June 30, 2011

Dear Students:

Welcome to the Quillen College of Medicine.

This student handbook contains those guidelines, policies, and procedures that most directly impact our students. It is intended to supplement and to help you consolidate the information and advice you will receive from our faculty and staff. Please familiarize yourself with the contents.

Congratulations on admission to medical school. We welcome you to our family and look forward to your continued success.

Sincerely,
Kenneth E. Olive, MD, FACP
Executive Associate Dean for Academic and Faculty Affairs
# Table of Contents

1 Policies and Procedures .......................................................... 5
   Disclaimer ............................................................................. 5

Registration and Related Matters ................................................... 5
   Registration ........................................................................... 5
   Residency Status .................................................................... 5
   Tuition and Fee Collection ....................................................... 5
   Satisfactory Academic Progress .............................................. 6
   Encumbrances ....................................................................... 6
   Medical Instruments/Supplies .................................................. 6
   Computer Specifications ......................................................... 6

Academic/Career Services and Resources ......................................... 7
   Office of Academic Affairs ....................................................... 7
   Student Advisory System ......................................................... 7
   Professional and Academic Resource Center ............................ 7
   Committee Supporting Student Health .................................... 8

Student Affairs .......................................................................... 10
   Financial Services .................................................................. 10
   Student Support Services ....................................................... 11

Student Records ........................................................................... 11
   Dissemination of Information ................................................... 12
   Information Disclosure Requirements ..................................... 12
   Privacy of Students’ Records ................................................. 12
   Advanced Placement Policy .................................................... 13

Department of Learning Resources ................................................. 13
   Medical Library ...................................................................... 13
   Biomedical Communications ................................................ 13

Non-Academic Resources and Facilities ......................................... 14
   University Bookstore ............................................................ 14
   Parking .................................................................................. 14

Student Health Requirements ........................................................ 15

Student Drug Screen Policy ........................................................... 15

Insurance Requirements ................................................................ 16

Health Care ............................................................................. 16

Health Risk of Exposure to Bloodborne Pathogens ............................ 16

Personal Appearance .................................................................. 17
   Identification (ID) Badges ....................................................... 17
   Dress Code ............................................................................ 17

United States Medical Licensing Examinations .............................. 17

Medical Student Duty Hours ......................................................... 19

Clinical Proficiency Competency for Promotion to the Senior Year .... 19

Commencement Objectives ........................................................... 20

Required Clinical Skills ................................................................ 21

Residency Application Process .................................................... 22

Class Attendance Policy ............................................................. 23

Student Conduct ....................................................................... 24

Student Honor System ................................................................ 25
Policies and Procedures

Disclaimer
The policies contained herein are provided to give a general understanding of the regulations governing East Tennessee State University and the Quillen College of Medicine. They are subject to revision at any time with little or no advance notification. The Quillen College of Medicine assumes no responsibility for errors in or misinterpretation of these policies. For more information on the official policies of ETSU and the Quillen College of Medicine contact the Office of Academic Affairs. Additional information concerning policies of ETSU may be found in the current College of Medicine Catalog or the ETSU Spectrum handbook, which is published in the ETSU telephone directory.

Registration and Related Matters

Registration
Course registration is handled by the Registrar’s Office for the first two years (basic science courses) and by the Office of Academic Affairs for the second two years (clinical courses). The first registration will be accomplished as part of the orientation process.

Schedule changes and adjustments must be made with the approval of the Executive Associate Dean for Academic and Faculty Affairs. The registrar will be notified of the altered schedule by memorandum from the Office of Academic Affairs.

Residency Status
The residency status (in-state or out-of-state) is initially determined for all students upon receipt of their application through AMCAS. This determination is made in compliance with Regulations for Classifying Students In-state and Out-of-state for the Purpose of Paying College or University Fees and Tuition, as well as for Admission Purposes as amended and prepared by the Board of Regents of the State University and Community College System of Tennessee. (A copy of these regulations is available on the Web or in the Office of Student Affairs upon request). As stipulated by these regulations, applicants or students have the burden of proving that they have established domicile in the state of Tennessee. Such persons are entitled to provide all evidence pertaining to this matter to the institution. The institution will consider evidence submitted to it concerning such claim of domicile, but will not treat any particular type or item of such evidence as conclusive that domicile has or has not been established.

The Assistant Dean for Admissions and Records of the Quillen College of Medicine shall be responsible for initially classifying students “in-state” or “out-of-state.” Students who believe their residency situation has changed should contact the Assistant Dean for Admissions and Records concerning the process of appeal. The assistant dean will make every effort on behalf of the student to see that the appeal is handled through university channels as expeditiously as possible. Regulations are subject to change by the Tennessee Board of Regents.

Tuition and Fee Collection
The Tennessee Board of Regents requires that all students pay fees before attending any class, clerkship or curricular session. All students enrolled at the Quillen College of Medicine are required to pay tuition and fees at the beginning of each academic period. First- and second-year students will pay a semester’s tuition during an announced period preceding each semester (generally August and January). Because an extra period of preparation is included for the third year, the fees for this year are higher than the rest. All junior and senior students pay tuition at the beginning of Period 1 and Period 4 of each academic year.

Fee payment is accomplished through the university Comptroller’s Office (2nd Floor, Dossett Hall) during a specified time at the beginning of each enrollment period. Payment may be completed online, by mail, or in person. Fees are due and payable during regular business hours of the first three days of classes.
during each enrollment period. Any student who does not clear obligations during this time will be assessed a late fee as mandated by university policy. A specific date is established for each enrollment period after which the university will not accept fees and, if proper arrangements have not been made by that date, the student will be removed from enrollment. All students are required to complete fee payment during each enrollment period. Before fee payment will be allowed, all encumbrances must be cleared.

**Satisfactory Academic Progress**
Federal law and regulations governing the Title IV student financial assistance programs require students to maintain satisfactory academic progress in order to receive assistance.

The Satisfactory Academic Progress policy for the Quillen College of Medicine is published in the College of Medicine Catalog which is available on the Web and is also available upon request by the student or interested party from the Associate Dean of Student Affairs.

**Encumbrances**
Encumbrances are sent from the Registrar's Office when financial obligations (such as a parking ticket or library fines) are overdue or some other obligation is not met (e.g. complying with health and insurance requirements). University regulations state, “No student may re-enroll, graduate or receive a transcript until all accounts are settled.” The term account includes any indebtedness to the university. An encumbrance notice will be prepared and forwarded to each student who has a debt. The notice will indicate the office(s) to which the student is encumbered. The student should take the notice to the appropriate office(s), and clear the encumbrance.

**Medical Instruments/Supplies**
Medical students are required to purchase diagnostic equipment during the first semester of their first year.

**Computer Specifications**
All entering medical students are required to have a portable computer (laptop/tablet) appropriately configured to be compatible with ETSU and the Quillen College of Medicine facilities. Information on acceptable hardware and software specifications is available below. Entering students wishing to purchase a computer on enrollment may have these costs considered as part of their required educational expense and therefore may be considered for financial aid purposes.

Note: If you currently own a computer, it should meet the specifications listed below. If it does not, you must either purchase upgrades for it (installation of which are your responsibility) or purchase a new computer. If you do not currently own a computer, please purchase one that meets the recommended specifications listed below. You may, of course, exceed these recommended specifications.

<table>
<thead>
<tr>
<th>Minimum Recommended specifications</th>
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<tbody>
<tr>
<td>Processor</td>
<td>Intel 1.6 GHZ or higher, AMD 2600+(1.6GHZ) or higher</td>
</tr>
<tr>
<td>Memory</td>
<td>1024 MB or higher</td>
</tr>
<tr>
<td>Hard drive</td>
<td>40 GB or higher</td>
</tr>
<tr>
<td>CD-ROM or DVD drive</td>
<td>DVD &amp; CD-RW (combo unit or DVD burner only)</td>
</tr>
<tr>
<td>Wireless Network Card</td>
<td>802.11 G</td>
</tr>
<tr>
<td>Video Card</td>
<td>Integrated Graphics that can support 32 bit color and a resolution of 1024 x 768 or higher</td>
</tr>
<tr>
<td>Multimedia</td>
<td>Sound card</td>
</tr>
<tr>
<td>Network Connection</td>
<td>10/100 Base Ethernet</td>
</tr>
<tr>
<td>Printer</td>
<td>Ink-jet or Laser (Optional and for home use.)</td>
</tr>
<tr>
<td>Monitor</td>
<td>15” Color SVGA CRT (Optional and for home use.)</td>
</tr>
<tr>
<td>Operating System</td>
<td>Windows XP SP2 or higher</td>
</tr>
</tbody>
</table>
Configuration of these computers and their included hardware and software, as well as ongoing maintenance, is the responsibility of the student. The Quillen College of Medicine will provide instructions and limited assistance for configuring the computer for use on the campus network; however, any difficulties due to hardware defects are the responsibility of the student. The Quillen College of Medicine may at times require certain software programs to be installed on the computer. If the student is required to purchase the software on his or her own, it is the responsibility of the student to install the software (limited assistance from the College of Medicine may be available). If the software will be provided by the Quillen College of Medicine, full installation and assistance will be provided by the College.

**Academic/Career Services and Resources**

**Office of Academic Affairs**

Responsibilities for the Office of Academic Affairs (AA) are many and varied. This office is responsible for the oversight and coordination of the curriculum. The academic calendar and schedules are determined by Academic Affairs along with schedules for clinical rotations for third and fourth years. Interdisciplinary courses are often developed through the efforts of this office. Academic Affairs is responsible for course and faculty evaluations as well as faculty development. One of the most pleasant responsibilities for Academic Affairs is the annual Honors Convocation, the internal College of Medicine component of graduation.

Personnel work very hard to help students maximize their learning experiences in the Quillen College of Medicine. This may result from counseling, assistance with educational interventions, analysis of test-taking abilities, and outside consultations when needed.

**Student Advisory System**

Recognizing that advisement needs vary a great deal among students, the Quillen College of Medicine Student Advisory System is designed to meet the needs of individual students. Most students have found that having a specific advisor assigned at the beginning of medical school is not useful. In years one and two, students who require assistance generally have issues related to adjusting to the academic rigors of medical school. Advisement related to academic performance difficulties in years one and two will occur through referral to course directors. It is our experience that direct involvement with course directors/faculty produces better outcomes for students than working through an assigned advisor. Students having academic difficulty in more than one course will be assigned an individual academic advisor through either Student Affairs or Academic Affairs. Tutorial services for students having academic difficulty are available through the Office of Student Affairs. Advisement related to possible learning disorders will start with Dr. Penny Smith in the Office of Academic Affairs. Dr. Smith does not play a role in making promotion or evaluation decisions.

**Professional and Academic Resource Center**

Advisement related to personal or emotional difficulties is available on a confidential basis through Phil Steffey LCSW through the Professional and Academic Resource Center (PARC) house-(423) 232-0275 or 24 Hour pager 854-0342. The Professional and Academic Resource Center (PARC) is the responsibility of Academic Affairs. PARC was developed by personnel from Academic Affairs and the Department of Psychiatry to provide an opportunity for students and their families to receive counseling at no cost. Student privacy is respected by PARC counselors who are under no obligation to report that students or their families are making use of PARC services. Student comments about the counselors involved in the PARC initiative have been very positive regarding both the support given and respect for student privacy. Mr. Steffey does not play a role in making promotion or evaluation decisions. For additional information: http://www.etsu.edu/com/studentsvcs/parc.aspx
All students will receive career guidance throughout their four years in medical school through the Career Exploration Program. Students desiring an advisor for more specific discussion of career/specialty interests in years one and two may contact either the Associate Dean for Student Affairs or Academic Affairs and an advisor will be assigned. Third year medical students will be required to choose a clinical faculty member as an advisor for both career advisement and fourth year course scheduling advisement.

Both the Associate Dean for Student Affairs and Executive Associate Dean for Academic and Faculty Affairs have “open door policies” and are available to meet with students at any time for individual advisement related to any issue. Additionally, the Associate Deans meet regularly with each class to discuss issues that are more directly related to the group.

Committee Supporting Student Health

Introduction and Purpose
Emphasizing holistic care of self; mind, body and spirit, is an important aspect for students at Quillen College of Medicine. The purpose of the Committee Supporting Student Health (CSSH) is to provide education to medical students on how to manage stress and to cope with the demands of medical school in non self-destructive ways. The hope is to identify students that are crisis and intervene in such a way to resolve that crisis. We believe that by forming good habits now and reinforcing those positive habits is the key to preparing students for a successful career in medicine. The ultimate goal for this committee is to reduce the number of impaired physicians through education, positive peer pressure and providing access to any necessary resources. Any and all communication or dealings with the committee will be such that confidentiality will be maintained to the strictest level; fully protecting the rights of students and make every effort to assist that student so that they may continue their medical education.

Administration of CSSH
The administration of CSSH shall be vested in the committee. The committee shall be comprised of two student representatives from each of the four medical school classes, the Associate Dean for Student Affairs and a faculty representative (appointed by the Dean of the College of Medicine).

Election of Class Representatives
Each entering class shall elect two of its members at the beginning of the fall semester, in September, after class elections have been held. This is to allow the class to have a chance to better get to know one another prior to nominating committee representatives. All class representatives shall serve on the committee throughout their four years in medical school, unless they resign or are removed from the committee. Representatives may be removed from the committee by majority vote of their medical school class or by the committee. Any vacancies on the council shall be filled as soon as possible.

Committee Officers and Members
The CSSH will hold an election each year for committee Chair. This person will be a student member of the committee. The duties of the Chair include; setting meeting dates, conduct meetings, help coordinate student education and any other duties necessary to carry out the purpose of CSSH. The election of a Chair will be conducted in September after the freshman class representatives are elected to the committee.

The committee will also elect from among its members on person to act as Vice-Chair. The Vice-Chair will fulfill the duties of the chair in those instances when the Chair is unavailable. The term of office for the Vice-Chair is one year.

The duties of the committee include;
1. Providing education to students on care of self, substance abuse and any other areas that are identified and are applicable to assisting students in maximizing their health.
2. Supplying information to medical students regarding substance abuse and available treatment programs.
3. Assisting students to gain access to counseling and providing information on the PARC program.
4. Reviewing cases wherein student impairment is suspected.
5. Participating in interventions wherein sufficient evidence of impairment to warrant such action exists.
6. Monitoring the recovering student in order to insure compliance with contractual agreement between the student and the College of Medicine. The contract should be designed to promote student participation in all required activities as to ensure successful recovery throughout the tenure at this institution.
7. Acting as liaison with the Tennessee Medical Foundation and the College of Medicine faculty to facilitate the return of students from treatment in order to optimize successful recovery.
8. Serving as an advocate for the recovering student wherein necessary.
9. Act as a class contact person for emergencies, such as a death in the family, will inform professors on behalf of student.

Meetings of the Committee
The committee will meet at least every three months. The first meeting will be after selection of freshman class representatives. Additional meetings will be at the call of the chair or Associate Dean for Student Affairs as deemed necessary.

Procedures
-Introduction to CSSH to be done for the incoming class in the first month of class by student committee members
- Lunch and Learns conducted monthly
- Procedure for impaired medical students:

When a student is identified as potentially suffering from impairment, this information should be forwarded to the committee and the Associate Dean for Student Affairs. Information will be collected and reviewed by both of these parties. If the evidence appears to warrant intervention, a recommendation is made from the committee to the Dean of the College of Medicine. If the dean does not agree with the findings of the committee, all materials are turned over to the Associate Dean for Student Affairs and the issue is dropped. If the Dean concurs with the recommendation of the committee, the committee according to the following guidelines organizes an intervention. Intervention teams consist primarily of committee members but may also include other individuals (e.g., family, classmates, concerned faculty and significant others). In addition, the team will include at least one of the committee advisors who will act as mediator. All members of the intervention team must be in total agreement with the need for professional evaluation and must agree to work in cooperation with the committee and its advisor to maximize success. The team will meet as needed to review the facts of the case, to establish the role each member of the team will play in the intervention and to prepare all members of the team to play their role effectively. All arrangements (e.g., scheduling a bed in a treatment facility, airline tickets, etc.) should be completed before the intervention takes place. Successful intervention will be one in which the student agrees to professional evaluation and/or assistance.

If the student declines to follow the recommendation of the intervention team, the student’s decision will be reported to the Dean by the committee with the recommendation that the student’s fitness for medical studies and potential success in the medical profession is seriously compromised and that the dean should consider terminating that student’s enrollment at this institution until compliance with the recommendation of the committee is achieved. If the recommendation of the committee is that the student be professionally evaluated, then both the committee and the student must abide by the findings of the evaluation team. The committee reserves the right to determine where the evaluation is to take place. If in the judgment of the evaluating professional it is determined that impairment does not exist, then all information regarding the case is submitted to the Associate Dean for Student Affairs and the case is dropped. If the evaluation team determines that treatment for impairments warranted, the student must comply with the recommendation. Failure to do so will actuate the committee to consider the student not acting in good faith and to recommend that the Dean terminate enrollment until the student demonstrates compliance.
If a student enters and successfully completes treatment, the committee will facilitate return to school through advocacy with appropriate faculty and administrators. Compliance to aftercare programs and contractual agreements with either the school or the treatment facilities will be monitored. Any relapse will be immediately reported to the committee, Dean and Tennessee Medical Foundation representatives. Recommendations from appropriate professionals will be solicited and acted upon in that event.

Should any impaired student voluntarily contact a committee member regarding treatment for alcohol or substance abuse, that committee member is to contact the Associate Dean for Student Affairs, who will arrange for the student’s participation in the Tennessee Medical Foundation (TMF) Physicians Health Program.

**Treatment Program**

The TMF Physicians Health Program in cooperation with the Office of Student Affairs will coordinate treatment programs for impaired medical students.

**Confidentiality**

This committee must make every reasonable effort to protect the identity of the impaired student, any student suspected of being impaired and any persons who have reported an impaired student. Maintaining confidentiality is of the utmost importance since the success of CSSH depends on student trust and confidence; a breach of confidentiality would compromise the program and render it ineffective and powerless.

**Student Affairs**

The Office of Student Affairs for the Quillen College of Medicine is a multifaceted, service-oriented organization. Departmental activities involving financial services and student support services which include student interest groups, outreach programs, and student life issues coordinated through various sections housed within this office.

**Financial Services**

Financial Services awards state, federal and university educational funds. It is also the point of contact for students interested in alternative sources for funding their medical education. Debt management counseling is offered on an ongoing basis through this office.

The annual student educational budget represents the reasonable costs for a student to attend medical school. The expectation is that the student will keep costs within this budget. The total educational budget for a first-year, Tennessee resident during the 2009-10 academic year was $44,463. Any extenuating circumstances that make it difficult for a student to live within this budget should be discussed with the Director of Financial Services. Extenuating circumstances will be considered on an individual basis and must be submitted in writing with supporting documentation to the Director of Financial Services.

As costs of a medical education rise sharply, it becomes imperative for applicants to explore every option to support their educational expenses. Applicants and returning students should investigate the possibility of obtaining financial help through private, religious, civic and fraternal organizations in addition to state or federal agencies. Students seeking information about financial assistance may write to East Tennessee State University, Quillen College of Medicine, Office of Financial Services, Box 70580, Johnson City, Tennessee 37614-1708; or may telephone during normal business hours at (423) 439-2035; or view information on our website at [http://www.etsu.edu/com/sa/finaid/](http://www.etsu.edu/com/sa/finaid/).

Regulations established by Higher Education Act of 1965, as amended, require the dissemination of certain information about financial aid to any student or prospective student who might request such information. In compliance with federal policy, the following information may be obtained from the Office of Financial Services:
1. Description of financial aid programs available to students
2. Statement of rights and responsibilities of students receiving aid
3. Cost of attending the institution (direct and indirect costs)
4. Refund policy. (Source: General Catalog)

To be considered for financial assistance, applicants and currently enrolled students must complete the Free Application for Federal Student Aid (FAFSA) annually and list the ETSU Quillen College of Medicine’s Federal School Code (E00171) on the application.

To be considered for institutional scholarships, applicants and currently enrolled students must complete the COM Institutional Scholarship Application (ISA) annually by visiting our website at http://www.etsu.edu/com/sa/finaid/. Click on Apply for Financial Aid; then, click on Step 3 and follow directions to submit the ISA electronically.

Submission of the FAFSA should be completed as soon as possible after your tax return is completed each year. The ISA should be completed by May 1 of each year. First-year students accepted after June 15 should contact the Office of Financial Services as soon as possible about applying for assistance. No action will be taken on applications for loans and/or scholarships until a student’s file is complete.

Student Support Services
Student Support Services provides various programs and services to support and facilitate the successful and timely completion of each student’s curriculum. These services include an orientation program for entering students, tutorial/peer counseling, dissemination of information pertaining to USMLE preparation courses, general advising, and maintenance of housing information. The office also coordinates the student health and accident insurance program, and provides support for student organizations. The Office of Student Support Services also serves as a point of contact for students in need of personal or professional counseling, and facilitates the referral of these students to appropriately trained individuals internal or external to the university community, including referrals to the Committee Supporting Student Health program that assists students who have been identified as suffering from a treatable dysfunction such as chemical dependency. Finally, the office is responsible, for the Careers in Medicine Program, which is a career planning program designed to help students choose a medical specialty, and select and apply to a residency program. This four-phase process will guide the components of Careers in Medicine, which are presented over the continuum of the curriculum, guide students through the elements of career planning, including self-understanding, exploring a variety of medical careers and finally, choosing a specialty to meet career objectives.

Student Records
The Registrar’s Office is the official collection and distribution point for all grades earned by students in the Quillen College of Medicine. Grades are usually obtained within a reasonable time after the completion of any course or clerkship or within five working days after receipt of board subject examination scores. Grades are officially reported to students through the ETSU GoldLink system. To ensure the privacy of student records, no grades will be given over the telephone. Information regarding a student’s grades will be made available, as time allows, upon personal inquiry in the Registrar’s Office. No student may have access to the grade of any other student except on the written authorization of that person or as allowed by prevailing law. The Registrar’s Office also handles in-school deferments for loan debt incurred prior to medical school. The school also utilizes the National Student Loan Clearing House for reporting enrollment. Guidelines of the Privacy Act (Buckley Amendment) are followed in managing student records and grades. Personal records and grades of a student, on file in the Registrar’s Office, are accessible for review by advisor(s). Annual notice of compliance with this act is located on page two of the current College of Medicine Catalog.
Dissemination of Information

Information dissemination is a two-way exercise; it is imperative that students keep the college apprised of changes in name and/or address. The college primarily uses email for communicating with students. Students are urged to check their ETSU email daily. The ETSU email address is the address used by all COM offices. Students may forward this address to any other they choose.

It is a policy of the Registrar’s Office to withhold name and address listings from persons outside the immediate university community. However, addresses are considered “directory information” and may as such be made available to outside individuals as provided by law. ETSU contracts the publication of a directory which shows student names, addresses (email, mailing, and campus box), major, and phone number. In addition, ETSU may release other directory information. Other directory information is defined as: enrollment status, dates of attendance, classification, previous institution(s) attended, awards, honors, photographs, degrees conferred (including dates), hometown, and residency placement information, and sports participation information.

If students prefer not to have these items released, they may fill out a form to prevent disclosure of this data. This form is available through the Registrar’s Office and must be submitted no later than August 31. A new form for nondisclosure must be completed each academic year. A form submitted the last term a student enrolls will remain in effect until the student re-enrolls.

Because student records are official legal documents, it is important that the full name appear accurately on each of these. The official student name is initially derived from the AMCAS application. Any student who has a change of name through marriage or legal action must report to the Registrar’s Office in person to complete a change of name form and provide legal documentation of the change. Once this has been completed, all student records will be altered to indicate the new name and appropriate notification will be forwarded to all university offices.

Information Disclosure Requirements

As a recipient of federal monies, an institution participating in certain federal programs has a responsibility to provide to students and applicants for admission certain information concerning the institution. The information dissemination requirements generally emanate from federal regulations and/or legislative actions. These requirements are not disclosed at length herein. However, more information may be acquired from the Office of Financial Services or from any college or university library. Information that is readily available includes the following:

1. Notice of nondiscrimination on the basis of race, color, national origin, gender or handicapping conditions.
2. Students’ rights and responsibilities, costs, refund policy, curriculum, retention and those personnel who can provide the information.
3. The institution’s available financial aid, methods by which the aid is distributed, application for aid requirements, rights and responsibilities of students receiving aid.
4. Program criteria, loan information, federal scholarship eligibility, and debt management.
5. Rights of students and non-students to student records information. For more information concerning student rights with respect to their educational records, please see the Family Educational Rights and Privacy Act (FERPA) available in the Registrar’s Office.
6. Use of social security number.

Privacy of Students’ Records

The privacy of student records is specified by the Family Educational Rights and Privacy Act of 1974 (the Buckley Amendment). The Quillen College of Medicine complies with this law and insures students’ access to their official academic and disciplinary records and prohibits the release of personally identifiable information, other than directory information without students’ permission. Students may withhold directory information by notifying the Registrar’s Office in writing within a reasonable time after the first day of class of the fall term (or subsequent term of the academic year if not enrolled for the fall
term). A request for non-disclosure will be honored by the institution for only one academic year; therefore, authorization to withhold directory information must be filed annually as described above.

Official student records are maintained in the Registrar’s Office and will be made available to the student, within a reasonable period of time, upon request.

Complaints regarding alleged violation of the student’s right with regard to the privacy of records or access thereto should be addressed to the Dean of the Quillen College of Medicine, the Vice President for Academic Affairs, ETSU, or the Family Educational Rights and Privacy Act Office, Department of Health and Human Services, 330 Independence Avenue, SW, Washington, D.C. 20201. Annual notice of compliance with this act is located on page two of the current College of Medicine Catalog.

Student records are available to officials within the institution on a need-to-know basis. This includes the student’s advisor, members of the dean’s office, and others who, in order to carry out institutional functions, need such information.

Advanced Placement Policy
Advanced placement in a specific course(s) will be determined upon the recommendation of the course director and departmental chair to the Executive Associate Dean for Academic and Faculty Affairs. Enrolled medical students who believe they qualify for advanced placement in a course(s) should make formal application through the Office of Academic Affairs. If awarding of advanced placement is approved, credit will be recorded on the student’s academic record using the grade of “P.” The credit hours for the course will be recorded under the heading “Earned Hours” and will not be used in the computation of the quality point average.

Department of Learning Resources

Medical Library
The Medical Library provides access to information that meets the educational, research and patient care needs of the students, staff, residents, fellows and faculty of the Quillen College of Medicine. Some of their services are also available to the local health care professionals and citizens of the local community. In order to satisfy the information needs of the users of the library, the library provides access to a number of print and web-based resources. The electronic databases include PubMed, Embase-Psychiatry, CINAHL, Biological Abstracts, Up-To-Date, MD consult, Wiley InterScience, ScienceDirect and many evidence based medicine resources, among others. They offer training classes on how to use these library resources. Other services they provide include Outreach & PDA Services, Interlibrary Loan, Document Delivery and Reference Services. They also manage the Museum at Mountain Home, a museum that highlights the history of medicine in the Appalachian region.

There are also a number of physical resources in the Medical Library including over 110,000 volumes of books and journals, and an extensive collection of audiotapes and DVD/videotapes. The library also has two computer labs set up for students. There are also a number of computers available for public use. These computers all have Internet access and start up on the library’s homepage, which includes a link to our web-based catalog of library materials (Millennium). The building has a secure wireless Internet access for use of laptop computers. The Medical Library is located in Building #4 on the campus of the Veteran’s Affairs Medical Center Grounds, Mountain Home.

Biomedical Communications
The Biomedical Communications Department is a team of design and production professionals, specializing in audio-visual service, computer graphics, medical illustrations, and photography. Their goal is to provide the kind of personal attention it takes to make a project effective, while maintaining an image of Quillen College of Medicine and East Tennessee State University of which we can all be proud. They are located in the Quillen College of Medicine Library, located at Building #4 on the VA campus. Please contact them at 439-2402 or stop by and see them at the Medical Library in rooms 217, 214, and 215.
They will be glad to explain the various aspects of producing your work; computer graphics services which include design for logos, brochures, and newsletters, medical illustrations, posters table top and slide presentations, title boards and mounting; nonstandard photographic services including techniques of reproduction of X-rays and photomicrography, studio & location photography, color and black & white printing, general copy work and digital photography; audio/video services include transfers and editing. Also, the department now offers laser color copying services at a reasonable charge. This can be done from a disk or hard copy. Please contact them for your presentation and photographic needs.

**Non-Academic Resources and Facilities**

**University Bookstore**
Medical texts are available from The College Store, 824 W. Walnut Street (behind McDonald's), (423) 929-0833. Regular business hours are 8:00am-4:30 pm, Monday-Friday. Call for extended hours at the beginning of the semester. The main University Bookstore is located in the D.P. Culp University Center on the main ETSU Campus.

**Parking**
All students who park any type of motor vehicle on the East Tennessee State University-Medical School campus are required to properly obtain and display an official ETSU parking permit. Each student is also provided a copy of current parking regulations.

The campus Public Safety Department is responsible for enforcing parking regulations. Parking regulations are available to each student, and students are urged to observe them. The process for appeal of traffic or parking violations is outlined in these regulations and must be followed if the student regards the citation as unjust.

All students must also obtain and display a VA Medical Center parking permit. These permits, free to Quillen College of Medicine students, should be obtained and properly affixed. The Security Office at the James H. Quillen Veterans Affairs Medical Center coordinates the distribution of these parking permits to each vehicle parking on the VA campus through the Office of Student Affairs.

Employees and students are entitled to two warning tickets if improperly parked. Visitors and patients will be entitled to one warning ticket. Thereafter, mandatory counseling sessions as well as federal citations will be issued for subsequent traffic/parking violations. Subsequent violations will result in issuance of United States District Court Violation Notices that require court appearance unless collateral security (fine) is paid. Failure to pay the fine is an automatic contempt of court infraction that carries a penalty of an additional fine of $50 levied by a United States Magistrate. Failure to answer a contempt of court charge automatically initiates issuance of arrest by the United States Marshal’s Office. A list of the violations and fines is available in the Security Office.

Employees, students, patients, or visitors who park a privately-owned vehicle in such a manner as to block fire lanes, ambulance and wheelchair ramps, fire exits, fire hydrants, or in any way impede the normal flow of traffic will have their vehicle removed from the VA Medical Center grounds. Vehicles are towed at the owner’s expense.

As a general policy, persons operating motor vehicles on the Veterans Affairs campus are to park in designated areas. They should also refrain from parking in specified reserved spaces. There are specific rules and regulations for student parking at each of the affiliated hospitals. These will be explained during orientation to respective hospitals.
**Student Health Requirements**

All entering students are required to provide documentation of current immunizations for Diphtheria, Tetanus, Polio, Measles, Mumps, Rubella (MMR), Hepatitis B and Varicella prior to their initial enrollment. Additionally, students are required to provide evidence of immunity to Hepatitis B by obtaining a blood serum titer following completion of the Hepatitis B vaccination series. Students whose Hepatitis B titer is negative will be required to repeat the vaccination series and obtain an additional titer. Entering students are also required to have on record the results of a recently completed physical examination, as well as the results of a Tuberculosis (TB) skin test taken prior to initial registration. If the TB skin test is positive, the student must also provide documentation of treatment or management. Students whose TB skin test results are negative are required to have the TB skin test performed annually.

All documentation should be submitted to the Office of Student Affairs. Documentation of the hepatitis titer must include a copy of the laboratory report indicating a numerical value for the surface antibody.

Students who are unable to comply with the requirements due to extenuating circumstances should contact the Office of Student Affairs, which will determine the appropriate action.

**Student Drug Screen Policy**

Many hospitals and other clinical facilities now require medical students (as well as employees) to have drug screens to work or train in their facilities. It is the current policy of the Quillen College of Medicine to require a ten-panel urine drug screen of all students prior to beginning the third year of medical school. As student clinical activities are incorporated into the curriculum over time, some hospitals or other clinical facilities are likely to require current drug screens so that they may need to be repeated at different intervals during other phases of their education. Quillen students will be notified by the administration of the requirements of the clinical facility. In the case of away electives arranged by the student, the student will be responsible for determining the requirements of the facility. All drug screens completed must be officially reported to the Quillen College of Medicine as a condition of continued enrollment. The results of all drug screens will be deemed medical information by the College and will be maintained as such.

The required drug screen will be performed by a Quillen approved provider of this service. All expenses for the test will be the responsibility of the student. The current standard is the ten-panel urine drug screen. The college may require additional or further tests as deemed appropriate by the college in the future for various situations, including for suspicion of inappropriate drug use.

If the drug screen identifies issues that may negatively impact a student’s participation in further academic activities, the initial step in the evaluation will be to require the student provide official documentation of all current prescriptions. This information, along with the results of the drug screen, will be reviewed by a qualified physician. If this physician determines that no further action/explanation is needed, then the results of the drug screen may be provided to the hospital(s) requiring it so that they can make a determination of their willingness to allow the student into their facilities.

If concerns are unresolved after the reviewing physician evaluates the results of all drug screens, the case will be referred immediately to the Criminal Background Administrative and Drug Screen Committee (CBADSC) for evaluation and determination of an appropriate course of action. The CBADSC is comprised of the Executive Associate Dean for Academic Affairs, Executive Associate Dean for Clinical Affairs, and the Associate Dean for Student Affairs. The CBADSC will be responsible for making recommendations to the Dean in all such matters. The CBADSC may require additional information from the student.

Upon proper notification and release by the student drug screen results may be provided to hospitals or other institutions as required for student participation.
Should the results of drug screens preclude a student from being able to complete the clinical rotations required in the curriculum, the student is subject to dismissal or other administrative action.

**Insurance Requirements**

It is required that all students at the Quillen College of Medicine carry health and accident insurance, and disability income insurance throughout their entire period of enrollment. Prior to initial registration and each subsequent registration, students will be required to provide proof of insurance coverage to the Office of Student Affairs. In the absence of an individual policy, students are required to purchase insurance through the providers approved by the Tennessee Board of Regents and the Quillen College of Medicine. Brochures and information on the available insurances can be obtained from the Office of Student Affairs.

The Quillen College of Medicine provides professional liability insurance (often referred to as malpractice insurance) for students. Liability insurance protects students from claims of negligence that may arise while participating in educational activities that are a part of the medical education program. The coverage does not extend to activities that are outside of the degree of program. Students with questions regarding this coverage should contact the Office of Student Affairs.

**Health Care**

Students enrolled in medical school accept responsibility for their own health care. As a condition of enrollment, students must have health insurance. East Tennessee State University and the Quillen College of Medicine do not accept responsibility for care if insurance coverage has lapsed or the student is uninsurable.

The following policies pertain to health care for medical students and their families:

1. ETSU students, including medical students, may receive health care services from the Student Health Clinic in Roy Nicks Hall on campus. Nominal fees for laboratory services, medicines and supplies may be charged.
2. Medical students and their legal dependents may also receive health care services from the ETSU Family Medicine Associates or ETSU Physicians and Associates. Students will be charged for the office visit; however, any co-pay required by insurance will be waived. Students are responsible for all other charges associated with the visit including:
   a. laboratory and X-ray services, and
   b. immunizations and supplies used in special procedures.
3. All ETSU affiliated health care facilities adhere to the Health Insurance Portability and Accountability Act (HIPAA). Students who have confidentiality concerns or highly sensitive health issues may seek care outside of the university system at their own expense.
4. The medical school provides the opportunity for medical student and their family members to receive free counseling services that are completely confidential and separate from the general functioning of the medical school. Scheduling is very flexible in order to meet individual needs. Services are coordinated by Mr. Phillip Steffey, M.Div., LCSW, and Ramsey McGowen, Ph.D. Services may be arranged by calling 232-0275 or paging 854-0342.
5. Counseling services for medical students are also available through the University Counseling Center located in the D. P. Culp Student Center on the ETSU campus (439-4841), as well as the Community Counseling Clinic (439-7679). There are no charges for these services. The Community Counseling Clinic also provides services to dependents.

**Health Risk of Exposure to Bloodborne Pathogens**

Since medical students have the privilege of caring for patients who are ill, they assume the risk of all health care workers being exposed to communicable diseases. Although all precautions are taken to minimize this risk, (e.g. immunizations required for admission to medical school), it cannot be totally eliminated. If exposure to potential bloodborne pathogens occurs (e.g. through a needle-stick), the student must immediately fulfill all responsibilities required by the facility in which the exposure occurred. This will
frequently involve medical testing and treatment for the student that may include some financial obligation by the student. The student must submit appropriate incident reports to the facility where exposure occurred and to the Office of Student Affairs. Students are required to file a claim with their health insurance provider for charges stemming from post-exposure management. Financial assistance is available to help students pay for charges associated with the initial testing that are in excess of insurance payments. Students should contact the Office of Student Affairs for help in arranging such assistance. This stipulation holds for all such accidents that may occur while students are fulfilling educational responsibilities.

**Personal Appearance**

**Identification (ID) Badges**
During orientation a clip-on identification badge bearing the photograph and name of each student will be provided without charge. Students are required to wear the name badge at all times. All Quillen College of Medicine students are required to conspicuously display this ID badge when they are in the hospitals or clinics of the college. This badge remains the property of the East Tennessee State University Quillen College of Medicine and must be surrendered upon termination of enrollment. If this badge is lost or stolen, the student is requested to immediately notify the I.D. Office in the D.P. Culp Center, 439-4286. A replacement fee will be charged.

**Dress Code**
It is the consensus of the faculty and administration of the Quillen College of Medicine that students should maintain a neat, clean personal appearance and dress in a professional manner at all times. Since students are intimately involved with patients and members of the health care team, wearing reasonable clothing and avoiding extremes of dress is imperative.

Inappropriate attire can interfere with one's ability to carry out specific functions as a medical student. Thus, it is important that all involved as members of the health care team do everything in their power to ease the discomforts of illness and hospitalization. Uncleanliness or improper attire might provoke uneasiness or negative feelings in patients. The physician in practice has the right to decide what specific appearance facilitates the accomplishment of the task, but while attending the Quillen College of Medicine of East Tennessee State University, the task is best accomplished by a reasonable degree of conformity.

**United States Medical Licensing Examinations**
“The United States Medical Licensing Examination® (USMLE®) is a three-step examination for medical licensure in the United States and is sponsored by the Federation of State Medical Boards (FSMB) and the National Board of Medical Examiners® (NBME®).

The USMLE assesses a physician's ability to apply knowledge, concepts, and principles, and to demonstrate fundamental patient-centered skills, that are important in health and disease and that constitute the basis of safe and effective patient care.”

**Step 1** assesses whether you understand and can apply important concepts of the sciences basic to the practice of medicine, with special emphasis on principles and mechanisms underlying health, disease, and modes of therapy.

**Step 2** assesses whether you can apply medical knowledge, skills, and understanding of clinical science essential for the provision of patient care under supervision and includes emphasis on health promotion and disease prevention

**Step 3** assesses whether you can apply medical knowledge and understanding of biomedical and clinical science essential for the unsupervised practice of medicine, with emphasis on patient management in ambulatory settings.” Step 3 is usually taken during residency.
All students are required to take USMLE Step 1 before the beginning of the third year curriculum. As a requirement for graduation, students must pass Step 1 and both components of USMLE Step 2, Clinical Knowledge (CK) and Clinical Skills (CS).

Students are responsible for the timely application and payment of all fees and expenses related to the examinations. Information and application forms are available online at [http://www.usmle.org](http://www.usmle.org)

Students are required to prepare for and complete the Step 1 exam prior to the beginning of the required Transitions to Clerkship course at the beginning of the junior year.

However, based on a detailed review of prior academic performance by the Executive Associate Dean for Academic and Faculty Affairs (EAD), some students may be identified as eligible to delay taking the exam, preceded by a period of special studies preparation time. Eligible students who choose to delay taking the exam must submit a written request for the delay, accompanied by a study plan outline to the EAD for review and approval. Students approved for the delay will be required to submit periodic progress reports to the EAD. These students are expected to take Step 1 by the end of Period 1 of their junior year.

In the event any student fails USMLE Step 1 on their first attempt, the following principles will guide modifying the student’s schedule to prepare for a successful retake of the exam and to complete at least two clerkship periods by the end of the fall semester.

a. Students already in a clerkship when they receive a failing score will generally be expected to complete the current clerkship before taking the next clerkship period off as special studies preparation time to prepare to retake the exam by the end of that clerkship period. No more than two clerkship periods in the fall semester may be permitted for special studies. These periods of special studies cannot be taken consecutively.

b. For periods of special study students must submit a written study plan to the EAD for review and approval. Students will submit periodic progress reports.

c. Students without a passing score by the beginning of Period 5 may elect to continue with up to two additional periods of special studies or begin a Leave of Absence until a passing score is achieved. Once a passing score is achieved students may resume their third year curriculum with the next clerkship period.

d. In accordance with USMLE policy, students may repeat USMLE Step 1 no more than four times in a 12-month period.

e. All required third year clerkships must be completed before beginning clinical requirements of the fourth year.

Students are strongly encouraged to take both components of Step 2 prior to beginning of or very early in their fourth year. Should a student not achieve a passing score on Step 2 CK, USMLE policy states it may be taken no more than four times within a 12-month period. If a failing score is received on Step 2 CS, USMLE policy states it may be taken no more than three times within a 12-month period. Both components of Step 2 must be passed before a student can graduate.
Medical Student Duty Hours

Medical student assignments, including the nature and content of activities and the number of duty hours required, must be determined by the educational value of the assignment. All assignments must provide meaningful educational value. Excessive work hours and fatigue can impact medical student learning just as it impacts patient care.

1. Duty hours consist of hours required
   a. In hospital or clinic/office.
   b. In didactic education (lectures, conferences, etc.).
   c. In any mandatory educational activity.

2. At home call is not included in duty hours determinations.

3. Student study at home is not counted as duty hours.

4. Medical student duty hours should not exceed 80 hrs / week.

5. IN-HOUSE NIGHT CALL is permitted under the following conditions:
   a. Is a valuable educational experience. Facilitates being a member of healthcare team.
   b. Adequate rest facilities available in hospital.
   c. Occurs no more frequently than once every week.
   d. Call will not precede day of an exam or quiz.
   e. If student feels fatigued after the call, he/she is to be excused for an appropriate length of time from rounds, classes, etc. Any didactic materials should be made available to the student. It is the responsibility of the student to effectively communicate with team members regarding their need for a period of post-call rest. The student should not leave normal student responsibilities without such communication.
   f. Hours of in-house call count toward 80 hours total.

Clinical Proficiency Competency for Promotion to the Senior Year

Quillen College of Medicine requires an Objective Structured Clinical Examination (OSCE) at the end of the second year of medical school during which students demonstrate clinical proficiency.

Procedures for demonstrating competency:

1. All QCOM students at the end of their second year will be required to take the Clinical Proficiency Competency OSCE. Students passing this examination will be deemed to have attained this competency.

2. Students failing to demonstrate competency on this evaluation (typically scores less than two standard deviations below the mean in any domain of the exam) will require additional effort to meet this competency including:
   a. Meet with OSCE director to review areas in which they failed to demonstrate competency. This may include reviewing video of student performance, reviewing standardized patient checklists, and/or reviewing student written work.
   b. Develop an individualized action plan to address the competency. This should include the student involving clinical faculty and clerkship directors during the third year clerkships. This faculty contact in the third year is initiated by the student and not the OSCE director.
Meet with the OSCE director at least three times in the third year to monitor progress towards meeting the competency.

Repeat OSCE evaluation near the end of the third year.

Students failing to demonstrate competency at this point will need further evaluation and/or remediation prior to be promoted to the senior year.

**Commencement Objectives**

The Quillen College of Medicine curriculum is designed to enable students to gain the fundamental information, attitudes, skills, and practice principles required to enter residency training while encouraging the acquisition of lifelong habits. Two curricular options are available: a Generalist Track and a Rural Primary Care Track. Both curricula meet accreditation requirements. Consistent with this institutional purpose, the Medical Student Education Committee has developed commencement objectives consistent with ACGME core competencies of medical knowledge, patient care, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice.

1. **Medical Knowledge** Students shall acquire the body of knowledge and thinking processes necessary to becoming a competent physician. Students shall:
   - acquire and retain the basic science knowledge base essential to becoming a physician
   - demonstrate the application of basic science principles to clinical practice
   - develop well-rounded and in-depth clinical knowledge
   - demonstrate the ability to formulate a differential diagnosis
   - demonstrate advanced critical thinking skills
   - demonstrate the ability to assimilate information, comprehend conceptual issues, analyze and correlate clinical information
   - demonstrate an understanding of normal human behavior and the impact of human behavior on health and illness

2. **Patient Care** Students shall acquire the skills necessary to provide competent care for their patients. Students shall:
   - demonstrate the skills necessary to perform a complete and accurate history and physical examination
   - demonstrate the appropriate application of diagnostic studies including laboratory testing, diagnostic imaging, and other testing
   - demonstrate the ability to process the information gathered on a patient into a diagnostic and therapeutic plan
   - demonstrate the ability to critically read the medical literature and apply this information appropriately in the treatment of individual patients in order to practice up-to-date, evidenced-based medicine
   - demonstrate appropriate procedural skills, sterile technique, and universal precautions and understands the scientific and technical concepts for these procedures
   - seek appropriate consultation for their patients
   - work effectively within a team to provide patient-centered care
   - provide care with compassion and respect for all patients

3. **Practice-Based Learning and Improvement** Students will become self-directed learners particularly within the patient care setting and center for experiential learning to strive for ongoing professional improvement. Students shall learn to:
   - assess their own learning needs
   - develop the skills to effectively use information technology and other resources to obtain information from the medical literature for optimum patient care
   - practice evidence-based medicine
   - perform ongoing self-assessment and plan for continuing improvement as a physician
4. **Interpersonal Communication Skills** Students must demonstrate effective communication skills necessary to functioning as a competent physician. Students shall:

- demonstrate effective listening skills
- demonstrate proficiency with interviewing and counseling patients and families
- demonstrate efficient and accurate verbal patient case presentations
- demonstrate accurate, appropriate, timely and legible documentation in the patient record
- communicate effectively as a member of a team with other health care providers

5. **Professionalism** Students shall demonstrate the behaviors befitting an ethical professional at all times. Students shall:

- exhibit respect, compassion, humility, altruism, duty, and honesty with patients, staff, faculty, fellow students, and themselves
- be punctual, reliable, and conscientious in fulfilling professional duties
- demonstrate a commitment to excellence
- accept responsibility for their own actions
- respect patient confidentiality
- practice sensitivity for patients with regard to culture, age, gender, race, ethnicity, sexual orientation, and disabilities
- demonstrate professionalism in dress, hygiene, and demeanor
- understand appropriate boundaries in the patient/physician relationship

6. **Systems-Based Practice** Students shall begin to develop an understanding of the setting in which they will practice medicine and the challenges of providing cost effective care. Students shall:

- be a patient advocate
- demonstrate comprehension of community health and epidemiology
- understand the importance of quality improvement measures and demonstrate a commitment to patient safety
- demonstrate an awareness of the types of healthcare coverage currently available
- demonstrate an appreciation for providing cost effective care
- awareness and respect of unique needs of an underserved rural population

### Required Clinical Skills

Graduation requirement: Clinical skills all QCOM students are required to satisfactorily demonstrate.

**Demonstrate on actual patient:**

**Family Medicine / RPCT**
1. Perform finger-stick glucose test
2. Obtain clean catch urine / Perform urine dipstick test
3. Perform subcutaneous and intramuscular injections

**Internal Medicine**
1. Perform an ECG
2. Perform stool guaiac testing

**OB/GYN**
1. Perform Pap smear
2. Perform wet mount and KOH prep
3. Suturing

**Surgery**
1. Arterial puncture
2. Aseptic technique
3. Collect specimen for bacterial culture

4. Insert foley catheter
5. NG tube insertion
6. Suturing
7. Venipuncture

**Demonstrate in simulation lab:**

**Transitions to Clinical Clerkships**

Endotracheal intubation

**Senior Internal Medicine**
1. Arterial line insertion
2. Lumbar puncture
3. Paracentesis
4. Spirometry
5. Thoracentesis

**OB/GYN**

Normal delivery
Residency Application Process

At the beginning of the senior year, students will receive a residency application handbook, “Strolling Through the Match” that details various aspects of the residency application and selection process. All seniors will attend an ERAS/NRMP orientation meeting, scheduled by the Office of Academic Affairs.

The following is a general timetable to give a reasonable idea of the chronology of the residency application process for students on a regular schedule. During the spring of the third year, students should try to reach a decision about their preferred specialty and make plans for the senior year program. During the summer following third year, students will begin to collect information about programs by writing for program brochures and talking with faculty who have completed residencies in the particular field or program in which application is being made.

By early fall of the fourth year, students will begin the application process. Most residency programs utilize the Electronic Residency Application Service (ERAS) that requires students to transmit applications and supporting materials electronically via the Internet.

Students schedule interviews with programs and follow up requests for information from those programs that have not responded to their initial contact. In mid-fall, the National Residency Matching Program (NRMP) Directory that lists all programs participating in the Match is available at http://www.nrmp.org. The Directory will also include a schedule of important dates for the match that must be strictly followed. The Student rank order list is due to the NRMP Office by February and the announcement of the match results will occur in mid-March.

The mechanics of the match are simple. Students apply to hospital programs and prepare a list, ranking in descending order of preference the programs to which they have applied. Programs rank applicants in a similar manner; the two lists are entered into a computer, and each student is matched with the program highest on the list that offers a place. The fundamental principle for students to remember is that by participating in the match they are entering into a binding, contractual agreement to accept the program to which they are matched. Therefore, the student should not rank a program that is not desired. The programs must play by similar rules, and only cooperation from both sides will keep NRMP a viable system. It is recommended that all students take part in the NRMP Match in addition to a military or subspecialty match (i.e. San Francisco Match).

The following is a list of resources that you may find helpful throughout your four years of medical school.

**Council on Medical Specialty Societies (CMSS)**
51 Sherwood Terrace, Suite M
Lake Bluff, Illinois 60044
(847) 295-3456
www.cmss.org

**CareerMD**
50 Elm Street
New Haven, CT 06510
(203) 787-2828
www.CareerMD.com

**Directory of Residency and Fellowship Programs in Women's Health**
200 Independence Avenue, SW Room 730B
Washington, DC 20201
(202) 690-7650
http://www.womenshealth.gov/pub/directory.cfm

**American Medical Association (AMA)**
AMA-FRIEDA
Fellowship / Residency Electronic Interactive Database
http://www.ama-assn.org/ama/pub/category/2997.html

AMA Publications
Graduate Medical Education Directory – A copy is available for review through the Office of Academic Affairs and the Medical Library.

Graduate Medical Education Library on CD-ROM – Available for purchase ($100) through the AMA

American Medical Student Association
1902 Association Drive
Reston, VA 20191
(703) 620-6600
www.amsa.org

Association of American Medical Colleges (AAMC)/Electronic Residency Application Service (ERAS)
2450 N Street NW
Washington, DC 20037-1126
(202) 828-0400
www.aamc.org/eras

AAMC Resources for Medical Students
http://www.aamc.org/students/medstudents/start.htm

National Resident Matching Program (NRMP)
2501 M Street NW, Suite 1
Washington, DC 20037-1307
(202) 828-0566
www.aamc.org/nrmp

San Francisco Matching Program Sub-Specialty Match Program for Neurology, Ophthalmology, Plastic Surgery
P.O. Box 7584
San Francisco, CA 94120-7584
(415) 447-0350
http://www.sfmatch.org/

These links are on-line under the student section of the Quillen College of Medicine’s intranet at: http://www.etsu.edu/com/acadaffairs/studentinfo/resident/resources.aspx. Please contact the Office of Academic Affairs (439-6756) if you need assistance or have any questions.

Class Attendance Policy

General Statement of Policy
It is expected that a student will attend classes regularly. Each department within the university has the right to set an attendance policy. Departmental class attendance policy is subject to approval by the Dean. At the beginning of each course, faculty must provide a written statement governing attendance policy for the course so that all students will be fully informed of their attendance responsibilities, including penalties
which may be imposed for failing to meet these responsibilities. It is the student’s responsibility to know the policy.

Absences Due to Emergency, Special Circumstances or Illness
In the case of emergency (e.g. death in the family or illness), absence from the class may be excused. In such cases it is the responsibility of the student to explain the situation to the faculty member as soon as possible. The faculty member may request verification of the emergency situation or illness from the student. Students confined at home or in a hospital for an extended period of time shall notify the faculty member from whose class they will be absent so that arrangements can be made for completion of assignments, if feasible.

Appeal of the Faculty Member’s Decision
If the student has evidence that a faculty member has not excused an absence that should have been excused within the guidelines stated above, the student can appeal the decision of the faculty member to the chair of the department and/or dean.

Fourth Year Attendance Policy
While students may vary in the amount of time needed to develop competency in an area, the more time a student spends in the clinical setting, the greater will be their exposure to a range of clinical conditions. Thus, students should attend as much of a scheduled rotation as is practical. Attendance is one measure of professionalism (QCOM Commencement Objectives: Professionalism: Students shall demonstrate the behaviors befitting an ethical professional at all times. Students shall be punctual, reliable, and conscientious in fulfilling professional duties.)

Electives
1. Students may be permitted to miss up to 25% of an elective rotation for residency interview purposes provided the following conditions are met:
   - there is an advance written request supported by documentation of the scheduled interview
   - the instructor approves of the absence.
2. Students missing more than 25% of a rotation may be required to:
   - make up time missed
   - withdraw from the rotation
   - have an alternative activity assigned by the instructor to make up for the time missed.

Selectives
On selective rotations students may miss up to two days with an excused absence without being required to make up missed time. These guidelines may apply to other circumstances (illness, personal issues) on a case by case basis. The instructor may assign an alternative activity to make up for the time missed. This policy should not be construed to mean that a student is entitled to take up to 25% of a rotation off for any reason.

Student Conduct
It is expected that all students will conduct themselves as law-abiding members of the community. All students are expected to adhere to rules and regulations that have been developed by ETSU to govern student conduct while attending academic assignments in any location. Any violation of national, state, or local laws as well as violation of ETSU regulations will subject the medical student to disciplinary proceedings. A complete statement on ETSU student disciplinary rules and procedures can be found in the student handbook, The Spectrum, which is published in the ETSU telephone directory and on the Web and shall apply to all Quillen College of Medicine students.

Any medical student who is convicted of a felony may be dropped from enrollment. Any medical student, who is alleged to have committed a felony and, if in the opinion of the dean the nature of the offense is
such that continued attendance by the student would adversely affect the Quillen College of Medicine’s pursuit of its educational objectives, will be suspended until the matter is settled by the courts.

Any student who engages in the unauthorized or unsupervised practice of medicine, immoral activities, cheating on any educational assignment, misuse or defacing College of Medicine property, unethical or unprofessional activities, or behavior which interferes in any way with patient care or another student’s ability to study and attend all curricular sessions may be dismissed from school. Any activity, which adversely impacts patient care or the ability of any student to meet a responsibility in the educational program, shall be deemed an academic matter.

**Student Honor System**

I. **Introduction**
Medical students at the Quillen College of Medicine, as future physicians, are men and women of integrity. They will, in the future, hold the public trust and are, therefore, held to the highest standards of personal honor.

A. They tell the truth and ensure that the full truth is known. They do not lie.
B. They embrace fairness in all actions. They ensure that work submitted as their own is their own, and that assistance received from any source is authorized and properly documented. They do not cheat.
C. They respect school and public property as well as the personal property of others. They do not steal.

II. **Background**
The honor code is designed to enable medical students at the Quillen College of Medicine to maintain their own highest ethical standards. It is loosely based upon those developed at United States service academies. It works only if the students understand and commit to it. The code is simple, yet its spirit is broad and covers all facets of a medical student's medical education. The code, as the minimum standard of honor for a medical student, forms the link to the high standards demanded of physicians in the practice of medicine.

III. **Purpose**
The honor code represents the minimum standard for medical students at the Quillen College of Medicine. Honor, personal integrity, and loyalty to the profession are fundamental characteristics essential to a successful physician. Medical students unable to conduct themselves in such a manner may not be fit to practice medicine and may jeopardize their privilege of becoming a member of the profession. The offenses of lying, cheating, and stealing are intolerable at the Quillen College of Medicine and may subject an offender to punishments up to and including dismissal.

IV. **Precepts**
The following precepts apply to all medical students at the Quillen College of Medicine:

A. Medical students are presumed to be honorable men and women of the highest personal integrity.
B. Medical students accept responsibility for their personal development as future physicians with adequate skills, knowledge, and professional integrity.
C. A medical student's honesty, loyalty to the profession and to the Quillen College of Medicine will compel him or her to report any violation of the honor code.

V. **The Honor Code**
Medical students at the Quillen College of Medicine shall not lie, cheat, or steal.

VI. **Definitions**

A. Lying. To state an oral or written untruth with the intent to deceive. It is a lie to knowingly misrepresent a true situation or to deceive by withholding, omitting or subtly wording information in
such a way as to leave an erroneous or false impression of the known true situation. Such misrepresentation may be either by word or by deed.

B. Cheating. To derive an unfair advantage by one’s actions. To knowingly use unauthorized assistance in work submitted as one’s own efforts or to knowingly submit another’s work or ideas, claiming them as one’s own by not giving proper reference to that work, i.e., plagiarism.

1. Plagiarism. Submission of another person’s work as one’s own. For example, the failure to provide proper documentation for all source material on reports, research papers, or any assignments submitted as original work constitutes plagiarism. Proper documentation shall be in the form of footnotes and an appropriate bibliography.

2. Assistance. Giving or receiving assistance is expressly allowed and encouraged on all homework, laboratory, and out-of-class assignments unless specifically prohibited by the instructor.

C. Stealing. Wrongfully taking, obtaining, or withholding personal, school, or public property or anything of value from the possession of the true owner with the intention of depriving the owner of its use or possession for any period of time. This includes fraudulently obtaining services without payment, (for example the unauthorized use of school telephones for long distance calls).

VII. Amplification

A. Section VI shall be considered honor violations under the honor code of the Quillen College of Medicine. Specifically, the failure of a student to comply with any policy or regulation of the Quillen College of Medicine is by definition not in itself a violation of the honor code unless that act specifically violates a provision of the honor code per Sections V and VI. The failure of any student to properly report a known or suspected honor violation is in and of itself not a violation of the honor code. The responsibilities of persons witnessing or suspecting honor violations are discussed in section IX.

B. Intent. To be guilty of lying, cheating, or stealing, an accused must be shown to have had the necessary state of mind. For a lie to have occurred, one must have intended to deceive. To have cheated, one must have intended to use unauthorized assistance, to represent another’s work as one’s own, or to otherwise gain an unfair advantage. To have stolen, one must have intended to deprive the owner without permission either temporarily or permanently of the use or possession of the property. A student need not intend to commit an honor violation per se, but only complete an act of lying, cheating, or stealing with the state of mind described.

C. Attempting, soliciting, or aiding the commission of an honor offense. It is a violation of the honor code to attempt to lie, cheat or steal; or to solicit or assist another to lie, cheat or steal.

1. An attempted offense is an act done with the intent to commit an offense under the honor code. The act must be more than mere preparation to commit an offense, but rather one must attempt to carry out or complete an act of lying, cheating or stealing. The specific intent required is that of the attempted offense; the accused need not intend to violate the honor code.

2. Solicitation consists of any statement, oral or written, or any other act or conduct intended as a serious request or advice to lie, cheat or steal. The solicited offense need not be attempted or committed.

3. Aiding in the commission of an honor offense consists of assisting or encouraging the active perpetrator of an honor offense, and sharing the intent of that offender. The intent required is the same as for the active offender. Mere presence at the scene of an offense does not constitute an offense. Failure to prevent the commission of an offense is not an honor violation unless the noninterference was designed to operate and did operate as an encouragement to, or protection of, the active offender.

VIII. Applicability

The honor code contains guidelines that form the basis for a medical student’s conduct in all places and under all conditions. Ideally they would apply off campus as strictly as they do in the classroom. Notwithstanding such, the honor code as an instrument of monitoring, investigating, and prosecuting medical student conduct shall be strictly limited to the following situations:
A. Any and all conduct occurring wholly or in part on the campus of East Tennessee State University or on the property of the Mountain Home Veterans Administration and/or the Quillen College of Medicine.

B. Any and all conduct occurring while participating in an academic setting or affiliated program away from the Quillen College of Medicine as a student or representative of the Quillen College of Medicine. Examples of this include clerkships, “away” rotations, preceptorships, etc.

C. Any and all conduct occurring while participating in any activity sponsored by East Tennessee State University or the Quillen College of Medicine, regardless of physical location.

Note: While specifically not covered by the student honor system, unscrupulous student activities wholly unrelated to the Quillen College of Medicine, e.g., a felony arrest and conviction, may subject a student to disciplinary action at the discretion of the Dean of the Quillen College of Medicine. Such situations will specifically not involve the student honor system or the honor council.

IX. Responsibilities upon learning of a possible honor offense

A. All members of the Quillen College of Medicine staff, faculty, and medical student body have the responsibility of being familiar with the precepts, purpose, definitions, and procedures of the honor code. Any individual, upon witnessing or learning of what may be a violation of the honor code, has the following options:
   1. Immediately report the suspected violation in accordance with the Procedural Appendix;
   2. Discuss the incident with the suspected offender and report the suspected violation in accordance with the Procedural Appendix;
   3. Discuss the incident with the suspected offender and, if it appears that no violation was committed, take no further action.

B. Prior to selecting a course of action, the person learning of a possible violation normally should gather relevant facts and discuss them with the suspected offender.

C. The responsibility for the proper course of action rests with the individual learning of the possible violation. To maintain confidence in the fairness of our system, medical students, faculty, and staff must take one of the steps outlined above. Failure to do so, while not specifically a violation of the honor code, may result in disciplinary action at the discretion of the Dean of the Quillen College of Medicine.

D. Any person who decides to report a possible honor offense should submit a written statement in accordance with Section III, paragraph A of the Procedural Appendix.

X. Amendments to the Honor Code

Students and full-time faculty members are encouraged to participate in the amendment process for the purpose of developing and maturing a successful honor code.

A. Amendments to the honor code may be proposed by a petition signed by at least two-thirds (2/3) of the entire voting honor council or by a petition signed by at least ten percent (10%) of the Quillen College of Medicine full-time faculty. A referendum election shall be held within six (6) weeks after receipt of the petition and proposed amendments.

B. Amendments to the honor code must be approved in a referendum election by at least two-thirds (2/3) of the students voting, provided that at least fifty percent (50%) of students have voted. Approved changes will take effect upon subsequent ratification of the amendments by at least two-thirds (2/3) of the full-time faculty voting providing that at least fifty percent (50%) of the full-time faculty have voted.

Student Honor System Procedural Appendix

I. Student Acknowledgment and Publicity of the Honor System

A. Entrance Conditions

   As a precondition for matriculation in the Quillen College of Medicine, each student shall sign the following pledge: “While registered in the Quillen College of Medicine, I pledge to abide by the Honor Code set forth in the Student Honor System.”
B. Publicity
1. Each new student entering the Quillen College of Medicine will be informed as to personal obligations with respect to the Honor System and its functions. Orientation of the incoming freshman class shall be the responsibility of the Honor Council as a whole, with the sophomore members acting as coordinators.
2. Upon matriculation into the medical school first year class, all medical students are under the stipulations of the Honor System and are expected to abide by it during their entire course of study.
3. A minimum of one training period shall be conducted on an annual basis, preferably near the beginning of each academic year, to discuss the honor code, its purpose, precepts, definitions, and procedures. Such training shall be the responsibility of the honor council chairman and will be conducted by members of the honor council. Training shall be available and mandatory for each class and highly encouraged for the faculty of the Quillen College of Medicine.

II. The Honor Council
A. Functions
In order to administer the Honor System, an Honor Council shall be formed. The council will be empowered with the following functions:
1. The council shall establish needed programs for the operation and maintenance of the Honor System.
2. The council shall act in an advisory capacity to students with regard to the interpretation of the Honor Code.
3. The council shall consider all reports of alleged violations of the Honor Code and determine whether further consideration is warranted.
4. The council shall act as a fact-finding board in hearing procedures of alleged violations of the Honor Code, as hereinafter specified.
5. The council shall act in an advisory capacity to the Dean of the Quillen College of Medicine in making recommendations with supporting documentation regarding any person found by the council to be in violation of the Honor Code.
6. While the council shall function to enforce the spirit and procedures of the Student Honor System, it is nevertheless a body which shall act to protect the rights of the students and, in this respect, shall be available to counsel students both individually and collectively.

B. Meetings
1. Meetings shall be called by the Chair of the Honor Council when a suspected violation of the Honor Code is reported. The chair may also call meetings at any other times as deemed necessary.
   a. Whenever possible, the meeting place shall be an appropriate room within the Quillen College of Medicine.
   b. Whenever possible, the meeting shall be held in the early evening on weekdays.
2. A meeting must be called by the chair within seven days after requested by two or more members of the council.
3. All meetings shall be conducted according to Roberts Rules of Order, Newly Revised.
4. The presence of seven elected voting members shall constitute a quorum, provided that at least one representative from each of the four medical school classes (i.e., freshman, sophomore, junior and senior) is present among the attending members.

C. Council Members
1. The council shall be comprised of (following spring freshman elections) fourteen members; of which thirteen shall be duly elected voting members and one shall be a non-voting faculty advisor. The thirteen voting members shall be elected representatives of the four medical school classes. The non-voting faculty advisor shall be appointed by the Dean of the Quillen College of Medicine from a list of nominees supplied by the Faculty Advisory Council.
2. In the year in which the Student Honor System is adopted, the election of Honor Council representatives from each of the four medical school classes shall be conducted as soon as feasible. The presidents of the individual classes shall conduct elections during which Honor
Council representatives shall be chosen as follows: the freshman, sophomore, and senior classes shall each elect three council members; the junior class shall elect four council members. The term of office for each representative shall be from the date of election until completion of elections during the forthcoming fall semester. After their election, the council representatives shall meet and select from among themselves by majority vote a Chair, a Vice-Chair, a Recorder, and a Chair-Elect. The Chair-Elect shall be elected from those representatives who are members of the freshman or sophomore class at the time of the election.

3. In all years subsequent to the year of adoption of the Student Honor System, elections of representatives of the freshman and sophomore medical school classes shall be conducted as soon as feasible after the commencement of fall semester. Each class shall elect three members to the council. The term of office of each representative of the freshman class shall be from the date of election until completion of elections during the forthcoming fall semester. The term of office of each representative of the sophomore class shall be from the date of election until graduation from the medical school. Elections will not be held in the junior and senior years, as representation shall be considered ongoing through the sophomore appointments. In addition, the Chair-Elect who was elected by the council during the preceding term will automatically be appointed to the council and serve as Chair of the council during the forthcoming term. The council representatives shall meet after the elections and select from among themselves by majority vote a Vice-Chair, a Recorder, and a Chair-Elect. The Chair-Elect shall be selected from the group as noted above. The term of office of each representative shall be from the date of election until completion of elections during the forthcoming fall semester.

4. Should any member of the council resign, the class from which the member was elected shall select a replacement as soon as it is feasible. The election shall be conducted by the president of the appropriate class.

5. At the time of the election of representatives to the council, each class shall prepare a list of names of three persons who would serve as alternate council members. Should a situation arise wherein an insufficient number of elected representatives is available for council service, as might occur during a summer session, the Chair shall temporarily appoint, from those students listed, an appropriate number to sit on the Honor Council. The Chair should attempt to appoint a new member to the council from the same class as that elected member who is unable to serve. After graduation of three senior class council members, the temporary appointments should come equally from the remaining three classes.

D. Duties of the Chair
1. Meet with the other members of the council as early in the school year as possible and explain in detail the function of the council and duties of its members.
2. Meet with the officers of each class to explain the Student Honor System.
3. Arrange a time and place for meetings to be held and notify the other members of the council and the faculty advisor of such meetings.
4. Take charge of and conduct all meetings and hearings with as much dispatch as possible.
5. Ascertain that adequate minutes of the meetings are recorded and that all minutes, correspondence, and any formal statements received by the council are kept in proper order.
6. Oversee responsibilities for communications between the council and the dean or the administration of the Quillen College of Medicine and report to the other members of the council any resulting matters of importance.
7. Perform any additional duties common to the Office of Chair not heretofore listed.

E. Duties of the Vice-Chair
1. The Vice-Chair of the council shall assume all of the duties of the Chair in the Chair's absence.
2. The Vice-Chair of the council shall assume all of the duties of the Recorder in the Recorder's absence.

F. Duties of the Recorder:
1. Record adequate minutes of every meeting.
2. Record by audiotape those portions of a hearing as hereinafter specified.
3. Take charge of and record the receipt of all correspondence, written statements, and other official papers received by the council.

4. Secure, file, and maintain in proper order in a special, locked Honor Council file in the Office of Student Affairs any council minutes, official papers or recordings, as well as any documents or evidence presented during a violation hearing as hereinafter provided. (Access to this special Honor Council file shall require prior Honor Council approval.)

5. In the absence of both the Chair and Vice-Chair, the Recorder shall assume all the duties of the Chair. Should such a situation occur, the Chair-Elect shall act as Recorder for the council.

III. Violations of the Honor Code and Hearing Procedure

A. Reporting Violations of the Honor Code

1. A student who has reason to believe that a breach of the Honor Code has been committed is expected to report the incident to the Honor Council within two weeks. This report shall be in writing and signed by the person(s) and witness(es) making the report. The report should name the alleged violator(s) and witnesses and state in as much detail as possible the place, date, time, circumstances, and other pertinent factors of the alleged offense. The report should be sealed in an envelope and given to any Honor Council member.

2. Faculty and staff may also report suspected violations of the Honor Code to the council as stated above.

3. Any council member receiving a report of a suspected violation of the Honor Code shall deliver it to the Chair of the council as soon as is feasible.

4. The Chair shall call a meeting of the council no later than seven days after receipt of a written report of a suspected violation. This meeting shall be scheduled to convene as soon as feasible. The report will be presented at the meeting by the Chair or other informed member of the council and the council will then vote to proceed according to one of the following courses of action:
   a. The report does not constitute a breach of the Student Honor System. Therefore, no further action should be taken by the council; or,
   b. A hearing on the report will be held by the council; or,
   c. Further investigation of the report is needed before appropriate action can be taken. After the investigation has been conducted according to procedures hereinafter set forth, the findings of the investigation shall be presented to the council. The council will then vote to proceed according to one of the aforementioned courses of action.

5. When voting on the proper course of action, a simple majority vote of those council members present at the meeting will control. Members of an investigating committee (defined below) may vote as to which course of action to follow and will be counted toward a quorum.

6. Committee Supporting Student Health (CSSH)
   a. The Committee Supporting Student Health (CSSH) has been established by the Medical Student Government Association of the Quillen College of Medicine to assist medical students who have a substance abuse problem.
   b. Any suspected problem of substance abuse or report of such should be made directly to the CSSH.
   c. Should the Honor Council receive a report alleging substance abuse on the part of a medical student, the council shall transmit information regarding said allegation to the CSSH.
   d. After transmission of the information, the Honor Council will take no further action unless the student has otherwise violated the Honor Code.

B. Hearing Procedure

1. Whenever the council decides that further investigation is required before it can act, or wherein the council decides that a hearing on a report is appropriate, the chair will appoint a committee of two members of the council to investigate the report and present their findings to the council. In the event of a hearing on the report, the investigating committee shall present evidence to the council at the hearing. The investigating committee shall not be present when the council considers their response to the evidence presented.
2. Wherein the council has voted to conduct a hearing, the accused shall be given the following information in writing:
   a. A list of the charge(s) against the accused, specifying the section(s) of the Honor Code violated.
   b. A copy of the Student Honor System that includes the accused’s procedural rights.
   c. A list of the members of the Honor Council.
   d. The date of the hearing on the alleged violation(s) which shall be no sooner than ten days after the above listed information is given to the accused. If the accused desires additional time in which to prepare a defense, a written petition may be submitted to the chair and, if warranted, a reasonable postponement of the hearing shall be granted.
3. The hearing will be private unless the accused requests an open hearing. Deliberations of the council on findings or recommendations shall be closed to all persons except members of the council. When a private hearing is conducted, it shall be closed to all persons except:
   a. Members of the council.
   b. The accused with an advisor, if asked to attend by the accused.
   c. Witnesses, while testifying.
   d. Other persons may be admitted by agreement of the accused and the council.
4. After being given written notification of the alleged violation(s) and hearing date, the accused has the right to be informed of the prosecutorial evidence. Additionally, the right to a copy of any written statements relevant to the case will be given. The accused does not have the right, prior to the actual hearing, to know the names of persons who have furnished written statements. Therefore, the names of such persons will be deleted from the copy of any written statements provided the accused.
5. The accused has the right to be faced by any witness who has given a statement relevant to the case at the hearing.
6. The accused has the right to produce witnesses (including no more than two character witnesses), introduce documentation, and offer personal testimony.
7. The accused has the right to be accompanied by a non-participant self-chosen advisor.
8. The accused has the right to be heard or to remain silent in regard to the charges brought. If the accused elects to offer testimony as to a specific alleged act of misconduct, then the right to remain silent as to that specific act is waived and all questions pertaining to that alleged act must be answered truthfully.
9. The accused has the right to challenge, on the grounds of prejudice, any member of the council sitting on the case. If such a challenge is made, the council shall deliberate to determine whether cause exists to remove the challenged member. Only council members shall be present during said deliberations. By a majority vote of the members of the council (excluding the members being challenged), the challenged members shall be excused from the case. The accused has the additional right to excuse without cause two council members sitting on the case. In such an event, the accused is not required to state a specific objection as to why a specific council member is excused. If the accused excuses council members without cause and, as a result, the number of council members sitting on a case is reduced below the number required for a quorum (seven), the case may nevertheless proceed through hearing and verdict. In such a case the accused will be deemed to have waived the right of having a quorum.
10. The accused has the right to challenge any conduct during the proceeding that may prejudice any personal rights. A majority vote of the council will sustain the accused’s challenge. If the council decides that a right of the accused has been prejudiced, the council will take appropriate actions to rectify same.
11. Any member of the Honor Council related by birth or marriage to the accused or accuser shall be disqualified from participation in that hearing, with the exception that such a council member may be a witness in the hearing.
12. Any member of the Honor Council who has a personal interest in the outcome of the hearing may be voluntarily disqualified from participation in that hearing. Should the council be informed that a member has such a personal interest and yet said member does not self-disqualify, the council shall deliberate in private to determine whether cause exists to excuse
that member from participation. Only council members shall be present during said deliberations. By a majority vote of the council (excluding the member being reviewed), the council member shall be excused from the case.

13. All hearing proceedings, except deliberations of the council on findings and recommendations and council deliberations regarding excusing council members from sitting on a case, shall be recorded on audio tape by the council Recorder. This tape recording shall serve as the official record of the hearing. In the event of a finding that no violations of the Honor System have occurred, the tape shall be destroyed. The accused has the right to obtain a duplicate copy of the hearing tape in those cases in which the council finds that a violation of the Honor System has occurred.

14. The accused should be present during all proceedings except deliberations of the council as heretofore specified. However, any part or all of the hearing may be conducted in the absence of the accused if
   a. the accused voluntarily fails to appear for the hearing; or,
   b. the accused willfully obstructs the progress of the hearing to such a degree that the council decides it is necessary to bar the accused from the hearing.

15. The accused shall be permitted to examine all evidence in the case. No evidence or testimony may be considered by the council unless such evidence or testimony has been presented in the presence of the accused or in accordance with sub-paragraph 14a. or 14b. above.

16. In the exercise of sound discretion, the Chair may reschedule a hearing date at any time prior to or after the commencement of a hearing. All parties should strive to be prepared to proceed on appointed hearing dates and avoid unnecessary delay and rescheduling. The request to reschedule the hearing may originate from any participating party or council member.

17. Hearing proceedings shall be conducted by the Chair or the council under the guidelines listed below.
   a. The council shall be called to order by the Chair.
   b. The Recorder shall call a roll of the council. A quorum of seven voting members shall be required before the hearing can proceed.
   c. The Chair shall read the original violation report to the council.
   d. The Chair shall ask the accused for a plea statement.
      (1.) In the case of a guilty plea, the council will dispense with full hearing on the evidence and will deliberate as to the appropriate recommendation. In this regard, the council may ask the investigation committee to make a statement of what they believe the evidence in the case would have shown. The accused shall be provided the opportunity to address the council.
      (2.) In the case of a not guilty plea, the council will proceed with a full hearing.
   e. After entry of a plea, the accused shall be given the opportunity to remove the council members sitting on the case by the challenge procedures detailed above.
   f. The case investigators shall be asked to present all witnesses and information gathered pertaining to the case. Students called before the council are to be notified personally prior to the hearing time. They shall be called individually and questioned in a dignified manner showing respect for the person being questioned. Questions will be allowed from the Chair, members of the council, the investigators, and the accused in an orderly fashion. All questions relating to procedure shall be decided by the Chair. Prior to the questioning of a student, it shall be ascertained that the student is familiar with the rules of the Honor System. In the case wherein a student is handicapped in performing any Quillen College of Medicine responsibilities because of personal attendance at a hearing, the council may recommend to the authorities involved that appropriate amends be made.
   g. After the case investigators have presented all of their witnesses and evidence, the accused shall then be asked to present any evidence and/or witnesses pertinent to the defense. Questioning shall follow a format similar to that described above.
   h. After the presentation of evidence by the accused, the investigators and the accused may make a closing statement to the council. The length of closing statements should be determined by the Chair after consulting the investigators and the accused.
After hearing the evidence and summations offered by the parties, the council shall consider its verdict in closed session. Only council members (excluding members of the investigating committee) shall be present during this closed session. The council shall choose one of the following verdicts and all council members must vote.

(1.) **Verdict 1**: No significant violation of the Honor Code has occurred. A report of the council’s findings shall be sent in writing to the dean for the purpose of excluding any attempt to re-charge the accused through alternative disciplinary procedures. The Chair shall inform the dean of the verdict and recommend that no disciplinary action of any kind be taken and that no mention whatsoever of the council’s proceedings appear in the record of the accused individual. The council may make suggestions to the individual(s) regarding future conduct with respect to the Honor System.

(2.) **Verdict 2**: A violation of the Honor Code has occurred to the severity that this verdict should be accompanied by a recommendation that the dean take such disciplinary action as deemed necessary, up to and including an informal reprimand, and that action exceeding an informal reprimand would not be suitable. No mention whatsoever of the proceedings should appear on the record of the accused individual.

(3.) **Verdict 3**: A violation of the Honor Code has occurred to the severity that this verdict should be accompanied by a recommendation that the dean take such disciplinary action as deemed appropriate, up to and including a formal reprimand, that action exceeding a formal reprimand would not be suitable, and that the verdict and resolutions of the council be affixed to the permanent record of the accused individual.

(4.) **Verdict 4**: A violation of the Honor Code has occurred to the severity that this verdict should be accompanied by a recommendation that the dean take such disciplinary action as deemed appropriate, up to and including expulsion from the Quillen College of Medicine, and that the verdict and resolution of the council be affixed to the permanent record of the accused individual.

(5.) In reaching a verdict the council shall proceed as follows:

(a.) First consider Verdict 4. If support for Verdict 4 is unanimous, Verdict 4 is returned; if not, it fails.

(b.) If Verdict 4 fails, next consider Verdict 3. If three-fourths of the council support Verdict 3, Verdict 3 is returned; if not, it fails.

(c.) If Verdict 3 fails, next consider Verdict 2. If the majority of the council supports Verdict 2, Verdict 2 is returned.

(d.) If Verdicts 4, 3, and 2 fail, then Verdict 1 shall be returned.

j. The accused or any witness may be recalled by the council before the verdict is reached. At that point the hearing must be reconvened.

k. Following its vote, the council shall recall the accused for the purpose of personal notification of the verdict and recommendation. The accused shall also be informed, except as heretofore provided under Verdict 1, that the verdict and recommendation will be delivered to the dean within seven days.

l. The chair shall thereafter prepare a written report of the council’s findings, verdict, and recommendation. Said report shall be signed by all members of the council who participated in the hearing. Should a member of the council who has dissented from the verdict of the council wish to submit a dissenting opinion, such dissenting opinion should be attached to the Chair’s report. Except as heretofore provided under Verdict 1, the report shall be presented to the Dean of the Quillen College of Medicine within seven days after the hearing has been concluded.

m. The council’s Recorder shall be responsible for securing, filing, and maintaining all documents and/or written evidence presented to the council at the hearing and, wherein appropriate, any physical evidence presented to the council. When the accused graduates from the Quillen College of Medicine, all such documents, written evidence, and physical evidence (wherein appropriate) shall be removed from the Honor Council’s files and destroyed, with the exception that said evidence shall not be removed or destroyed while the accused’s case is still pending before any administrative body of the
Quillen College of Medicine, East Tennessee State University, the Tennessee Board of Regents, or while ongoing civil or criminal litigation is pending.

18. If an accused leaves the Quillen College of Medicine prior to the resolution of the case by the council, the Chair shall prepare a written letter to the dean indicating the nature of the alleged violation(s) and that said case has not been resolved by the council due to the accused’s departure from school. This letter shall be placed in the accused’s permanent record. Should the accused be permitted to return to the Quillen College of Medicine, the dean may require the accused to appear before the council and resolve the pending case. Should the council thereafter determine that Verdict 1 or Verdict 2 is an appropriate resolution of the case, the dean may remove the aforementioned Chair’s letter from the student’s permanent record.

IV. Procedure for Amendments to the Appendix
   A. Students and full-time faculty are encouraged to participate in the amendment process in order to develop a successful Honor System. Amendments to the Honor System Procedural Appendix may be proposed by a petition signed by two-thirds of the entire voting Honor Council, by a petition signed by ten percent of the medical students or by a petition signed by ten percent of the Quillen College of Medicine full-time faculty. A referendum election will be held within six weeks after receipt of the proposed amendment.
   B. Amendments to the Procedural Appendix must be approved by one-half of the students voting, provided that at least fifty percent of the students have voted. Proposed amendments will take effect upon their subsequent ratification by one-half of the full-time faculty voting, provided that at least fifty percent of the faculty eligible to vote have done so.

Evaluation System

Introduction
The faculty of the Quillen College of Medicine believes it essential to have a multi-faceted system of evaluation to maintain its programs at a high level of quality. Elements of this system include the evaluation of students, faculty, courses and curriculum. The faculty is also committed to the proposition that all professionals must be able to evaluate themselves in order to improve and that the process of self-evaluation should be emphasized to the students so that they may continue it throughout their careers.

General Concepts
The evaluation system is directed toward the following goals:
1. All programs are continually and effectively evaluated.
2. The evaluations identify strengths and weaknesses.
3. The evaluations are directed toward producing data useful in planning and effecting improvements.
4. The system is understood by all individuals involved.
5. Evaluations are uniform and give equal treatment to all involved.
6. Individual components of the system are compatible with each other as much as possible.
7. Evaluations are multifaceted and use information from all available sources.
8. It is designed to be as concise as possible in order to provide easily managed quantitative data.
9. It allows for much flexibility and freedom of responses compatible with the above goals.
10. It is an open system with easy access to those who have a legitimate need for such knowledge.

Student Evaluation
Students are subject to continuous evaluation in both cognitive and non-cognitive areas throughout the curriculum. The overall progress of the student is monitored by the Student Promotions Committee which meets to receive and consider departmental reports and all other information relative to student evaluations. The faculty makes periodic progress reports both during and after the completion of various units of the curriculum. These periodic reports will be available to the students. Students are encouraged to discuss these periodic reports with appropriate course faculty.
At the conclusion of each course and clerkship, an evaluation report is submitted by each respective faculty to the Registrar’s Office. These reports become the official institutional record of the student’s performance and are the basis on which a transcript is generated. All students have access to their record.

The manner of evaluation is made known to the student body by the course and clerkship directors at the beginning of each course or clerkship. The reports of objective and subjective evaluations of performance are submitted to the Registrar’s Office by the directors of clinical clerkships.

Throughout the curriculum, self-evaluation and peer-evaluation are encouraged both formally and informally. Students are encouraged to indicate by signature that they have read (not necessarily accepted) evaluations completed by faculty members whenever possible. Discussions between a student and faculty member or with small groups of students and faculty members are encouraged for the purpose of student self-evaluation and feedback.

**Grading System**

The Quillen College of Medicine utilizes two marking systems to assign grades: The faculty in a majority of courses and clinical clerkships report achievement of the student by means of a five point (A, B, C, D, F) scale, with A representing excellent, B good, and C adequate; In certain curricular offerings, achievement may be reported on a P (pass), D, or F (fail) basis. The pass/fail grading system is utilized in the elective clinical clerkships and other courses throughout the curriculum as approved by the Medical Student Education Committee (MSEC).

In both marking systems the D and F are failing grades. A D grade indicates that in the judgment of the course faculty, an additional period of prescribed remediation (assuming no deficiencies in other courses), if successfully completed, will qualify a student for a grade of C*. Upon remediation, a C* must replace a D. An asterisk will be used on the transcript to indicate that the student required remediation to obtain the indicated grade. The F grade indicates that the performance of the student is such that only a complete repeat of the course, on approval of the course faculty and the Student Promotions Committee, will be accepted as remediation. Upon the advice of the Student Promotions Committee, any student who has one or more failing grades is subject to being dropped from registration.

Since all students must obtain a passing grade in all courses in the M.D. curriculum to receive the degree, remediation of failing grades is required if the student continues in the curriculum on permission of the Student Promotions Committee. In the case of a D grade, the course faculty will recommend to the committee the means by which the student might achieve a passing grade in the course. If a student receives two or more D grades in the same academic period, the Student Promotions Committee may require that the student repeat a part of the curriculum assuming that continuation in the curriculum is approved.

When a student has received a D grade, and remediation is successful, the grade of D will be changed to a C* at the completion of the remediation. If the remediation requires a new period of enrollment under requirement of the Student Promotions Committee, special procedures apply as outlined in section IX.C.8. of the Student Promotions Committee Section of the Handbook for Medical Students. If a grade of D is not successfully remediated in the time period allotted by the faculty and/or the Student Promotions Committee, a grade of F will be assigned.

A grade of F will remain permanently on the transcript. The remediated grade earned will be added to the transcript in the academic period in which it is obtained. A student who receives one or more F grades is subject to being dropped from enrollment.

A grade of I (incomplete) may be given in cases wherein students, for an acceptable reason, have been unable to complete all of the required work in a course. An incomplete grade must be removed within twelve months after it has occurred or it will automatically be changed to F. If the student removes the
incomplete within the time period, the instructor may assign any appropriate grade according to the quality of the work completed for the entire course.

If for some appropriate reason a course faculty wishes to insure that the performance of a student is discussed at a Student Promotions Committee meeting, a grade of \( R \) (review) may be assigned. Following the consideration by the Student Promotions Committee, the \( R \) will be changed to the appropriate grade. Under appropriate circumstances, with the approval of the course director, a student may officially audit a course. In such instances the audit will be recorded in the permanent record.

A student may withdraw from a course up to one-quarter of the course duration with no penalty (no record of enrollment); between one-quarter and three-quarters of the course, the student may withdraw, receiving a \( WP \) (Withdrawn passing) or \( WF \) (Withdrawn failing) grade; and after three-quarters, the student may only withdraw under documented extenuating circumstances as approved by the course director, and the Offices of Academic and Student Affairs and will receive a \( WP \) or \( WF \) grade. Withdrawal during the last quarter under other circumstances will yield a recorded grade of \( F \). Grade point values in all Quillen College of Medicine courses and clerkships will be assigned on the four point system for passing grades (A-4, B-3, C-2).

The departmental and interdepartmental course directors will be responsible for determining the grades to be assigned to students. The distribution of the grades assigned will also be the responsibility of the departments and interdepartmental course directors. In addition to letter grades, a numeric grade will be assigned. A class rank based upon numeric course grades will be calculated and used for internal purposes. In the instance in which a student receives \( F \) and successfully remediates the course, the grade point values assigned will be those of the grade earned upon remediation and the total credit hours attempted (originally failing attempt plus the repeat). Grades earned in a pass/fail course are not used in determination of the grade point average.

On occasion the Student Promotions Committee, after an analysis of overall performance, will require that the student repeat (re-enroll) in all or a portion of the curriculum, including those courses in which the original grade was \( D \). In this special instance the student’s record will reflect the following policy.

a. Upon completion of the remediation, the original grade (\( D \)) will be covered on the official transcript with an asterisk. From this time the course entry will be ignored in all further qualitative computations.

b. The enrollment of the repeated course will be added to the transcript as appropriate in the subsequent enrollment period. The grade obtained by the student during the repeat course will be the grade recorded on the transcript.

c. The credit hours for the new course will be added to the student’s summary line under graduation hours, gross hours attempted and hours earned (provided that a passing grade was achieved in the new enrollment period). Quality credits will be added as appropriate. (Quality credit does not apply in the instance of a \( P/D/F \) graded course).

**Student Promotions Committee**

A Student Promotions Committee is appointed by the dean to serve in an advisory capacity to the dean and the faculty. The purpose of the committee is to review, on a continuing basis, the performance of each individual student including all cognitive and non-cognitive evaluations that have been submitted. See the section on Student Promotions Committee in this publication.

**Class Ranking**

The Quillen College of Medicine maintains a class ranking for each student. This is based upon numeric course grades.

**Course Evaluation**
Much of the data obtained from the evaluation of students is useful in the evaluation of the course and course faculty. In addition, student feedback concerning the course is sought by the course faculty and utilized by them and MSEC to help assess the quality of the course. This input will be used in the institutional evaluation of the overall program. The Section of Medical Education offers assistance in this endeavor.

**Academic Grievance Procedures**

Students who believe they have been mistreated on an academic matter are entitled to an independent review of the alleged offense followed by corrective action, if appropriate. This procedure does not apply to instances in which a student has been recommended for suspension or dismissal. A student’s appeal process in the latter instances is described in the grade appeal process, evaluation system, and Student Promotions Committee policies and procedures. The guidelines are applicable only in those cases wherein there is a perceived academic impropriety arising from an action taken by (a) an individual instructor, (b) a department, or (c) a committee charged to administer academic policies or criteria of a particular school or department. They do not pertain to complaints expressing dissatisfaction with a university policy of general application to all students.

The grievance procedures are as follows:

1. The student should first discuss the perceived offense, orally or in writing, with the individual(s) most closely responsible. If no resolution results, the student should then consult with the relevant departmental chair. In those cases wherein there is no departmental chair, consultation should then be with an individual or a representative of the regulatory committee charged by the faculty with administering that school’s academic policies. Every effort should be made to resolve the issue at this informal level, without the complaint attaining the status of a formal grievance.

2. If informal means of resolution prove inadequate, the student should set forth in writing the substance of the alleged offense, the grounds on which the student is basing the complaint and the efforts taken to date to resolve the matter; this document then should be submitted to the dean (or designee) for adjudication. It is at this point that the complaint becomes a formal grievance. A grievance should be filed in a timely fashion, i.e., before the end of the semester or clinical period following the semester or clinical period in which the alleged offense occurred or should reasonably have been discovered.

3. Upon receipt of the student’s written grievance, the dean (or designee) will initiate a timely and independent investigation into the matter (typically to be completed within thirty days). The investigator may request a written response to the issue raised in the grievance from the pertinent faculty, staff member(s) or departmental chair. The grievant will be given an opportunity to comment in writing on the response(s). Upon completion of the investigation, the dean (or designee) will prepare and transmit to both the grievant and the pertinent academic personnel written findings and dispositive recommendations that the dean has authority to implement.

4. If the grievant or the party against whom the grievance was lodged disagrees with the dean’s recommendations, either on substantive or procedural grounds, an appeal may be made in writing to the faculty of the Quillen College of Medicine. The written appeal must specify the substantive bases on which such appeal is being made (i.e., the appeal must be made on grounds other than general dissatisfaction with the recommended disposition) and must be directed to the issues in the grievance as filed, not to new issues. No more than thirty days should elapse between receipt of the recommendations submitted by the dean and the written appeal to the faculty.

5. Upon receipt of the appeal and by a process chosen by the faculty, a timely independent review of the grievance (normally to be completed within thirty days) will be conducted. Upon completion, the faculty shall remit to all appropriate parties written findings and dispositive recommendations that will be final and binding on the parties to the grievance within the jurisdiction of the Quillen College of Medicine.

The review of a grievance and/or appeal undertaken by a grievance officer(s) normally shall be limited to the following considerations: (a) were the proper facts and criteria brought to bear on the decision (or, conversely, were improper or extraneous criteria brought to bear on the decision); (b) were there any
procedural irregularities that substantially affected the outcome; and (c) given proper facts, criteria, and procedure, was the decision one which a person in the position of the decision-maker might reasonably have made?

Students should be aware that the Associate Dean for Student Affairs has a relatively wide authority of inquiry, including investigating student complaints against instructors, but has no decision-making authority. The Office of Student Affairs is available to all students to discuss any troublesome matter of university concern and frequently helps expedite resolution of such matters.

Grade Appeal Process

I. Basis for appeal
   A. A student may appeal a course grade if there is evidence that the grade was assigned in a malicious, capricious, erroneous, or arbitrary manner. The following steps provide a guideline for the appeals process.
   B. All persons concerned with this process should make every attempt to adhere to the approximate time schedule outlined in the following description of the appeals process. No appeal will be considered later than one year following the date the grade was assigned.

II. Appeal to the faculty member for review of the assigned grade
   A. Within three weeks after the beginning of the next term, excluding summer school, the student should discuss the assigned grade with the faculty member. If it is found that the assigned grade is incorrect in the judgment of the faculty member, the appropriate change will be made. At this point the matter is concluded.
   B. If the faculty member is no longer with the university, the student should confer with the departmental chair who will then make every effort to receive written input concerning the grade from the former faculty member. If this is not possible, the student may appeal the grade as described below. The departmental chair will represent the interests of the faculty member who issued the grade.

III. Appeal to the departmental chair
   A. If the question of the assigned grade cannot be resolved between the student and the faculty member, the student may appeal in writing to the chair of the department in which the course was taught. If at all possible, the written appeal to the chair should be made by the end of the fourth week of the term. The student should include all known information relating to the appeal. After receiving such an appeal from the student, the chair shall review with the faculty member the substance of the student's appeal and seek to determine its validity.
   B. If the chair determines that the assigned grade is inappropriate, the chair should recommend to the faculty member that the grade be changed. The faculty member may or may not concur with the recommendation.
   C. The chair will notify the student in writing, usually within ten days of the appeal, whether or not the assigned grade will be changed. If the grade is changed to the student's satisfaction, the matter is concluded. If the grade will not be changed, the chair will also advise the student of the right of appeal to the dean of the college within which the grade was assigned.
   D. If the grade will not be changed, copies of all written communication mentioned above should be sent by the chair to the dean.

IV. Appeal to the college dean
   A. If the grade is not changed to the satisfaction of the student at the departmental level, the student may appeal the assigned grade in writing to the Dean of the Quillen College of Medicine. The appeal shall be prepared in writing by the student in consultation with the Executive Associate Dean for Academic and Faculty Affairs of the Quillen College of Medicine. The Dean of the Quillen College of Medicine may follow one of two procedures. The dean may discuss the case with the student, the faculty member, the chair of the department in which the course was taught, and the Executive Associate Dean for Academic and Faculty Affairs of the Quillen College of Medicine.
Following these discussions, the Dean of the Quillen College of Medicine may make a recommendation to the faculty member, the student, and the departmental chair. If this results in an acceptable solution to all parties, the matter is concluded. If not, the appeal will be forwarded to the Student Promotions Committee, which will serve as the hearing body. The dean may appoint the Student Promotions Committee as a hearing body upon receiving the initial appeal.

B. The Student Promotions Committee will submit to the Dean of the Quillen College of Medicine a written report containing a recommendation for a specific course of action regarding the student’s grade appeal. If the committee cannot reach a conclusion, the written report will be submitted to the dean, with the reason why the committee failed to reach a decision.

C. The Dean of the Quillen College of Medicine will then recommend a solution that may or may not contain some or all of the recommendations of the Student Promotions Committee. This decision will be relayed in writing to the student. In the absence of further appeal, the opinion rendered by the Dean becomes final.

V. Appeal to the President of the University

- If either the student or the faculty member believes that due process has not been afforded, a written appeal may be made to the President; otherwise, the decision of the Dean of the Quillen College of Medicine is final. Such an appeal, based upon denial of due process and specifically identifying the failure of the process, must be initiated in writing within two weeks from the time the dean reports the decision to the appropriate individuals.

Student Promotions Committee

I. Purpose

The purpose of the committee is to review, on a continuing basis, the performance of each individual student. The review will include consideration of all cognitive and non-cognitive evaluations that have been submitted. The committee is appointed by the Dean of the Quillen College of Medicine to serve in an advisory capacity to the Dean and to the faculty.

II. Composition

A. Voting Members (20)
   1. The chair (or designate) from each department within the Quillen College of Medicine
   2. The director (or designate) from the faculty of each course not conducted by a department

B. Non-Voting Members
   1. The Executive Associate Dean for Academic and Faculty Affairs (or designate) who shall be chair of the committee
   2. The Associate Dean for Student Affairs
   3. The Assistant Dean for Admissions and Records
   4. One student from each class designated by the class membership

III. Requirements for quorum and adoptive action

A quorum for any regular or called meeting of the Student Promotions Committee shall be defined as more than half of the voting members. All actions of the committee will require a simple majority of those voting.

IV. Roles and responsibilities

A. Each student will be considered individually with emphasis upon quality of performance. The Student Promotions Committee may recommend continued pursuit of medical studies for any student who is presumed capable of completing the M.D. degree requirements within the time limits established in Section X.

B. At appropriate intervals, the committee will review the progress of students throughout their medical school career. The committee will review the progress of all students at least once yearly.

C. The committee recommends to the faculty:
1. The promotion of a student from one year’s study to the next.
2. The certification of a student as qualified to graduate.

D. The Committee recommends to the Dean:
1. Placement of a student on a reduced schedule.
2. Requiring a student to take a leave of absence for diagnostic evaluation, medical intervention or personal reasons.
3. Dismissal of the student from medical school.
4. Disciplinary action for unethical and/or non-professional behavior.

E. The committee has the authority to take action in the following areas:
1. The formulation of a remedial program. These programs may include, but are not limited to:
   a. Requiring a student to take a remedial make-up examination with or without a period of tutorial study.
   b. Recommending or requiring a student to take a course at another institution acceptable to the faculty in whose course the deficiency occurred.
   c. Requiring a student to be reexamined in a course.
   d. Requiring a student to receive academic tutoring.
   e. Requiring a student to repeat all or part of a year’s work.
2. Placement of student on academic probation. (See description at X. E. 1. below.)
3. The review of petitions for return from a leave of absence for those students placed on such status by the Committee.
4. Any other action deemed appropriate for the individual student and not categorized under responsibilities in IV.D. above.

F. If the action contemplated is to remove a student from registration, place on a leave of absence, or assign on a reduced schedule, the student will be afforded an automatic hearing as detailed in Section XI. to follow.

G. The Executive Associate Dean for Academic and Faculty Affairs (or designate) will serve as non-voting chair of the Student Promotions Committee. Responsibilities will include preparation of the agenda for regular and called meetings, written notification of committee action(s) to the affected student and verbal discussion of pertinent committee action(s) with the individual student to whom such actions apply.

H. All deliberations of the committee are strictly confidential. Actions of the committee are announced through official channels of the Dean’s office or, in special instances, by means designated by the Committee.

V. Scheduling and frequency of meetings
A. Routine meetings will be scheduled throughout the year.
B. Special meetings will be called by the chair when appropriate information has been transmitted that requires an extraordinary session.

VI. Agenda
The agenda shall consist of the promotion of students from one year to the next, certification of students for graduation, and consideration of students’ academic progress. Specific students to be discussed are those whose course faculties have indicated as having failed their course, those who are performing at less than satisfactory levels after an interim evaluation, those who have received an R grade and any student who has received a grade other than A, B, C, or P. Any other student will be discussed at the request of a course director or course faculty. An attempt is made to identify students in difficulty in concert with the goal of advising the student.

VII. United States Medical Licensing Examination (USMLE)
A. Students are required to have their USMLE scores officially reported to the school. The Committee will consider the test scores, along with the entire record, when developing recommendations related to an individual student’s performance.
B. Unless a passing score on USMLE Step 1 is recorded for a student by the completion of the second clerkship rotation of the third year, the student will not be allowed to proceed further in the curriculum until a passing score is recorded.
C. A student's failure of either examination after three attempts is sufficient justification for dismissal.
D. For additional information, refer to the “United States Medical Licensing Examinations (USMLE)” section of this handbook.

VIII. Advancement of students with satisfactory performance
A. Requirements for Promotion
   1. For promotion from freshman to sophomore year, a student must obtain a passing grade in all required courses that comprise the freshman year curriculum of the medical school.
   2. For promotion from sophomore to junior year, a student must have obtained a passing grade in all required courses that comprise the sophomore year curriculum of the medical school.
   3. For promotion from junior to senior year, a student must have obtained a passing grade in all required courses that comprise the junior year curriculum and have passed Step 1 of the USMLE.

B. Requirements for Graduation
   1. A student must have obtained a passing grade in all courses of the established curriculum of the medical school leading to the M.D. degree.
   2. A student must pass Step 1 and Step 2 (Clinical Knowledge and Clinical Skills) of the United States Medical Licensing Examination in accordance with national standards.
   3. A student must have made appropriate arrangements to discharge all financial obligations to the university.
   4. A student admitted with advanced standing must have completed, at the minimum, the last two years of the curriculum at East Tennessee State University, Quillen College of Medicine.

IX. Incompletes and Withdrawals
A. A student who receives an incomplete grade (I) in a course or withdraws (WP or WF) from a course is reviewed by the Student Promotions Committee.
B. The Student Promotions Committee usually accepts the recommendation of the departmental faculty for satisfactory completion of the course.
C. The Student Promotions Committee monitors a student who has received an I, WP or WF grade in a course, as appropriate.

X. Registered students with unsatisfactory performance
A. Time limitations:
   1. A student’s failure to be eligible for promotion to the junior year of the curriculum within four years from the date of matriculation is sufficient justification for dismissal.
   2. A student’s failure to complete all requirements for graduation within six years from the date of matriculation is sufficient justification for dismissal.

B. Deficiencies
   1. A deficiency is defined as a grade of D or F.
   2. When a student has one or more deficiencies, there is sufficient justification for dismissal.
   3. A student who has two deficiencies at any given time will automatically be placed on academic probation.

C. Removal of Deficiencies
   1. When reporting a deficiency grade, the faculty responsible for that course will also submit a recommendation for removing the deficiency.
   2. Based upon the faculty recommendation and a comprehensive evaluation review of the student's circumstances, the Student Promotions Committee will recommend the course of action and time requirement for removal of a D grade.
   3. If the student receives a D grade and is not successful in the approved course of action within one year, an F grade will be assigned.
   4. If a student has obtained an F grade and the Student Promotions Committee recommends continuation of medical studies, the student must remove the deficiency by repeating the course. If the plan of action includes repeating the course at another academic institution, the faculty responsible for the course in which the deficiency occurred will provide a list of approved courses.
D. Continuous Academic Review
   1. A student who is performing unsatisfactorily and has received one deficiency grade or has a failing average in one or more courses will be under continuous academic review by the Student Promotions Committee. The purpose of Continuous Academic Review is to promote awareness of students who are at academic risk and to promote academic success.
   2. Continuous Academic Review may be removed by the Student Promotions Committee once the student’s performance is satisfactory. In order to promote academic success, a student placed on Continuous Academic Review may be required to resign from committees and/or relinquish positions of leadership internal or external to the university.

E. Academic Probation
   1. Academic Probation occurs when a student simultaneously has more than one deficient grade (D or F). A student remains on Academic Probation until deficient grades are removed.
   2. A student placed on academic probation will not be permitted to serve on committees or hold positions of leadership internal or external to the university.

F. Referrals to Counseling, Tutorial, and Study Skills Services
   All students may avail themselves of these services without referral. However, when students are presented as having difficulty at a Student Promotions Committee meeting, they often are urged to procure specific services and in some instances are directed to do so. If a student who is repeatedly urged to arrange tutoring, counseling, or study skills help does not do so and subsequently fails a course, this is made known to the Student Promotions Committee to assist in evaluation of the student’s overall performance. Students who are directed to seek these referral services have a choice of intra- or extramural resources. Verification that the referral services have been utilized will be required. In addition, the committee may require such students have their counselor submit information and/or a recommendation to the committee relating to the student’s academic program.

G. Academic Performance
   In the final analysis, students are judged on the basis of academic performance, regardless of whether or not they have acted upon the committee’s recommendation that they avail themselves of opportunities for assistance. The faculty or director of each course defines the criteria for acceptable academic performance in the course offering. Evaluation of academic performance may include (but is not necessarily limited to) measuring the student’s knowledge, testing how the student applies such knowledge to specific problems, evaluation of the judgment a student employs in solving problems and assessing the quality of the student’s psychomotor skills, ethical behavior and interpersonal relationships.

XI. Students whose registration is discontinued
A. Dismissal
   1. If in the opinion of the Student Promotions Committee, a student’s academic performance does not meet institutional standards, the committee may, at any regular or extra called meeting, recommend dismissal. Students are subject to dismissal if they have one or more F grades at any time, fail a course while on academic probation, fail a course for a second time, fail to meet the requirements of remediation, or demonstrate other evidence of unsatisfactory performance, academic or otherwise.
   2. A student may be dismissed from the Quillen College of Medicine for non-academic reasons. Graduation is predicated on the determination by the faculty, as recommended by the Student Promotions Committee, that a student is suitable for the practice of medicine in terms of personal characteristics and conduct. The Student Promotions Committee may recommend the Dean dismiss any student whose behavior is not in keeping with the standards of the medical profession, or when the student’s conduct in the medical school is considered detrimental to the individual student, other students in the school, patients, or society in general. When requested, the Student Promotions Committee may evaluate cases of students whose professional behavior and/or ethics have been questioned by a faculty member or the Honor Council and make a recommendation for dismissal, if deemed appropriate.
3. If there is a recommendation that the student should be dismissed, the student will be afforded a hearing before the Student Promotions Committee within a period of two weeks from the time of the original decision. The student will be offered the opportunity to appear personally and be allowed to bring any person for advice, counsel or to serve as an advocate. The hearing will be an informal procedure dealing with evidence of a student’s performance and/or professional behavior and those factors applying directly to the student’s ability to perform.

4. Immediately following the hearing, the Student Promotions Committee will decide upon a specific recommendation. If the decision is to dismiss the student, the recommendation will be forwarded to the Dean.

B. Leave of Absence

1. When a student’s performance is such that continued registration should not occur but, in the opinion of the Student Promotions Committee, the student is judged to be capable of completing the M.D. degree requirements within the time limits of Section X. presuming academic or non-academic problems are resolved, the committee may recommend that a student be placed on a leave of absence. This recommendation will be explained to the student. If a student accepts, the recommendation will be implemented. If the student disagrees with the recommendation, the same procedure for a hearing as in Section XI. will be followed.

2. At the Dean’s discretion, a student may be placed on a leave of absence. A student who wishes such an action may ask the Student Promotions Committee for a review that shall be conducted with a hearing as established in XI. above.

C. Reduced Schedule

1. The Committee may recommend that a student be placed on a mandatory reduced schedule in order to assist with completing the curriculum. If the student disagrees with the recommendation, the same procedure for a hearing as in Section XI. will be followed.

2. The Committee may also permissively recommend the student be offered the opportunity for the reduced schedule. In this instance the student may or may not accept. If the student does not accept, no further action is required.

XII. Petition for readmission following leave of absence

A. A student may be placed on a leave of absence for a particular period of time with a specified date of expected re-enrollment. In such cases no further action need be taken at the time the student returns to medical studies. All other students who are on a leave of absence must receive approval of the Student Promotions Committee to return to medical studies.

B. Students placed on a leave of absence without a specified date of return, may maintain such status for a maximum of two years. In order to return to registration, the student must petition the Student Promotions Committee within the time period allowed. When petitioning to the Committee, the student must submit data that will support the contention that the problem that caused discontinuance of registration has been rectified. This also is required in instances wherein the student’s departure from registration was in part or completely related to nonacademic problems.

C. Petitions for readmission may be considered at any regular or called meeting of the Student Promotions Committee. The time of readmission will be based upon what is most appropriate to the student’s schedule. Preference will be given to students petitioning for return whose registration was discontinued for other than deficient academic performance. Readmission may be denied because all available positions are filled even if a student meets all other qualifications for readmission.

XIII. Appeal mechanisms for students.

Three appeal opportunities follow the Committee’s action.

A. Appeal to the Student Promotions Committee. When the Student Promotions Committee’s action is within stipulated authority of the Committee (Sec. IV. E.), a student may ask for a reconsideration of the action taken. The Student Promotions Committee Chair must receive the written request within fifteen calendar days following the date the student was informed of the
decision. If a student is not satisfied with the result of reconsideration by the Student Promotions Committee, the student may appeal the decision to the Dean of Medicine.

B. Appeal to the Dean of Medicine.
   1. Any written appeal of the Committee’s recommendation must be submitted to the Dean of Medicine within 14 calendar days from the time the student is notified of the committee’s recommendation.
   2. The Dean will review the Committee recommendation, the appeal, and other relevant information in reaching a decision. The Dean will then notify the student, the chair of the Student Promotions Committee, and other appropriate individuals regarding the decision.

C. Appeal to the President of the University. If the student believes that due process has not been afforded, a written appeal may be made to the President; otherwise, the decision of the Dean of the Quillen College of Medicine is final. Such an appeal, based upon denial of due process and specifically identifying the failure of the process, must be initiated in writing within two weeks from the time the Dean reports the decision to the appropriate individuals.

XIV. Right of student appearance at committee meetings
   A. A student may request to appear personally before the committee in order to answer questions or expand the information available to the committee.
   B. The committee may request that a student be present to answer questions or provide information.
   C. A student appearing for any reason may be accompanied by a person (or persons) of the student’s choice to provide support and counsel.

XV. Amendments
   This policy is recommended by the Student Promotions Committee to be approved by the faculty. Any amendments to this policy shall require the same procedure.

Mistreatment Prevention

I. Introduction
   A. The Quillen College of Medicine has a responsibility to foster the development of professional and collegial attitudes needed to provide caring and compassionate health care by all members of the Quillen College of Medicine community, including medical students, graduate students, resident physicians, faculty, and other staff who participate in the educational process. An atmosphere of mutual respect and collegiality is essential to nurture these attitudes and promote an effective learning environment. The diversity of members of the academic community combined with the intensity of interactions that occur in the health care setting may lead to incidents of mistreatment.
   B. This policy on mistreatment prevention has three main components:
      1. A statement of Quillen College of Medicine standards of behavior with regard to mistreatment, including: a definition of mistreatment; examples of types of mistreatment; persons who may be the object or perpetrator of mistreatment; and the purpose of the policy on mistreatment.
      2. A plan for the ongoing education of the Quillen College of Medicine community concerning these standards of behavior and the process by which they are upheld.
      3. A description of the Quillen College of Medicine process for responding to allegations of mistreatment.

   NOTE: Accusations of racial or gender discrimination or harassment are not handled under this policy, but rather by the ETSU Affirmative Action Officer. Similarly, disputes about grades are handled under the Quillen College of Medicine Academic Grievance Procedures and Grade Appeal Process as described in the Handbook for Medical Students.

II. Mistreatment in the learning environment
   A. Mistreatment, a form of professional misconduct, is defined as improper use or handling of an individual(s). It may cause the subject to become more cynical about the medical profession, may interfere with the learning process, may cause talented individuals to abandon medical training, and may promote an atmosphere in which abuse is accepted and perpetuated in medical training.
   B. Examples of inappropriate and unacceptable behavior include:
1. Harmful, injurious, or offensive conduct
2. Verbal attacks
3. Insults or unjustifiably harsh language in speaking to or about a person
4. Public belittling or humiliation
5. Threats of physical harm
6. Physical attacks (e.g., hitting, slapping, or kicking a person)
7. Requiring performance of personal services (e.g., shopping, baby sitting)
8. Threatening with a lower grade or poor evaluation for reasons other than course/clinical performance
9. Sexual harassment
10. Discrimination on the basis of race, gender, sexual orientation, religion, ethnic background, age, or physical disability
11. Intentional neglect or lack of communication
12. Taking credit for another individual’s work
13. Disregard for student safety
14. Any other behavior that is contrary to the spirit of learning and/or violates the trust between the teacher and learner.

III. Ongoing education to prevent mistreatment
A. To promote an environment respectful of all individuals, the Quillen College of Medicine will provide ongoing education to students, residents, fellows, faculty, and other staff that emphasizes the importance of professional and collegial attitudes and behavior. The materials and methods for providing this education will be the responsibility of the Grievance Officer, in consultation with the Associate Dean for Student Affairs, the Associate Dean for Clinical Affairs, the Grievance Council, and the Assistant Dean and Director of Women in Medicine.
B. Education of the Quillen College of Medicine community concerning mistreatment serves to promote a positive learning environment. This is characterized by attitudes of mutual respect and collegiality. Education will alert all members of the Quillen College of Medicine community to expected standards of behavior. Education will also inform persons who believe they have been mistreated of the avenues for redress and will inform all concerned parties of the policies and processes for responding to allegations of mistreatment.
C. The methods for the specific groups are described below, subject to annual review and revision by the Grievance Council:
1. Medical Students
   a. The policy will be included in the Student Handbook
   b. The topic will be addressed at all orientations
   c. Each department is encouraged to include this topic in the course policies for each preclinical course and each clinical rotation
2. Resident Physicians and Fellows
   a. The policy will be included in the Resident Handbook
   b. The topic will be addressed at the annual resident physician orientation
   c. The clinical department chairs are encouraged to ensure all their fellows and residents are cognizant of the policy.
3. Faculty and Graduate Students
   a. An informative written message will be sent each year from the Dean’s Office to all departmental chairs.
   b. The dean will direct the chairs to convey the information to all faculty and graduate students within their respective departments.
   c. They will also direct the course directors, clerkship directors, and program directors to convey this information to all adjunct faculty who participate in the teaching process in order to ensure that all faculty are cognizant of the policy.
4. Nursing and Other Clinical/Support Staff
   • An informative written message will be sent each year from the Dean’s Office to the Chief Executive Officer at each training site to explain the policy and to request its distribution to all staff interacting with COM trainees.
IV. Process for responding to allegations of mistreatment

A. Introduction
1. When an allegation of mistreatment occurs, the parties directly involved should try to resolve the matter informally. Methods to resolve the issue informally may include: direct discussion between parties, involvement of course/clerkship directors, or departmental chairs. If this informal approach is unsuccessful, a more structured process is available within the Quillen College of Medicine for resolving the matter prior to filing a complaint within the larger university system.

2. This process is designed to be fair to both the accuser and the accused. It is also designed to be impartial, effective, and unlikely to result in retaliation for the accuser.

B. Time Frame for Introducing a Complaint
1. Evidence and memories tend to deteriorate with time; therefore, complaints should be introduced without delay. Whenever possible, this should be initiated within a four-month period of the incident.

2. Requests for a delay in these proceedings shall be at the discretion of the Grievance Officer.

C. The Grievance Officer
1. The position of Grievance Officer has been established to help resolve conflicts by mediating between the conflicting parties and striving for reconciliation.

2. Either the accuser or the accused may contact the Grievance Officer to seek assistance in resolving the conflict.

3. Both parties will be encouraged to resolve the problem between themselves, but will also have the Grievance Officer available as a facilitator of this process.

4. To achieve neutrality, the officer is chosen from the non-teaching faculty in the Quillen College of Medicine and is appointed to this position by the Dean of the Quillen College of Medicine.

5. The Grievance Officer is accountable to the dean concerning advocacy issues.

D. The Conflict Resolution Council
1. If a reasonable effort by the Grievance Officer does not yield a solution, upon request of either party, he/she will convene a conflict resolution council.

2. The purposes of the council include the following: to ascertain the facts to the extent feasible, to mediate between the parties, and to strive for resolution.

3. The council will assess the evidence as objectively as possible, be fair in its deliberations, and protect the rights of both parties.

   a. Council Composition
      The dean will select a fourteen-member council to include two members from each of the following groups: preclinical students, clinical students, graduate students, residents, preclinical faculty, clinical faculty, and administration. When a case arises for deliberation, the Grievance Officer will select a working subcouncil that consists of five members to include representatives from the appropriate peer groups of the accuser and accused. The Grievance Officer is not a member of the council; however, the officer is present at council meetings and may be called upon to break a tie vote. Nominations for membership will be submitted from the representative groups. Members will be appointed to the council for terms of one to three years. Appointments are staggered so that the council always has experienced members. If the accused or accuser in a specific case is not represented by groups on the council, the council may recruit additional members from the appropriate group (e.g., nurses, staff, etc.) to review the specific situation. The method of recruitment is at the discretion of the council. The subcouncil will select its own chair to preside over deliberations. The subcouncil will select a recorder. Duties of the recorder shall be: 1) to record adequate minutes of every meeting; 2) to record by audio tape those portions of a hearing as hereinafter specified; 3) to take charge of and record the receipt of all correspondence, written statements, and other official papers received by the council; and, 4) to secure, file, and maintain in proper order in a special lock box in the office of the Grievance Officer.

   b. Council Meetings
The council will hold two scheduled meetings per year. One will be at the beginning of the academic year (August) to review the charge with the council and the Grievance Officer, and the other at the end of the academic year prior to graduation to review the policy and recommend appropriate changes in the policy and procedures. Other meetings will be held on an as needed basis.

c. Council Procedures
The council becomes involved in a given case only after the Grievance Officer has made reasonable efforts to resolve it. When the selected subcouncil hears a case, the Grievance Officer, accuser, and the accused are present. The subcouncil chair is responsible for notifying the parties concerning the time and place of the subcouncil meeting. The proceedings begin with the Grievance Officer presenting the case. Both the accuser and accused have an opportunity to speak and to bring witnesses to speak.

The council recorder shall record all hearing proceedings, except deliberations of the council on findings and recommendations and council deliberations regarding excusing council members from sitting on a case. This record shall serve as the official documentation of the hearing.
The order of speakers is as follows:
(1.) The accuser
(2.) Witnesses for the accuser
(3.) The accused
(4.) Witnesses for the accused

The accused has the right to be present whenever the Grievance Officer, the accuser, or any witnesses are making statements. Similarly, the accuser has the right to be present during statements by the Grievance Officer, the accused, or any witnesses.

Witnesses will be present only when they are called to give information. After speaking, they will be asked to leave and will not speak to each other prior to or during the proceedings. Both the accused and the accuser can be harmed by breaches of confidentiality. Thus, all who are involved in the process of responding to allegations must maintain confidentiality.

All individuals involved in the process should know and understand the need for confidentiality. The accuser and accused are not allowed to bring lawyers to council meetings as advocates, advisors, or observers, nor may they bring any other persons, except witnesses. This process is intramural and is designed to avoid complaints being filed outside the university, if possible.

When the council convenes deliberations, the dean will be notified.

d. Outcomes of Council Deliberations
The council’s record of deliberations summarizing their findings will be sent to the Executive Associate Dean for Academic and Faculty Affairs, who will then decide what action to take. The Executive Associate Dean (or designate) will advise the accused and accuser concerning the final disposition of the matter.

Decisions about a letter being forwarded to the Dean should be made on a case-by-case basis. It is a matter of judgment by the council based on the degree of offensiveness of the behavior and the strength of evidence that the behavior actually occurred. It is possible that the council might become aware of a history of recurring mistreatment behavior by a given individual. In such a situation, a letter might be warranted even if each occurrence of mistreatment would not be regarded as serious enough to justify a letter if considered individually.

If the conflicting parties resolve the matter satisfactorily between themselves, the council has the option to decide that a letter is not warranted. However, if the offense is serious or recurring, a letter might be deemed appropriate even if the conflicting parties have reached a resolution. In exceptional circumstances it may be appropriate for the Grievance Officer to inform the Dean concerning a complaint before the council meets.

e. Additional Council Responsibilities
If the Grievance Officer decides that the council should be involved in resolving a case, the accused does not have the right to prevent the council from meeting. A function
of the council is to decide whether the matter should be brought to the attention of the Dean. It is in the interests of the accused to meet with the council to resolve the matter without involvement of the Dean. If the accused refuses to attend the council meeting, the council will still meet to decide if a letter should be sent to the Dean. If a council member is approached by someone who believes that mistreatment has occurred, the council member will refer the individual to the Grievance Officer. The Grievance Officer maintains essential records.

V. Protections
A. Retaliation
   1. Those who are accused of mistreatment will be informed that retaliation is regarded as a form of mistreatment and will not be tolerated. Accusations that retaliation has occurred will be handled in the same manner as accusations concerning other forms of mistreatment, using the Grievance Officer and council if needed. If the council finds that retaliation has occurred, a letter will be sent to the Dean.
   2. All reasonable action will be taken to ensure that the complainant and those providing information on behalf of the complainant or supporting the complainant in other ways will suffer no retaliation as a result of their activities in regard to the process.
B. Malicious Accusations
   A complaint or witness found to have been intentionally dishonest or malicious in making the allegations may be subject to disciplinary action.
C. Professional Reputations
   In the event the allegations are not substantiated, all reasonable steps will be taken to restore the reputation of the accused as deemed appropriate by the council.

VI. Relation to other university policies
A. This policy outlines an additional process for responding to complaints of mistreatment and is subordinate to the formal policies of East Tennessee State University and Quillen College of Medicine.

ETSU PPP-26 ETSU Policy Statement on a Drug-Free Campus
PP-27 ETSU Employee Grievance/Complaint Procedures
PP-30 Policy on Sexual Harassment
PP-31 Grievance Procedures for the Resolution of Sexual Harassment Charges at ETSU
PP-40 Affirmative Action Complaints
PP-45 Americans with Disabilities Act

COM Student Conduct
   Student Honor System
   Academic Grievance Procedures
   Evaluation System
   Grade Appeal Process

   In addition to this informal avenue, which is coordinated by the Grievance Officer, complaints concerning sexual harassment may be submitted to one of the designated contact persons for the Quillen College of Medicine, the Associate Dean for Student Affairs, the Assistant Dean and Director of Women in Medicine, or to the Affirmative Action Officer for the university. Similarly, complaints concerning discrimination may be submitted to the Affirmative Action Officer. This may be done through the Office of Women in Medicine.
B. Allegations of student misconduct may be addressed according to the Student Conduct Policy and the Student Honor Code.

This policy will help promote a positive environment for learning in the Quillen College of Medicine, and will affirm the importance of collegiality and respect for others.
### Sexual Harassment

Sexual harassment is a category of mistreatment that is illegal according to federal law. East Tennessee State University desires to maintain an environment that is safe and supportive for students and employees and to reward performance solely on the basis of relevant criteria. Accordingly, the University will not tolerate sexual harassment of its students or employees.

The legal definition of sexual harassment:
Unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature constitute sexual harassment when:

1. Submission to such conduct is made either explicitly or implicitly a term or condition of an individual’s employment or academic standing; or
2. Submission to or rejection of such conduct by an individual is used as a basis for employment or academic decisions affecting an individual; or
3. Such conduct has the purpose or effect of unreasonably interfering with an individual’s work or academic performance or creating an intimidating, hostile or offensive working or academic environment.

What to do if you think you are being sexually harassed:

1. In circumstances in which you believe you will not be jeopardizing your personal safety, your job, or your academic status, communicate clearly to the offender that the behavior is not humorous or welcome and should cease immediately.
2. Keep a record of what happened and when it took place. Should there be any witnesses, ask for their names to include in your documentation of the incident.
3. If the harassment continues, or if you choose not to confront the offender directly, you may report the situation to the contact persons designated for the university.

Sexual harassment is always inappropriate regardless of whether it comes from a person in authority or a colleague. If a gesture or remark of a sexual or gender nature makes you feel uncomfortable, threatened, intimidated, or pressured, it may be a sign that you are experiencing sexual harassment.

Trust your instincts; do not remain silent; and do not blame yourself. Act quickly without delay to inform the abuser of unwelcome behavior or request advice from one of the contact persons listed below.

Contact persons designated for the Quillen College of Medicine are the Associate Dean for Student Affairs and the Assistant Dean and Director of Women in Medicine. You may also consult the ETSU Affirmative Action Officer, Ms. Mary Jordan, Office of the President.

### Graduation / Commencement

The M.D. degree is awarded after completion of all degree requirements and upon recommendation of the Student Promotions Committee and approval of the Quillen College of Medicine faculty. The Quillen College of Medicine Convocation ceremony is held in the spring of each year. The ceremony consists of the recognizing of student awards and honors, bestowing of the doctoral hoods, awarding of the M.D. degrees, and the administration of the Oath of Hippocrates. An address by a speaker recommended by the graduating class to the Dean of the College of Medicine may also be included. A reception hosted by the Dean of the Quillen College of Medicine for the graduating class, their families, faculty and other invited guests follows the Commencement ceremony.

Attendance at Commencement ceremony is required. Petitions for graduation in absentia must be submitted in writing to the Executive Associate Dean for Academic and Faculty Affairs.

It is the policy of East Tennessee State University that only students who have met degree requirements will be permitted to participate in graduation ceremonies. All Quillen students are expected to attend and
participate in the graduation ceremony appropriate to the date they complete their degree requirements. Students who finish requirements for the degree after the regularly scheduled graduation date and prior to the next regularly scheduled enrollment period for the college, MAY BE PERMITTED TO PARTICIPATE IN THE GRADUATION EXERCISE WITHOUT RECEIVING A DIPLOMA.

The only students who will be permitted to “walk” (participate in the Commence ceremony without receiving a diploma) are those who will complete all requirements for the degree prior to the beginning of the next regularly scheduled enrollment period. To participate in the May Commence, all requirements must be completed by June 30th. In December, the requirements must be completed before the beginning of Spring Semester. If an additional period of enrollment is required, the student will participate in the next regularly scheduled graduation exercise.

To receive permission to participate in the graduation exercises (“walk”) under these special conditions the student must SEEK PERMISSION through the Executive Associate Dean for Academic and Faculty Affairs at least one week prior. For those graduating “off schedule” the Quillen College of Medicine diploma will be ordered once all requirements are met and will be forwarded to the graduate by the Registrar’s Office. The date of graduation on the diploma will reflect the date on which all requirements were successfully completed.

Standing Committees

The standing committees of the Quillen College of Medicine are listed below with a brief description of each committee’s function. An asterisk (*) indicates the committees on which there are voting student members and a double asterisk (**) indicates the committees on which there are non-voting student members.

**Academic Partnership Council:** Representatives of the VA hospital and dean’s staff meet to consider concerns related to the medical school-VA hospital affiliation.

**Admissions Committee***: responsible for the selection of students for medical student status.

**Chairs Group:** The dean meets with departmental chairs and dean’s staff on a regular basis to discuss medical school concerns, problems, and budget.

**Committee of Basic Science Chairs:** meets at regular intervals to discuss problems of mutual concern to the basic science departments.

**Committee of Clinical Chairs:** meets at regular intervals to discuss problems of mutual concern to the clinical science departments.

**Committee on Women’s and Gender Issues***: serves as a resource in the Quillen College of Medicine for issues concerning women's and gender issues.

**Continuing Medical Education Advisory Committee:** The committee has an active role in planning and guiding the office of continuing medical education in future program ideas.

**Criminal Background Administrative and Drug Screen Committee (CBADSC):** This committee evaluates and determines an appropriate course of action if concerns are unresolved after the reviewing physician evaluates the results of all drug screens. The CBADSC is comprised of the Executive Associate Dean for Academic Affairs, Executive Associate Dean for Clinical Affairs, and the Associate Dean for Student Affairs. The CBADSC will be responsible for making recommendations to the Dean in all such matters.

**Faculty Advisory Council:** an elected committee of representatives from each medical school department (not including chairs) to recommend to the dean actions of concern to the medical faculty.

**Financial Aid and Scholarship Committee***: establishes the policies under which the student financial aid office functions, recommends students for financial aid, and recommends which students should receive scholarships and/or honor awards.

**Hospital Liaison Subcommittee of ICGME:** Representatives of clinical departments, affiliated hospitals, and the dean’s staff meet to discuss problems of mutual concern involving the medical student and residency education programs.
Institutional Committee on Graduate Medical Education: Residency program directors and peer selected residents perform a periodic analysis of each residency training program.

Learning Resources Advisory Committee*: consults with the Assistant Dean for Learning Resources on library policies and procedures

Medical Student Education Committee*: responsible for recommendations related to the quality of the medical student education program

Promotion & Tenure Committee: The committee serves as an advisor to the dean for faculty promotion & tenure.

Student Promotions Committee**: monitors progress of all students and recommends actions involving students who have academic deficiencies

Organization of Student Representatives
Each class of students functions autonomously with respect to class related matters. As such, a student government association (SGA) does not exist. A defacto SGA does exist in the form of the Organization of Student Representatives (OSR). OSR serves as a liaison between the student body and administration, conducts activities that promote camaraderie across classes and serves as a change agent. Each class is represented on OSR through its president and two additional members-at-large. A full description of OSR can be found on the internet at http://www.etsu.edu/com/studentsvcs/lifeoutside/osr.aspx

Student Organizations
American Medical Association
Chapter of American Medical Student Association
Chapter of Student National Medical Association
Complementary and Alternative Medicine Student Interest Group
Chapter of Christian Medical and Dental Association
Emergency Medicine Interest Group
Family Medicine Interest Group
Global Health Interest Group
Internal Medicine Interest Group
Medical Ethics Interest Group
Pediatrics Interest Group
Psychiatry Student Interest Group
Surgery Student Interest Group
Student Physicians Interested in Anesthesiology
Student Women in Medicine
Women's Health Student Interest Group

Honor Medical Society
Alpha Omega Alpha is the national honor medical society. The Delta Chapter of Tennessee was established at the Quillen College of Medicine in 1985. Alpha Omega Alpha elects outstanding medical students, graduates, alumni, faculty, and honorary members to its ranks. Its purpose is to recognize and perpetuate excellence in the medical profession by promoting scholarship, encouraging high standards of character and conduct, and recognizing high attainment in medical science, practice, and related fields. Junior and senior medical students who are ranked among the top 25% of the class academically are invited to apply for election to AOA.

Gold Humanism Honor Society
The Gold Humanism Honor Society (GHHS) is dedicated to recognize, support and promote the values of humanism and professionalism in medicine. The Society is committed to working within and beyond medical education to inspire, nurture and sustain lifelong advocates and activists for patient-centered medical care. The GHHS is a steadfast advocate for humanism through activities on campus and involvement with its membership. Creating a chapter of the GHHS signifies to students and faculty that an
institution places high value on the interpersonal skills and attitudes that are essential for excellent patient care. Inspiration for the GHHS began in the late 1990s, when medical educators and residency program directors expressed the need for a mechanism to identify applicants for internships and residencies who have outstanding clinical and interpersonal skills.

Inclement Weather

The official radio station for reporting the status of classes and other activities of the Quillen College of Medicine during inclement weather is WETS-FM 89.5. All students are to govern themselves according to the status as reported by this station for the university. Medical students scheduled in various clerkships are not considered "essential personnel," since they do not have direct patient responsibilities; however, learning opportunities may be enhanced, given the limited hospital personnel available during such weather. Therefore, third- and fourth-year students are to contact their preceptor whenever classes are canceled due to weather in order to gain direction regarding the role they might fill in their particular clerkship/elective assignment.

Statement of Nondiscrimination

East Tennessee State University is fully in accord with the belief that educational and employment opportunities should be available to all eligible persons without regard to age, sex, color, race, religion, national origin or disability. It is the intent of the university to comply fully with Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990, and all other federal civil rights statutes. Inquiries and complaints alleging violation of this policy should be directed to the Dean of the Quillen College of Medicine or to the Vice President for Academic Affairs, ETSU.

University Smoking Policy

In the interest of the health, safety and property of all campus employees, students and guests, the following policy will govern the smoking of tobacco products in buildings and on property owned or operated by East Tennessee State University.

Effective August 11, 2008, ETSU is a Tobacco-Free Campus, with smoking and all other tobacco usage permitted only in private vehicles. This policy applies to all university buildings/grounds; ETSU-affiliated off-campus locations and clinics; any buildings owned, leased or rented by ETSU in all other areas; and ETSU facilities located on the campus of the James H. Quillen Veterans Affairs Medical Center at Mountain Home. Tobacco use is also prohibited in all state vehicles. This tobacco-free policy is in effect 24 hours a day year-round.

College and University Security Information Act

Pursuant to the requirements of the College and University Security Information Act, the following information is available and will be provided upon request:

1. Annual crime statistics and crime rates for crimes occurring on this campus as reported to and compiled by the Tennessee Bureau of Investigation for each of the most recent three years. (The first such report required under this Act was available January 1990. Therefore it was January 1992 when three years of crime rates and statistics were available.)

2. Copies of Board of Regents and/or institutional security related policies and procedures and certain other related information are available at http://www.etsu.edu/security.asp. If a printed version of these statistics is necessary, a copy may be obtained through the ETSU Department of Public Safety.