Section 7: 
Academic Review Process

PRE-REVIEW ASSESSMENT
The policy as outlined below describes the necessary steps when reviewing students for concerns about knowledge, skills, attitudes and/or behavior brought forward by anyone in the Medical Center and/or College of Medicine. A formal review is preceded by data-gathering and fact-finding performed by the academic program, to assure that there is sufficient information to refer the student for formal review.

Academic reviews are typically triggered by assessment data that do not meet stated requirements. Prior to referral, the student should have received performance feedback, and data regarding the standards in question.

Students who have failed to meet competency milestones may be required, as a condition of continued participation in the curriculum, to comply with academic or behavioral requirements that differ from those applied to the student without a history of academic and/or behavioral difficulties.

Egregious behavior (actions that put patients, students, faculty, staff, and/or oneself at personal or professional risk) may require immediate action by the Dean or designee. Students in dual degree programs who encounter academic, behavioral, and/or professionalism difficulties in either component of their program must also go through the College of Medicine formal review process. For these students, the results of the review process may be communicated to the other program(s) as deemed appropriate.

FORMAL ACADEMIC REVIEW LEVELS
There are four levels of academic review, with responsibilities that are assigned by the Executive Curriculum Committee. A brief review of each is provided below, with more detailed discussions of each committee in the following sections.

Level I: Formative/Advisory Review (Support)
Level 1 Review is intended to assist the student in correcting academic or behavioral patterns that may be disruptive to their success in medical school or as a physician. Appearances before Level I Review groups will not be noted in the MSPE.

- Student Review Committee
- Honor and Professionalism Council (students only)

Level II: Disciplinary Review (Detailed Performance Analysis)
Level II Review committees have the authority to modify a student’s curricular progression and to recommend that a student be dismissed from the College of Medicine. Appearances before Level II Review committees and the subsequent actions taken are noted in the MSPE and/or the student’s electronic file.
• Honor and Professional Council (faculty and students)
• Technical Standards Advisory Committee
• Violations Committee
• Academic/Behavioral Review Committee
• USMLE Review Committee

Level III: Assessment of Due Process
A Level III committee evaluates the process of the Level II committees in the event that a student is recommended for dismissal to assure that decisions were fairly made with complete information. A Level III committee also evaluates requests for reinstatement to the College after a student has withdrawn or been dismissed.
  • Academic Review Board

Level IV: Final Decision Making
Final decision making for a student’s dismissal or reinstatement resides with the Dean of the College of Medicine or his designee, the Vice Dean for Education. In the event that a student demonstrates behavior felt to be significantly harmful to patients, students, staff, or faculty, the Dean may suspend or dismiss a student without using other levels of the review process.

STUDENT REVIEW COMMITTEE

Responsibilities

The Executive Curriculum Committee has assigned the following responsibilities to the Student Review Committee (SRC):

• Review and make recommendations regarding all students who have been referred for failure to meet an academic, behavioral or professionalism standard, or for other concerns about performance not meeting the level of a failed standard or competency
• Engage the student in discussion about any academic and non-academic factors that may be contributing to challenges with performance
• Consider and offer educational interventions for students
• Recommend COM and university-based resources to students, where applicable, to facilitate improvement in performance, successful completion of the remediation plan recommended by the referring academic program

Membership

The co-chairs of the SRC are the Associate Program Directors of the LSI curriculum Parts 1, 2 and 3, who are appointed annually by the Associate Dean for Medical Education in consultation with the ECC.

The Committee shall have a minimum of 15 members derived from the following:

• Associate Program Directors (3)
• Expert Educators for Parts 1, 2, and 3 (30)
Associate Program Directors will not serve concurrently on any Level II or III review committees. The SRC reports back to the Academic Program Directors, and quarterly to the Academic Review Process Committee.

A formal SRC meeting must include at least one APD acting as chair and at least 3 expert educators.

**Review Meeting**

A student will be referred to SRC when there is failure to meet an academic, behavioral, or professionalism standard of the Academic Program in which a student is currently enrolled. The student will be informed of the review meeting at least 7 calendar days before the scheduled meeting. Written notification about the time and location of the meeting will be sent to the student by e-mail, following notification by the referring academic program director.

A review scheduled with the SRC is considered an administration function of the College of Medicine. Attendance is limited to the committee members and the referred student.

The SRC is responsible for reviewing all information related to the student’s progress in medical school, i.e. all foundational science and clinical performance, behavioral and mental health observations, and admissions information.

At the meeting, the student will have the opportunity to share with the committee about their view of the challenges leading up to the referral, about their perceptions of their performance difficulties, and about any/all academic or non-academic issues that may be contributing to the performance challenges. The remediation plan recommended by the program will also be addressed.

**Recommendations**

The SRC will develop recommendations for the student at the time of the SRC meeting—These typically include educational interventions and connections to COM and/or university-based resources (academic support, counseling, financial aid, etc.) that may help to improve performance and decrease external stressors. During the meeting, students will be encouraged to discuss these recommendations and the strategies for utilizing them to 1) satisfy the requirements put forth by the referring academic program, and 2) to maintain progress in the curriculum, thereby avoiding additional committee reviews in the future. A summary of the meeting will be made by the chair and will be sent to the referring academic program director.

The SRC aims to identify the academic and non-academic causes of challenges as a means of connecting students to resources to attempt to mitigate these challenges. With this in mind, students are encouraged to view a referral to the SRC as supportive rather than punitive.

**HONOR AND PROFESSIONALISM COUNCIL**

**Responsibilities**

The OSUCOM Honor and Professionalism Council (HPC) is a student-run, faculty advised body whose goal is to promote and ensure professional and ethical behavior in the COM by upholding the Student Professional Honor Code developed by the OSUCOM Student Council in 2006 and to review behaviors that are inconsistent with professionalism standards.
Membership

- 17 peer elected student members. Elections occur at the beginning of each academic year for the Med 1 and Med 3 classes, with each representative serving a two-year term. Those running for a position on the HPC are asked to write a personal statement and a response to a posed mock incident. A member of the council may be dismissed by majority vote of the council before their two-year term is complete. If a position becomes vacant for the Med 2 or 4 classes, an election to fill the vacant spot will be held – usually at the same time as the Med 1/ Med 3 elections. Elections for the leave of absence representative are held in January every other year.
  - 4 student members from each of the current 4 COM classes
  - 1 student from the group of students on LOA in pursuit of a dual degree such as a MD-PhD
- 1 faculty member who serves as the advisor of the HPC
- Officers: The HPC President and Vice President are members of the Med 2 class elected by the HPC student members

Meetings

The HPC holds meetings at least quarterly to discuss issues and challenges in professionalism.

Referrals

Students may be referred to the HPC by any student or faculty member or by one of the other COM review committees. Referrals will be directed to the Associate Dean of Student Life, who will perform an initial investigation and gather documentation starting with a meeting with the referred student to determine if the referral is appropriate for review by the HPC and what level of review is required, taking into consideration the recommendation of the referring body. The Associate Dean might alternatively decide that a referral to the university student conduct board or another COM level II committee is more appropriate depending upon the nature of the lapse and overall context. If it is determined that the student should meet with HPC, The Associate Dean of Student Life will then set up a meeting to convey information to the HPC vice president who will then schedule the meeting.

Review Process

Level I: Peer Consultation

Upon referral, the HPC VP will convene a group of at least 2 other student members of HPC. If the referred student is in LSI Part 1, at least 2 students in the group should be in Part 1. Correspondingly, if the referred student is in LSI Part 2 or Part 3, at least 2 students in the group should be in Part 2 or 3. The purpose of the peer consultation is to discuss the situation and stressors that may have contributed to the professionalism lapse, to explore attitudes about what happened and to advise the student about different approaches that they might take to avoid such a lapse in the future or to handle difficult situations. The HPC VP should submit a written summary of the consultation to the associate dean of student life within the next 24-48 hours.

Level II: Formal Hearing Committee

Upon referral, the HPC VP will convene an ad hoc Hearing Committee which will consist of:
- Six student members (voting members)
• If the accused student is in their LSI Part 1 years, at least three student representatives must be from LSI Part 1 classes
• If the accused student is in LSI Part 2 or 3, at least three representatives must be from LSI Part 2 and 3 classes
• Three faculty members (nonvoting members)
  • HPC advisor
  • Two other faculty selected by the HPC student members (one clinical and one preclinical faculty member)

The hearing committee will meet with all involved parties individually to discuss, question and clarify details of the case. The accused student may request one person to come and speak on their behalf as advocate or witness. The person who reported the incident will be encouraged but is not required to appear before the committee. After meeting with the accused and any other people providing information, the committee will engage in discussion and then vote if a lapse of professionalism occurred or not. In the event of a tied student member vote, the faculty members will join a second vote. If the committee finds that a professionalism lapse occurred, they will then develop recommendations that will help the student to understand the importance of professionalism and to grow and succeed in the future. All 9 of the hearing committee members will vote on the recommendations and 6 of 9 are required to approve the proposed recommendations (7 of 9 if the recommendation is dismissal). The HPC VP will inform the Associate Dean of Student Life of the committee’s decision and recommendations within 24 hours; the Associate Dean will then set up a meeting to inform / discuss the findings with the referred student. If the HPC makes recommendations regarding curricular requirements or grading, then a referral to the ABRC must be made to approve these recommendations. If the HPC recommends dismissal, the recommendation will be forwarded to the Academic Review Board for review.

**Documentation**

If a student is found guilty of a professionalism lapse by the HPC, then notations of this professionalism lapse will be made in the students Medical Student Performance Evaluation (MSPE).

**REVIEW OF TECHNICAL STANDARDS AND THE TECHNICAL STANDARDS ADVISORY COMMITTEE**

**Procedures**

**Procedures**

Pre-Matriculate: The College is required by law to provide reasonable accommodations for applicants with disabilities. In certain circumstances, the Admissions Committee or Associate Dean for Medical Education may determine that an applicant who has requested accommodation has the academic record and the personal attributes appropriate for admission to the College, but may not have the capacity to meet the requirements outlined in the Technical Standards. The Technical Standards Advisory Committee of the College of Medicine will evaluate accepted candidates in accordance with the Technical Standards through review of the technical standards
Candidates will be provided a copy of these standards as part of the admissions process and are required to notify the Associate Dean for Medical Education if accommodations are needed. Upon receipt of the student’s Attestation, the Associate Dean for Medical Education will determine if reasonable accommodations for the student can be made. In circumstances when the Associate Dean for Medical Education determines that a student does not meet the technical standards and may not be reasonably accommodated, the student will be referred for review by the Technical Standards Advisory Committee. It is the responsibility of the Technical Standards Advisory Committee to determine whether the applicant can or cannot meet the described standards utilizing reasonable accommodations. The recommendations of this Committee shall guide the Admissions Committee in its final decision as to whether admission is or is not appropriate. Students who are unable to meet the technical standards of the College of Medicine even with reasonable accommodations will not be admitted. Those who have falsified records or made false written or oral statements during the admissions process will be subject to expulsion from the College.

Enrolled Student: If at any point in time a student enrolled in the College of Medicine may no longer meet the Technical Standards of the College of Medicine they must notify the Associate Dean for Medical Education and complete a new technical standards attestation. The student will work with the University’s Office of Disability Services to obtain recommendations for accommodations. Upon receipt of the student’s Attestation and recommendations from ODS, the Associate Dean for Medical Education will determine if reasonable accommodations for the student can be made. In circumstances when the Associate Dean for Medical Education determines that a student does not meet the technical standards and may not be reasonably accommodated, the student will be referred for review by the Technical Standards Advisory Committee. It is the responsibility of the Technical Standards Advisory Committee to determine whether the student can or cannot meet the described standards utilizing reasonable accommodations. The recommendations of this Committee shall guide the Associate Dean in determining whether a student should be referred to the Academic Review Board for dismissal. Students who are no longer able to meet the technical standards of the College of Medicine even with reasonable accommodations will be dismissed.

**Technical Standards Advisory Committee**

**Functions of the Committee:** Evaluation of applicants who have been accepted to the College who have impairments which may impact their ability to meet the Technical Standards. This evaluation is done at the request of the Admissions Committee or the Associate Dean for Medical Education. If the Admissions Committee or Associate Dean for Medical Education (or designee) identifies an otherwise qualified student, the Committee/Associate Dean may request an evaluation by the Technical Standards Advisory Committee (TSAC) to determine whether that student can meet the Technical Standards with or without reasonable accommodations.

If the committee determines that the pre-matriculate can meet the technical standards a report will be sent to the Admissions Committee and the Associate Dean for Medical Education (or designee) and the matriculation process will continue.

If the committee determines that the pre-matriculate cannot meet the technical standards a report will be sent to the Admissions Committee and the Associate Dean for Medical Education (or designee) and the acceptance will be rescinded.
Evaluation of an enrolled student who develops an impairment that brings into question his/her ability to meet the technical standards. This circumstance may occur as the result of injury, illness, or newly-discovered impairment. Before evaluation by the Committee, the student must register with the OSU Office of Disability Services. The Associate Dean for Medical Education may request an evaluation by the TSAC. The TSAC determines whether that student can meet the Technical Standards with or without reasonable accommodations.

If the Committee determines that the enrolled student can meet the technical standards a report will be sent to the Associate Dean for Medical Education and the student will be allowed to continue in the curriculum.

If the Committee determines that the enrolled student cannot meet the technical standards a report will be sent to the Associate Dean for Medical Education and the student will be referred to the Academic Review Board for dismissal.

Committee Composition

1 faculty member from each of the academic programs (Part 1, Part 2, Part 3) chosen from the respective APC. The faculty member from the APC in which the student is currently enrolled serves as the chair of the committee.

1 faculty member from the Department of Physical Medicine & Rehabilitation
1 faculty member from the Department of Neurology
1 faculty member from the Department of Psychiatry
1 faculty member from the Department of Surgery
1 faculty member with expertise in Undergraduate Medical Education evaluations/assessments

Ex-officio members:
College of Medicine Legal Counsel
University ADA Coordinator or representative of ODS

A student who is referred to the Technical Standards Advisory Committee will be notified by the chair of the date and time for the student to appear. The notification to the student should be no less than 7 calendar days prior to the meeting date and time. The student should be notified electronically and through regular mail at the current address listed for the student.

A quorum is five members. Decisions are made by a majority of members voting. Ex-officio members have voting rights. The chair of the committee should vote. Any member can designate an alternate with the approval of the committee chair. Voting is open ballot unless a member requests a closed ballot.

If the recommendation is for other than dismissal, the Technical Standards Advisory Committee has the authority to require an education contract and to dictate the stipulations therein. Education contracts are to be signed by the student, the Chair of the Technical Standards Advisory Committee (the Associate Dean of Medical Education) and the Vice Dean of Education (see Education Contracts, later in this section.)
VIOLATIONS COMMITTEE
The Violations Committee is responsible for the oversight of applicant and student self-disclosure, background checks, toxicology screens and other requirements of the professional student. The Violations Committee will make recommendations to the Admissions Committee (for recommendation of rescindment of admission), the Associate Dean for Admissions (for all other recommendations for a pre-matriculate), and/or the Associate Dean for Student Life (for matriculated students), as appropriate, in regards to positive findings on student/applicant self-disclosure, background checks, and toxicology screening.

Committee Composition
Associate Dean of Medical Education, Chair  
Part 1 Program Director  
Part 2 Program Director  
Part 3 Program Director

If the recommendation is for other than dismissal, the Violations Committee has the authority to require an education contract and to dictate the stipulations therein. Education contracts are to be signed by the student, the Chair of the Violations Committee (Associate Dean for Medical Education) and the Vice Dean for Education (see Education Contracts, later in this section).

ACADEMIC/BEHAVIORAL REVIEW COMMITTEE

Responsibilities
The Executive Curriculum Committee has assigned the following responsibilities to the Academic/Behavioral Review Committee (ABRC):

- Review and make recommendations regarding all students who have been considered for dismissal or repetition of a year for academic, behavioral, or other intervention by an Academic Program Committee, Student Review Subcommittee, or the Advancement Committee;
- Determine curricular recommendations for students who are reinstated;
- Make recommendations for a change in a substantial portion of a student’s curriculum;
- Make recommendations for a repetition of a substantial portion of a student’s curriculum;
- Make recommendations for dismissal, excluding those that have been heard through any other level II committee;
- Make recommendations for action because of any combination of lapses in academic or professional behavior.

The Academic Behavioral Review Committee does not overturn or change grades given by an academic program. In considering recommendations for repetition of a year, dismissal, or interruption of progress, the committee is responsible for reviewing all information related to the student’s progress in medical school, including all basic science and clinical performance and admissions information.
Membership

The chair of the Academic Behavioral Review Committee is appointed annually by the Associate Dean for Medical Education in consultation with the ECC. The 16 members of this committee are as follows:

- Four Part 1, Part 2 and/or 3 curricular component/subcomponent directors or associate directors; and
- Ten faculty members, from a mix of foundational and clinical sciences, at least two of whom are elected by the faculty at large.

Members should not be concurrent members of Student Review Committee, USMLE Review Committee, or the Academic Review Board. The chair and vice-chairs are appointed by the Associate Dean for Medical Education in consultation with the ECC. Any member can designate an alternate with the approval of the committee chair.

A quorum is five members. Decisions are made by a majority of members voting. An abstention does not count as a vote. The chair of the committee votes. Any member can designate an alternate with the approval of the committee chair. Voting is open ballot unless a member requests a closed ballot.

Review Procedures

The Academic Program Director, with input from the Student Review Committee, informs the chair of the Academic/Behavioral Review Committee of a recommendation for repetition of a year, dismissal, or other interruption of a student’s progress for academic or behavioral reasons. In rare circumstances, a referral to the Academic/Behavioral Review Committee may come directly from the Associate Dean for Medical Education or the Associate Dean for Student Life. If possible, the Academic/Behavioral Review Committee should complete the process no less than two weeks and no more than three weeks following the referral. Under extenuating circumstances, or during vacation periods, or upon request of the student, the meeting may be delayed by the chair. The review, however, must proceed in a timely manner.

The student will be informed of the review meeting at least seven calendar days before the scheduled meeting. Written notification will be sent to the student’s current home address by certified mail and by e-mail. Notification includes the time and place of the meeting, the review procedures, and the rights of the student. In addition, the student will have the opportunity to meet with the Associate Dean for Student Life or designee who will discuss the procedures, provide advice on selection of an advocate and presentation of information, and answer questions. Prior to the review, the student may inspect his or her College records in accordance with the procedures established by the University.

Review Meeting

A review scheduled with the Academic/Behavioral Review Committee is considered an administration function of the College of Medicine. Attendance is limited to the committee members, student, one advocate, and participants as indicated below. The student, advocate, and any other invited participants are excused from the meeting before deliberations.
The review meeting by the Academic/Behavioral Review Committee will be conducted according to the following procedures:

- The student will be afforded the opportunity to meet with the Academic/Behavioral Review Committee. The student may select one advocate from the College faculty to accompany him or her to the review.
- At the meeting, the student may present any written or oral information pertaining to his or her standing in medical school.
- The student may invite up to two faculty, house staff, or health care professionals who can provide relevant information on the student’s academic performance.
- The committee may request additional information or invite other individuals as needed.
- The chair has the authority to control the conduct of the proceedings.
- A decision is made by a majority vote of the members voting.
- A summary of the proceedings will be made by the chair.

**Recommendations**

The chair will send a written report of the recommendations to the student, with copies to the student’s portfolio coach, the Chair of the Advancement Committee, the Associate Dean for Student Life, and the Associate Dean for Medical Education. In general the report should be sent within five business days of the meeting; however this may be delayed in certain circumstances (e.g., when the Committee requests additional information). Regardless, all communications should proceed in a timely fashion. In addition, the chair or designee will attempt to contact the student by phone regarding the outcome within 48 hours of the meeting. A report of the recommendations will be included in the student’s permanent file.

If the recommendation is for dismissal, the student may be placed on an immediate, administrative leave of absence, at the discretion of the Associate Dean for Medical Education, until the Academic Review Board concludes its review.

If the recommendation is for dismissal, the chair of the Academic Review Board is informed in writing and, if possible, by phone. Information to be forwarded to the Academic Review Board includes, but is not limited to: written conclusion of the Academic Program Committee (Student Review Committee) and the Academic/Behavioral Review Committee; a summary of review meetings; records of the student’s academic performance; documentation of problems, including the resolution; if available, written statements from faculty, including the student’s academic advisor and advocate; and correspondence with the student regarding the review process.

If the recommendation is for other than dismissal, the Academic/Behavioral Review Committee has the authority to alter a student’s curriculum and/or require an education contract and to dictate the stipulations therein. Education contracts are to be signed by the student, the Associate Dean for Medical Education (or designee), the Associate Dean of Student Life, and the Vice Dean for Education (see Education Contracts, later in this section).

The student is expected to develop a plan with timeline that addresses the recommendations/requirements as per the letter from the Academic and Behavioral Review Committee, methods for ensuring timeline adherence to the plan, and strategies to overcome barriers to adherence, as
needed. The student is permitted and encouraged to work with their portfolio coach on these aspects, though any collaboration would be at the student's initiation. Students will be expected to write a letter to the Chair of the Advancement Committee within two months of the Academic and Behavioral Review Committee meeting (or sooner, at the discretion of the level II committee) that addresses the execution, and timeline for completion, of the recommendations/requirements outlined in the Academic and Behavioral Review Committee’s letter. In addition the student will address the degree to which s/he engaged his/her Portfolio Coach in the follow up process.

The Academic Advancement Committee will review the progress of the student with respect to requirements/recommendations made by the Academic and Behavioral Review Committee. The Chair of the Academic and Behavioral Review Committee will determine if further review by that committee is warranted.

**USMLE REVIEW COMMITTEE**

**Responsibilities**

The Executive Curriculum Committee has assigned the following responsibilities to the USMLE Review Committee:

- Review and make recommendations regarding all students who have been considered for dismissal or repetition of a year for academic, behavioral, or other intervention secondary to the student’s failure to meet the USMLE requirements of the College of Medicine.
- Determine USMLE recommendations for students who are reinstated.
- Review students who have posted failures on Step 1, Step 2CK and/or Step 2CS, and students who have not met the established deadline for taking Step 1, Step 2CK and/or Step 2CS.

In considering recommendations for repetition of a year, dismissal, or interruption of progress, the committee is responsible for reviewing all information related to the student’s progress in medical school, including all basic science and clinical performance and admissions information.

**Membership**

The chair and vice-chair of the USMLE Review Committee are appointed annually by the Associate Dean for Medical Education in consultation with the ECC. The 8 members of this committee are as follows:

- Five faculty members, from a mix of foundational and clinical sciences, at least two of whom are elected by the faculty at large;
- Two Part 2 or Part 3 curricular component/subcomponent directors; and

Members should not be concurrent members of other Level I or Level II academic review committees. Any member can designate an alternate with the approval of the committee chair. A quorum is four members. Decisions are made by a majority of members voting. An abstention does not count as a vote. The chair of the committee votes. Voting is open ballot unless a member requests a closed ballot.
**Review Procedures**

The College monitors student USMLE activity centrally (primarily through the NBME Chief Proctor), with notification sent to the Associate Dean for Medical Education, the Associate Dean for Student Life, the Chair of the Academic Advancement Committee, and the Chair of the USMLE Review Committee of any student who posts a failing score or who does not meet COM USMLE requirements. An Associate Dean (or designee) then notifies the Chair of the USMLE Review Committee of the referral. If possible, the USMLE Review Committee should complete the process no less than two weeks and no more than three weeks following the referral. Under certain circumstances or vacation periods, or upon request of the student, the meeting may be delayed by the chair. The review, however, must proceed in a timely manner.

The student will be informed of the review meeting at least seven calendar days before the scheduled meeting. Written notification will be sent to the student’s current home address by certified mail and by e-mail. Notification includes the time and place of the meeting, the review procedures, and the rights of the student. In addition, the student will have the opportunity to meet with the Associate Dean for Student Life (or designee) who will discuss the procedures, provide advice on selection of an advocate and presentation of information, and answer questions. Prior to the review, the student may inspect his or her College records in accordance with the procedures established by the University.

**Review Meeting**

A review scheduled with the USMLE Review Committee is considered an administrative function of the College of Medicine. Attendance is limited to the committee members, student, one advocate, and participants as indicated below. The student, advocate, and any other invited participants are excused from the meeting before deliberations.

The review meeting by the USMLE Review Committee will be conducted according to the following procedures:

- The student will be afforded the opportunity to meet with the USMLE Review Committee. The student may select one advocate from the College faculty to accompany him or her to the review.
- At the meeting, the student may present any written or oral information pertaining to his or her standing in medical school.
- The student may invite up to two faculty, house staff, or health care professionals who can provide relevant information on the student’s academic performance.
- The committee may require additional information or invite other individuals as needed.
- The chair has the authority to control the conduct of the proceedings.
- A decision is made by a majority vote of the members voting.
- Minutes of the meeting will be taken.
- A summary of the proceedings will be made by the chair.

**Recommendations**

The chair will send a written report of the recommendations to the student, with copies to the student’s portfolio coach, the Chair of the Academic Advancement Committee, the Associate Dean for Student Life, and the Associate Dean for Medical Education. The report should be sent within
five business days of the meeting; however this may be delayed in certain circumstances (e.g., when the Committee requests additional information). Regardless, all communications should proceed in a timely fashion. In addition, the chair or designee will attempt to contact the student by phone regarding the outcome. A report of the recommendations will be included in the student’s permanent file.

If the recommendation is for dismissal, the student may be placed on an immediate administrative leave of absence at the discretion of the Associate Dean for Medical Education until the Academic Review Board concludes its review.

If the recommendation is for dismissal, the chair of the Academic Review Board is informed in writing and, if possible, by phone. Information to be forwarded to the Academic Review Board includes, but is not limited to: written conclusion of the Academic Program Committee (Student Review Subcommittee) and the USMLE Review Committee; minutes of review meetings; records of the student’s academic performance; documentation of problems, including the resolution; if available, written statements from faculty, including the student’s academic advisor and advocate; and correspondence with the student regarding the review process.

If the recommendation is for other than dismissal, the USMLE Review Committee has the authority to alter a student’s curriculum and/or require an education contract and to dictate the stipulations therein. Education contracts are to be signed by the student, the Associate Dean for Medical Education (or designee), the Associate Dean of Student Life, and the Vice Dean for Education (see Education Contracts, later in this section).

The student is expected to develop a plan with timeline that addresses the recommendations/requirements as per the letter from the USMLE Review Committee, methods for ensuring timeline adherence to the plan, and strategies to overcome barriers to adherence, as needed. The student is permitted and encouraged to work with their portfolio coach on these aspects, though any collaboration would be at the student's initiation. Students will be expected to write a letter to the Chair of the Advancement Committee within two months of the USMLE Review Committee meeting (or sooner, at the discretion of the level II committee) that addresses the execution, and timeline for completion, of the recommendations/requirements outlined in the USMLE Review Committee’s letter. In addition the student will address the degree to which s/he engaged his/her Portfolio Coach in the follow up process.

The Academic Advancement Committee will review the progress of the student with respect to requirements/recommendations made by the USMLE Review Committee. The Chair of the USMLE Review Committee will determine if further review by that committee is warranted.

**ACADEMIC REVIEW BOARD**

**Responsibilities**

The Executive Curriculum Committee has assigned the following responsibilities to the Academic Review Board:
• To review all recommendations for dismissal for completeness of significant information available to the Academic Standing Subcommittee making the decision and to ensure that the College’s policies and procedures have been followed; and
• To recommend to the Dean or designee whether or not a student should be dismissed or reinstated.

**Membership**

The eleven-member Academic Review Board, including the chair, is appointed by the Dean or designee and consists of:

- Eight faculty members who are neither College administrators (medical student) nor members of the Academic Standing Committees or Academic Program Student Review Subcommittees;
- Two associate deans or their faculty designees from medical student administration who have had minimal disciplinary interaction with the student, to be selected from Medical Education, Admissions, Student Life, or Research Education; and
- Associate Dean for Diversity and Inclusion.

Of the eight faculty members, one should be a representative to the Faculty Council and one the chair of the Admissions Committee. Of the eight faculty members, at least one should be from a foundational sciences department and one from a clinical sciences department. The Academic Review Board is chaired by a faculty member who is not a College administrator.

**Decision Making/Voting**

A quorum is four members. At least 50% of the members voting should not be College administrators. Decisions are made by a majority vote of the members voting. An abstention does not count as a vote. The chair of the committee votes. Voting is open ballot unless a member requests a closed ballot.

**Procedure for Dismissal Review**

A recommendation for dismissal by a level II committee is automatically reviewed by the Academic Review Board. The Academic Review Board’s responsibility is only to review the determinations of the previous committees (Student Review/Academic Behavioral Review/USMLE Review), HPC, Violations Committee, Technical Standards Advisory Committee, and to ensure that they had access to all significant information and to determine if the College’s policies and procedures were followed.

When a quorum of voting members is available, a recommendation for dismissal should come before the Academic Review Board no less than two weeks and no more than three weeks following receipt of the Academic Standing Committee’s written recommendation for dismissal and supporting documentation. Under extenuating circumstances, the review meeting may be delayed by the chair, or upon request of the student. The review, however, must proceed in a timely manner. Copies of all materials in the dismissal recommendation are to be forwarded to the chair of the Academic Review Board.

At the Academic Review Board meeting, the student and the chair of the referring level II committee are invited to make a presentation or answer questions. They only provide information
and are not present for deliberations. The student’s advocate can write a letter but is not invited to the meeting. In this meeting, information may not be reviewed comprehensively, since it is neither an appeal nor a hearing. The Academic Review Board determines if the prior committees had access to significant information that might influence their decisions. General information reviewed includes, but is not limited to:

- Written conclusions of the Academic Program Student Review Committee;
- Written conclusions of the ABRC/USMLE Review Committee;
- Written conclusions of the HPC;
- Written conclusions of the Violations Committee;
- The student’s academic performance;
- Documentation of problems, including their resolution; and
- Written statements from faculty, including the student’s advisor and advocate, if available.

In general, guidelines for the College’s policies and procedures include the following:

- The student’s difficulties and attempts to address them were documented. Documentation indicates that the student was informed of his or her difficulties and the consequences of their continuation. Such paperwork also indicates that requirements for improved performance to meet standards were explained to the student and preferably provided in writing.
- The student had opportunities to address and eliminate these difficulties. Regular or standard methods for support (e.g., tutoring or counseling) were made available. The student was referred to other support services if College resources were not available.
- Once the dismissal process with the Academic Standing Subcommittees (Student Review, Academic Behavioral Review, USMLE Review), HPC, Violations Committee began, the student received written notice of the Academic Standing Committee review meeting and dismissal procedures at least seven calendar days before the scheduled meeting.
- Prior to Academic Standing Subcommittees (Student Review, Academic Behavioral Review, USMLE Review), HPC, Violations Committee consideration, the student had the opportunity to discuss the dismissal process with the Associate Dean for Student Life or designee.
- Prior to Academic Standing Subcommittees (Student Review, Academic Behavioral Review, USMLE Review), HPC, Violations Committee consideration, the student was informed that a College faculty advocate can present information on his or her behalf either in person or in writing.
- The student had the opportunity to present in person and in writing any significant information related to his or her difficulties to the Academic Standing Subcommittees (Student Review, Academic Behavioral Review, USMLE Review), HPC.

If the Review Board is concerned about completeness of information or whether the College’s procedures were followed, the recommendation is returned to the appropriate Academic Standing Subcommittees (Student Review/Academic, Behavioral Review, USMLE Review), HPC, Violations Committee. Returning a decision for reconsideration means that there is significant new information or a step in the process may have been overlooked. If the Academic Review Board determines that there was access to all significant information and the College’s policies and procedures were followed, the recommendation for dismissal is forwarded by the chair of the Academic Review Board to the Dean or designee within 24 hours. With the Dean’s or designee’s
concurrence, the notification process is initiated. If the Dean or designee does not concur, the
decision is returned to the Academic Review Board for re-evaluation.

The Vice Dean for Education will inform the student of the board’s conclusions in a timely fashion.

**Procedures for Reinstatement Review**

The Academic Review Board considers all requests for reinstatement. In general, the Academic
Review Board will not consider petitions for reinstatement sooner than six months following the
student’s withdrawal or dismissal from the College. In addition, it is generally the practice of the
College not to permit reinstatement of students who have been dismissed from the College.

Following a denial of reinstatement, the board will consider a subsequent petition no sooner than
six months, except under the most unusual circumstances. In addition, it will not review more than
two petitions for an individual.

The Academic Review Board may choose to:

- Recommend reinstatement;
- Deny reinstatement; or
- Recommend that the student reapply for admission.

In addition, the Academic Review Board:

- will not review more than two petitions from one individual
- will not consider any reinstatement petition for an individual after 4 years from the
  withdrawal/dismissal action

The board recommends to the Dean or designee whether the student should be reinstated. With the
Dean’s or designee’s concurrence, the Associate Dean for Medical Education will inform the
student in writing of the decision.

If the decision is to reinstate the student, the appropriate Academic Standing Subcommittees will
determine specific curricular requirements, including performance requirements for remaining in
good standing (see Education Contracts, later in this section).

The procedures for determining reinstatement after withdrawal or dismissal are outlined below.

**REINSTATEMENT**

A student may elect to withdraw from the College of Medicine for academic or personal reasons.

*Unlike a leave of absence, a specific return date is not arranged or guaranteed for a student
who withdraws from the College.*

Students who have been dismissed or who have formally withdrawn from the College of Medicine
may subsequently petition for reinstatement, provided they meet the eligibility criteria outlined
above (see Procedures for Reinstatement Review, above). In general, it is the practice of the
College not to permit reinstatement of students who have been dismissed from the College.

Such a request must be supported by compelling evidence indicating that the student has made
substantial changes in his or her ability to meet the College’s current cognitive standards,
professionalism standards, and graduation requirements. This is in addition to the ones in place
when the student was originally admitted.
The student initiates the process of reinstatement by scheduling a meeting (in person or by phone) with the Associate Dean for Student Life or designee. At that meeting, the Associate Dean will review the reasons for withdrawal or dismissal and discuss information required to support a request for reinstatement. If the student chooses to pursue this action, a formal reinstatement request is prepared which includes:

- A letter from the student that:
  - Requests reinstatement;
  - Summarizes recent activities that might have an impact on performance; and
  - States how his or her ability to perform has changed since the dismissal/withdrawal, including specific performance problems identified during the dismissal/withdrawal process.

- Documentation to support the above (e.g., letters from therapists, proof of completion and grades in courses taken since dismissal).

For students who have been withdrawn from the College of Medicine, an Academic Review Board hearing is scheduled upon receipt of the formal statement request as with the receipt of a recommendation for dismissal as above (under Procedure for Dismissal Review). For students who have been dismissed, the formal statement request is reviewed by the chair and/or members of the Academic Review Board to determine if a reinstatement hearing is warranted.

**OTHER OVERSIGHT COMMITTEES**

**ACADEMIC REVIEW PROCESS COMMITTEE**

The Academic Standing Committee is a systems committee responsible for overseeing the process of student review and promotion. This committee meets quarterly and will monitor the actions of all of its subcommittees and other relevant committees that have occurred over the quarter. This committee will not meet with students. The committee will function in a quality assurance fashion to ensure that the academic review process is functioning in a manner that is consistent with the Core Institutional Objectives and the mission, vision, and values of the College of Medicine.

The Academic Standing Committee serves to maintain quality student assessments and to ensure that all members understand and are able to implement College of Medicine academic review policies. This committee is charged with ensuring outcomes-based decision making in all reviews. In addition, committee meetings serve to disseminate new policies that have been approved by the College of Medicine. The chairperson of this committee is responsible for supervising the management of all student referrals to any of the subcommittees and ensuring that the appropriate subcommittee meets with the student. The chairperson is also responsible for ensuring a centralized mechanism for documentation of student performance across all subcommittees. This documentation should be available to program and curricular component directors as well as all committee members. Individual faculty access to a particular student’s performance will be determined by the program or clerkship director under the direction of the Associate Dean for Medical Education. Faculty members who are working with a student who has substantial performance deficiencies will be informed of these deficiencies prior to working with the student.
to enable maximal opportunity for the student to improve performance. Transmission of student information by any means will be in compliance with FERPA at all times.

Committee Composition

Associate Dean for Medical Education
Associate Dean for Diversity and Inclusion
Associate Dean for Student Life
Associate Dean for Admissions
Directors of Competencies (Patient Care, Medical Knowledge, Practice-Based Learning and Improvement, Interpersonal Communication Skills, Systems-Based Practice, Professionalism)
Academic Program Directors, LSI Part 1, 2, and 3
Associate Academic Program Directors, LSI Part 1, 2, and 3
Directors of Integration, Part 2
Part 3 Unit Directors (AMHBC, AMRCC, Advanced Competencies/Clinical Tracks)
Faculty (10); from a mix of foundational and clinical science, at least two of whom are elected by the faculty at large, and at least two of whom are community faculty (or from affiliated programs)

There are four subcommittees of the Academic Standing Committee: (1) Advancement Committee; (2) USMLE Review Committee; (3) Student Review Committee; and (4) Academic/Behavioral Review Committee.

ADVANCEMENT COMMITTEE

Responsibilities

- This subcommittee is specifically charged with reviewing trends in student performance through monitoring of grades, exam scores and patterns of behavior. This committee will determine if students have a pattern of performance that requires intervention or formal review by the Academic/Behavioral Review or USMLE Review subcommittee. Prior to such a referral, the committee may ask for the student to meet with an Associate Dean or Counselor in an attempt to understand if there are outside factors affecting performance.
- This subcommittee does not meet with students.
- This subcommittee meets approximately twice a month to discuss the progress of all students.
- This subcommittee will monitor the progress of all students seen by any other subcommittee (Academic/Behavioral Review or USMLE Review).
- This subcommittee will be responsible for promotion of students to the next academic program or for graduation. Any students who are felt not to qualify for promotion will be referred to the appropriate level II committee.

Guidelines for Changing Student Academic Status Lights
(June 29, 2012, reviewed July 26, 2015)

Guiding principles:
- “Academic” issues refer to all domains of competency, including: Patient Care, Knowledge for Practice; Practice-Based Learning and Improvement; Interpersonal and Communication Skills; Professionalism; Systems-Based Practice; Interprofessional Collaboration; and Personal and Professional Development.
• The purpose of the colored “light” designations is to better track student academic performance and/or alert educators about a student’s areas of difficulty.

• Decisions about academic status changes (“lights”) are made after a comprehensive review of a student’s performance record and an understanding of a student’s progress and prognosis for future performance. Guidelines for decision-making have been developed, but the AAC has the discretion to modify them based upon their comprehensive review.

• Consideration of performance on USMLE Steps 1, 2CK and 2CS is included in this review process.

Guidelines for Status (Light) Changes:

• Green light means “Good Academic Standing.” No areas of current concern and/or any initial issues have been clearly resolved and student has consistently demonstrated academic progress.

• Yellow light means “Good Academic Standing/Minor Risk”
  o A student may be placed in “Good Academic Standing/Minor Risk” (yellow) when student initially encounters a challenge or failure to meet standards in any assessments or competencies. A student may return to green when the AAC determines the student has clearly resolved any issues and met assessment and/or competency standards.

• Orange light means “Good Academic Standing/Moderate Risk.”
  o Students who are “Good Academic Standing/Moderate Risk” (orange) have an accumulation of academic and/or non-academic issues or challenges with competencies that need to be taken into consideration when assigning small group or clinical activities. Students will typically remain at this status for the duration of the academic program or academic year. In exceptional circumstances, the status may be changed to “Good Academic Standing” (green) if the AAC determines that the student has clearly resolved all issues and consistently demonstrated academic progress (i.e., consistently achieved assessment and competency standards).
  o A student at the end of an academic program who is “Good Academic Standing/Moderate Risk” (orange) will remain at that status going into the next academic program until the AAC determines that the student has clearly resolved all issues and consistently demonstrated academic progress (i.e., consistently achieved assessment and competency standards).

• Brown light means “Good Academic Standing/High Risk.”
  o A student who is at high risk of not meeting established academic competency or performance levels will be changed to “Good Academic Standing/High Risk” (brown). Students may not participate in longitudinal Advanced Competency experiences while on “brown” status in order for them to concentrate on achievement of core competencies. This student should be placed at The Ohio State University Wexner Medical Center facilities for clinical experiences and is not allowed to do away or international electives without permission from the Academic Program Director. Students in this status may rotate to our local affiliates only with permission from the Academic Program Director. The student will remain on “Good Academic Standing/High Risk” (brown) until the AAC determines that the student has clearly resolved all issues and consistently demonstrated academic progress (i.e., consistently achieved assessment and competency standards).
• Red light means “Not in Good Academic Standing.”
  o A student who is “Not in Good Academic Standing” (red) has failed a program or has a significant issue pending official action. This student should not be involved with any academic program activities unless approved by Dean's staff in conjunction with the appropriate Academic Program Director.

• Purple light means “Academic Standing Under Review”
  o The Evaluation and Assessment team will change the status to purple if a student has not met a competency, pending further review at the next meeting of the Academic Advancement Committee.

Returning from LOA:
A student retains their status from the time of taking an LOA until they return and the Academic Advancement Committee or its designee have reviewed their performance and made a status determination.

Membership
The chair of this subcommittee is the Associate Dean for Medical Education or designee. The membership is as follows:
• Associate Dean for Student Life
• Each of the Academic and Associate Academic Program Directors (Part 1, 2, and 3)
• Each of the Directors of Integration (Associate Directors of Integration and Unit Directors of Part 2 are encouraged to attend, but their attendance is not mandatory)
• Unit Directors for Part 3 (AMHBC, AMRCC, Advanced Competencies/Clinical Tracks)
• Directors of Competencies are invited, but their attendance is not mandatory
• Others will also be invited (e.g., other curricular leaders [Portfolio Coaching, Longitudinal Practice, Longitudinal Group, etc.], the Director of OME, select OME staff, including staff of Evaluation and Assessments, select Student Life staff) but their attendance is not mandatory.

Function
Quorum is seven (of the 14 required members). Only required members vote. The chair votes unless stipulated otherwise; decisions are made by a majority of those voting. Abstentions are not counted. On a quarterly basis, the Committee will review all students who are not on “green” status, and all students, regardless of “light” designation, who have been reviewed by other ASC subcommittees (ABRC, USMLE Review).

The student light status will show up in the electronic curriculum management system as below:

<table>
<thead>
<tr>
<th>Light</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Green</td>
<td>Good Academic Standing.</td>
</tr>
<tr>
<td>Yellow</td>
<td>Good Academic Standing/Minor Risk: Student has encountered initial challenges or failures in any of the assessments or competencies.</td>
</tr>
<tr>
<td>Color</td>
<td>Description</td>
</tr>
<tr>
<td>-------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Orange</td>
<td>Good Academic Standing/ Moderate Risk: Student has an ongoing accumulation of cognitive and/or non-cognitive issues or challenges with competencies that need to be taken into consideration when assigned small group or clinical activities.</td>
</tr>
<tr>
<td>Brown</td>
<td>Good Academic Standing/High Risk: Student is at high risk of not meeting established academic competency or performance levels. The student’s issues need to be taken into consideration when assigning clinical and/or small group activities. This student should be placed at The Ohio State University Wexner Medical Center facilities for clinical experiences and is not allowed to do away or international electives without permission from the Academic Program Director. Students in this status may rotate to our local affiliates only under the specific request of The Academic Program Director.</td>
</tr>
<tr>
<td>Red</td>
<td>Not in Good Academic Standing: The student has failed a program or has a significant issue pending official action. This student should not be involved with any academic program activities unless approved by Dean’s staff in conjunction with the appropriate Academic Program Director.</td>
</tr>
<tr>
<td>Purple</td>
<td>Academic Standing Under Review. A temporary designation indicating that the student’s status requires review by the Academic Advancement Committee.</td>
</tr>
<tr>
<td>Black</td>
<td>Visiting Student.</td>
</tr>
</tbody>
</table>

**EDUCATION CONTRACTS**

As a consequence of the student review process, level II/III committees and the Dean (and his/her designee) have the authority to require the execution of an education contract as a provision of continuing in the curriculum. The requirements to be contained in the contract are stipulated by the requesting committee or the Dean or designee. The contract also dictates consequences of failure to meet the requirements/terms of the contract, up to and including recommendation for dismissal from the College. It should be noted that the requirements for successful progress in the curriculum stipulated in the contract may differ from those in place for students who have not encountered academic and/or behavioral difficulties. Education contracts are to be reviewed and signed by the student, the Associate Dean for Medical Education (or designee), the Associate Dean of Student Life and the Vice Dean for Education.

**AVOIDANCE OF CONFLICT IN FACULTY ROLES**

Faculty and other healthcare professionals who provide sensitive health, psychiatric, or psychological care to medical students will not evaluate student academic performance or participate in decisions regarding student advancement and/or graduation. Faculty are required to attest that they have not provided such care to students when they complete evaluations, participate in course grading, or engage in committee academic review or promotion decisions and must recuse themselves from these academic roles if they have provided such care at any time in the past, or have significant conflict of interest impacting their ability to be impartial in these processes.
OSU UNIVERSITY STUDENT CONDUCT

Student Conduct is a department of the university Office of Student Life. Student Conduct administers the Code of Student Conduct and serves as a resource the university community. The Code of Student Conduct is established to foster and protect the core missions of the university, to foster the scholarly and civic development of the university's students in a safe and secure learning environment, and to protect the people, properties and processes that support the university and its missions. The Code of Student Conduct covers a broad range of prohibited conduct including but not limited to academic misconduct, endangering, stalking, sexual misconduct, destruction of property, theft, dangerous weapons, hazing, disorderly conduct, or violation of other university rules or federal, state or local laws.

All OSU students including students of the COM are subject to the Code of Student Conduct for the Ohio State University and the jurisdiction of Student Conduct. Student Conduct can receive reports of incidents of possible violations of the Code of Student Conduct from any source, including local police, University Housing, students, faculty and staff of the Ohio State University, or any other interested party. The processes of investigation, adjudication of complaints and appeals are outlined at the Student Conduct website. Sanctions determined by Student Conduct may include informal admonition, formal reprimand, disciplinary probation, suspension or dismissal from the university.

If a medical student is found guilty of misconduct and is given sanctions short of dismissal, they will be referred to the Academic Behavioral Review Committee within the College of Medicine for review of the misconduct and determination if the student’s behavior is consistent with the standards of professionalism of the College of Medicine. If Student Conduct determines that the sanction is dismissal, no further review will be performed through the College of Medicine.

Office of Student Life, Student Conduct
550 Lincoln Tower, 1800 Cannon Drive, Columbus, Ohio 43210
Telephone: 614-292-0748
Fax: 614-292-2098
Hours: 8:00 a.m. to 5:00 p.m., Monday through Friday
http://studentconduct.osu.edu/

The entire OSU Code of Student Conduct may be accessed at http://studentlife.osu.edu/csc/