Section 6: Academic Affairs -

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Curriculum for Tomorrow’s Medicine

GRADING

Each academic program may determine its own standards for satisfactory progress and completion. Descriptions of detailed standards (including requirements for passing, remediation, and withdrawal) can be found in the guidelines issued annually by each academic program. The student is responsible for reading and understanding the guidelines for his or her specific curricular choices. Students are required to participate in course and program evaluations and are strongly encouraged to complete part 1 of the AAMC Graduate Questionnaire prior to graduation.

The College of Medicine uses the standard grading system of The Ohio State University. Medical school classes officially use a pass/fail system consisting of:

- S = Satisfactory
- U = Unsatisfactory
- P = Progress (issued when grading is required for University purposes, progress is satisfactory, but the curricular component has not been completed.)

In addition, for internal College purposes (not to be recorded on an official transcript), a curricular component program may use the following distinctions:

- Honors = Outstanding performance
- Letter of Commendation = Performance clearly above average

Distinctions will appear on the Medical Student Performance Evaluation (MSPE) sent to residency programs in the student’s fourth year. (See Section 11: Graduation, “Applying for Residencies.”)

SIX YEAR RULE

Regular progress through the curricular components is required of all students. Each student must successfully complete the entire curriculum within six years of his or her starting date. Successful passage of USMLE Steps 1, 2CK & 2CS are graduation requirements and, as such, are considered part of the curriculum. Leaves of absence for any reason are included and count towards the maximum time of six years unless the leave is taken within the first 8 weeks of the first attempt at Med 1.

Students obtaining a dual degree (PhD, MPH, MHA, MBA, or JD) or those involved in approved academic pursuits such as research fellowships are granted a renewable waiver from the six year rule for completion of requirements for the MD degree based on successful progress in the alternative program. This waiver is contingent upon the joint degree enrollment being the primary purpose of the leave as determined by the Associate Dean for Student Life or his/her designee.
When it is clear at any point in the course of studies that a student cannot complete the entire curriculum within the specified six years, he or she will be subject to dismissal from the College of Medicine. Student review and dismissal procedures will be followed in accordance with the College of Medicine’s Academic Review policy detailed in the Medical Student Handbook. *(Approved ECC, 2-2-10)*

**ATTENDANCE**

Medical students are expected to attend all scheduled academic activities. An unapproved absence from clinical activities or examinations may result in failure of the course or one of the course components. **In the event of severe weather in which the University closes**, students should stay home and not report to classes, preceptorships, or clerkship assignments unless otherwise instructed by the program/clerkship director (see below). In the event of a disaster, natural or otherwise, any students **on campus** should assemble in the basement of Meiling Hall. If the basement of Meiling Hall is not available, details about meeting and instructions regarding classes, assignments and any responses to the disaster will be communicated by email and publicized on the College of Medicine Facebook page. **More specific policies regarding attendance and notification of program staff regarding illness and requests for excuse from activities are listed in the specific academic program handbook.**

**Attendance and Weather Emergencies**

Attendance policies are outlined in detail in the handbook for each academic program. A general policy for all programs is that classes and clinical rotations are cancelled when the OSU main campus is closed.

In addition, students often have questions about whether to attend classes and rotations when the OSU main campus remains open but a **snow emergency** is declared. The first guideline is that student safety is an important priority, and students must at all times use their best judgment about personal safety when travel conditions are compromised by poor weather.

**Snow Emergency Guidelines:**

**Level 1 Snow Emergency:** Students should plan to attend class/clinical rotations.

**Level 2 Snow Emergency:** Classes and clinical rotations will be held as scheduled. A student should use their best judgment about personal safety to get to class or their rotation and notify the appropriate course or rotation office if they are unable to get to class safely.

**Level 3 Snow Emergency:** All roadways are closed to non-emergency personnel. No one else should be out during these conditions unless it is absolutely necessary to travel. Students should not come to class or clinical rotations when a Level 3 Snow Emergency is declared since they are non-emergency personnel.
RELIGIOUS OBSERVATION POLICY

The OSU College of Medicine policy on religious observations holds that every reasonable effort should be made to help students avoid negative academic consequences when religious obligations conflict with academic course requirements. Any student who is unable due to his or her religious beliefs to attend classes or participate in any academic requirement such as assignments, quizzes, or examinations shall be provided with an opportunity to make up the assignment or examination or be given a reasonable alternative opportunity to complete their academic requirements without penalty unless it can be demonstrated that such an accommodation would fundamentally change the essential nature of the element of the curriculum, interfere with the delivery of the course, or create an unreasonable burden upon the program. Students who anticipate absences from scheduled, required educational activities must notify the course or clerkship director at least four weeks in advance of the anticipated absence to request accommodations.

Although the College of Medicine makes every effort to accommodate participation in religious holidays and other religious observations, medical students and trainees should recognize that the requirements of patient care and required clinical education are significantly different from standard classroom education. If a course or clerkship director or coordinator reports that accommodations for a religious observation cannot be made and that this would result in negative academic consequences for the student, the student should contact the Associate Dean for Student Life, the Associate Dean for Medical Education, or the Vice Dean for Health Sciences Education for further consideration.

COM academic faculty and staff are referred to the Interfaith Calendar Website as a resource of religious holidays: http://www.interfaithcalendar.org/
PART 1 – CLINICAL FOUNDATIONS

Part 1 – Leadership
Douglas Danforth PhD, Program Director
Beth Liston MD/PhD, Associate Program Director

Part 1 – Foundational Sciences
Casey Leitwein, Program Manager
Christin Thatcher, Program Coordinator, Year 1
Emily Rismiller, Program Coordinator, Year 2

Part One of the LSI Curriculum is entitled Clinical Foundations and covers the basic foundational sciences and clinical skills necessary for entrance into Part Two: Clinical Applications curriculum, including passage of USMLE Step 1. Part One of the curriculum is divided into nine blocks covering the major foundational sciences topics and their clinical correlates, while practicing and building on clinical and communication skills.

Longitudinal Group
Camilla Curren MD, Program Director
Patrick Ecklar MD, Assistant Director
Samantha Ellwood, Program Coordinator
Dawn Ryan, Program Assistant

Students will participate in weekly Longitudinal Group sessions one half-day per week. Groups will consist of approximately twelve students working with one or two facilitators across Part One. Topics for these sessions include interpersonal communication, physical examination, behavioral/social sciences, and clinical reasoning.
Longitudinal Practice
Kristen Rundell MD, Program Director
Patrick Ecklar MD, Assistant Director
Diana Bahner, Program Manager

Starting in early October, students will be placed at a clinical site and participate in Longitudinal Practice sessions one half-day every other week across Part One. To help prepare students for this experience, students will receive basic training in medical interviewing, physical exam, and basic procedures during the Foundations 1 block. This will allow students to function as productive members of the patient-care team. Longitudinal Practice permits students the opportunity to practice skills learned in Longitudinal Group in a real clinical setting and allows students to appreciate the clinical context of material they are learning in Part One.

Other Part One Curricular Components
Other curricular components of Part One of the LSI Curriculum include the educational portfolio, projects, and the career exploration weeks.

Part One – Evaluation and Assessment
Part One/block grades will appear on the Medical Student Performance Evaluation (MSPE) sent to residency programs in the student’s fourth year. Part One grades are assigned for 1) each block and 2) Part One as a whole. The Health Coach and Community Health Education projects are assigned separate grades.

Cumulative performance across all blocks will be used to determine the overall grade for Part One. Failure of any competency during a block disqualifies a student from receiving Honor or Letter of Commendation for that block only. Failing any competency twice or failing three competencies across all of Part One will disqualify a student from Honors and Letters of Commendation for the program.

Computer Accessed Patient Information Order Entry Training
The OSU Wexner Medical Center uses an electronic medical record. The inpatient portion of this system requires special training. Training on the use of the electronic medical record is mandatory for all medical students prior to the start of third

Other requirements for beginning Part 1 and Part 2 include meeting Human Resources requirements for the Medical Center. Students are required to be up to date on immunization requirements, complete all required CBLs, be certified for ACLS, complete a background check, get a new ID, undergo mask fit testing, and pass a toxicology screen before beginning Part Two ring rotations.
USMLE STEP 1

http://www.usmle.org

A physician must pass Steps 1, 2, and 3 of the USMLE to become licensed. Step 1, which focuses on foundational sciences, is taken at the end of LSI Part 1. Step 2 CS and CK, which represent an intern readiness assessment, are usually taken at the beginning of the Part 3. Step 3, which assesses the ability to practice independently, is taken following the first year of (residency) postgraduate training. In addition, the Ohio State Medical Board requires that all three steps be taken within a single ten-year period. Students should note that each state has its own requirements regarding timelines and number of attempts allowed for each USMLE Step examination (see http://www.fsmb.org/policy/public-resources/state_specific).

The College of Medicine intends to have all its graduates achieve licensure for the practice of medicine. Consequently, requirements for promotion and graduation include passing Step 1 before beginning clinical rings and passing Step 2 in order to certify for the match and graduate. Step 1 and Step 2 scores must be released to the College. Entry into Part 2 is also contingent upon successful completion of all other requirements of the Part 1 curriculum.

Application packets for the USMLE are available only from the USMLE website at http://www.usmle.org.

Student Requirements for Step 1
All current Part 1, Med 2 students must take USMLE Step 1 by April 30, 2016 following completion of their Part 1 Academic Program and prior to starting Part 2. Those who have taken Step 1 are eligible for conditional matriculation into Part 2 and may then continue in the required rings while a score is pending.

Exceptions and clarifications to the April 30, 2016 deadline:
• MSTP students follow an accelerated Part 1 Program, with a usual deadline in mid February of their second year to take Step 1. Specific yearly deadlines can be obtained from the MSTP Program office.
• “Late Start” into Part 2—A “late start” into Part 2 is defined as entering midway into the first ring (usually week 7 or 8, as determined by the Academic Program Director). Individuals who have been approved for a late start into Part 2 by the Associate Dean for Student Life or designee must take Step 1 no later than the Saturday before the middle of the first ring of Part 2 (June 18, 2016 for the current Med 2 class) following completion of Part 1.
• Leave of Absence—Students finishing Part 1 and then participating in joint degree programs (MPH, MHA, MBA, PhD, and JD) or taking a leave of absence for other reasons must take Step 1 no later than July 20, 2016.

All students must post a passing score on USMLE Step 1 within one year of completion of the last block of the LSI Part 1 Academic Program.

Delay beyond the applicable deadline above will result in notation of an adverse event in the Medical Student Performance Evaluation and referral to the Part 1 Student Review Subcommittee with the potential for further institutional actions. Failure to post a passing score may result in removal from the curriculum and a recommendation for dismissal from the college of medicine for failure to progress toward graduation and licensure requirements.
**Students with a Failing Score**

A student who receives a failing score prior to the start of Part 2 will not be permitted to start the clerkship unless they retake the examination prior to the start of the first ring. A student who receives a failing score after starting Part 2 will be removed from the rotation within 24 hours of the College’s receipt of the score, referred to the Part 1 Student Review Committee, and no credit will be granted for time spent on that ring. Immediate removal is warranted and supported by the faculty because the student has not demonstrated a knowledge level appropriate to continue in the curriculum. Students may appeal to the USMLE Review Committee to continue through two months of the ring and receive credit. If this appeal is granted, students will typically re-enter at the start of the second ring and make-up the remaining two months within the first four months of Part 3. In this instance, Step 1 must be taken for the second time prior to the start date of the second ring.

**Students who do not retake the exam before the start of the second ring will find it difficult to graduate with their class.** The student may choose to take a longer period to prepare for a second administration of Step 1. Failure to retake Step 1 by the start of the second ring will result in the student’s placement on LOA until the next start of Part 2. The student record will be marked “LOA for academic purposes,” the discontinuity will be noted in the Medical Student Performance Evaluation, and the student will be referred to the USMLE Review Committee.

**Students who receive a second failing score:** Second failing scores are handled by the USMLE Review Committee, and usually result in placement on LOA for academic purposes with documentation of this in the student’s Medical Student Performance Evaluation.

All students must receive a passing score on Step 1 within one year of the completion of the last block of the Part 1 curriculum.

**Students with an Approved Late Start**

For students with an approved late start into Part 2, Step 1 must be taken on or before the Saturday before the middle week of the first ring (for this year, June 18, 2016) without exception. The student will be permitted to start ring 1 in the middle (usually week 7 or 8, as determined by the Academic Program Director).

A student with an approved late start who fails to take the exam on or before the mid-ring start date (July 13, 2015, for this year) or who receives a failing score on the first administration of Step 1 will be removed from the ring, referred to the Part 1 Student Review Subcommittee, placed on “LOA for academic purposes,” and the discontinuity will be noted in the Medical Student Performance Evaluation. The student will not be permitted to return to Part 2 until the next year. A student on LOA is not eligible for financial aid and may only receive one off-semester of student health insurance.

**Step 1 Examination Attempt Limit**

Students in the current (2015-2016) med 2 class will have the opportunity for three attempts at Step 1 but must post a passing score within one year of completing Part 1, regardless of the number of examination attempts. Failure to take the first exam attempt by July 20, 2016, will result in a referral to the Part 1 Student Review Subcommittee and placement on academic LOA.
LATE START INTO PART TWO

No unapproved late starts will be permitted. As noted above, any student without prior approval for a late start or who starts late and fails Step 1 on or before the mid-ring start date (June 20, 2016, for this year) will be placed on LOA for academic purposes and will be required to wait to start Part 2 until the following year. The student will be referred to the Part 1 Student Review Committee. The student record will indicate “LOA for academic purposes.” A student on LOA is not eligible for financial aid and may only receive one off-semester of student health insurance. The discontinuity in attendance will be noted in the Medical Student Performance Evaluation.

Approval for a late start may only be obtained from the Associate Dean for Student Life or designee (155 Meiling Hall). Request for a late start must be made in writing and accompanied by appropriate documentation of the need for a late start. Approval of a late start may require discussion of the student’s academic performance with the Part 1 Academic Program Director.

LSI PARTS TWO and THREE

Part 2 – Leadership
Kimberly Tartaglia MD, Program Director
Benedict Nwomeh MD, Associate Program Director
Rita Arnold, Program Coordinator

Part 3 – Leadership
Nicholas Kman MD, Program Director
Daniel Cohen, MD, Associate Program Director
Laura Volk, Program Manager

Curricular Requirements
All students are required to complete 48 weeks of clinical rotation in the three rings in the Part 2 curriculum and 8 months of rotations in the Part 3 curriculum. The Part 2 Academic Program Handbook is available from the Office of Medical Education (B053 Graves), and specific components will be provided by the individual rings/clerkships.

LCME guidelines mandate that all required clinical clerkships must be completed under the supervision of the faculty of the College of Medicine. Therefore, students must complete required rotations at The Ohio State University Hospitals and its affiliates.

The Academic Advancement Committee is charged with the responsibility of certifying that a student not only has completed the technical requirements for Part 2 and 3 (e.g., the individual required rings, rotations, and electives) but also is qualified to continue studies in an internship or residency. Factors to be evaluated include: student’s professionalism, attitude toward patient care, motivation, attendance, clinical problem-solving ability, adequacy of clinical medicine knowledge base, evidence of increasing clinical competence over time, and general suitability to be a physician.

Successful completion of Parts 2 and 3 will be judged by a student’s overall performance in the curriculum. Specifically, successful completion of the individual clerkships may not constitute passing of the overall Part 2 or 3 programs. For example, several borderline satisfactory grades in individual clerkships may be judged, on an overall basis, to be an unsatisfactory performance in Part 2 or Part 3.
Away Electives
Medical students in Part 3 are allowed to take three elective rotations “away” from the Ohio State University Hospitals and its affiliates, assuming no remediation requirements. Students who are on “brown” academic status are only permitted to do an away rotation with the express, written permission of the Academic Program Director. Away electives must be initiated by the student requesting this privilege and required information gathered by the student. No away elective may be taken for credit in the month of April due to the inability to receive evaluations in time to provide credit for graduation in May. The one-month-long electives are permitted only after:

- The student and Part 3 office have received notice that the student has been accepted into the program.
- It is verified that evaluations for this rotation will be prepared by either an MD or PhD (required if the student is to receive credit for this month).
- The OSU Department that most closely aligns to the away elective has given approval and a signed Medical Away Elective Request form has been returned to the Part 3 office at least 30 days in advance of the elective.
- Goals, objectives, major responsibilities, and learning activities have been stated in written form and returned to the Part 3 office.
- Complete contact information is on record for the elective (where, when, who).
- The student has obtained any information required by the participating site (e.g., documentation of health and liability insurance, current immunization status, current background check, a letter of good standing from the office of the Associate Dean for Student Life).

Global Health Electives
The Office of Global Health Education offers a “Global Health Elective” to fourth-year medical students. The course is individually tailored for each student, and students receive funding and credit for the elective. As with the away electives above, students who are on “brown” academic status may only participate in the Global Health Elective with the express, written consent of the Academic Program Director.

For a complete list of criteria and requirements, as well as an application, please visit: http://medicine.osu.edu/orgs/globalhealth/Pages/index.aspx. The program coordinator is Lynnsay Sinclair, who can be reached at (614)247-8968.
LIABILITY COVERAGE

Students in the College of Medicine are covered by the University Hospitals self-insurance program in amounts of at least $1 million per occurrence and $3 million annual aggregate for acts or omissions performed in the scope of their assigned academic course work at OSU Hospitals and Clinics and all OSU owned or operated facilities. Acts or omissions that are intentional or are so careless to be wanton or reckless are not covered.

Medical students are covered while participating in any required or elective course work at OSU hospitals, affiliates, or institutions within the state of Ohio approved by the Associate Dean for Medical Education. They are covered for electives approved by the Associate Dean for Medical Education and outside the state of Ohio through a separate malpractice policy. Proof of coverage is obtained through the Offices of Medical Education and Student Life (Meiling 155). Students are not covered for electives outside of the United States. Check with the Office of Global Health Education at 247-8968 for more information.

In no case will Ohio State provide coverage for nonacademic activities. This includes non-approved volunteer services to non-OSU owned or sponsored groups. No coverage is provided where medical students are performing work for hire, that is, receiving compensation as salary or other benefits.

Non-OSU medical students, including visiting or foreign medical students, are not covered on the same terms as College students for service at OSU Hospitals and Clinics. Note: Approval by the College and clinical department as well as reporting to the Medical Director of OSU Hospitals must be completed first. All visiting students must provide proof of insurance coverage comparable to OSU coverage prior to beginning any clinical activity.

USMLE STEP 2

Student Requirements for USMLE STEP 2

CLINICAL KNOWLEDGE (CK) AND CLINICAL SKILLS (CS)

http://www.usmle.org

Most residency programs require passing scores on USMLE Step 2 CK and Step 2 CS prior to student ranking in the National Residency Match Program (February). In addition, since OSUCOM requires passing scores to be eligible to graduate from the College of Medicine with an MD degree, a passing score must be posted in order to certify a student to participate in the National Residency Match Program (February) and to certify a student for graduation (March). The deadline requirements are based on the anticipated graduation and residency program match dates.

All students must take USMLE Step 2 CK by November 30, 2015/2016 after completion of Part 2 clerkships.

All students must take USMLE Step 2 CS by September 6, 2015 (September 10, 2016) after completion of Part 2 clerkships.
Students must seek written permission from the Associate Dean for Student Life or designee prior to the deadlines posted, if they wish to be granted an exception to the deadlines due to special circumstances, such as a delay in completion of Part 2 clerkships or early match.

All students must post a passing score on USMLE Step 2 CK and USMLE Step 2 CS by the date of NRMP certification (mid to late February).

Students who fail to take the exams by the deadlines or who fail to post a passing score will be referred to the USMLE Review Committee. Students with a failing Step 2 score (CS and/or CK) AND who have not retaken the exam(s) by December 31, 2015/2016, will be removed from the following residency match. Students who have not posted a passing score on Step 2 CS and Step 2 CK by certification date will be removed from the residency match. If a passing score is not posted by April 1, the student will not be certified for the spring semester graduation roster.

The National Board of Medical Examiners only allows three attempts on any Step exam in any twelve-month period. The College has set a limit on the number of attempts to a maximum of three.

ACADEMIC SUPPORT SERVICES

As a future physician, it is the medical student’s responsibility to develop skills in lifelong learning and ultimately to be responsible for meeting the academic standards of The Ohio State University College of Medicine. The volume of material presented in medical school can sometimes seem overwhelming. Students who have never before had difficulty in organizing work, completing assignments, or understanding the material may find they need help. Students should know about the wide variety of academic support services available to help academic performance.

Academic Assistance Programs

All academic programs provide academic assistance to students experiencing difficulties. The type of assistance varies depending on the content, student needs, and resources available.

For a study skills assessment which can include skills coaching, time management, and tips for note-taking and test-taking, contact:

Kelly-Ann Perry, MEd
Academic Counselor, The OSU College of Medicine
138B Meiling Hall
Phone: (614) 293-9158
Email: kelly-ann.perry@osumc.edu

Or students may also contact:

Samuel Rowe, Head Academic Coach
250D Younkin Success Center
1640 Neil Avenue
(614) 688-4011
Email: rowe.220@osu.edu
For tutoring assistance that is subject related, contact the Academic Counselor or Dr. Joanne Lynn, Associate Dean for Student Life in 155 Meiling Hall (292-5126). Once contacted, the student will be assigned to a specific faculty member on the Tutor Team for help.

For assistance in exploring unidentified learning issues or personal issues affecting studying, learning and exam performance, the onsite mental health counselor is available at:

Lora Eberhard, MS, PCC, LCDCIII
Personal Counselor, The OSU College of Medicine
138A Meiling Hall
Phone: (614) 292-3340
Email: lora.eberhard@osumc.edu

If a student has been identified or self-identified for a learning issue and wants to proceed with diagnostic psychometric testing, their own physician can make a referral to their choice of provider.

If a student has a learning or other disability, it is recommended that he/she set up a meeting with a counselor at:

The OSU Office of Disability Services
150 Pomerene Hall
1760 Neil Ave.
Phone: 614-292-3307
Hours: 7:30 a.m.–8:30 p.m. (M–Th); 7:30 a.m.–5:00 p.m. (Friday)

**Board Preparation**
A number of resources are available to assist students with preparation for the USMLE board examinations. Study plans, materials, and practice questions and examinations are available on Carmen. Students run a series of board review sessions each year. Faculty tutors are available to assist with individual study plans and material review as well as facilitation of study groups and may be accessed through the Associate Dean for Student Life. It is highly recommended that students work with simulated patients in the Clinical Skills Center to prepare for the step 2 CS examination. In addition, multiple commercial sources of assistance with board examination preparation are available outside the College of Medicine.
CLINICAL SKILLS EDUCATION & ASSESSMENT CENTER
http://medicine.osu.edu/orgs/clinicalsks/Pages/index.aspx

The College of Medicine’s Clinical Skills Education and Assessment Center (CSEAC) is an innovative training facility that uses state-of-the-art technology, low- to high-fidelity simulators, as well as highly trained “standardized patients” to mimic actual patient care experiences. The CSEAC plays an essential role in the implementation of innovative curricula for medical students and residents. A major objective has been to ensure that all our graduates have been exposed to an extensive range of skills and procedures, from basic to complex.

The CSEAC simulates actual patient care, both ambulatory and in-patient, and gives medical trainees hands-on clinical skills experience in a safe, controlled environment. With the healthcare setting’s limited hospital stays, diversity of physician faculty, and multiple training sites, the CSEAC provides a means of assuring consistency in education. Students and residents hone their interpersonal skills by conducting histories and physical exams on standardized patients (individuals trained to simulate specific case scenarios) and enhance their technical skills by practicing on task trainers and human-patient stimulators.

Medical students are encouraged to initiate individual or group procedure practices to gain exposure to a variety of procedures as well as explore different specialties. Student interest groups often hold hands-on workshops throughout the first two years of medical school.

To contact the Clinical Skills Center, please call (614) 688-7988.

CONSCIENTIOUS OBJECTION POLICY
(Adapted from University of Manitoba)

The College of Medicine recognizes that, for reasons of commonly held ethical and religious beliefs, some students may wish not to involve themselves with certain medical procedures or services. Out of respect for such beliefs, the College of Medicine will respect conscientious objection by students if all of the following criteria are met:

1. A conscientious objection does not relieve a medical student from a duty to meet the current standard of timely and acceptable medical care, to engage in full and nonselective disclosure for Informed Consent, to inform patients of their conditions, and referral prognoses, and risks of receiving care services for their illness, condition or health-related request.

2. Patients cannot be abandoned. Any student who wishes to excuse him or herself must find another qualified individual to provide service to patients.

3. A medical student cannot object to provide a service if the patient’s condition, in the judgment of an attending physician, requires immediate action and that student’s assistance is required to provide that service. This is particularly important if the patient’s life is in jeopardy.
4. A medical student may not be allowed to object to medical service during a public health emergency.

5. A medical student shall not object to participate in the care of a specified classification or group of people, or on the basis of particular diseases or states of health or illness.

6. A medical student shall not object to provide or participate in a healthcare service if this objection amounts to discrimination.

7. A conscientious objection must not be so broad as to limit a student’s general medical education. If a conscientious objection constrains a student’s ability to provide the current standard of medical care, the College of Medicine may refer a student for dismissal from medical school.

8. An objection to participate in any service or delivery of care does not exempt the student from the responsibility to learn about its indications, contraindications, benefits, and risks. A student will not be exempted to demonstrate this knowledge on any examination.

9. All curricular or clinical time missed through an excused exemption must be made up otherwise.

10. When a conscientious objection might compromise completion of the curriculum, this matter will be discussed by the appropriate academic student review committee, and if necessary, by the ABRC. Students can represent themselves at these meetings in accordance with College of Medicine policies.

11. If, in the course of a conscientious objection, a student engages in behavior which the College of Medicine considers unacceptable for a physician, the College may require that student to withdraw from medical school on the basis of improper professionalism.

12. A student wishing to make a Conscientious Objection Declaration should complete the Conscientious Objection request and declaration form (available in 155 Meiling Hall) and submit to the Associate Dean for Medical Education or the Associate Dean for Student Life. Any appeals to the decision of the associate dean will be heard through the Honor and Professionalism Council Review Board.