recommends that U.S. licensing authorities require completion of USMLE Steps 1, 2, and 3 within a seven-year period, though this varies from state to state (California currently requires completing all three steps within a 10-year period). This period begins when the examinee first passes a Step examination. Score records will include a complete history of each person's attempts at USMLE Steps in order to provide the information necessary for licensing authorities to implement these recommendations.

Successful passage of Step 1 and Step 2 (both Clinical Knowledge and Clinical Skills) of the USMLE is required for graduation from the Keck School of Medicine of USC. Since both passing Step 1 and Step 2 examinations are required for graduation, diplomas for students who have not completed both requirements will be withheld until both requirements are met. Students will ordinarily take Step 3 of the USMLE during their first graduate year of residency training. Under no circumstances does the school guarantee that the student will pass any USMLE Step examination successfully.

STEP 1

All students must take USMLE Step 1 before the start of Year III clerkships or within 6 months of completion of Year II (whichever comes first). Students delaying the start of Year III may be excused from taking the USMLE by the Senior Associate Dean for Student and Educational Affairs or may submit a request for deferral to the Senior Associate Dean for Student and Educational Affairs. If the status of any student is unclear, the Senior Associate Dean for Student and Educational Affairs will determine eligibility.

Any student who takes but fails to pass the USMLE Step 1 examination may proceed into Year III. Students who do not pass USMLE Step 1 on the first attempt will be required to sit for a second attempt within six months of their first attempt. Failure to do so will result in the student being placed on an administrative leave of absence. If a student does not pass after a second attempt, they will be placed on an administrative leave of absence and must submit a passing score prior to returning to the curriculum. Exceptions to this policy can only be granted by the Senior Associate Dean for Student and Educational Affairs. Students who have not passed the USMLE Step 1 by the end of their third year will be placed on an administrative leave of absence. Students can take Step 1 a maximum of three times. Students who have not passed Step 1 after three attempts are ineligible for promotion to Year IV and will be dismissed from the Keck School of Medicine.

STEP 2

Students must take both sections of Step 2 – Clinical Knowledge (CK) and Clinical Skills (CS) on or before December 31st of Year IV. Registration for these examinations must take place by September 1 of Year IV. Any student who fails to take Step 2 (CK and CS) prior to December 31st of Year IV will not be certified for the National Residency Match Program. Students who do not meet the December 31st deadline will have their performance reviewed by the Committee on Performance, Professionalism and Promotion. Any exceptions to this policy must be approved by the Senior Associate Dean for Student and Educational Affairs. Students can take Step 2 CK and Step 2 CS a maximum of three times each. If a student does not pass after a second attempt, they will be placed on an administrative leave of absence and must submit a passing score prior to returning to the curriculum. Students who have not passed Step 2 CK or Step 2 CS after three attempts will be dismissed from the Keck School of Medicine.

STEP 3

Step 3 is ordinarily taken during the first graduate year of residency training.
Application

Application to take the examination is the responsibility of the student. Students should apply well in advance of desired examination dates to maximize the chance of receiving a testing appointment for the desired date and location. Applications and information about the examination may be obtained from the USMLE website http://www.usmle.org. All fees and examination dates are subject to change. See USMLE website for current information. Examination centers for Steps 1 and 2 are located throughout the United States and around the world.

The above information regarding the USMLE is subject to change by the NBME. We encourage you to review the USMLE web site for the most current information. The School is not responsible for changes in the above information.

Guidelines for USMLE Examinees with Disabilities

The National Board of Medical Examiners provides reasonable and appropriate accommodations for examinees with documented disabilities. Examinees are informed of the availability of test accommodations in the USMLE Bulletin of Information. All requests for test accommodations must be received in a timely manner. Reasonable accommodations vary according to the type and degree of disability. Accommodations will be made on an individual basis and depend on the nature and extent of the disability, documentation provided, and the requirements of the examination. Because the NBME’s requirements for documentation may result in requests for supplemental information, we encourage students requesting accommodations to apply well in advance of deadlines. Students intending to request accommodations for the USMLE examinations should recognize that the review and approval process is stringent and time consuming; students planning to request accommodations are encouraged to review NBME requirements at least a year prior to planned testing.

GOOD ACADEMIC STANDING

Progress toward the completion of the Doctor of Medicine degree is monitored by the Student Performance Committee (Years I and II) and the Committee on Professionalism, Performance, and Promotion (Years III and IV). A student in good standing at the Keck School of Medicine of USC requires that the student:
1. achieve a passing grade on the system exams, comprehensive exams, required clerkships, selectives/electives and other mandatory competencies; or
2. be eligible to remediate any unsatisfactory grades on the system exams, comprehensive exams, required clerkships, selectives/electives and other mandatory competencies;
3. pass the appropriate step of the USMLE by established deadlines;
4. maintain acceptable academic and professional behavior and ethical standards as outlined in the student handbook.

Loss of good standing may end a student’s eligibility for special programs, including, but not limited to, the Summer Research Fellowship program. A student not in good standing also places her/his federal student aid and scholarships at risk.

A student who has lost good standing will be notified by the respective Performance Committee and may be placed on academic or professional behavior probation. The student will return to good standing upon completion of the required remediation.

SATISFACTORY ACADEMIC PROGRESS

 Students must maintain satisfactory academic progress toward their stated degree objective at all times. Progress is measured from the beginning of the first course at USC applied toward a specified degree, and all requirements for that degree must be completed within a specified time. Satisfactory Academic Progress requires that a student adhere to the medical school schedule for degree completion which is a maximum of six years for the MD degree including two years of approved leaves of absence. Leaves for an approved educational program (dual degree, MPH, MBA, PhD) extend this timeline as appropriate for the number of years to complete the approved educational program. Exceptions to this policy will be reviewed by the appropriate Performance Committee.
Students who have exceeded the time limit for completing their degree program will not be permitted any further registrations and an administrative withdrawal will be executed. If granted an extension of time by the appropriate performance committee, the Senior Associate Dean for Student and Educational Affairs will permit registration for the specified period of extension.

Please see the SCampus for more information on the University policy for maintaining Satisfactory Academic Progress and Financial Aid eligibility.

**LEAVE OF ABSENCE POLICIES AND PROCEDURES**

A leave of absence, for whatever reason, may be arranged by the Senior Associate Dean for Student and Educational Affairs. A request for a leave of absence should include: the desired start date for the leave; the desired duration and/or completion date of the leave; a description of any activities to be pursued during the leave, including specific planned outcomes, if any; and, for leaves planned to pursue research or other educational programs, the name(s) of any faculty supervisor(s). Where applicable, supporting documentation should also be submitted, e.g., letter from treating physician, faculty supervisor, etc.

Before a decision is rendered, the Senior Associate Dean for Student and Educational Affairs will discuss the request with the student. A decision of approval will guarantee the student a return to school if the conditions of the leave are met and if there is an uncommitted space in the year to which the student will return. A review of compliance with the conditions will be made by the Senior Associate Dean for Student and Educational Affairs prior to the return of the student. The basis for this review will be a written report from the student outlining his/her accomplishments.

Leaves of absence are handled differently depending upon the reason for the leave:

1. **ACADEMIC** – reviewed by the respective Performance Committee and recommended to the Senior Associate Dean for Student and Educational Affairs. Conditions of return, extensions, etc., are handled by petition (in person or in writing) to that Committee.
2. **ADMINISTRATIVE** – Can be initiated at the discretion of the Senior Associate Dean for Student and Educational Affairs for failure to comply with Keck policies.
3. **JOINT DEGREE OR RESEARCH PROGRAMS** – processed through the Office of Student Affairs and initiated by a student submitting a Request for Leave of Absence form to the Senior Associate Dean for Student and Educational Affairs. With the exception of the joint degree programs, leaves of absence will not normally be extended beyond one academic year. Exceptions to this policy must be granted by the Senior Associate Dean for Student and Educational Affairs. It is against policy for students to be enrolled in a non-joint degree program without prior approval from the Senior Associate Dean for Student and Educational Affairs.
4. **MEDICAL** – Handled by the Senior Associate Dean for Student and Educational Affairs. Students must submit a Request for Leave of Absence form along with a letter from the student’s health care professional and, at the discretion of the Senior Associate Dean for Student and Educational Affairs, a health care professional designated by the school, documenting the need for a medical leave. A letter from the student’s licensed health care professional will be required to return from the leave of absence.
5. **OTHER** (i.e., financial, family obligations, etc.) – Handled by the Senior Associate Dean for Student and Educational Affairs. Students must submit a Request for a Leave of Absence form.

*Maximum cumulative medical and/or personal leave is two years.

**General Information:**

1. Requests for a Leave of Absence by students in good standing will be acted upon by the Senior Associate Dean for Student and Educational Affairs. Appeals to the Senior Associate Dean for Student and Educational Affairs’ decision may be made to the appropriate Performance Committee.
2. Requests for a Leave of Absence by students in academic difficulty will be forwarded by the Senior Associate Dean for Student and Educational Affairs to the appropriate Performance Committee for action.
3. Return after leave requires that the student has met all other requirements for progression to the level on which he/she is returning, whether or not such requirements change during the leave period. In the event of a change of policy, return to the Keck School of Medicine of USC requires meeting the requirement(s) of the new policy.
4. Responsibility for meeting deadlines which may occur during the period of leave, e.g., scheduling deadlines, USMLE exam dates, or NRMP deadline dates, are assigned to the student and not to the Office of Student Affairs.

5. Students who have completed Year II and who are on a Leave of Absence for any reason must pass USMLE Step 1 before they may return to clerkships.

6. Students who do not pass USMLE Step 1 or Step 2 CK or CS after a second attempt will be placed on an administrative leave of absence until they submit a passing score for the examination.

Students who are granted a leave of absence should be aware that:

1. Extensions of leave must be reviewed and approved by the Senior Associate Dean for Student and Educational Affairs annually. A status report will be required from the committee advising any student who is seeking the M.D./Ph.D. degree.

2. Exceeding the leave time approved, without an approved extension, abrogates the Dean's authority to guarantee return and may be the basis for a student’s withdrawal or dismissal from the medical school.

3. Students approved for leave must file, with the Student Affairs Office, a mailing and email address and phone number at which they can be reached during the leave.

4. A return to school earlier than the time allotted is contingent on whether the student can be accommodated in the existing schedule.

**Process for Leave of Absence Consideration**

Students who are considering a leave of absence need to:

1. Submit a Request for Leave of Absence form to the Senior Associate Dean for Student and Educational Affairs, as described above.

2. Meet with the Senior Associate Dean for Student and Educational Affairs for consideration of the request for a leave of absence.


4. Meet with the Registrar in KAM 100-B to discuss individual leave of absence requirements.

5. Return MDL keys prior to the start of a leave of absence (Year I and II students only).

**Process for Returning From Leave of Absence**

Students returning from a Leave of Absence for any reason need to:

1. Contact the Office of Student Affairs by the date indicated on the letter granting the leave of absence.

2. Submit a Request to Return from a Leave of Absence form to the Senior Associate Dean for Student and Educational Affairs. If the request is not received by the deadline stipulated in the original letter granting the leave, an administrative withdrawal will be processed.

3. Be responsible for all requirements for progression to the level on which student is returning.

Students returning to Year III from a leave of absence greater than or equal to three years will be required to complete the following additional requirements prior to beginning required clerkships:

- Participate in the MSP tutoring sessions offered to Year II students as preparation for the Year II OSCE
- Retake and pass the Year II OSCE, and receive feedback and any appropriate remediation
- A four week outpatient internal medicine elective, to be coordinated with the department of Medicine
- Shadowing during the leave is strongly encouraged

**RESEARCH PROGRAMS**

**Dean’s Research Scholars Program**

This program provides students the opportunity to take a full year of research experience any time following the first year of medical school. Students electing this program will continue to be considered enrolled as full-time students. Students may elect such a research program with a faculty mentor at another institution if the program is approved by the appropriate department at Keck School of Medicine of USC and the Director of the Dean’s Research Scholars Program. Any student interested in this option should contact the Office of Student Affairs at (323) 442-2553 for full information and an application.
Dean’s Research Scholarship
A one-year stipend that is approximately equal to the authorized university stipend for a graduate student at the postgraduate year may be provided to students in the Dean’s Research Scholars Program. Students may apply for this scholarship at time they submit their application for the Deans Research Scholars Program. Only students completing the Dean’s Research Scholars program at the Keck School of Medicine are eligible for the Dean’s Research Scholarship.

DUEL DEGREE PROGRAMS

The MD/MBA Program
The Keck School of Medicine of USC and the Marshall School of Business jointly offer an innovative program for students seeking knowledge in both medicine and business administration. The program prepares graduates with knowledge and skills to assume leadership in business and health care.

The MD/MBA programs spans five and one-half years. Interested students may apply during their second or third year of medical school, and begin core M.B.A. courses following successful completion of at least the first two years of medical school. At the conclusion of the program, students will have completed 48 units in the Marshall School of Business, and four years of courses in the Keck School of Medicine of USC. Additional information about the application process and business curriculum is contained in the Marshall School’s application, available from the Marshall School of Business on University Park Campus, (213) 740-7846. Students considering this program should contact the Office of Student Affairs, (323) 442-2553.

The MD/MPH Program
Students may elect to complete the dual M.D./M.P.H. degree in four or five years.

The goal of the program is to prepare Keck medical graduates for careers in public health, community medicine and health policy. Clinically-trained physicians with the MPH degree can take positions in state and local health departments, the United States Centers for Disease Control and Prevention, non-profit organizations such as community health centers, and health plans. They may also work in international contexts. Keck will graduate physicians who have the academic knowledge and skills, and clinical experience to improve the health of populations, particularly those in underserved communities.

The Keck School of Medicine’s four-year MD/MPH dual-degree program allows a student enrolled in the MD program to concurrently enroll in an accelerated MPH program that leads to graduation at the end of four years with both degrees. Students completing the program in five years will complete M.P.H. coursework over the course of one year (3 semesters), following the successful completion of at least the first two years of medical school. For more information please visit: http://mph.usc.edu/.

MD/PhD Program
The Keck School of Medicine’s M.D./Ph.D. Program is a fully funded joint program of the University of Southern California (USC) and the California Institute of Technology (Caltech), which is designed for individuals who aspire to a career in academic medicine or a leadership role in the biomedical industry. The mission of the program is to train a qualified and diverse group of physician scientists to become the next generation's leader in translational science.

The combined M.D./Ph.D. degree is awarded for demonstrated competence in clinical performance and innovative research. Clinical training occurs under the auspices of the Keck School of Medicine at the University of Southern
California. Unlike some programs, we believe that an M.D./Ph.D. student should receive complete and undiluted medical training. The privilege of caring for patients comes with the important responsibility to be as knowledgeable and competent in medical practice as other physicians who complete the medical school program. Competency in clinical medicine is judged by excellence in completion of all Year I and II coursework, as well as the Introduction to Clinical Medicine program offered during both years. Additional requirements include completion of all clinical rotations in Years III and IV, and passing of the National Boards Parts I and II.

The performance of innovative research occurs within the guidelines of a specific doctoral degree granting program in the Graduate School at the University of Southern California or at the California Institute of Technology. Students are encouraged to explore research opportunities from the beginning of their enrollment in the program. Competency in research is evaluated based upon grades in coursework and successful completion of an individual department’s requirements for the award of their Ph.D. degree.

During the first two years of medical school, students are enrolled as medical students in the medical curriculum (which is graded Pass/Fail). Students must perform at an acceptable level in their coursework in order to receive graduate credit for these medical school courses. Appropriate graduate credits will be transferred to each M.D./Ph.D. student’s transcript at the end of the MSII year, based on continued adherence to performance standards (see Performance Guidelines, Medical School Curriculum). Note that graduate credit is not transferred to the California Institute of Technology.

In the fall semester of the MSII year, the M.D./Ph.D. student decides which Ph.D. granting graduate departmental program to enter. For description of these graduate programs and selecting participating Ph.D. programs, visit www.usc.edu/pibbs. For other University programs, you may also visit http://viterbi.usc.edu/ or http://dornsife.usc.edu/.

The requirement for the graduate program selected is that it must be a Ph.D. granting program within the University of Southern California or the California Institute of Technology. Although the M.D./Ph.D. student was accepted into a combined degree program, there are certain application procedures that students must follow. Graduate programs have early application deadlines so it is best to begin planning for that transition early in the second year. Students should directly contact the staff advisor of the department for specific instructions.

During the PhD years, students participate in the Longitudinal Clinic Experience. During this Experience, students participate as an active medical trainee (MSII or equivalent) in a clinical venue 12 times per academic year. The clinical experience should complement the research and/or career interest of the student. Dates and times for the interactions are flexible as determined by the requirements for the graduate program and availability of the student and clinical mentor. Overall, the goal of this experience is to maintain clinical skills and gain exposure to clinical problems to enrich students’ potential to become physician scientists.

Each student must complete the requirements for the Ph.D. degree (including their thesis defense) before they re-enter the clinical MSIII year. Students who expect to complete the Ph.D. and enter MSIII in July of the respective year of completion must contact the Office of Medical Student Affairs in the early spring (January) to notify this office of their intent and to develop a rotation schedule. In addition, the students should notify the M.D./Ph.D. Program Office. Students must complete the dissertation deadlines imposed by either USC or Caltech prior to entering MSIII.

For more information on the MD/PhD Program jointly administered by the Keck School of Medicine of USC and the California Institute of Technology, please contact: MD/PhD Program, Keck School of Medicine of USC, 1975 Zonal Avenue (KAM 200), Los Angeles, CA 90089-9023; (323) 442-2965, FAX: (323) 442-2318; Email: mdphdpgm@usc.edu.

**ABSENCE POLICIES**

**Year I/II Absence Policy**
For ICM, PPM, and ICS, attendance at all sessions is required. All absences are reported to the Office of Student Affairs.

A. Electronic Absence Request/Notification Forms are required for all absences.
   1. For absences in advance of a session:
      a. The student will obtain the ICM, PPM, or ICS faculty signature on the printed copy of the electronic form and submit the form to the ICM Office (KAM B29), PPM Office (KAM 314), or ICS (Dr. Dixon
via jfdixon@usc.edu) for course director review.

b. The ICM/PPM/ICS faculty will specify the make-up activity when they sign the form.

c. Documentation verifying the request will be required. (Upload the appropriate documentation when completing the electronic form.)

2. In general, examples of excused absences include: illness, family illness, death, religious holiday, or participating as a primary presenter at a professional conference.

3. For unanticipated absences, e.g., illness, family emergency:
   a. Submission of electronic absence request/notification is required.
   b. Students must notify the ICM Office (323-442-2439), PPM Office (323-442-1763), or ICS (Dr. Dixson via jfdixon@usc.edu) and their ICM, PPM, or ICS faculty on the day of the absence.
   c. For some unanticipated absences documentation verifying the reason for the absence may be required. (Upload the documentation if appropriate when completing the electronic form.)

B. Any missed session must be made-up (excused or unexcused.) Although make-up sessions may not be possible for missed workshops, students must still follow the policy above.

Clerkship Absence Policy

Absence for Reason of Illness
Absence due to illness must be reported to the clerkship director or medical student educator on a required clerkship. In case of extended absence (2 days or more), a note from a physician (who is not a relative), is required and the absence will be reported to the Office of Student Affairs. A physician note may be requested for any absence due to illness at the discretion of the clerkship director or designee.

Absence for Reasons Other Than Illness
Anticipated absences must be approved in advance by the clerkship director or designee. The required Student Absence Request Form must be submitted along with supportive documentation at least 6 weeks in advance of the start of the clerkship to be considered for approval. Absences where less than 6 weeks notice is provided will be considered at the discretion of the Clerkship Director. Some general guidelines include:

- In general, absences due to illness, residency interviews, USMLE Step 2 CS, or presentation of student research are examples of appropriate reasons for excused absences.
- USMLE – Only Step 2 CS will be considered an excused absence due to limited numbers of testing sites; Step 2 CK must be taken during discretionary time.
- BLS/ACLS Training – will not be considered an excused absence; this must be taken during discretionary time.
- Residency Interviews – interviews scheduled during a clerkship, elective or selective must be approved in advance. Printed email verification of the invitation to interview must be submitted with the request.

While faculty will try to accommodate reasonable requests, students are not guaranteed time away from courses. All absences, excused or unexcused, must be made up before a passing grade can be assigned. The specific make-up activities will be determined by the clerkship director. Only by successfully petitioning the Committee on Performance, Professionalism, and Promotion may a student obtain a waiver from having to make up lost time.

Unexcused absences from a clerkship may be grounds for failing and/or disciplinary action. Any unexcused absence makes the student ineligible to earn a final grade of “Honors,” and may be grounds for failure regardless of final exam or clinical performance evaluations. Additionally, failing to notify staff or faculty in the clerkship office when a student is unable to attend lecture may preclude them from earning a final grade of “Honors.”

Selective/Elective Absence Policy

In order to ensure adequate clinical exposure, no more than 3 days of excused absences (to include official Holidays) can be accepted during a selective or elective. This policy does not imply that absences are guaranteed; absences may be excused at the discretion of the faculty. Absence due to illness must be reported to the faculty or his/her designee as soon as possible. In case of extended absence (2 days or more), a note from a physician (who is not a relative) is required and the absence will be reported to the Office of Student Affairs. A physician note may be requested for any absence, at the discretion of the faculty.
Students will generally be required to make up days before a passing grade can be assigned. All absences must be excused and any planned absence must be registered with the Course Director and preceptor prior to the first day of the selective. Students should use discretionary time if they anticipate a need for missing more than 3 days during a selective. USMLE Step 2 CK and BLS/ACLS will not be considered excused absences.

Ample weeks of discretionary time are allotted during the Junior/Senior Continuum. Students should use discretionary time for studying for Step 2 and residency interviews as well as for vacation time.

**POLICY ON THE ASSESSMENT OF STUDENT PERFORMANCE BY FACULTY HEALTHCARE PROVIDERS**

Faculty who have provided health care services to a medical student or are currently providing health care services to a medical student cannot participate in the assessment of that student’s performance in any venue, including, but not limited to, a course, clerkship, or performance committee. If, in the best interests of a student’s health, specialized care is sought and delivered to a medical student by a faculty member, that faculty member must recuse him or herself from any role in the subsequent assessment of that student.

**SCHEDULING POLICY FOR YEARS III/IV**

Students must have all rotations on scheduled in MedOASIS at least three weeks in advance. Students are able to self-schedule home Selective and Elective courses according to course availability and student eligibility in MedOASIS. For all away electives not scheduled in MedOASIS, proof of approval from the host institution must be submitted to the Office of Student Affairs in order for it to be added to a student’s schedule.

**Schedule Changes**

Students cannot drop courses within two weeks of rotation start date. The drop/change process for selectives and electives will be managed by OASIS. Schedule requests for away electives submitted late will be approved at the discretion of the Year III/IV Committee on Performance, Professionalism, and Promotion.

**SITE ASSIGNMENT POLICY**

Students will be notified of their specific site assignment six weeks prior to the start of the clerkship. All site assignments are final unless there are extenuating circumstances that arise after the initial site assignments are made. Changes will be made at the discretion of the clerkship director.

**Policy for Off-Site Rotations**

As part of our commitment to providing the best educational experiences for all students, we offer off-site rotations for the Core Clerkships. These sites have been selected based on their ability to provide exposure to a wide variety of patient encounters, in combination with outstanding faculty teaching and mentorship. Students will submit their preferences and the final site determination will be made by lottery. E-mail notification listing the sites will be sent out to the students prior to the start of each clerkship.

Consideration is taken into account that health and other personal circumstances that place special demands on a student may arise in the course of the year. **Extenuating circumstances** requiring a student to stay in the Los Angeles or identified area must be submitted by the student in writing at the time of the initial site request. Examples of extenuating circumstances include:

1. Personal health
2. Personal health or special needs of a dependent, significant other, or minor (excluding pets)

In order to obtain any of the above site exemptions, the student must submit a written request to the Assistant or Senior Associate Dean for Student and Educational Affairs PRIOR to assignments being made. The request must be approved by the Associate or Assistant Dean for Student Affairs.
Every effort will be made to honor a student’s request and preference for a particular site assignment. However, unforeseeable circumstances may require students who were initially assigned to one location to be changed to another. Unless there is an exemption on file for the student(s) as explained above, the student(s) will be asked to move sites. Each site offers a unique educational opportunity and adheres to the outstanding standards of the Keck School of Medicine.

**MEDICAL STUDENT TIME REQUIREMENTS FOR CLINICAL AND EDUCATIONAL ACTIVITIES**

Keck School of Medicine of USC policy places value on achieving the optimal clinical educational experience for medical student learners, while recognizing the effects of fatigue and sleep deprivation on learning, clinical activities, and health and safety. Student activities on clerkships are therefore structured to assure a meaningful and clinically relevant educational experience. Moreover, the experiences are structured to reflect the realities of patient care, provide the students with an understanding of the timeless nature of a physician’s responsibilities, and engender the highest medical ideals of altruism and lifelong learning. Becoming a physician includes learning to accept responsibility for patients 24 hours a day, 7 days a week, 365 days a year—except when alternatives for coverage have been arranged.

**Duty hours:**

1. Duty hours are defined as all clinical and academic activities related to the students, i.e., patient care (both inpatient and outpatient), administrative duties related to patient care, the provision for transfer of patient care, time spent in-house during call activities, and scheduled academic activities such as conferences. Duty hours do not include reading and preparation time spent away from the duty site.
2. Duty hours must be limited to 80 hours per week, averaged over the length of the clerkship, inclusive of all in-house call activities.
3. Students must be provided with one day in seven free from all educational and clinical responsibilities, averaged over the length of the clerkship, inclusive of call. One day is defined as one continuous 24-hour period free from all clinical, educational, and administrative activities.

Because resident and intern schedules will vary in each department, please refer to the individual clerkship manuals for details regarding clerkship-specific implementation of medical student duty hours.

**OSCA AND OSCE STUDENT INSTRUCTIONS AND INFORMATION**

1. The OSCAs and OSCEs are required clinical examinations and therefore all requirements in the Code of Professional Behavior will be enforced. Students must not discuss standardized cases (paper, simulated patient or real patient) with other students at any time before, during, or after taking an OSCE or OSCA (with the exception of specific curricular activities structured around OSCA review).
2. The KSOM Dress Code will be applicable to these testing situations. Professional attire including white coat and LAC+USC ID badge is required. No flip-flops, shorts, tank tops, jeans or revealing clothing will be allowed. As with any patient care experience, hair must be secured back to avoid handling. Scrubs with a white coat are acceptable if cleared with the Medical Student Educator in advance.
3. Students must bring their own stethoscopes, oto-ophthalmoscopes, penlights, and all required equipment to the examinations. Students who do not bring their required equipment may still take the exam, but loaner equipment will not be provided.
4. Colored paper will be provided inside the exam rooms for taking patient notes. Students are not permitted to remove any exam materials including the colored note paper from the test site. All patient note papers will be collected and shredded. Any exam papers taken by a student will be considered a violation of the Code of Professional Behavior.
5. No notes, study materials or personal scratch paper will be allowed inside the patient exam rooms. Backpacks, purses, satchels, and briefcases will not be allowed inside the patient exam rooms or the post-encounter rooms and will need to be left outside the rooms, in the hallway.
6. Mechanical and digital devices including but not limited to, cell phones, pagers, PDAs, calculators, recording or filming devices, radios, and 2-way communication devices are not allowed in the examination rooms during testing.
7. Talking with classmates is not allowed in the testing hallway or in the post-encounter room.
8. No gum, food, candy or beverages are allowed in the testing area.
9. Students must enter the testing area from the KAM basement lobby area and exit via the door to the Biggy parking structure. Students who have completed the examination are not allowed to re-congregate in the KAM basement lobby.
10. Overhead audio announcements will tell students when to begin each patient encounter, when 5 minutes are remaining, and when the patient encounter is over. These announcements, as well as instructions from the proctors, must be followed.

Any action considered irregular behavior by the proctoring staff will be reported. The Clinical Skills Education and Evaluation Center reserves the right to remove students who exhibit disruptive behavior.

OSCAs Policy

The Objective Structured Clinical Assessments (OSCA) in Years I and II are designed as formative experiences for students in the Introduction to Clinical Medicine (ICM) course. OSCAs are designed for feedback purposes only and are not graded. Student performance on each OSCA is reviewed by faculty and/or fellow students, either individually or in ICM group sessions where constructive feedback is provided. In addition, students have the opportunity to individually review their OSCA recordings to complete the required OSCA Self-Reflection form.

OSCE Policy

The Objective Structured Clinical Examination (OSCE) is designed to evaluate a student’s ability to take a relevant history, perform a focused physical exam, and when appropriate, discuss the relevant treatment plans and next steps with the patient all while maintaining a patient-centered approach. Studies show that the OSCE is an excellent and reliable tool to evaluate medical student and resident clinical performance. The Liaison Committee on Medical Education has deemed OSCE as the “preferred method of evaluation” by integrating it into the USMLE Step 2 as a method for examining Clinical Skills (CS) competency. Currently, OSCEs are incorporated into the curriculum in the following courses:

Year II – At the end of Year II, students will take a summative OSCE to demonstrate their readiness to enter the clinical rotations. All Year II ICM required activities, milestones, and the course and instructor evaluation must be completed PRIOR to taking the OSCE.

Year III/IV – 1) Most required clerkships have an OSCE as part of their final examination component. 2) At the end of Year III, students will take another cumulative OSCE called the CPX (Clinical Performance Examination) as a KSOM graduation requirement. All Year III/IV clerkship required learning activities and course/faculty evaluations must be completed by specified due date to be eligible to take the OSCE and CPX.

Year III OSCE Performance Review Policy

Students receive an individualized Skills Summary Report that highlights the strengths and weaknesses of their performance after each OSCE. Students who are identified as “need remediation” on each OSCE are required to:
1) complete an OSCE self-reflection exercise with a video review of their own performance;
2) meet with a faculty member for feedback.

Students who are not identified as “needing remediation” also have the opportunity to review their OSCE encounters and complete an OSCE Self-Reflection document for self-improvement purposes. As such, students are encouraged to take advantage of the opportunity to reflect on their clinical skills and determine areas of competence and deficiency.

For exam security reasons, OSCE checklists are not available for any OSCE review. Due to space and scheduling limitations, priority for reviews will be given to those who are required to remediate. To schedule a review time, a student needs to contact the Clinical Skills Education and Evaluation Center at (323) 442-3483 or email Joy Cruz at josefinc@usc.edu for an appointment during regular business hours.
If after self-review, a student believes the OSCE score to be in error, he/she may file a formal written appeal of the entire clerkship grade to the clerkship director, as per Keck School of Medicine policy. The OSCE review portion of a grade appeal will be performed by faculty in the Clinical Skills Education and Evaluation Center.

ACADEMIC PROBATION, ADMINISTRATIVE WITHDRAWAL, DISMISSAL, AND APPEAL PROCESS

Academic Probation

The Student Performance Committee or the Committee on Performance, Professionalism, and Promotion may place a student on probation at any time during the student's enrollment. Justifications for placing a student on academic probation include, but are not limited, to the following:

1. Failure to pass a required course, a required clerkship, selectives/electives or other mandatory competencies (OSCE, CPX, HEAL, etc.)
2. Failure to pass the appropriate USMLE exam by the specified time
3. Failure to satisfactorily remediate a pattern of marginal performance as specified by the performance committees
4. Failure to make Satisfactory Academic Progress toward the completion of the MD degree
5. Repeating the year for academic reasons

A student may be placed on academic probation by the Senior Associate Dean for Student and Educational Affairs for either academic matters without convening the performance committee. The student may meet with the Senior Associate Dean for Student and Educational Affairs to discuss whether probation is warranted, and may appeal being placed on probation to the appropriate Performance Committee.

At the time a student is placed on probation, s/he will be informed of the reason for probation, the terms of probation, the duration of probation, and any other matters deemed pertinent by the Performance Committee or the Senior Associate Dean for Student and Educational Affairs.

Administrative Withdrawal

The Senior Associate Dean for Student and Educational Affairs may execute an administrative withdrawal for any of the following reasons:

1. Failure to contact the Keck School of Medicine by the stated deadline while on a leave of absence
2. Failure to return from a scheduled leave of absence; or absence without leave
3. Failure to make satisfactory academic progress
4. Failure to meet financial obligations. An administrative withdrawal does not relieve a student of the obligation to pay outstanding debts.

An administrative withdrawal from the M.D. degree program is equivalent to being dismissed from the Keck School of Medicine of USC. Once executed, “Administrative Withdrawal” will be noted on the student's transcript.

Dismissal

A student may be dismissed from the Keck School of Medicine for, but not limited to, the following reasons.

1. Exceeding the time approved for a leave of absence
2. Failure to demonstrate satisfactory academic progress
3. Ineligibility for promotion to the subsequent year of the curriculum
4. Failure to pass USMLE Step 1, Step 2 CK or Step 2 CS after three attempts
5. Behavior that places patients or others at risk
6. Violations of the Code of Professional Behavior
7. Violations of the University Student Conduct Code
The appropriate Student Performance Committee or the Senior Associate Dean for Student and Educational Affairs will recommend dismissal to the Dean of the Keck School of Medicine in accordance with policy stated in the Student Handbook. A student may be dismissed from the Keck School of Medicine of USC without first having been placed on probation.

**Procedure for Dismissal**

1. A student who is being considered for dismissal shall be invited to meet with the Senior Associate Dean for Student and Educational Affairs no later than ten (10) days prior to the appropriate Performance Committee meeting so that any extenuating circumstances may be made known.
2. The student will receive a written statement that he/she may be considered for academic dismissal at least ten (10) days prior to the meeting of the Performance Committee.
3. The student may inspect his/her medical school file, including material upon which the proposed dismissal is based.
4. The student will be given an opportunity and is urged to appear before the appropriate Performance Committee when a recommendation for dismissal is being considered. The student may waive his/her right to such an appearance. The student should notify the Senior Associate Dean for Student and Educational Affairs in writing within five (5) business days prior to the meeting of his/her intent to appear.
5. The student shall be given a written copy of all rules and procedures to be followed at least ten (10) days prior to the student's hearing.
6. If the student attends the Performance Committee meeting, the student may be accompanied by counsel but must inform the Senior Associate Dean for Student and Educational Affairs of this intent at least seven (7) days prior to the meeting.
7. A quorum (two-thirds of the membership) must be present to vote on dismissal. Affirmative votes by two-thirds of the members present are necessary for dismissal. If a Committee member is unable to attend a meeting, he/she may send an alternate who has prior approval of the Vice Dean for Medical Education. The alternate has full authority to act in the absence of the regular Committee member.
8. At the students' request, he/she will be provided the information against him/her, including academic reports and evaluations used in arriving at the summation of his/her performance.
9. The student will have an opportunity to present any relevant information to the Performance Committee regarding his/her performance, using any relevant evidence including affidavits, exhibits and oral testimony. If the student desires copies of written materials to be distributed to Committee members, he/she must present them to the Office of Student Affairs at least three (3) business days before the meeting, or prepare the materials him/herself.
10. Recommendations for student dismissal must be based upon the information presented at the hearing.
11. The recommendations of the Performance Committee will be transmitted orally to the student by the Chairperson of the respective Performance Committee. The recommendations of the Committee will be transmitted in writing to the Vice Dean for Medical Education and the student within three (3) business days following termination of the meeting.

**APPEAL PROCESS**

1. The student may appeal the Committee's recommendation to the Vice Dean for Medical Education no later than ten (10) business days following transmittal of the Committee's written recommendation.
2. The Vice Dean for Medical Education may choose to uphold, to reverse, to ask the Committee to reconsider, or may choose to appoint an ad hoc committee to hear the student's appeal.
3. The members of this ad hoc committee shall be faculty members who have not been involved in the decision to dismiss. The Chairperson of the respective Performance Committee shall present the findings of the Performance Committee to the ad hoc appeals committee but shall not sit as a voting member of said Committee.
4. The ad hoc hearing committee shall submit its recommendation in writing to the Vice Dean for Medical Education within five (5) business days after the meeting.

Following receipt of the Performance Committee or ad hoc hearing committee recommendation, the Vice Dean for Medical Education will issue a final decision in writing to the student. There is no appeal from the Vice Dean’s decision.
MEDICAL STUDENT PERFORMANCE EVALUATION (MSPE)

Our MSPE structure is based on the Association of American Medical College’s recommendations for the Medical Student Performance Evaluation (MSPE), which we have fully implemented. The MSPE replaced what was previously known as the Dean’s Letter.

The MSPE is not a letter of recommendation, but an objective summary of a student’s performance throughout medical school in accordance with nationally defined guidelines.

The MSPE contains four sections: (1) Introduction; (2) Unique Characteristics; (3) Academic History; and (4) Summary, supplemented by appendices (described below). Other information may be included if appropriate.

1) The **Introduction** gives the student’s name and the location of the Keck School of Medicine of USC. It also provides a brief overview of the assessment methodologies at Keck.

2) The **Unique Characteristics** section is developed by compiling the student’s most important extracurricular activities. This may include leadership positions, membership in clubs, volunteer work, research, election to AOA, and documents Dean’s Recognition and Highest Distinction.

3) The **Academic History** is organized chronologically and summarizes academic progress.

This section contains year-end ICM narrative evaluations from the first and second year. These evaluations may be abstracted, and highly subjective comments may be modified, but other wording changes regarding performance in the courses can only be made by the course director. PPM evaluations will not be included in the MSPE. However, if they represent recurrent comments, they may be included in the summary.

The narrative evaluations from each required clerkship and elective/selective follow, in the order of completion, and may be abbreviated if necessary to meet AAMC guidelines for brevity. We will include in your MSPE all clerkship and elective/selective evaluations which are received in the Office of Student Affairs one month prior to the national release date for the MSPE. Each required clerkship narrative is preceded by your grade (Honors, High Pass, Pass, Fail, Incomplete).

Although we may edit the clerkship narratives for grammar, spelling, etc., our policies do not permit us to modify the narrative section of the clinical clerkship evaluation which describes a student’s performance. Changes in the narrative portion can be requested through a formal appeal process that includes the clerkship director or preceptor, the Department Chair, and the Vice Dean for Medical Education (as described in detail elsewhere in this Student Handbook). There is a deadline for appealing an evaluation; six weeks after receipt of the evaluation.

The Academic History may include information about irregular progress through medical school, such as leaves of absence, the Deans Research Scholars Program, etc. Negative information, if it exists, may also be included in the Academic History.

4) The **Summary** is developed by compiling some of the most frequently occurring "qualities" as mentioned in your clinical clerkship evaluations. It also explains that Keck School of Medicine students are recommended for postgraduate training as Acceptable, Good, Very Good, Excellent, or Outstanding, based on a formula computing the number of weeks of Honors/High Pass/Pass on required clerkships received in the Office of Student Affairs at the time the letter is written. Neurology, Internal Medicine Sub-Internship, and Surgical Subspecialty clerkship grades are excluded from this computation, as most students will not have taken these rotations by the time the MSPEs are written. The summary adjective is not "pro-rated" based upon the number of core clerkships completed at the time the MSPE is prepared. The minimum criteria are as follows:

- **OUTSTANDING:** 18 weeks of Honors; no grades of Pass
- **EXCELLENT:** 36 weeks of High Pass or the equivalent (e.g. 6 weeks of Honors, 6 weeks of Pass, and 24 weeks of High Pass)
- **VERY GOOD:** 18 weeks of High Pass or the equivalent
- **GOOD:** 0-17 weeks of High Pass or the equivalent
- **ACCEPTABLE:** Rarely used (notably irregular academic progress)
Appendices
A page describing Keck School of Medicine of USC curriculum and educational policies, and graphs illustrating comparative academic performance, will be appended to each MSPE.

These include:
- Appendix A: Graphic representation of comparative performance in preclinical/basic science courses.
- Appendix B: Graphic representation of comparative performance in core clinical clerkships.
- Appendix C: Assessment of student performance in the area of professionalism.
- Appendix D: Graphic representation of overall comparative performance in medical school.
- Appendix E: Medical school information page.

Inclusion of Negative Information
The MSPE may contain negative information about a student's cognitive performance and personal attributes. Examples of such information include, but are not limited to: Ethics Code violations; academic or professional behavior probation; failing a year of the preclinical curriculum or failing a clerkship; failure to pass USMLE Step 1 by the end of Year III; documented, significant behavior problems including, but not limited to, verbal or physical abuse, racism, sexual harassment, or homophobia; unprofessional behavior involving colleagues, staff, faculty or patients; substance abuse; criminal activity; and lying that advances one's self interest and/or adversely affects others.

Student Review of MSPE
Once the MSPE has been drafted, students are encouraged to review their MSPE and may request changes prior to the final printing and distribution of the MSPE in accordance with Student Affairs procedures and KSOM policies. Every student will be invited to review the content of their MSPE in the Office of Student Affairs. No substantive changes to the narrative evaluations will be made as part of this review process. If a student feels that inaccurate or misleading statements are present, the student may complete a Request for a Change Form, identify the specific changes requested, and provide any evidence the student feels may support the appeal. The Senior Associate Dean for Student and Educational Affairs will review the request and the student will be notified when a decision is made. The Senior Associate Dean for Student and Educational Affairs’ decision is final.

MSPE Release Date
An individual student’s MSPE will not be distributed without the student’s signed consent. MSPEs are released nationwide on October 1st to all programs, including Early Match specialties. MSPEs cannot be given to anyone (including the student) before October 1st.

MSPE Addendum
An MSPE addendum will be written and submitted for all students who re-apply to residency post graduation. Students who delay graduation to pursue research or joint degree programs will also have an MSPE addendum written and submitted with their residency application. The addendum will consist of all evaluations received after the creation of the MSPE and will also include any information regarding academic and professionalism issues that occurred after the creation of the MSPE.

AWARDS

ACADEMIC EXCELLENCE AWARDS
Selections for awards are made in accordance with individual awards’ established deadlines; therefore, academic determinations will be based on student achievement officially recorded at the time of the award deadline.

Graduation with Highest Distinction – Awarded for consistent excellence, this is the highest accolade bestowed at graduation by the Keck School of Medicine of USC. Students must achieve 34 or more weeks of Honors in required clerkships during the Year III/IV Continuum to receive this award. The words Graduate “with Highest Distinction” are added to the recipient’s transcript and Medical Student Performance Evaluation. Less than 10% of graduating seniors are expected to receive this honor each year.
Dean’s Recognition (Class of 2015 and 2016 only) – This designation identifies the consistently superior student. Criteria for selection will be based on performance throughout the year and will be specified by the Educational Policy Committee.

- **Years I & II**: Dean’s Recognition will indicate excellent achievement by a student. Dean’s Recognition characterizes students who distinguish themselves in their academic coursework; whose Year II RSPs are especially noteworthy; and who achieve a high level of success in development of their professional skills and attitudes. Dean’s Recognition will be recorded on the official transcript and in the Medical Student Performance Evaluation. The selection process is as follows:
  1. At the end of each of Year I and Year II, students meeting standards of excellence will be considered as potential recipients of Dean’s Recognition.
  2. Criteria will include:
     a. Comprehensive examination performance at or above the mean without make-up examination for Year I.
     b. Noteworthy professional development in ICM and/or PPM.
     c. Required Scholarly Project that meets standards set for Dean’s Recognition (Year II only).
     d. Outside Activities that meet standards set for Dean’s Recognition.
     e. Additional accomplishments as deemed appropriate by the Dean’s Recognition Committee.
  3. Final decisions will be determined by the Dean’s Recognition Committee.

Year I and Year II Dean’s Recognition will not be awarded beginning with the Class of 2017.

- **Years III & IV**: This designation is utilized to identify the consistently superior student. This designation is awarded to students who achieve 28 weeks or more of Honors during the Year III/IV continuum, based on the 48 weeks of required core clerkships. This information will appear on the official transcript and in the Medical Student Performance Evaluation.

Alpha Omega Alpha National Honor Society – This is essentially the "Phi Beta Kappa of medical school." The society was established in Chicago in 1902, and is composed of medical school students, faculty and alumni. According to the AOA Constitution, "...its aims shall be the promotion of scholarship in medical schools, the encouragement of a high standard of character and conduct among medical students and graduates, and the recognition of high attainment in medical science, practice and related fields." The major consideration for election is the "promise of future leadership in medicine," either as a practitioner or academician, as reflected in a student's academic record in medical school, and as reflected in subjective considerations of character. In addition to academic performance, character and integrity of the applicant and other factors such as extracurricular medical activities and research accomplishments are taken into consideration. New members are elected in August/September of the senior year. Students must be in the top 25% of their class to be considered for membership, as computed by a formula which covers all years of medical school to the time of election, but only one-sixth of the class may be elected.

### Classes of 2015 and 2016:

<table>
<thead>
<tr>
<th>Year I Criteria &amp; Weight</th>
<th>Comprehensive exam = 2/3; System exams = 1/3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year II Criteria &amp; Weight</td>
<td>Comprehensive exam = 2/3; System exams = 1/3</td>
</tr>
<tr>
<td>Year III Criteria &amp; Weight</td>
<td>Honors = 6 points; High Pass = 4 points</td>
</tr>
<tr>
<td>Relative Weight of Years I:II:III</td>
<td>2:2:3</td>
</tr>
</tbody>
</table>

### Classes of 2017:

<table>
<thead>
<tr>
<th>Year I Criteria &amp; Weight</th>
<th>System exams</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year II Criteria &amp; Weight</td>
<td>Year II OSCE = 1/3; ICS exam = 1/3; System exams = 1/3</td>
</tr>
<tr>
<td>Year III Criteria &amp; Weight</td>
<td>Honors = 6 points; High Pass = 4 points</td>
</tr>
<tr>
<td>Relative Weight of Years I:II:III</td>
<td>0.6:2:3</td>
</tr>
</tbody>
</table>
Any questions regarding AOA selection or activities should be directed to the AOA Faculty Councilor, Dr. Eric Hsieh.

*American Medical Women's Association Glasgow-Rubin Certificate of Commendation for Academic Achievement* – only presented in years when a woman medical student finishes first in her graduating class.

*American Medical Women's Association Janet M. Glasgow Achievement Certificates* – only presented to women who graduate in the top 10% of their class, based on their four-year academic record.

*Award for Academic Excellence Years I and II* – presented to the top second-year student based on performance during the first two years of medical school.

*Award for Academic Excellence Years I-IV* – presented to the top senior medical student based on performance during the four years of medical school.

**SERVICE AWARDS**

*Community Achievement Award* – Given to honor a medical student who has had an impact on the general population and the medical community as a whole, and who has been an example of the effect that medical students can have on patient care at all treatment levels.

*Dr. George Herron, M.D., Memorial Award* – An award given to the graduating senior who, in the opinion of the senior class, has given the most to the class during the four years of medical school. The recipient is selected by a vote of the class.

*Eric Cohen, M.D., Introduction To Clinical Medicine Award* – Recognizes the one student who best exemplifies the goals and objectives of the ICM program.

*Leonard Tow Humanism In Medicine Award (presented by The Arnold P. Gold Foundation)* - Given to one senior student who, by class vote, is felt to consistently demonstrate compassion and empathy with peers and patients.

**RESEARCH AWARDS**

*Carmen A. Puliafito, M.D., M.B.A. Dean’s Research Scholars Award* – awarded to the top senior medical student who has conducted the most outstanding research as a Dean’s Research Scholar.

**Graduation with Distinction in Research** - Students must meet the following criteria:
- Be in good academic standing. MD/PhD students are excluded from consideration.
- Be first or second author on a publication in a peer-reviewed journal.* Case reports may be considered. However, review articles are unacceptable.
- Provide a summary of his/her contributions to the published work with associated timeline. Publication must strictly be from completed RSP.
- Provide a letter from the RSP research mentor supporting the student’s application for Distinction in Research.

*An ad hoc review board will be convened to review projects on a case by case basis (i.e., project has yet to be published, was published in a non-peer reviewed journal).

Final project paper or manuscript must be submitted by the fourth Friday in February for consideration and to be reviewed in time for inclusion in commencement program.
Irving I. Lasky, M.D. Memorial Award – Recognizes the most outstanding research during the four years of medical school.

GRADUATION REQUIREMENTS

Academic Requirements for Graduation
All requirements for courses and clerkships must be completed prior to graduation. Students cannot graduate with a Fail or No Credit evaluation in any of the components of the curriculum. Students will be responsible for ensuring that they have completed curricular requirements and may verify their status and eligibility with the Office of Student Affairs.

Students must successfully pass all competency examinations (or make-up examinations, if eligible) from the Foundations of Medical Sciences, Skin, Hematology/Clinical Immunology, Neurosciences, Musculoskeletal, Cardiovascular, Renal, Respiratory, Endocrine/Metabolic, Reproduction, and G.I./Liver systems. Students must successfully complete all requirements for Integrated Cases and pass the Year I (all classes) and II (Class of 2015 and Class of 2016) comprehensive examinations. All requirements for Year I and II ICM and PPM must be successfully completed. The Literature Search and Clinical Translational Research assignments and the Required Scholarly Project must also be successfully completed.

During the Year III/IV Continuum, the student must satisfactorily complete all required curricular work as follows:

<table>
<thead>
<tr>
<th>Required Clerkships</th>
<th>No. of Weeks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Medicine</td>
<td>6 weeks</td>
</tr>
<tr>
<td>Internal Medicine</td>
<td>6 weeks</td>
</tr>
<tr>
<td>Internal Medicine Sub-Internship</td>
<td>4 weeks</td>
</tr>
<tr>
<td>Obstetrics/Gynecology</td>
<td>6 weeks</td>
</tr>
<tr>
<td>Pediatrics</td>
<td>6 weeks</td>
</tr>
<tr>
<td>Psychiatry</td>
<td>6 weeks</td>
</tr>
<tr>
<td>Neurology</td>
<td>4 weeks</td>
</tr>
<tr>
<td>Surgery</td>
<td>6 weeks</td>
</tr>
<tr>
<td>Surgical Subspecialty</td>
<td>4 weeks</td>
</tr>
<tr>
<td>Intersessions I and II</td>
<td>2 weeks</td>
</tr>
<tr>
<td>Total</td>
<td>50 weeks</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Rotations:*</th>
<th>No. of Weeks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Selectives</td>
<td>16 weeks</td>
</tr>
<tr>
<td>Electives</td>
<td>16 weeks</td>
</tr>
<tr>
<td>Total</td>
<td>32 weeks</td>
</tr>
</tbody>
</table>

*Note: Of the 32 weeks of Selectives and Electives, a minimum of 20 weeks must be devoted to clinical rotations. Ultimately, all Selective and Elective schedules are subject to approval by the Office of Student Affairs.

Required Examinations
Students must pass the Clinical Performance Examination (CPX), USMLE Step 1 and Step 2 CK and CS.

Fiscal Requirements for Graduation
The student is responsible for the timely payment of all tuition, fees and other special charges. The Office of Student Affairs will review the current status of all graduating seniors and will not certify the student for graduation unless all payments have been made and there are no outstanding obligations. Questions concerning financial obligations may be directed to the Financial Aid Office, KAM B22, (323) 442-1016.

Signing out before Graduation
Graduating students must clear their records prior to graduation. A sign-out sheet will be provided and must be completed and turned in to the Office of Student Affairs before the student's diploma will be released. Students must present verification that they have been cleared by all entities listed on the sign-out sheet.
Attendance at Graduation and Diplomas
Students in good academic standing, but with curriculum deficits which may include additional required, selective or elective clerkships to meet graduation requirements anticipated to be completed by June 30 and with evidence of satisfactory completion of clerkships, evidence of passing the CPX, USMLE Step 1 and both sections of USMLE Step 2, and completion of Senior Sign-out Form may participate in commencement ceremonies with the permission of the Senior Associate Dean for Student and Educational Affairs, but their diploma will be withheld until all curricular and financial requirements have been met. All requirements must be met by June 30 in order to receive a diploma with the May graduation date. Date of graduation will be adjusted when needed to reflect late completion of graduation requirements; University Diploma dates are also available in August (deadline July 31) and December (deadline December 31).

Diploma Security and Care
Diplomas should be kept safe and secure. If damaged or lost, on receipt of an affidavit attesting to loss or destruction, a reissued diploma may be ordered through the Office of Degree Progress, University Park Campus. Any extant fragments of the original must accompany the order. Re-orders take from one to three months to fill. There is a charge for degree replacement. Include your USC ID, year of graduation, and your name at the time of graduation.

RECORD RETENTION POLICY

Applicant Records
Admissions applications are submitted electronically by each applicant via AMCAS. In compliance with the Association of American Medical Colleges (AAMC) data retention policy, the AMCAS application is maintained electronically for 5 years from the application year.

Student Records
Student educational records are kept in the Keck School of Medicine of USC Office of Student Affairs. In accordance with the Association of American Medical Colleges’ Guidelines for Maintaining Active and Permanent Individual Student Records, the Keck School of Medicine of USC’s student educational records are to be maintained for an indefinite or a specific period of time depending on the nature of the subset of documents. After graduation, portions of the student record, including the materials listed below, become part of the permanent record and are stored electronically.

Medical Student Performance Evaluation
Transcript
Official dates of Enrollment
Photograph of Student

Note: Letters of recommendation sent for scanning into the AAMC’s ERAS system are not part of the student record and thus are not affected by the processes described herein. Questions regarding these procedures should be addressed to the Registrar at (323) 442-2553.
PROFESSIONALISM
POLICIES

- Essential Characteristics and Abilities Required for Completion of M.D. Degree
- Policy on Background Checks, Toxicology Testing and Disclosure
- Code of Professional Behavior
- Professional Behavior Expectations
- Honor System
- Professional Behavior, Probation, Dismissal and Appeal
- Student Mistreatment Procedure
- Policy on Official Correspondence
- Multidiscipline Laboratories
- Dress Code / Appearance Guidelines
ESSENTIAL CHARACTERISTICS AND ABILITIES REQUIRED FOR COMPLETION OF THE M.D. DEGREE AT THE KECK SCHOOL OF MEDICINE OF USC

PREAMBLE

The Keck School of Medicine of USC awards the M.D. degree to its students who demonstrate mastery of the requisite general knowledge and basic skills necessary to continue training as interns and residents in order to practice medicine. Essential characteristics and abilities required for completion of the M.D. program consist of certain minimum physical abilities, communication skills, intellectual, conceptual, integrative and quantitative abilities, and behavioral and social attributes. A candidate for the M.D. degree, herein referred to as “candidate”, must demonstrate sufficient mental stability to successfully complete the entire course of study and participate fully in all aspects of medical training. Graduates are expected to be capable of satisfactorily completing graduate medical education programs, passing licensing exams, and obtaining medical licenses. Consistent with this goal, the University of Southern California (USC) is committed to fully comply with the Rehabilitation Act (Section 504) and the Americans with Disabilities Act (ADA). The Keck School of Medicine of USC does not discriminate against qualified individuals with these essential characteristics and abilities who apply for admission to the M.D. degree program or are enrolled as medical students. Any applicant or student with these essential characteristics and abilities requesting special accommodations based on a disability is required to register and be approved by the Disability Services and Programs (DSP) Office in the Center for Academic Support on the University Park Campus.

The Keck School of Medicine of USC is responsible for the safety of patients with whom candidates will interact. Consideration of patient safety is an essential factor in establishing requirements for physical, cognitive, and emotional capabilities for admission, continued enrollment, promotion and graduation. An avowed intention to practice only a narrow part of clinical medicine does not alter the requirement that all students demonstrate full competence in the entire curriculum. Essential characteristics and abilities as described herein are a prerequisite for admission, continued enrollment, promotion and graduation from the Keck School of Medicine of USC. All candidates for the M.D. degree must meet all essential characteristics and abilities as described in this document.

I. PHYSICAL REQUIREMENTS

After reasonable training and experience, the candidate must be able to observe and participate in demonstrations and experiments in the basic sciences, including but not limited to dissection of cadavers, and examination of anatomical and microbiological specimens. Observation of gross and microscopic structures and information acquisition require visual, auditory, and somatic sensory functions sufficient to pass examinations.

After reasonable training and experience, the candidate must be capable of performing a complete physical examination, including compassionate observation, palpation, percussion, and auscultation of a patient. The candidate must be capable of using instruments, such as, but not limited to, a stethoscope, an ophthalmoscope, an otoscope, and a sphygmomanometer. The candidate must be capable of performing required clinical procedures such as, but not limited to the following: pelvic examination, digital rectal examination, drawing blood from veins and arteries and giving intravenous injections, basic cardiopulmonary life support, spinal puncture, and obstetrical and surgical procedures. The candidate must be physically capable of performing basic laboratory tests, using a calculator and a computer, reading an EKG, and interpreting common imaging tests. He/she must be able to respond to emergency situations in a timely manner and provide general emergency care such as airway management, placement of intravenous catheters, simple wound repair, and basic obstetrical procedures. The observations and information acquisition discussed in this document require sensory awareness, physical mobility, coordination of both gross and fine motor neuromuscular function, and balance and equilibrium.

II. COMMUNICATION

A candidate must be able to communicate in a respectful and timely manner with all individuals; both within and outside of the USC community. Communication includes speech, writing, nonverbal, and electronic communication. A candidate must possess written and oral English language fluency. He/she must be able to communicate in an effective and sensitive manner with patients, in order to elicit information, describe changes in mood, activity and posture, and perceive nonverbal affective and gestural cues. These communication skills also must enable the
candidate to obtain a medical history from a wide variety of patients. The candidate must be able to produce written
documentation and perform oral presentations of patient cases as required in the clinical rotations, which includes
patient history, physical exam and case assessment. Also, the candidate must be able to sufficiently comprehend
written materials and oral instructions in the curricular materials, medical records, laboratory reports, and pharmaco-
logical prescriptions.

III. INTELLECTUAL-CONCEPTUAL, INTEGRATIVE AND QUANTITATIVE ABILITIES

A candidate must have sufficient cognitive (mental) capacity to assimilate the technically detailed and complex
information presented in formal lectures and associated teaching materials, small group discussions, medical
literature, individual teaching settings and clinical settings. A candidate must be able to measure, calculate, reason,
analyze and synthesize information across modalities, appreciate three-dimensional spatial relationships among
structures and logical sequential relationships among events, and form and test hypotheses in order to enable
effective and timely problem-solving in diagnosis and treatment of patients.

IV. BEHAVIORAL AND SOCIAL ATTRIBUTES

A candidate must possess the emotional health, maturity, discipline, and professional attributes necessary for the
competent practice of medicine. These include but are not limited to: integrity and ethics, honesty, reliability and
dependability, punctuality, flexibility, empathy, cultural competence, conscientiousness, a sense of altruism and a
spirit of cooperation and teamwork. The candidate for the M.D. degree must accept responsibility for learning and
exercise good judgment in decision making and actions. A candidate must possess self-awareness of limitations,
beliefs, and values, capacity for improvement, and must not disrupt or interfere with the learning of others. He/she
must be able to tolerate physically taxing workloads, function effectively under stress, and demonstrate resilience
and adaptability. The candidate must be physically present for all required educational activities including
examinations. Candidates must demonstrate a respectful and professional manner in all interactions. Candidates must
be willing and able to interact with and care for all individuals of the community, regardless of gender, race, age,
sexual orientation, national origin, religion, physical or mental disability, socioeconomic status, or any other
protected status identified by the University’s Non-Discrimination Policy.

V. SAFETY

The Keck School of Medicine of USC has the responsibility to consider the safety and welfare of patients and others.
Should a candidate for the M.D. degree have a condition or exhibit behavior that places patients or others at risk, that
condition may be the basis for denial of admission or dismissal from the school. Students must be able to comply
with all requirements to work in a clinical environment and with hazardous materials.

VI. DEMONSTRATION OF ESSENTIAL CHARACTERISTICS AND ABILITIES

All students entering and continuing in the Keck School of Medicine of USC must demonstrate they possess all of
the “Essential Characteristics and Abilities”, with reasonable accommodation if necessary, and each student will be
expected to certify that he/she meets these standards. At its sole discretion, the Keck School of Medicine of USC can
require that a candidate for the M.D. degree undergo an evaluation to determine whether these essential characteris-
tics and abilities can be met.

Applicants and students should contact Disability Services and Programs (DSP) in the Center for Academic Support
on the University Park Campus if they have questions as to what accommodations are reasonable. As soon as a
student is aware of the need for an accommodation, the student shall register with DSP. Students who fail in a timely
manner to register with DSP or provide necessary documentation may not receive accommodations. DSP shall work
with students who request accommodations to make recommendations to the Senior Associate Dean for Student and
Educational Affairs concerning reasonable accommodations.

POLICY ON BACKGROUND CHECKS, TOXICOLOGY TESTING AND DISCLOSURE

An increasing number of health care facilities require that students in the Keck School of Medicine at the University
of Southern California (“Keck”) obtain and pass a background check, drug test and/or finger printing in order to
participate in clinical facility placements. Consequently students will be required to undergo a background check, when they are conditionally admitted to the Doctor of Medicine program. Drug testing is not a required part of the background check. Students will also be required to submit a background check as part of the first year orientation program to clear them for participation at the LAC+USC Medical Center.

Admitted students are required to immediately report all changes in their criminal record which occur while enrolled in the MD program since any conviction or other adverse result may prevent placement at a clinical training site. Failure to report any change in status will result in referral to the Student Performance Committee OR the Committee on Performance, Professionalism and Promotion.

Criminal background checks and/or drug testing may be required by clinical affiliates of the Keck School of Medicine.

The following are the minimum areas of inquiry typically covered in the requested background check, although some clinical partners may require a more comprehensive background check:

- Seven year criminal court history
- Address verification
- Sex offender database search
- Two names verification (current legal and one other name (AKA))
- Three county check of records
- Social security number verification.

The fees required to obtain a background check and any additional tests may be the sole responsibility of the student.

Students must authorize release of the results of the background check to the Keck School of Medicine and its clinical affiliates. If there is any information in the report that the clinical facility determines disqualifies the student from participating, the student will be responsible for obtaining the necessary documents to correct/explain the information. If the issue is not resolved to the satisfaction of the clinical facility, the student may not be able to participate in a clinical program and may be unable to complete the requirements for his or her degree.

**CODE OF PROFESSIONAL BEHAVIOR**

The students of the Keck School of Medicine of USC, in order that our activities reflect the high standards of moral character demanded by the medical profession, do subscribe to the following CODE OF PROFESSIONAL BEHAVIOR:

**Honesty and Integrity:**
- We will conduct ourselves with the highest degree of integrity and honesty.
- We will truthfully conduct our research and report our research findings, and will not represent others’ work or ideas as our own.
- We will not seek, by action or implication, oral or otherwise, to create an incorrect impression of our abilities or to create an unfair advantage over our colleagues.
- We will not tolerate or support unethical behavior in ourselves or in our colleagues and will report such behavior when it occurs through established procedures as detailed in the Student Handbook.

**Responsibility, Reliability, and Accountability:**
- We accept our professional responsibility to be punctual and to respect the time and effort of others.
- We hold ourselves accountable to policies and procedures of the school and its associated clinical sites including, but not limited to, evaluations, charting, and documentation requirements.
- We will respond in a timely manner to all official KSOM communication.
- We recognize our own personal limitations and will seek help when needed. We will not assume responsibilities beyond our capabilities.
We will represent the Keck School of Medicine of USC appropriately in all relevant settings including all forms of electronic communication.

Respect for others (students, colleagues, faculty, staff, patients):

- We will treat others with respect and honor their dignity.
- We will not discriminate nor tolerate discrimination based on race, ethnicity, language, religion, gender, sexual orientation, age, disability, disease, or socioeconomic status.
- We will respect the confidentiality of our patients at all times.
- We recognize the importance of teamwork and will work respectfully in collaboration with others.
- We will demonstrate respect for our patients and colleagues by maintaining an appearance that is appropriate to learning and patient care.

Attendance at the Keck School of Medicine of USC constitutes de facto acceptance of the CODE OF PROFESSIONAL BEHAVIOR and its concepts, the Honor System, and its procedures.

Specific violations of the KSOM Code of Professional Behavior include but are not limited to the following examples. It is not just the letter, but also the spirit of the Code of Professional Behavior that is to be upheld by students.

PROFESSIONAL BEHAVIOR EXPECTATIONS

Although all students are expected to behave professionally without supervision, these expectations have been written to elaborate upon the responsibilities of all students at Keck School of Medicine of USC (KSOM).

1. The student must be punctual for and attend all required Introduction to Clinical Medicine (ICM) sessions, Professionalism and the Practice of Medicine (PPM) sessions, lectures, rounds, clinics, conferences, and all clerkship, and selective and elective activities.
2. The student must not give or receive aid in any standardized assessment or examination, in paper or electronic form, or with a real/standardized patient.
3. A student absence from any of the required activities requires the completion of an absence request/notification form.
4. The student is expected to treat all patients, employees, colleagues, and superiors with respect.
5. The student is responsible for disseminating information to the student group/team once asked to do so. For example, a student informed of the time of rounds, the teaching of a procedure, or a special teaching session must call the other medical students involved and inform them.
6. The student is expected to turn in all of his or her assignments on time, and the content must be original work completed for that assignment. Any incorporation of the work of others must be cited. This includes plagiarism, including using prepared reports from the Internet or “cutting and pasting” without referencing original works.
7. The student is expected to complete all requested course/clerkship and instructor/faculty/resident evaluations.
8. The student is expected to consider the professional behavior and well-being of his/her peers, and to report behaviors or concern to the course or clerkship director, or to the Senior Associate Dean for Student and Educational Affairs.
9. Sexual advances, gestures, improper propositions, harassment, battery, threatening behavior, stalking, illegal drug possession, and any conduct breaking the law by any student will not be tolerated.
10. The student is expected to respond to all emails, calls and other communications from the Keck School Medicine in a timely and appropriate manner.
11. The student must be present for call, and participate in all team activities.
12. The student must introduce and represent himself or herself as a student physician at all times. Therefore, a student will not wear a long white coat or a badge misidentifying his or her level of training.
13. The student must follow the KSOM professional dress code in all clinical settings.
14. The student must follow all signatures by designating their current standing, e.g., MS III or MS IV.
15. The student may sign (or indicate electronically) only his or her own name and/or signature to indicate his or her presence at a workshop, conference, or other activity with a sign-in sheet or required electronic sign-in or evaluation form. Signing in another student's or physician's name, or having another individual sign your name or otherwise indicate your presence will violate the Code of Professional Behavior.
16. The student is responsible to make sure all notes and orders are cosigned by a supervising physician.
17. The student must never forge a physician's signature, even if told to do so by the physician. This includes but is not limited to: prescriptions, physician's orders, forms for restricted medications, and discharge summaries.
18. All information reported to the team from the student must be accurate to the best of the student's knowledge. The student must not report any portion of the patient's history or physical examination unless s/he has first-hand knowledge of the information being reported. The student must report only laboratory values or test results that s/he has personally seen or seen report of. The student is expected to admit that s/he has forgotten to ask, check, or look up something if such is the case.
19. The student must have specific authorization and/or supervision by his or her supervising physician in order to perform any procedure.
20. The student must not conduct clinical responsibilities while impaired by drugs or alcohol.
21. The student must not falsify data in research or knowingly participating in research activities that are reporting false data.
22. The student must maintain the highest level of professional behavior: lying, cheating or stealing is unacceptable.

In addition, the student must abide by all University of Southern California policies as described in the University Catalogue and the SCAMPUS student guidebook (Section 11.00-11.55, Behavior Violating University Standards).

HONOR SYSTEM

Medical ethics is a difficult subject to describe, much less to judge. Because of the relationship of physicians to the public at large, there exist strong feelings towards physicians' attitudes and behavior by society. Traditionally, the physician has been ultimately held accountable to society. The individual doctor's actions are reviewed and endorsed by colleagues who attempt to settle in their minds whether or not the adjudged has fulfilled the basic tenets and an essentially unwritten code on the ethical care of patients.

Professional behavior encompasses integrity, respect, courtesy, and compassion, in a pattern of moral and ethical interaction with patients, peers, faculty, and staff. It requires confidentiality and responsibility regarding patient information and group discussions, and demands an understanding of and esteem for oneself, patients, peers, faculty, and staff.

The Student Ethics Committee (SEC) at USC operates in this framework. Anticipating that the student will soon find himself/herself involved in this tradition, an attempt is made to prepare him/her to understand and respect this obligation. To do so, s/he must certainly respect and have confidence in himself/herself. The SEC is a body which is elected by the students and asked to interpret and describe for them what is ethical behavior, and in certain instances, to judge whether a certain student has met those criteria. The SEC itself can only direct. The final responsibility is, of course, a private one.

STUDENT ETHICS COMMITTEE (SEC)

Administration

The SEC consists of two students from each of the four medical school classes, and two faculty members who attend all meetings of the SEC in an advisory capacity. The function of the SEC and its members is to provide guidance to students and faculty concerning the Code of Professional Behavior and the Honor System, to investigate alleged violations of the Code of Professional Behavior, to make recommendations concerning such violations based upon the SEC’s findings in such an investigation, and to take any other actions the SEC deems reasonable and proper in the execution of its responsibilities to the Code of Professional Behavior, to the Student Body, and to the Keck School of Medicine of USC.

1. SEC members are elected by classmates during the general elections held each year. The term of office is from the beginning of one Fall semester to the beginning of the Fall semester one year later; incoming officers may assume responsibilities prior to the expiration of the term of the outgoing member with the consent of the outgoing member, and incoming senior members will assume office upon graduation of the outgoing senior members.
2. There is no limit to the number of terms, consecutive or nonconsecutive, which may be served by any one
individual. The faculty members will be appointed by the Senior Associate Dean for Student and Educational Affairs (in consultation with the Student Affairs Committee), and will serve a two-year term, which may be renewed any number of times.

3. The outgoing Chairperson calls a meeting of the newly elected SEC members in the spring following the election. The actual terms of service commence in the Fall semester, notwithstanding situations described above. At this meeting, the elections of officers for the following year are held. The officers to be elected and their duties are:
   a. The Chairperson
      (1) Will preside over meetings.
      (2) Will preside over all Honor Boards.
      (3) Will normally be the principal liaison between the SEC and the School Administration in all matter.
      (4) Will meet with the first year class and familiarize any transferring students during orientation each fall and explain the Code of Professional Behavior and the SEC utilizing a brief written synopsis of the Honor System, citing scenarios of infractions and procedures to be followed.
      (5) Will be responsible for calling a meeting of the SEC following the Year I election for the purpose of becoming familiar with the proceedings of the SEC.
   b. The Vice-Chairperson
      (1) In the absence of the Chairperson, shall have the ability to discharge the duties of the Chairperson in all matters.
      (2) Cannot be a member of the same class as the Chairperson.
   c. The Secretary
      (1) Will record minutes of all regular meetings and distribute them to all SEC members, the Dean, the Vice Dean for Medical Education, the Associate and Assistant Dean for Student Affairs, and the Associate and Assistant Dean for Curriculum.
      (2) If the Secretary cannot be present, any SEC member may sit as the Secretary, as designated by the Chairperson.
      (3) May function as Chairperson or Vice-Chairperson when necessary.

4. Should a SEC seat become vacated during the school year, the remaining member of the affected class will immediately solicit the class at large for interested individuals to come forth and apply for the vacated seat. If necessary, a class election will be held. Should only one person come forward, she or he will automatically qualify to fill the seat.

5. The representatives for each class are responsible for announcing the procedures and intent of the Code of Professional Behavior to their class during the first month of every school year.

General Considerations

1. The Vice Dean for Medical Education, the Senior Associate Dean for Student and Educational Affairs, and the two faculty members previously mentioned, serve as an advisory body to the SEC.
2. The Student Handbook of the Keck School of Medicine of USC shall include information concerning the existence and enforcement of the Code of Professional Behavior at the School, and shall include a statement informing prospective applicants that attendance at this School constitutes de facto acceptance of the Code and its concepts and the Honor System and its procedures.
3. For those students offered a position in a class at the University of Southern California Keck School of Medicine, a detailed explanation of the Code of Professional Behavior and the Honor System will be provided during orientation.
4. Faculty, residents, and staff at the Keck School of Medicine of USC should also consider it their responsibility to encourage and uphold the Code of Professional Behavior, including the reporting of violators.

POTENTIAL VIOLATIONS OF THE CODE OF PROFESSIONAL BEHAVIOR

Procedures

1. Any individual should initiate the following procedure if an honor violation is suspected:
   a. In order to ensure an understanding of the situation, the identifying individual should talk to the person suspected of committing the violation.
   b. If the facts indicate a possible violation of the Code of Professional Behavior, the alleged violator should be advised to report to the SEC.
2. A formal complaint shall be a brief written description of the suspected infraction signed by the person bringing the complaint, and also signed by an SEC member; if an oral complaint is made to an SEC member, it shall be followed by a written description.

3. A formal complaint must be brought to the SEC not later than 30 working days after the commission of the alleged incident, unless extenuating circumstance interferes. The formal complaint shall be brought no later than 60 working days after the discovery by the SEC of the alleged incident.

4. Once a formal complaint has been lodged, or once the alleged violator has reported to the SEC, a preliminary investigation will be instituted by the SEC.

5. This procedure should be followed by all persons: faculty, students, or community members with an academic or non-academic complaint.

6. If an SEC member is accused, the member will be relieved of SEC duties until after the case has been decided.

**Preliminary Investigation**

1. Upon receiving a formal complaint concerning a suspected violation of the Code of Professional Behavior, the SEC member will take the following actions:
   a. The SEC member will inform other members of the SEC of the complaint.
   b. A brief meeting of the SEC will be called to discuss the complaint, determine the direction and goals of the subsequent investigation, and delegate investigatory responsibilities.
   c. To the extent possible, all persons involved with the alleged violation, including the alleged violator as well as witnesses, will be interviewed by a member of the SEC. Additionally, any factual or material evidence pertinent to the allegation will be gathered.

2. Should an alleged violator refuse to cooperate with the SEC members at any time during their actions, the SEC will proceed without the alleged violator to the conclusion of its actions.

3. The SEC members will summarize all statements, facts, and evidence, including test papers if applicable and available, into a single report which will then be submitted to the members of the SEC, to the complainant, and to the alleged violator. This shall occur as soon as possible and within 20 working days of the formal complaint.

4. The alleged violator may ask the Chairperson of the SEC to expedite the proceedings, in which case all reasonable efforts shall be made to ensure that the proceedings are hastened.

5. The SEC will meet and review the case and decide by majority vote whether the case should be dismissed or continued to an Honor Board. A tie vote will be decided by a faculty member; faculty will otherwise not vote on whether to proceed to an Honor Board. If the SEC decides to dismiss the case, the alleged violator and the complainant will immediately be informed.

6. If the SEC decides to continue to an Honor Board, the following will occur:
   a. The Chairperson of the SEC will inform the alleged violator in writing that the SEC has decided to bring the case before an Honor Board and of the charges to be presented to the Board. The SEC will provide the alleged violator with a copy of the SEC’s procedures. The Chairperson will explain the procedures, and will answer any questions.
   b. The accused shall have fifteen (15) working days after receiving the notification of the SEC’s decision to proceed to an Honor Board to prepare for the Honor Board proceedings. If after 15 days from the notification, the alleged violator is unable to show cause for continuance, the case will proceed to an Honor Board.

**HONOR BOARD**

**General Considerations**

1. The Honor Board shall consist of nine members: the six medical student SEC members who are not classmates of the accused, one of the two appointed faculty SEC members, and two additional faculty members chosen by the SEC in consultation with the Senior Associate Dean for Student and Educational Affairs.

2. The Dean of the Keck School of Medicine of USC will not be eligible to sit on the Honor Board. Faculty members who teach in the organ system or the clinical service where the alleged infraction occurred, if applicable, cannot sit on the Honor Board.

3. The SEC will notify the Dean of the Keck School of Medicine of USC (or his designee) of an impending Honor
Board, in order that the Dean may notify the University legal staff. The University legal staff will place utmost priority on the Honor Board proceedings.

4. Should an alleged violation of the Code of Professional Behavior arise when there is a vacancy or vacancies in the SEC membership, the class presidents who are not classmates of the accused will fill said vacancies on the Honor Board, but only for a time period sufficient to resolve the issue at hand.

5. The alleged violator has the right to choose any person (exclusive of SEC members), and/or legal counsel to assist in the defense of the allegation. If the accused chooses to have legal counsel present, s/he must notify the investigating member no later than ten (10) working days before the Honor Board.

6. The burden shall be on the accused to request documents in advance of the Honor Board hearing, other than those previously specified, which will be used against the accused.

7. If the alleged violator is unclear of the charges, the burden shall be on the accused to request a clarification of the charges in advance of the Honor Board hearing.

**Duties of the Honor Board Officer**

1. The Chairperson of the SEC will preside over the proceedings, and will make procedural and evidentiary ruling.

2. The Secretary will be responsible for making a tape recording of the proceeding. Said tape recording shall remain in the possession of and shall exist for the use of the SEC exclusively. Tape will be retained until appeals or options for appeals have expired, and will then be destroyed.

3. If after the 15 days described previously, the alleged violator is unable to show cause for continuance, the case will proceed to the Honor Board. The investigating members of the SEC will be responsible for arranging a time and place for the Honor Board which is reasonably agreeable to all parties. He/she will be responsible for insuring the notification of all witnesses as to the time and place, and for the presence of all material evidence at the Honor Board.

**Procedures**

1. The purpose of an Honor Board is to make a determination of the facts of the case and to make a recommendation to the Dean or his designee.

2. An Honor Board will be convened as described previously.

3. The accused shall have the option as to whether he/she desires his/her Board proceedings open to the medical student body or closed to include only those individuals directly involved with the case.

4. Any arrangements with regard to due process afforded by these procedures shall be submitted to the Board no less than 3 day prior to the scheduled date of the hearing.

5. The Chairperson will call the meeting to order. He/she will then call upon the investigating member.

6. The investigating member of the SEC will present the facts and evidence of the case as established by the preliminary investigation. The following points shall be brought out by the presentation:
   a. Name of the accused
   b. Witnesses involved
   c. Nature of the suspected violation
   d. Points of conflict.

7. Questions may be asked of the investigating member by the Honor Board or by the accused (who will be present during all testimony during his/her Honor Board).

8. Any witnesses specified by the investigating member will now be called to testify before the Board. The Chairperson will instruct witnesses that the Honor Board is meeting to investigate the facts of the case and will ask the witnesses to tell what they know of the case. After the witness has testified, questions may be directed to the witness. Anyone present at the Board meeting may ask questions, although preference will be given to the members of the Honor Board. When there are no further questions, the witness will be excused. This procedure will be repeated with each witness.

9. The accused will present his/her case and will answer questions. Anyone present may ask questions, although preference will be given to members of the Honor Board. The accused may then call any additional witnesses to testify in his/her behalf before the Honor Board. Anyone may ask questions, but preference will be given to members of the Honor Board. When there are no further questions, the witness will be excused. This procedure will be repeated with each witness.

10. Formal rules of evidence do not apply. Hearsay evidence is admissible. However, the final decision cannot be based on the hearsay evidence alone. Cross-examination will be limited to the discretion of the Honor Board and shall not be unreasonable, repetitive, redundant, argumentative, harassing, vexing or irrelevant to any matter before the Board. In the foregoing instances, the Board will exercise its discretion to terminate cross-examination.
11. After all evidence had been presented, the Honor Board will meet in closed session to consider the facts and reach a decision as to whether or not the allegation has been substantiated. This session will not be tape-recorded.

12. A unanimous vote (by secret ballot of student and faculty members) of the Honor Board will be required to substantiate an allegation of an Honor Code infraction. If a unanimous decision cannot be reached initially, further deliberation and further voting can take place. If an infraction is substantiated, the Honor Board must agree on a recommendation for subsequent action by two-thirds vote. The Board will submit to the Dean of the Keck School of Medicine of USC (or his designee) recommendations as to disposition of the case.

13. Recommendations to the Dean of the Keck School of Medicine of USC or his designee may include but are not limited to the following:
   a. Dismissal of the individual from the Keck School of Medicine of USC.
   b. Dismissal from the individual’s current class, with re-entry into the Keck School of Medicine of USC with a subsequent class.
   c. Retaking of any examination in question.
   d. Being placed on Professional Behavior Probation.
   e. Other recommendations as the facts and judgment of the Honor Board warrant.

14. The Dean or his designee will meet with the Chair of the Honor Board and will then make a final decision concerning the disposition of the case, taking into account the findings and recommendations of the Honor Board.

15. The Dean or his designee will inform the accused, accuser, and the Honor Board of his decision.

16. The Chair of the Honor Board will then inform the rest of the involved parties.

Records of the Board Proceedings

If an infraction is substantiated, records of any case which results in any type of student censure will be preserved to protect the School and the Honor Board, but only the infraction and action taken may appear in the Medical Student Performance Evaluation (MSPE). Records will be maintained in accordance with University policies pertaining to records of student conduct. If any infraction is not substantiated, all records of the investigation will be destroyed.

PROFESSIONAL BEHAVIOR PROBATION, DISMISSAL AND APPEAL PROCESS

PROFESSIONAL BEHAVIOR PROBATION

A student may be placed on Professional Behavior Probation for violations of the Code of Professional Behavior. Once a student has been placed on Professional Behavior Probation, any additional violations of this Code or these expectations may constitute the sole reason for further disciplinary action or dismissal from the Keck School of Medicine of USC.

1. A student may be placed on Professional Behavior Probation by an Honor Board, a Performance Committee, the Senior Associate Dean for Student and Educational Affairs, and/or the Dean of the Keck School of Medicine of USC.

2. A student placed on Professional Behavior Probation shall be reported by the Office of Student Affairs to the appropriate Performance Committee and his or her status will be reviewed at least yearly by that committee. During this review, the student may be removed from Professional Behavior Probation status at the discretion of both the Performance Committee and the Senior Associate Dean for Student and Educational Affairs.

3. A student on Professional Behavior Probation may request an early review by the Performance Committee prior to completing one year's probation. The student on probation must give the Performance Committee at least one month’s advance notice to complete an early review.

4. A student placed on Professional Behavior Probation shall be reported to course/ clerkship directors, along with a copy of the Code of Professional Behavior and the Expectations that the student is expected to follow. Although the clerkship directors are notified, the past violation should not be noted or considered in the student’s evaluation.

5. The fact of Professional Behavior Probation will be included in the student’s Medical Student Performance Evaluation (MSPE) unless later specifically removed by both the Performance Committee and the Senior Associate Dean for Student and Educational Affairs. Removal by the Performance Committee will require a majority vote by a quorum.
DISMISSAL

A student may be dismissed from the Keck School of Medicine of USC without first having been placed on probation.

A student may be dismissed from the Keck School of Medicine for, but not limited to, the following reasons.

1. Exceeding the time approved for a leave of absence
2. Failure to demonstrate satisfactory academic progress
3. Ineligibility for promotion to the subsequent year of the curriculum
4. Failure to pass USMLE Step 1 , Step 2 CK or Step 2 CS after three attempts
5. Behavior that places patients or others at risk
6. Violations of the Code of Professional Behavior
7. Violations of the University Student Conduct Code

The appropriate Student Performance Committee or the Senior Associate Dean for Student and Educational Affairs will recommend dismissal to the Dean of the Keck School of Medicine in accordance with policy stated in the Student Handbook. A student may be dismissed from the Keck School of Medicine of USC without first having been placed on probation.

Procedure for Dismissal

1. A student who is being considered for dismissal shall be invited to meet with the Senior Associate Dean for Student and Educational Affairs no later than ten (10) days prior to the appropriate Performance Committee meeting so that any extenuating circumstances may be made known.
2. The student will receive a written statement that he/she may be considered for academic dismissal at least ten (10) days prior to the meeting of the Performance Committee.
3. The student may inspect his/her medical school file, including material upon which the proposed dismissal is based.
4. The student will be given an opportunity and is urged to appear before the appropriate Performance Committee when a recommendation for dismissal is being considered. The student may waive his/her right to such an appearance. The student should notify the Senior Associate Dean for Student and Educational Affairs in writing within five (5) business days prior to the meeting of his/her intent to appear.
5. The student shall be given a written copy of all rules and procedures to be followed at least ten (10) days prior to the student's hearing.
6. If the student attends the Performance Committee meeting, the student may be accompanied by counsel but must inform the Senior Associate Dean for Student and Educational Affairs of this intent at least seven (7) days prior to the meeting.
7. A quorum (two-thirds of the membership) must be present to vote on dismissal. Affirmative votes by two-thirds of the members present are necessary for dismissal. If a Committee member is unable to attend a meeting, he/she may send an alternate who has prior approval of the Vice Dean for Medical Education. The alternate has full authority to act in the absence of the regular Committee member.
8. At the students' request, he/she will be provided the information against him/her, including academic reports and evaluations used in arriving at the summation of his/her performance.
9. The student will have an opportunity to present any relevant information to the Performance Committee regarding his/her performance, using any relevant evidence including affidavits, exhibits and oral testimony. If the student desires copies of written materials to be distributed to Committee members, he/she must present them to the Office of Student Affairs at least three (3) business days before the meeting, or prepare the materials him/herself.
10. Recommendations for student dismissal must be based upon the information presented at the hearing.
11. The recommendations of the Performance Committee will be transmitted orally to the student by the Chairperson of the respective Performance Committee. The recommendations of the Committee will be transmitted in writing to the Vice Dean for Medical Education and the student within three (3) business days following termination of the meeting.
APPEAL PROCESS

1. The student may appeal the Committee's recommendation to the Vice Dean for Medical Education no later than ten (10) business days following transmittal of the Committee's written recommendation.
2. The Vice Dean for Medical Education may choose to uphold, to reverse, to ask the Committee to reconsider, or may choose to appoint an ad hoc committee to hear the student's appeal.
3. The members of this ad hoc committee shall be faculty members who have not been involved in the decision to dismiss. The Chairperson of the respective Performance Committee shall present the findings of the Performance Committee to the ad hoc appeals committee but shall not sit as a voting member of said Committee.
4. The ad hoc hearing committee shall submit its recommendation in writing to the Vice Dean for Medical Education within five (5) business days after the meeting.
5. Following receipt of the Performance Committee or ad hoc hearing committee recommendation, the Vice Dean for Medical Education will issue a final decision in writing to the student. There is no appeal from the Vice Dean's decision.

STUDENT MISTREATMENT PROCEDURE

I. INTRODUCTION

The diversity and complexity of the medical education environment require the medical school to reaffirm, on a periodic basis, its expectations of students, faculty, and staff. The spirit of this procedure is to promote dynamic personal and professional growth at all levels of the medical campus. This procedure seeks to limit any breach in the integrity and trust among students and professionals in the health care environment, by establishing standards of conduct, and a means of fairly dealing with problems of student mistreatment. This procedure is an important pillar of support to the mission statement of the university.

The Student Mistreatment Procedure (SMP) has been developed for the Keck School of Medicine of USC with several goals in mind. Before stating those goals, however, it should be emphasized that this procedure is by definition subordinate to:

1) State and Federal Law
2) USC University Procedure
3) Affiliating Institutional Procedure (for problems in other medical education venues)

While the subordinate nature of this procedure is a legal necessity, the Student Affairs Committee believes that the medical education environment is unique and that this procedure may address several goals, including:

1) Explication of standards of conduct within the medical school and its research community.
2) Maximizing the opportunity for “local” mutually satisfactory remedies to be reached.
3) Delineation of an equitable method of investigating and adjudicating student mistreatment complaints.
4) Provision of a means of monitoring complaint occurrences within the medical school so resources can be directed toward solutions.
5) Protection of the rights of both the complainant and the accused.

II. A UNIQUE ENVIRONMENT: The need for a Keck School of Medicine of USC Student Mistreatment Procedures.

The medical learning environment is more complex than the undergraduate environment for several reasons. These include:

1) Physical intimacy of medical examination and teaching;
2) Overnight call environment;
3) Prolonged hours in many medical arenas;
4) Patient care must supersede teaching and learning objectives;
5) Intimate partner relationships that may develop between members of the medical community;
6) Medical student vulnerability due to career aspirations, residency matching, and the subjective nature of medical education evaluation;
7) The teacher, student, and patient all have rights, which must be respected within the teaching and patient care framework.

The complex relationships of the medical education environment: student mistreatment may occur along any bold arrow.

FIGURE 1

In response to these realities, and a perceived need for a more explicit procedure governing the medical campus, the Student Affairs Committee created the Keck School of Medicine of USC Student Mistreatment Procedure. This procedure is designed to maximize student protection in the complex medical learning environment, while providing an opportunity for local rapid solutions without necessarily resorting to legal remedies. To achieve this end, the Student Affairs Committee has sought to define the institutional standards, and to create a procedure for reporting and adjudication that does not conflict with other institutional procedures. Examples and definitions of appropriate and inappropriate behavior (see part III) will help both the student and the teacher understand what is and is not professional behavior. This understanding will help all to maintain the value of professionalism, which the university represents and promotes.

Goals of this procedure:
1) To define our principles of community and standards of conduct;
2) To provide a means of determining when an investigation is warranted;
3) To establish a non-threatening and easily accessible mechanism for reporting alleged mistreatment;
4) To provide an equitable method of locally investigating and resolving complaints, consistent with other university procedures;
5) To guarantee the rights of due process; and
6) To appropriately protect both the complainant and the accused.

III. INSTITUTIONAL STANDARDS AND DEFINITIONS

Principles of Community

USC is a multicultural community of people from diverse racial, ethnic and class backgrounds, national origins, religious and political beliefs, physical abilities, and sexual orientations. Our activities, programs, classes, workshops/lectures, and everyday interactions are enriched by our acceptance of one another, and we strive to learn from each other in an atmosphere of positive engagement and mutual respect. As professionals, we are responsible for our behavior and are fully accountable for our actions. We each must take responsibility for our awareness of racism, sexism, ageism, xenophobia, homophobia, and other forms of oppression.

Bigotry will not go unchallenged within this community. No one has the right to denigrate another human being on the basis of race, sex, sexual orientation, national origin, etc. We will not tolerate verbal or written abuse, threats, harassment, intimidation, or violence against person or property. In this context, we do not accept alcohol or substance abuse as an excuse, reason, or rationale for such abuse, harassment, intimidation, or violence. Ignorance or “it was just a joke” is also not an excuse for such behavior. Such behavior will be subject to the University’s disciplinary processes. All who work, live, study and teach in the USC community are here by choice, and as part of
that choice, should be committed to these principles which are an integral part of USC’s focus, goals and mission.

(We wish to acknowledge the roles played by the University of California, Irvine and Santa Cruz, in the evolution and wording of “Principles of Community”).

Standards of Conduct in the Keck School of Medicine of USC

Effective, caring and compassionate health care depends critically on the professional and collegial attributes acquired by medical students during their education. In this regard, the teacher-student relationship is one of the most important, since the teacher is responsible for both imparting information and guiding the personal development of the student. The teacher also stands as a potential role model for any student and it is therefore important that the teacher’s behavior towards her or his students is equitable and professional. At the core of an effective learning environment lies mutual respect between the teacher (including, but not limited to, faculty, residents and staff) and the student, and between each student and his/her student colleagues.

To this end, the Keck School of Medicine of USC will not tolerate the harassment or abuse of, discrimination against, or improper favoritism towards a student by a teacher or a student colleague. This includes, but is not limited to:

Harassment of a Sexual Nature

This includes, but is not limited to
1. Unwanted sexual advances,
2. Unwanted and inappropriate touching,
3. Displaying sexually suggestive materials in an unreasonable and inappropriate manner,
4. Unreasonable and inappropriate sexual comments in the presence of, or directed to, any person,
5. Making training, advancement, promotion or rewards contingent on sexual favors, and
6. Requesting sexual favors in return for grades.

A. Discrimination, Harassment and Abuse

Examples include:
1. Denying opportunity of training or rewards based on gender, race, color, national or ethnic origin, sexual orientation (or perceived orientation), religious belief, age, disability or military service,
2. Conduct towards an individual intended to insult or stigmatize him/her,
3. Making inappropriate physical contact with the student,
4. Humiliating/denigrating the student, either privately or in the presence of other students, staff members, faculty or patients,
5. Requiring students to perform personal services for a teacher,
6. Grading or evaluating a student’s performance on factors other than merit, and
7. Exclusion of a student from any usual education opportunity for any reason other than as a justifiable response to that student’s performance or merit.

B. Abuse of a Student Based on His/Her Failure to Perform Adequately

Upon occasion, the performance of a student may fall below that expected by the teacher. The teacher must ensure that his/her response to such an event is remedial, without being punitive or harsh. Under no circumstances will abuse directed towards the student be permitted. Abuse includes, but is not limited, to those items listed above.

C. Favoritism Towards a Student or Group of Students

Although instances may arise when an instructor comes to favor some students over others, this should in no way skew her or his teaching activities such that:
1. Some students receive better access to information than others, or
2. Some students and their opinions are neglected in the teaching process, or
3. Some students receive preferential treatment which is not available to all students equally, and/or not based upon academic merit.

Teachers are also cautioned against behavior that leads to the perception of favoritism.

IV. REPORTING PROCEDURES

The Office of Equity and Diversity must be notified of complaints by faculty, staff, students or applicants who believe themselves to be harmed by sexual harassment or discrimination and harassment related to issues that have protected class status (which includes, but is not limited to, sex, race, gender, national origin, color, religion, marital status, and any other class protected by law). The exception is if the complaint is from one student about another student (see process below). The office represents the university to government agencies, including Los Angeles County, on those same matters. Should a complaint of sexual harassment or discrimination and harassment be brought forth, it is extremely important that the Office of Equity and Diversity is contacted immediately. Keck School of Medicine of USC may not proceed in any way to investigate allegations of this sort on its own.

A prompt report of harassment, mistreatment or retaliation is very important for several reasons. The Keck School of Medicine of USC is better able to investigate and remedy complaints if they are immediately brought to attention. The recollection of witnesses generally diminishes over time. Many perpetrators will discontinue inappropriate behavior once they understand that it is objectionable. The School’s ability to impose a meaningful remedy dissipates with the passage of time. For all these reasons, the Keck School of Medicine of USC urges that complaints be filed promptly.

In the absence of a complaint, the Keck School of Medicine of USC may initiate an investigation if it has reason to believe that its procedure prohibiting harassment, mistreatment or retaliation has been violated.

A. Informal Consultation

A student considering making a report may bring his or her concerns related to the incident(s) to a Primary Contact. Primary Contacts are the Associate or Assistant Dean for Student Affairs or the chair of the Student Affairs Committee. Complaints should be brought to a Primary Contact as soon as possible, but within 90 days of the incident(s). This 90-day limit does not apply to cases which fall under the purview of the Office of Equity and Diversity. Delay in taking action with respect to an incident may foreclose other remedies.

The reporting individual may consult informally with either Primary Contact for information and assistance. The Primary Contact’s duties shall include but are not limited to:

1. Counseling the student with respect to his/her rights.
2. Facilitating communication with the alleged offender, the alleged offender’s Program Director, Department Chair, or other appropriate supervisors (at student request).
3. Serving as a sounding board, thus allowing the student to vent his/her feelings.
4. Assisting the student in filing a formal complaint.
5. Ensuring that the Office of Equity and Diversity is notified in a timely manner when appropriate.

Any such informal consultation will be confidential unless the student consents to mediation with the alleged offender, or if the alleged offense is reportable by law or otherwise required to be reported. An informal consultation may result in:

1. No written record if so requested by the complainant or
2. A confidential memorandum generated by the Primary Contact and retained in the files of the Chair of the Student Affairs Committee. (Confidential memoranda may be made available to the other members of the Student Affairs Committee should more than three complaints arise against one individual over the course of a single calendar year, or if the nature or degree of the complaints causes the Chair to believe the matter merits review by the Student Affairs Committee). If a pattern of mistreatment is suspected, the Student Affairs Committee may initiate an inquiry on its own by convening a Sub-Committee on Student Mistreatment. After two complaints have been received against the same individual, the alleged violator will be warned by the Committee that “some students” (no names given) perceive his/her conduct to be in violation of the School’s Standards of Conduct, and that should this conduct continue, further steps will be taken.
B. Formal Reporting

To make a **formal** complaint of an alleged violation of the Standards of Conduct, a written, signed description of the alleged violation should be submitted to the Primary Contact. The report should be filed with the Primary Contact within 90 days of the occurrence of the alleged act. Early filing is encouraged so that the investigation can be more complete and more detailed. The student has the option to suggest a possible remedy.

The Primary Contact shall then forward the written complaint to the **Student Affairs Committee**. An ad hoc Student Affairs Sub-Committee on Student Mistreatment will be convened. This 5-member sub-committee (consisting of 3 faculty and 2 student members of the Student Affairs Committee) will conduct a preliminary investigation, giving the reporting individual, the alleged offender, and any other persons the sub-committee identifies, the opportunity to express their views on the matter. The sub-committee shall make it clear to all parties that retaliation in any way against any participant in the process is forbidden. The sub-committee shall make a preliminary determination of the events documented in the complaint.

Thereafter, the sub-committee shall issue a written statement of its preliminary findings and recommendations for vote by the Student Affairs Committee. (Note: the Senior Associate Dean for Student and Educational Affairs will abstain from voting at this time if the conflict involves 2 students). The decision of the Student Affairs Committee will be sent to the appropriate supervisor(s) who, in consultation with the Student Affairs Committee, will decide on final disciplinary action. Discipline will be consistent with University and School of Medicine policies on disciplinary actions as set forth in the USC Faculty Handbook, the USC Staff Employee Handbook, and the Keck School of Medicine of USC Student Handbook, as applicable.

Online Reporting Process

In addition to the informal consultation and formal reporting processes outlined above, a student has the option of using the Keck School of Medicine of USC online reporting system to report any concerns related to mistreatment by students, residents, faculty or staff. The report will be sent to the Chair of the Student Affairs Committee who will oversee the investigation of the incident. The report may be anonymous, however that may limit our ability to complete the investigation or to provide follow up information. The website for the on-line report is [https://mymedweb.usc.edu/source/mistreatment.asp](https://mymedweb.usc.edu/source/mistreatment.asp).

Recommendations

The Student Affairs Committee will issue its recommendation to the appropriate party/individual as follows:

- **If** the offender is determined to be:
  - **A faculty member, the recommendation goes to the:**
    - Dean of the Keck School of Medicine of USC
    - Department Chair
    - Vice Dean for Faculty Affairs
    - If faculty is an employee of LAC then Human Resources at LAC may also be advised of findings
  - **A resident, the recommendation goes to the:**
    - Program Director
    - Department Chair
    - Designated Institutional Officer/Associate Dean for Graduate Medical Education
  - **A University employee, the recommendation goes to the:**
    - Senior Associate Dean for Student and Educational Affairs
  - **A LAC+USC employee, the recommendation goes to the:**
    - Department Chair
    - Human Resources at LAC as indicated

The final decision will be issued in a statement by the Student Affairs Committee and provided to the individual making the report, the alleged offender, and the designated supervisors. If the sanction or corrective action is not in agreement with the remedy requested by the complainant, the reason for this decision shall be included in the written
ruling. Sanctions shall go into effect against the person concerned no sooner than 10 calendar days after she/he has received a copy of the ruling, unless she/he files a written appeal with the Vice Dean for Medical Education before 10 days have elapsed (time frames in accordance with the staff/faculty handbook). The Vice Dean for Medical Education shall decide the appeal within 14 days of receipt and shall notify the individuals of his/her decision.

REPORTING TIME LINE

<table>
<thead>
<tr>
<th>Event(s)</th>
<th>Receipt by primary contact</th>
<th>*Report to Dean, Student and accused</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Evaluation Receipt</td>
<td>Investigation by SAC</td>
</tr>
<tr>
<td>TIME: 0</td>
<td>&lt;90 DAYS</td>
<td>120 DAYS</td>
</tr>
<tr>
<td></td>
<td>Contemplation</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Writing Report</td>
<td></td>
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</tbody>
</table>

*Investigation may take longer depending on schedules, availability, and witness related issues.

1) Student may stop at the primary contact.
2) Student may seek remedy outside the Student Affairs Committee at any time.

V. PROTECTION OF COMPLAINANT AND ACCUSED

Students, hospital employees, patients, residents, fellows and faculty have individual rights, which should be recognized in the application of these procedures. With regard to allegations of student mistreatment, the student and teacher should remain vigilant to each other’s rights and responsibilities.

### THE STUDENT

- Has a right to educational resources and facilities
- Has a right to a confidential non-threatening reporting process
- Has a right to a learning environment consistent with the definitions in Part III
- Has a right to counseling and support services
- Has a right to a timely response

### THE ACCUSED (faculty, resident, or student as applicable)

- Has a right to establish performance standards
- Has a right and a duty to maximize patient care
- Has a right to a confidential timely non-threatening notification process
- Has a right to protection from knowingly and intentionally false accusation
- Has a right to counseling and support services
- Has a right to protection from knowingly and intentionally false accusation
- Has a right to a learning environment consistent with the definitions in Part III
- Has a right to a confidential timely non-threatening notification process
- Has a right to counseling and support services
- Has a right to protection from knowingly and intentionally false accusation
- Has a right to a timely response

Since disputes of this nature can be career threatening, all must understand that false accusations must be prohibited. Protection of the faculty and residents from false accusation is essential for both the students and the faculty/residents. For these reasons a local investigation to establish the nature of the problem by the Student Affairs Committee (with both student and faculty input) is essential. This process will also provide the greatest likelihood of achieving a local solution which is satisfactory (and constructive) to both parties.

Finally, neither the faculty’s, resident’s nor the student’s rights supersede the patient’s right for care. Both the teacher and the student must be aware of this priority at all times.
POLICY ON OFFICIAL CORRESPONDENCE

Official correspondence from the Keck School of Medicine of USC to students will be considered to have been delivered if sent to the student's home address on record, MDL mailbox, or USC University email account.

However email is considered the official mechanism of communication at the Keck School of Medicine of USC. Students are expected to read messages sent to their official USC email address in a timely manner. Students are responsible for checking these on a regular basis, and will be held accountable for materials sent via any of these routes. Failure to read official university and medical school communications sent to students’ official email addresses does not absolve students from knowing and complying with the content of official communications. Communication from students to the School or University should be addressed to the department or administrative unit in question. If uncertain, students should address communications to:

Office of Student Affairs  
Keck School of Medicine of USC  
University of Southern California  
1975 Zonal Avenue, KAM 100-B  
Los Angeles, CA 90089-9020

MULTIDISCIPLINE LABORATORIES

During Years I and II, each student is assigned a desk and a chair in one of the multidiscipline laboratories in the McKibben or Bishop Buildings. All personal items, (i.e. laptop computer, books, or clothing) are expected to be stored and fully contained within the desk unit. Personally owned equipment, furniture, or animals will not be permitted in the laboratory. Prohibited items include, but are not limited to, chairs, beds, sleeping cots, rugs, drapery materials, electric hot plates or any items of large or unwieldy sports or exercise equipment. Exceptions to this policy will be made only for reasons relating to a medical or physical condition of individual students when items of medically related equipment are deemed necessary or advisable for the proper functioning or comfort of these students. Most house plants will be permitted in the labs and will not require approval. Any exceptions to the policy must be specifically approved.

Student desks within the multidiscipline laboratories are set in place prior to the beginning of the school year in such a manner as to allow maximum access by students and lab personnel. The desks may not be re-arranged. In addition, shared MDL equipment, (i.e. projectors, models, etc.) may not be removed from the assigned MDL.

No materials may be attached to the outside of the student desks or to the walls of the laboratory. The tack board (bulletin board) on the desk is the only area where students may display photographs, drawings, art work, pictures from magazines, calendars, charts, etc.

All photographs and other visual materials which may be considered unsuitable for display in a physician's office or in a public waiting room are also unsuitable for display in a professional school; many persons find such materials offensive and therefore inappropriate. Individual students must realize and respect the fact that although individual space is assigned in the lab, it is intended primarily for study purposes and the lab facilities as a whole are used by many students and faculty. In addition, family members, patients and visitors may enter the lab rooms and their sensitivities must also be considered.

The purpose of the policy regarding personal property or graphic material is to maintain a suitable working environment in the laboratory conducive to instruction and to individual student study. The addition of privately owned equipment or furniture to the laboratory may obstruct free flow of traffic and result in added congestion and inconvenience to other students and faculty and may violate the City of Los Angeles codes. Equipment and materials (including crepe paper streamers) constructed for home use are often unsuitable for use in a public building because they cannot meet City of Los Angeles codes for fire and public safety. USC is obligated to comply with these codes and is subject to unannounced inspections by City Fire Inspectors.
To prevent damage or theft, bicycles or mopeds may be brought into the building only with administrative permission; when in the building, they must be stored or located in a designated manner so as not to interfere with the normal intended use of the lab rooms. Larger vehicles such as motorcycles may not be brought into the buildings; designated spaces are available for such vehicles in the parking structure.

Students should be aware that the University's insurance coverage does not include any personal belongings, even though permission may have been granted for the personal property to be used or stored within University buildings; students are advised that all financial responsibility for loss or damage rests solely with the owner or private insurer.

Security in the MDL: MDL Door Keys

MDL doors should be locked except during class times. Students are issued keys which will allow access to his/her own MDL at any time and should observe security standards, especially on evenings and weekends. No key deposit will be charged; however, if a key is lost or stolen, a replacement fee of $10.00 will be charged. For this reason, and for reasons of laboratory security, students should not leave their keys in visible areas.

Doors must not be propped open when a room is unoccupied. Any doors found open or unlocked after hours will be closed, and locked, so students should carry their keys when they leave the room. Students should note that it is possible to accidentally leave a door in an unlocked condition. Whenever a student enters, he/she should test the knob to verify that it is locked after the key is removed. Any trouble in the use of the lock should be reported to the MDL staff [Bishop 106; (323) 442-1119], or to the University Department of Public Safety. Public Safety officers may be summoned at any time by dialing (323) 442-1200 or 2-1200 on the phones located in the first and second floor hallways of the Bishop Building.

DRESS CODE/APPEARANCE GUIDELINES

PURPOSE:
The USC Keck School of Medicine of USC recognizes that dress, grooming, and personal hygiene contribute to the morale of all and the image that the Keck School of Medicine presents to patients, families, and the community. The image presented in interactions with patients, colleagues, and visitors has a major influence on how one is perceived as a professional. Students at the Keck School of Medicine are expected to promote a professional environment. The following guidelines are the minimum standards for all Keck School of Medicine students. Students must adhere to the dress code policies of any assigned clinical sites.

POLICY GUIDELINES:

Minimum Professional Standards

Personal Hygiene/Cleanliness:
- Hair is to be clean and well groomed; for patient care, hair must be secured at the shoulders as to not require handling.
- Men must be clean-shaven or beards and mustaches must be clean, neatly trimmed, and well groomed.
- Body hygiene is required so that offensive body and/or breath odor is avoided.
- Cosmetics should be appropriate for a business environment and not detract from a person’s appearance.
- Strong perfumes, colognes, lotions and/or after-shave lotion should not be worn.
- Fingernails must be kept clean, well manicured, and trimmed at a length that does not interfere with patient care performance and personal safety. Acrylic and artificial nails are not permitted.

Clinical Setting Attire:
- The official photo identification badge of the hospital or clinical site must be worn at all times, between the shoulder and the waist, with the name and picture easily visible.
- KSOM-issued white coat must be clean and pressed.
- Men: Collared shirt – button down or polo-style (necktie as required by ICM and respective clerkship) – and trousers in clean, pressed, and in good condition.
Women: Blouse with slacks or skirt, or a dress in clean, pressed, and in good condition with appropriate undergarments. Clothing must not be tight, sheer, or revealing. Skirts and dresses must be an appropriate length. Any clean and closed-toe and -heel shoes constructed of sufficient strength to protect the foot may be worn. Open-toe shoes, slingbacks, sandals, and flip-flops are not permitted for safety issues. Only facility provided scrubs may be worn on clerkships where they are allowed. Scrubs should be clean. Note: t-shirts or short sleeve shirts may be worn under scrubs in the operating room only if contained within the scrub shirt. Jewelry should not interfere with patient care performance and personal safety. Dangling jewelry including but not limited to ornate rings, long neck chains and earring that extend below the ear lobe my not be worn by patient care personnel. Body piercing ornaments and earrings worn in other visible exterior parts of the body, other than the ear are not permissible*. Students will also need to adhere to the dress code policies of any assigned clinical site (e.g., Kaiser, California Hospital, Cedars Sinai, etc.).

Inappropriate Attire Not Permitted in Clinical Settings:
- Jeans, denim, or denim-like fabric
- Shorts of any type, tights alone, leggings, mini-skirts, sweat pants or shirts, and athletic wear
- T-shirt, undershirts or sleeveless shirts worn by themselves
- Midriff, off-the-shoulder, spaghetti-strap, or strapless blouses, sweaters, and dresses
- Hats, caps, or visors indoors*
- Wearing operating room/procedure room attire (masks, booties, hair coverings) outside of patient care areas
- Torn, wrinkled, unclean clothing, and scrubs
- Ill-fitting clothing or scrubs (oversized which is potentially hazardous)

Classroom Setting/Presentations:
As a participant in a graduate program and a representative of the USC-KSOM, it is important that personal hygiene/cleanliness and clothing/attire be appropriate for interaction with peers and faculty members. Students are to wear professional clothing/attire for presentations in the classroom (ICM, PPM, Clerkships, Poster Forums, Senior Seminar Series, etc.).

* Wearing these items for medical or religious reasons is acceptable.

Approved by the USC KSOM, Educational Performance Committee, April 2010
STUDENT HEALTH

- Student Health Requirements
- Policies for Prevention of Bloodborne Pathogen Infection
- Policy for Students with Chronic Viral Hepatitis
- Student Disability Insurance
STUDENT HEALTH REQUIREMENTS UPON ENTRANCE TO THE SCHOOL

Prior to matriculation, each student is required to submit a physical examination, health history, and proper medical documentation for the following requirements:

**Tuberculosis (TB) clearance**: All medical students are required to complete a two part TB test. The first test must be placed 2 months prior to the start date of school. The second test must be placed within a year from the first test. A negative tuberculin (TB) skin test or negative IGRA test (interferon gamma release assay, such as the QuantiFERON-TB Gold In-Tube (QFT-GIT) assay, or the T-SPOT.TB assay) is required. If the student has a history of a positive tuberculin skin test, he/she must have a a negative IGRA test (preferred) or a negative chest x-ray performed six months or less from your school start date.

Use of two-step testing is recommended for initial TB skin testing of adults who will be retested periodically (e.g., health care workers). This ensures any future positive tests can be interpreted as being caused by a new infection, rather than simply a reaction to an old infection or BCG vaccination.

The 2 step TB test follows the following schedule. The first test must be placed no sooner than 2 months from your program start date. If, however, you have had a TB skin test placed in the 364 days prior to your program start date, then this test can be your baseline TB test and the test performed within 2 months of your program start date will be the second test in the 2 step TB skin testing. If you haven’t had a TB skin test within 364 days from your program start date, then you will get your baseline (or first) test no sooner than the 2 months from your program start date. A second TB skin test will then be placed 1-3 weeks after the baseline test. If either of these TB skin tests are positive then an IGRA blood test (preferred) or chest x-ray is required.

**Measles, Mumps and Rubella (MMR)**: Positive IGG titer

**Tetanus/Diphtheria/Pertussis (TdaP)**: Booster injection within the last 5 years (Booster injection must be 5 years or less from your school start date).

**Varicella**: Positive IGG titer

**Hepatitis B**: 3 injections and positive Hepatitis B surface Antibody titer

*Note*: Meningococcal vaccine is offered, but may be declined without restricting access to clinical rotations.

*Note*: Failure to provide adequate documentation may be grounds for restricting patient contact and/or registration.

ONGOING STUDENT HEALTH REQUIREMENTS AFTER ENTRANCE TO THE SCHOOL

An annual tuberculin skin test or IGRA test is required for all students. An annual chest x-ray or negative annual IGRA test is required for those with positive tuberculin skin tests. The Student Health Fee will cover chest x-rays or IGRA tests only for those students whose skin tests show conversion during their education on the Health Sciences Campus.

It is the policy of the Keck School of Medicine of USC that all health care providers and all students involved in clinical care are expected to attend all patients, regardless of disease. Medical students, residents and faculty members have a fundamental responsibility to provide care to all patients assigned to them. A failure to accept this responsibility violates a basic tenet of the medical profession: to place the patient's interest and welfare first. Faculty have a special responsibility to model the professional behavior and attitudes expected of physicians in training, in their own willingness to provide competent, sensitive, and compassionate care to all patients.

**Guidelines**: If a violation of the policy occurs, the Senior Associate Dean for Student and Educational Affairs will be informed.
1. Individuals who have had difficulty adhering to this policy will be referred for counseling and/or education.
2. If violations persist, despite the measures above, further refusal to care for such patients will result in disciplinary actions, including, but not limited to the possibility of interim and/or permanent suspension.

POLICIES FOR PREVENTION OF BLOODBORNE PATHOGEN INFECTION AND TREATMENT FOLLOWING ACCIDENTAL EXPOSURE

Needlestick and Bodily Fluid Exposure Protocol:

An exposure incident occurs when human blood or other potentially infectious materials enter your body by:
- A splash to the eye, mouth or other mucus membrane
- Contamination of non-intact skin
- A puncture or cut with a sharp instrument which has been exposed to another's body fluid

If exposed immediate first aid should be administered:
- Wash needlesticks and cuts with soap and water. Flush splashes to the nose, mouth, or skin with water. Irrigate eyes with clean water, saline, or sterile irrigants. Report the incident to your supervisor and immediately seek medical treatment.

Obtain Source Patient Information:
- Obtain as much demographical data on the source patient as possible. (Name, Date of Birth, Medical Record Number, the diagnosis and history (including history of hepatitis, liver disease, HIV status, blood transfusions and IV drug or alcohol abuse).
- Exposure must be reported to the student’s immediate supervisor. (Resident, Chief, Attending)
- The supervisor will consent the source patient to testing for HIV, HBV and HCV at the time of exposure or when medically able to obtain consent.

Students must immediately call the USC Eric Cohen Student Health Center. During business hours, please call (323) 442-5631. During afterhours or weekends – please call either the Needlestick Hotline at (323) 442-7900 or call the ECSHC at (323) 442-5631 and ask for the nurse on call.

For treatment to prevent bloodborne disease after exposure:
- Hepatitis B (HBV) can be prevented by vaccination. For students who are HBsAb negative, including “nonconverters,” Hepatitis B immunoglobulin may be offered for prevention.
- Human Immunodeficiency Disease may be prevented by taking post exposure antiretroviral therapy
- Hepatitis C (HCV) has no preventive therapy

For all students, all required initial baseline care, follow-up lab testing and prophylactic medications for a reported episode of potential occupational Bloodborne Pathogen (BBP) exposure are provided at no cost.

POLICY FOR STUDENTS WITH CHRONIC VIRAL HEPATITIS
(Persistent Hepatitis B or C antigenemia)

Patients infected with viral hepatitis pose a potential threat to any health care provider caring for them. While this risk is variable depending on the patient and the clinical situation, it is imperative that students observe proper procedure when dealing with all patients. This should include use of Standard Precautions in all patient contact.

Health care providers infected with viral hepatitis can also pose a threat to patients. Cases of hepatitis transmission from physician to patient are documented in the literature, and therefore students infected with viral hepatitis may have additional matters to consider regarding their contact with patients. These considerations will likely extend throughout their education and careers, and form the basis for the following policy.

1. All medical students are required to obtain hepatitis B vaccination before beginning medical school, and certainly before any patient contact. The vaccine is highly effective at inducing immunity to hepatitis B, and its side effect profile is minimal.
2. Students infected with chronic viral hepatitis (hepatitis B or hepatitis C) are required to discuss their condition with a physician or physician assistant in the Student Health Service. This discussion should include an evaluation of their current health status (or review of data previously collected elsewhere), and consider the impact their hepatitis infection may have on patients seen during their training.

3. Students are encouraged but not required to meet with faculty advisors regarding the potential impact hepatitis may have on their future career and specialty choice. This is especially important for any student with chronic hepatitis infection who is considering a surgical career. Appropriate advisors include the Chair or Chief of the specialty being considered, faculty in the specialty being considered, and the Associate or Assistant Dean for Student Affairs.

4. Students who have a HBV PCR viral load of 1000 IU/ml or greater or have a positive HBeAg, may pose a greater risk to patients when performing exposure prone procedures and/or techniques on their surgical or OB/Gyn rotations and certain restrictions regarding full participation in these exposure prone procedures and/or techniques may be warranted. Students who have a consistent HBV viral load less than 1000 IU/ml and a negative HBeAg do not require any restrictions in participating in exposure prone procedures and/or techniques. For a list of these procedures and techniques please see the CDC MMWR Updated Recommendations for Management of HPV infected Health Care Providers and Students, Box, published July 6, 2012. Acceptable alternate educational experiences will be developed wherever possible to provide the student with the full educational benefit available, though there may be some instances where an equivalent experience will not be possible.

5. Students with chronic Hepatitis B infection who may be rotating on surgical or OB/Gyn rotations are required to have HBV PCR at least every 6 months, regardless of their HBeAg status.

7. To comply with these policies, students are required to discuss their situation with the physicians at the Eric Cohen Student Health Center. An Expert Review Panel will review the infected student’s information and make appropriate recommendations regarding the student’s clinical activities.

8. To the extent possible, this process will respect and maintain the confidentiality of all involved parties. The health status of the affected student will not routinely be released to other members of the health care team, staff, faculty or patients.

This policy was initially adopted on November 16, 1995 following input and review by clinical faculty, the Student Health Service of the Health Sciences Campus, the Employee Health Service of the LAC+USC Medical Center, the Senior Associate Dean for Student and Educational Affairs, and University legal counsel. This policy was last reviewed and modified on August 8, 2013. Any questions should be directed to the Senior Associate Dean for Student and Educational Affairs.

### STUDENT DISABILITY INSURANCE

All medical students enrolled full-time in the School of Medicine will be covered in an AMA-sponsored group disability insurance program, which will be added to your student fee bill. Should you become disabled due to illness (including pregnancy) or accidental bodily injury which occurs while you are insured; the plan will provide you with an income of approximately $1,500.00 per month, after a 90 day elimination period, during your disability. Students may continue their coverage upon entering a residency program by purchasing the conversion policy at a rate determined by the provider. Terms and cost cited above are accurate as of time of printing, but students should verify this information by consulting the actual policy.

A full description of your benefits while in school and, potentially for the remainder of your professional career, is contained in print materials distributed during orientation week furnished by the Guardian Life Insurance Company. Any questions regarding coverage may be directed to the Broker (Health Professionals Insurance Services, Inc., at (800-628-2861).

Enrollment in this program establishes a relationship between the student and the insurer independent of the University and the Keck School of Medicine. Changes in coverage, terms, fees and other attributes of this insurance are at the discretion of the insurer. Neither the School nor the University has responsibility for any aspect of the relationship between the student and the insurer.