## CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>PURPOSE OF STUDENT HANDBOOK</td>
<td>4</td>
</tr>
<tr>
<td>HISTORY AND GOVERNANCE</td>
<td>4</td>
</tr>
<tr>
<td>STATEMENT OF PURPOSE</td>
<td>4</td>
</tr>
<tr>
<td>SCHOOL OF MEDICINE MISSION</td>
<td>5</td>
</tr>
<tr>
<td>FACILITIES</td>
<td>5</td>
</tr>
<tr>
<td>The University Hospitals and Health System; Jackson Medical Mall; Affiliated Hospitals</td>
<td></td>
</tr>
<tr>
<td>ADMINISTRATION</td>
<td>6</td>
</tr>
<tr>
<td>EQUAL OPPORTUNITY STATEMENT</td>
<td>6</td>
</tr>
<tr>
<td>DIVERSITY STATEMENT</td>
<td>6</td>
</tr>
<tr>
<td>POLICY ON RELIGIOUS DIVERSITY</td>
<td>7</td>
</tr>
<tr>
<td>SCHOOL OF MEDICINE GOALS AND OBJECTIVES</td>
<td>7</td>
</tr>
<tr>
<td>PROGRAM</td>
<td>9</td>
</tr>
<tr>
<td>TECHNICAL STANDARDS: ADMISSION, RETENTION, PROMOTION AND CERTIFICATION</td>
<td>9</td>
</tr>
<tr>
<td>Observation; Communication; Motor; Intellectual, Conceptual, Integrative, and Quantitative Abilities; Behavioral and Social Attributes</td>
<td></td>
</tr>
<tr>
<td>PROFESSIONALISM</td>
<td>11</td>
</tr>
<tr>
<td>Professional Appearance Guidelines, Professional Behavior</td>
<td></td>
</tr>
<tr>
<td>POLICY ON PROFESSION BEHAVIOR</td>
<td>12</td>
</tr>
<tr>
<td>CODE OF HONORABLE AND PROFESSIONAL CONDUCT</td>
<td>13</td>
</tr>
<tr>
<td>POLICY ON ACADEMIC STATUS</td>
<td>13</td>
</tr>
<tr>
<td>A. Promotions Committee</td>
<td>13</td>
</tr>
<tr>
<td>B. Grading</td>
<td>13</td>
</tr>
<tr>
<td>C. Promotion</td>
<td>14</td>
</tr>
<tr>
<td>D. Leave of Absence</td>
<td>16</td>
</tr>
<tr>
<td>E. Withdrawal</td>
<td>16</td>
</tr>
<tr>
<td>F. Dismissal</td>
<td>16</td>
</tr>
<tr>
<td>MECHANISM FOR APPEAL</td>
<td>17</td>
</tr>
<tr>
<td>ACADEMIC ACHIEVEMENT POLICY</td>
<td>17</td>
</tr>
<tr>
<td>POLICY REGARDING PERSONAL BELONGINGS DURING EXAMS</td>
<td>18</td>
</tr>
<tr>
<td>ATTENDANCE POLICY</td>
<td>18</td>
</tr>
<tr>
<td>POLICY ON STUDENT DUTY HOURS</td>
<td>19</td>
</tr>
<tr>
<td>On-Call Activities, Oversight</td>
<td></td>
</tr>
<tr>
<td>COURSE SYLLABI</td>
<td>19</td>
</tr>
<tr>
<td>PODCASTING GUIDELINES</td>
<td>20</td>
</tr>
<tr>
<td>EVALUATION</td>
<td>20</td>
</tr>
<tr>
<td>Topic</td>
<td>Page</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>------</td>
</tr>
<tr>
<td>STUDENT ASSISTANCE PROGRAM</td>
<td>27</td>
</tr>
<tr>
<td>INTERNATIONAL TRAVEL</td>
<td>27</td>
</tr>
<tr>
<td>STUDENT DISABILITY INSURANCE</td>
<td>27</td>
</tr>
<tr>
<td>ACADEMIC ACCOMMODATIONS</td>
<td>28</td>
</tr>
<tr>
<td>MEDICAL INSURANCE REQUIREMENT</td>
<td>28</td>
</tr>
<tr>
<td>STUDENT AND EMPLOYEE HEALTH</td>
<td>28</td>
</tr>
<tr>
<td>IMMUNIZATION REQUIREMENT</td>
<td>29</td>
</tr>
<tr>
<td>DRUG PROGRAM</td>
<td>29</td>
</tr>
<tr>
<td>EMPLOYEE/STUDENT DRUG AWARENESS PROGRAM</td>
<td>29</td>
</tr>
<tr>
<td>LEGAL SANCTIONS UNDER LOCAL, STATE OR FEDERAL LAW</td>
<td>30</td>
</tr>
<tr>
<td>TOBACCO PRODUCT USE</td>
<td>30</td>
</tr>
<tr>
<td>FIREARMS POLICY</td>
<td>30</td>
</tr>
<tr>
<td>MEDICAL CENTER SAFETY PRECAUTIONS</td>
<td>30</td>
</tr>
<tr>
<td>Personnel, Equipment, Teaching Laboratories, Behavior Risk</td>
<td></td>
</tr>
<tr>
<td>BLOOD BORNE PATHOGENS POLICY</td>
<td>31</td>
</tr>
<tr>
<td>BLOOD BORNE PATHOGENS EXPOSURE</td>
<td>31</td>
</tr>
<tr>
<td>MISTREATMENT POLICY</td>
<td>31</td>
</tr>
<tr>
<td>General Mistreatment; Discrimination; Sexual Misconduct</td>
<td></td>
</tr>
<tr>
<td>CONFIDENTIALITY</td>
<td>33</td>
</tr>
<tr>
<td>INFORMATION POLICY</td>
<td>33</td>
</tr>
<tr>
<td>Scope, Responsibilities, Passwords</td>
<td></td>
</tr>
<tr>
<td>DIGITAL AND ELECTRONIC COPYRIGHT POLICY</td>
<td>34</td>
</tr>
<tr>
<td>PUBLIC WIRELESS ACCESS POLICY</td>
<td>35</td>
</tr>
<tr>
<td>EMAIL POLICY</td>
<td>35</td>
</tr>
<tr>
<td>SOCIAL MEDIA</td>
<td>36</td>
</tr>
<tr>
<td>FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT OF 1974</td>
<td>37</td>
</tr>
<tr>
<td>Student Access to Records; Release of Information; Accuracy of Educational Records</td>
<td></td>
</tr>
<tr>
<td>EMERGENCY PROCEDURES</td>
<td>38</td>
</tr>
<tr>
<td>Fire; Tornadoes or Severe Weather; Suspicious Persons</td>
<td></td>
</tr>
<tr>
<td>LOST AND FOUND</td>
<td>39</td>
</tr>
<tr>
<td>COMPLAINTS</td>
<td>39</td>
</tr>
<tr>
<td>MEDICAL CENTER PROPERTY</td>
<td>40</td>
</tr>
<tr>
<td>MEDICAL CENTER TELEPHONE SYSTEM DIALING INSTRUCTIONS</td>
<td>40</td>
</tr>
<tr>
<td>EMERGENCY NUMBERS</td>
<td>40</td>
</tr>
<tr>
<td>UMMC CAMPUS MAP</td>
<td>41</td>
</tr>
</tbody>
</table>
PURPOSE OF STUDENT HANDBOOK

The School of Medicine Student Handbook and the University of Mississippi Medical Center Bulletin are the primary sources of information about the School of Medicine and the Medical Center. It is the responsibility of each medical student to be familiar with each document.

Copies of the student handbook and the bulletin are provided to students during their orientation to medical school and posted on the School of Medicine’s website. General information, rules, regulations and responsibilities pertaining to medical students, included in these documents, are discussed during orientation.

School of Medicine and Medical Center policies are subject to revision at any time without prior notice. Medical students are notified of any relevant changes in policy made effective during the course of the academic year.

As members of the academic community, medical students have a voice in the formulation and application of policies and procedures and are responsible for adhering to the standards of scholarship and conduct essential to the educational mission of and community life at the Medical Center.

HISTORY AND GOVERNANCE

The Medical Center in Jackson is the health sciences campus of the University of Mississippi. The Medical Center opened in 1955, but its beginnings go back to 1903 when a special act of the Board of Trustees created the School of Medicine. Except for the 1909-10 sessions when clinical training was provided at the Charity Hospital in Vicksburg, the School of Medicine operated continuously as a two-year school on the Oxford campus for more than half a century. In the summer of 1955, the school was moved to the state capital at Jackson and expanded to include the third and fourth years of medical training. The first class was graduated in June 1957.

The Medical Center functions as a separately funded, semi-autonomous unit responsible to the chancellor of the University of Mississippi, and through him to the constitutional Mississippi Board of Trustees of State Institutions of Higher Learning, which governs all eight state institutions of higher learning. All final authority for the operation of the institutions under its control lies with this board.

STATEMENT OF PURPOSE

The 1950 Mississippi Legislature enlarged and strengthened health professions education in Mississippi by enacting bills to establish and construct the Medical Center in Jackson as part of the University of Mississippi. The Medical Center unites the interrelated activities of education in the health sciences and accepts responsibility for teaching, research, service and leadership in this field. Its programs embrace training for physicians, dentists, nurses and related members of the health team; graduate study in the biomedical sciences; and the delivery of health care in the teaching hospitals and clinics.

The parent campus, the University of Mississippi, chartered in 1844, has five areas of focus in its current Statement of Purpose. One of these is health. “The University will continue to provide the professional education of those who deliver and administer human health services and those who perform research aimed at improving the efficiency, the effectiveness, quality, and availability of health care.

Within this framework, the Medical Center’s principal and continuing purpose is to accomplish the interrelated goals of health professional education for Mississippi: to teach in a superior manner the art and science of health care to students of exceptional promise and talent; to provide high-quality treatment for all patients using the disciplines and specialties of modern health care; to lead the way to discoveries which will raise the health level of Mississippians and, indeed, all mankind; to foster dedication to lifelong learning; to respond to community needs through continuing education and outreach programs that extend beyond the campus; and to recruit and retain the caliber of faculty necessary to meet these goals. The Medical Center fosters and protects an intellectual, emotional and
challenging learning environment conducive to educational excellence in the health sciences, productive scientific investigation and exemplary patient care, and moves toward the ultimate goal of improved health and well-being for the citizens of Mississippi, the region, the nation and the world.

Medical Center graduates are expected to possess and to demonstrate the skills and knowledge necessary to practice their disciplines as competent health professionals. The Medical Center regularly uses appropriate external and internal measurement tools to assess the institution’s effectiveness in training health professionals for Mississippi and to evaluate its programs for patient care, research, continuing education and outreach.

The expeditious growth of the Medical Center into a major academic health sciences center reflects the deep commitment of the State of Mississippi, the Mississippi Board of Trustees of State Institutions of Higher Learning and the administration and faculty of the University of Mississippi Medical Center to the continuing fulfillment of this statement of purpose.

SCHOOL OF MEDICINE MISSION

The School of Medicine’s principal mission is to offer an excellent, comprehensive and interrelated program of medical education, biomedical research and health care. Through this program, the ultimate goal of the school is to provide quality and equitable health care to all citizens of Mississippi, the region and the nation. A core value of this mission is respect for the multiple dimensions of diversity reflected in all people. In support of this mission, the school offers an accredited program of medical education that trains a diverse, skilled, compassionate and respectful physician workforce in numbers consistent with the health care needs of Mississippi, professionals who are responsive to the health problems of the people, aware of health care disparities and committed to medical education as a continuum which must prevail throughout professional life. In addition, the school seeks to expand the body of basic and applied knowledge in biomedical sciences for the state, the nation and the world; to improve systems of health care delivery; and to demonstrate model patient care for all members of its diverse community.

FACILITIES

The Medical Center occupies a 164-acre tract of University-owned land in the heart of the capital city. The original eight-story building is now the nucleus of a major academic health sciences complex, more than quadruple in size since its opening in 1955. The Schools of Medicine, Nursing, Health Related Professions, Pharmacy and Dentistry all have their own buildings on campus. The dental education building and a major classroom addition were completed in 1977; a clinical sciences expansion to the medical school was occupied in 1978; and the Verner Smith Holmes Learning Resource Center was occupied in 1982. An ambulatory care center – the University Physicians Pavilion – was completed in 1987, and an addition to the learning resource center was completed in 1990. The Arthur C. Guyton Laboratory Research Building opened in 1993 and was expanded in 2008. In addition to academic, research and patient care areas, other campus facilities include an alumni house and the Norman C. Nelson Student Union. The Medical Center’s graduate programs in the health sciences previously operated under the auspices of the Graduate School of the University of Mississippi; the Medical Center’s School of Graduate Studies in the Health Sciences was established in 2001.

The University Hospitals and Health System

The University Hospitals and Health System (UHHS) are the teaching hospitals for all Medical Center education programs and a 772-bed diagnostic and treatment referral center for the entire state. The hospital system includes the ambulatory services at the Jackson Medical Mall, faculty practice in the University of Mississippi Pavilion; the Blair E. Batson Hospital for Children, which includes both the Mississippi Children’s Cancer Clinic and the Children’s Rehabilitation Center; the Winfred L. Wiser Hospital for Women and Infants; the Wallace Conerly Hospital for Critical Care; University Hospital; and the Holmes County Hospital and Clinics.
Jackson Medical Mall Thad Cochran Center

Some UHHS clinics are located at the Jackson Medical Mall Thad Cochran Center. Services at the mall include immunization; hypertension counseling and treatment; tuberculosis screening; diabetes education and research; and STD screening and counseling. The Departments of Family Medicine, Medicine, Pediatrics, and Ob-Gyn collaborate in a primary care clinic. Other mall tenants are the Hinds County Health Department and the City of Jackson Department of Human Services.

Affiliated Hospitals

The G.V. (Sonny) Montgomery VA Medical Center of Jackson, with 376 general patient beds and a 120-bed nursing home, is the principal teaching affiliate for Medical Center educational programs. The Mississippi Baptist Medical Center also is affiliated.

ADMINISTRATION

The University answers to the Board of Trustees through the University’s administrative head, Chancellor Jeffrey S. Vitter, whose office is on the Oxford campus. The chief executive officer at the semiautonomous Medical Center is Dr. LouAnn Woodward, vice chancellor for health affairs and dean of the School of Medicine. Executive leadership of the School of Medicine includes: Dr. Loretta Jackson-Williams, vice dean (601) 984-5006; Jeni Tipnis, assistant dean for curriculum (601) 815-7158; Dr. Jerry Clark, associate dean for student affairs (601) 984-5012; Dr. Sharon P. Douglas, associate dean for coordination of education at the G.V. (Sonny) Montgomery VA Medical Center (601) 362-4471 (Ext. 1860); Dr. Rick Barr, senior associate dean for graduate medical education; Dr. J. Marc Majure, assistant dean for graduate medical education (601) 984-1113; Dr. Stephen Manual, associate dean for admissions (601) 984-5010; Dr. Shirley D. Schlessinger, associate dean for graduate medical education (601) 984-1113; and Dr. Patrick Smith, associate dean for faculty affairs (601) 984-5003.

EQUAL OPPORTUNITY STATEMENT

The Medical Center adheres to the principle of equal educational and employment opportunity without regard to race, creed, sex, color, religion, marital status, sexual orientation, age, national origin, disability or veteran status. This policy extends to all programs and activities supported by the Medical Center. Under the provisions of Title IX of the Educational Amendments of 1972, the Medical Center does not discriminate on the basis of sex in its educational programs or activities with respect to admissions or employment.

DIVERSITY STATEMENT

The School of Medicine is proud to be part of Mississippi’s only academic health science campus. Fulfillment of the school’s mission requires student, faculty, administration and staff respect for and appreciation of the rich cultural heritage and growing diversity of the citizens of Mississippi, including their:

- demographic attributes (race; ethnicity; gender; gender identity; sexual orientation; age; educationally or financially disadvantaged background; socioeconomic status; marital and family status; rural, state and national origin; languages spoken; religious and spiritual beliefs; and culture),
- personal attributes (including integrity; communication; skills and abilities; disabilities; work habits; interactions with people; and desire to learn) and
- life experiences (including health care, community service, leadership, teamwork and employment).

Diversity, inclusion and cultural humility enrich the teaching and learning environment. Students think more vigorously and imaginatively, enhancing their preparation as citizens and professionals committed to providing all patients, including those from underserved populations, access to quality and equitable health care that can ameliorate the health care disparities of Mississippians and the nation through medical education, biomedical research and patient care.
POLICY ON RELIGIOUS DIVERSITY*

In an effort to embrace religious diversity at the Medical Center, a policy has been instituted to address the observance of religious holidays for individuals of all faiths. It is the intent of the institution to make every effort to reasonably accommodate individuals based on their religious beliefs. Observation of religious holidays in all faiths will be supported except when detrimental to patient care. Conflicts between religious obligations and patient care obligations are handled much as they would in clinical practice; that is, patient care responsibilities take precedence unless coverage has been previously arranged. In an effort to respect students’ religious customs, departments will attempt to adjust schedules to allow the observance of these holidays. Any observance of religious holidays will not be a negative factor in the grading of a student’s performance. In the event the conflict is with an essential experience (e.g., board exams), the essential experience will take precedence. It is the student’s responsibility to inform the appropriate person in the department of his or her request for accommodation before or at the initial clinical rotation orientation so that patient care and on-call responsibilities can be met in full. It is also the student’s responsibility to obtain coverage so that patient care and on-call coverage are not compromised. In the event students cannot obtain coverage, they are expected to meet their responsibilities by taking call regardless of the schedule conflict. If scheduling conflicts with religious observances occur in regard to daily patient care activities such as ward rounds, writing notes or monitoring patients, the department may excuse students who have made prior arrangements to cover their responsibilities by performing these duties at another time or by obtaining coverage from other students or house officers. These arrangements must be made in advance and must be satisfactory to the department. Questions and requests for additional information should be directed to student affairs officers or the director of pastoral services.

Like the other schools on the UMMC campus, the School of Medicine is committed to maintaining an educational environment that fosters respect for and sensitivity to individual differences; promotes personal and professional development; and gives all students every opportunity to succeed, regardless of ethnicity, gender or socioeconomic status.

*Adapted in part from the University of Nebraska Religious Policy Statement.

SCHOOL OF MEDICINE GOALS AND OBJECTIVES

The School of Medicine’s principal responsibility is to offer an excellent, comprehensive program of medical education, biomedical research and health care. The ultimate goal of this program is the improvement of the physical and mental well-being of citizens of the state, the nation and the world.

Primary Goal: The School of Medicine’s primary goal is to offer an accredited program of medical education which will provide well trained physicians and certain supporting health care professionals, in numbers consistent with the health care needs of the state, who are responsive to the health problems of the people and committed to medical education as a continuum that must prevail throughout professional life.

Related Goals: The School of Medicine’s related goals are to expand the body of basic and applied knowledge in biomedical sciences; to improve systems of health care delivery; to demonstrate model medical care for hospitalized and ambulatory patients; and to provide excellent programs of continuing education for the state’s practicing physicians.

Objectives: The educational program of the School of Medicine is designed to achieve the multiple goals of dissemination of knowledge through teaching, application of knowledge through clinical practice and creation of new knowledge through scientific research. The specific educational program objectives set forth below
reflect the essential requirements for physicians to act in an ethical and altruistic fashion while providing competent medical care and fulfilling their obligations to their patients.

I. Graduates must have sufficient knowledge of the structure and function of the human body to recognize alterations from the normal. They must understand the various causes of such abnormalities and their pathogenesis. At the completion of the medical school curriculum, students must be able to demonstrate:

A. Knowledge of the normal structure and function of the human body and each of its major organ systems;
B. Knowledge of the molecular, biochemical and cellular mechanisms which help maintain the body's homeostasis;
C. Knowledge of the various causes (genetic, developmental, metabolic, toxic, microbiologic, autoimmune, neoplastic, degenerative and traumatic) of diseases and the ways in which they impact the body (pathogenesis);
D. Knowledge of the altered structure and function (pathology and pathophysiology) of the body and its major organ systems that are seen in various diseases and conditions;
E. An understanding of the power of the scientific method in establishing the causation of disease and efficacy of traditional and nontraditional therapies; and
F. A commitment to engage in lifelong learning to stay abreast of relevant scientific advances, especially those in the disciplines of genetics and molecular biology.

II. Graduates must possess the necessary diagnostic and interventional skills to accurately evaluate, diagnose and plan treatment appropriate for each patient. At the completion of the medical school curriculum, students must be able to demonstrate:

A. Competence in obtaining an accurate medical history that covers all essential aspects of the patient's history, including issues related to age, gender, and ethnic and socioeconomic status;
B. Competence in performing both a complete and an organ system-specific examination, including one for mental status;
C. Competence in performing routine technical procedures, including, at a minimum, venipuncture, inserting an intravenous catheter, arterial puncture, inserting a nasogastric tube, inserting a foley catheter and suturing simple lacerations;
D. Competence in interpreting results of commonly used diagnostic tests and procedures (i.e., laboratory, roentgenographic, electrocardiographic);
E. Knowledge of the most frequent manifestations of common disorders;
F. Ability to reason deductively in solving clinical problems;
G. Ability to construct appropriate diagnostic and therapeutic plans/strategies for patients with common conditions, both acute and chronic, including medical, surgical and psychiatric conditions and those requiring short- and long-term rehabilitation;
H. Ability to recognize patients with immediately life-threatening conditions (i.e. infectious, cardiac, pulmonary, allergic, neurologic or psychiatric diseases regardless of etiology) and to institute appropriate initial therapy;
I. Ability to recognize and outline initial management for patients with conditions requiring critical care;
J. Knowledge of how to relieve pain and ameliorate suffering of patients; and
K. Ability to communicate effectively, both orally and in writing, with patients, patients’ families, colleagues and health care team members with whom physicians must exchange information in carrying out their responsibilities.

III. Graduates must possess those characteristics, attitudes and values that are needed to provide ethical and beneficent medical care for all patients. At the completion of the medical school curriculum, students must be able to demonstrate:
A. Knowledge of theories and principles that govern ethical decision-making and the major ethical questions in medicine, particularly those at the beginning and end of life and those that surface from the rapid expansion of technology;

B. Compassionate and nonjudgemental treatment of all patients and respect for the privacy and dignity of all patients;

C. Honesty and integrity in all interactions with patients, families, colleagues and others with whom physicians must interact in their professional lives;

D. An understanding of, and respect for, the roles of other health care professionals and of the need to collaborate and work with others in caring for individual patients and in promoting the health of defined populations;

E. A commitment to advocate the interests of one’s patients over one’s own interests at all times;

F. An understanding of the threats to medical professionalism posed by the conflicts of interest inherent in various financial and organizational arrangements for the practice of medicine; and

G. The capacity to recognize and accept limitations in one’s knowledge and clinical skills and a commitment to continuously improve one’s knowledge and abilities.

IV. Graduates must have the ability to use systematic approaches for promoting, maintaining and improving the health of individuals and populations. At the completion of the medical school curriculum, students must be able to demonstrate:

A. Knowledge of the important nonbiological determinants of poor health and of the economic, psychological, social and cultural factors that contribute to the development and/or continuation of maladies;

B. Knowledge of the epidemiology of common maladies within a defined population and the systematic approaches useful in reducing the incidence and prevalence of those maladies;

C. The ability to identify factors that place individuals at risk for disease or injury, to select appropriate tests for detecting patients at risk for specific diseases or in the early stage of disease, and to determine strategies for responding appropriately;

D. The ability to retrieve information from electronic databases and other resources, manage and utilize biomedical information for solving problems and make decisions that are relevant to the care of individuals and populations;

E. Knowledge of various approaches to the organization, financing and delivery of health care; and

F. A commitment to provide care to patients who are unable to pay and to advocate for access to health care for members of traditionally underserved populations.

Adapted from Learning Objectives for Medical Student Education, Guidelines for Medical Schools AAMC. 1998.

Revised by the School of Medicine Curriculum Committee July 2009 and April 2011.

PROGRAM

The School of Medicine offers a course of study leading to the degree of Doctor of Medicine. A combined M.D.-Ph.D. program also is offered. The four-year program leading to the degree of Doctor of Medicine is accredited by the Liaison Committee on Medical Education. Consult the University of Mississippi Medical Center Bulletin for requirements and details.

TECHNICAL STANDARDS: ADMISSION, RETENTION, PROMOTION AND CERTIFICATION FOR THE DEGREE OF DOCTOR OF MEDICINE

Because the M.D. degree awarded to a senior medical student signifies the holder is prepared for entry into the practice of medicine within postgraduate training programs, graduates must have the knowledge and skills to function in a broad variety of clinical situations and to render a wide spectrum of patient care.

If they are to function in this manner, medical
students must have somatic sensation, the functional use of the senses of vision and hearing, and equilibrium. They must have sufficient exteroceptive sense (touch, pain and temperature), sufficient proprioceptive sense (position, pressure, movement, stereognosis and vibratory) and sufficient motor function to perform the activities described in the sections that follow. Students also must be able to consistently, quickly and accurately integrate all information received by whatever sense(s), have the intellectual ability to learn, integrate, analyze and synthesize data, and demonstrate the appropriate behavioral and social skills for patient interaction.

Technological compensation can be made for some handicaps in certain of these areas, but the student should be able to perform in a largely independent manner.

**Observation**

The medical student must be able to observe and participate in demonstrations and experiments in the basic sciences, including but not limited to physiologic and pharmacologic demonstrations in animals; microbiologic cultures; microscopic studies of microorganisms and tissues in normal and pathologic states; and anatomical specimens. Medical students are not required to participate in any procedure or service for which they have religious objection. Students must attend all required educational sessions whether or not they have religious objection and are responsible for the educational content of the session. In addition, students may not refuse to provide care to a patient based on religion, gender, sexual orientation, race, patient diagnosis or any other patient personal characteristic. It is required that students communicate with the course or clerkship director at the beginning of the course or clerkship when they are aware that procedures to which they object may occur. The student must be able to observe a patient accurately at a distance and close at hand. Observation necessitates the functional use of the senses of vision, hearing and somatic sensation. It is enhanced by the functional use of the sense of smell.

**Communication**

A medical student should be able to speak, to hear and to observe patients in a sensitive manner. A medical student should be able to elicit information; describe changes in the patient’s mood, activity and posture; and perceive nonverbal communication. The student also must be able to communicate effectively in oral and written form with all members of the health care team.

**Motor**

A student should have sufficient motor function to obtain information from patients by palpation, auscultation, percussion and other diagnostic maneuvers; to do basic laboratory tests; to carry out diagnostic procedures; to read electrocardiograms and radiographs; and to conduct anatomical dissections in the basic sciences and clinical years. A student should be able to execute the motor movements reasonably required to provide general and emergency care to patients. Examples of emergency treatment reasonably required of physicians are cardiopulmonary resuscitation, the administration of intravenous medication, the application of pressure to stop bleeding, the opening of obstructed airways, the suturing of simple wounds and the performance of simple obstetrical maneuvers. Such actions require coordination of both gross and fine muscular movements, equilibrium and functional use of the senses of touch and vision.

**Intellectual, Conceptual, Integrative and Quantitative Abilities**

These abilities include measurement, calculation, reasoning, analysis and synthesis. Problem-solving, the critical skill demanded of physicians, requires all of these intellectual abilities. In addition, the student must be able to comprehend three-dimensional relationships and to understand the spatial relationships of structures.

**Behavioral and Social Attributes**

A student must possess the emotional health required to fully use his or her intellectual abilities; to exercise good judgment; to promptly complete the responsibilities attendant to the diagnosis and care of patients; and to develop
mature, sensitive and appropriate relationships with patients. A student must be able to tolerate physically taxing workloads and to function effectively under stress. A student must be flexible, and able to adapt to changing environments, and capable of functioning in the face of uncertainties inherent to the clinical problems of many patients.

PROFESSIONALISM

Professionalism is an inherent and vital part of the discipline and practice of medicine. The School of Medicine has adopted the Medical Student Professionalism Code and the Covenant for Medical Education.

Professional Appearance Guidelines: University of Mississippi School of Medicine Classroom Dress Guidelines

Shirts: Collared shirts, blouses and T-shirts may be worn as long as they do not contain inappropriate, offensive or distracting graphics. Tank tops and spaghetti straps are not appropriate. No undergarments should be exposed, with the exception of undershirts. These clothing items should not be extremely oversized or excessively baggy.

Pants: Pants should be in good condition, not tattered or with holes. Jeans, cargo pants and capris are acceptable. Pants should not be excessively clinging; leggings and spandex are not suitable to be worn as pants.

Shorts: Shorts should extend to at least mid-thigh in length and they should visibly extend beyond any shirt/top that is worn. Athletic shorts and cutoffs are not appropriate.

Skirts: Skirts must be of sufficient length to reach an ID card placed vertically at the knee. Athletic shorts and cutoffs are not acceptable.

Shoes: All footwear should be clean and in good condition. Sneakers, flip flops and sandals may be worn. House shoes should not be worn.

Other: Hats are appropriate as long as they do not have inappropriate, offensive or distracting graphics. The Student ID Badge should be worn on the person’s front, at the waist or higher. Garments such as sweat suits, jogging suits, camouflage or any type of pants and top worn for sportswear are not appropriate.

PROFESSIONAL DRESS GUIDELINES

Shirts: Men should wear button-down shirts. Women’s shirts should not be low cut or excessively clinging; these tops must have sleeves.

Pants, Skirts, Dresses: These items should not be denim; neither capris nor shorts are appropriate. Dresses and skirts must be of sufficient length to reach an ID card placed vertically at the knee. Men are required to wear belts with their pants.

Shoes: Shoes should be clean, neat and always with closed toes. Heels should be of modest height. Sandals, flip flops and house shoes are not appropriate.

ID Badge: UMMC policy requires employees to wear their ID badges at all times while on duty. The badge should be worn with the name and photo clearly visible on the front, upper torso and affixed to a collar, pocket, lapel or displayed on a short neck strap.

Accessories: Minimize excessively bright, dark or creatively-colorful nail polish. As a health precaution, no fake nails are allowed and natural fingernails should not extend more than one quarter-inch past the fingertip. Makeup should not be distracting. Hats and sunglasses should not be worn indoors. Tattoos should be covered. Visible piercings should be limited to the ears only, and earrings should not exceed one-and-a-half inch in size. Refrain from excessive use of fragrant hairspray, perfume or cologne.

SCRUBS GUIDELINES

Scrubs: Scrubs are acceptable to wear both in the classroom and in the hospital setting. Scrubs should be clean; top and bottom should be of matching color. Scrubs should not display any extra logos or embellishments. Plain, neutral T-shirts may be worn underneath, but they must be tucked into the pants. Clean and neat tennis shoes may be worn with scrubs.

GENERAL GUIDELINES

Hair: Hair should always be clean, well groomed and styled so that the face is visible. Extreme hair color or style distracts from a professional appearance and is not acceptable.
Facial Hair: Students who wear mustaches, beards or sideburns should keep them trimmed appropriately and well groomed. Those who shave their facial hair should make every effort to maintain a clean shaven look.

These recommendations for dress are expected to be adhered to any time the students are in the hospital/clinical setting or any time they interact with patients. Students are free to dress neatly and informally in the library or when on campus to study in the classroom building.

POLICY ON PROFESSIONAL BEHAVIOR

Students enrolled in the School of Medicine must develop the professional behaviors expected of a physician. Students will be evaluated in the areas of attentiveness, maturity, cooperation, responsibility, personal appearance, respect (for authority, peers, patients and other members of the health care team), communication, judgment, ethics, honesty and morality, as well as other characteristics of professionalism important for a career in medicine. Each day, a medical student will encounter a number of people who will observe professional or unprofessional behaviors. These people may report compliments or concerns related to the professional behavior of a student through verbal, written or other reporting mechanisms. Examples of reporting sources include: faculty members, residents, nurses, other health care providers, other Medical Center employees, medical school peers, patients or patients’ family members. Reports of exemplary professional or unprofessional behaviors or concerns should be made to the assistant or associate dean for student affairs or the assistant or associate dean for medical education.

When a student receives a report of a concern related to unprofessional behavior, the assistant or associate dean for student affairs or the assistant or associate dean for medical education shall meet with the student to discuss the incident.

Following the initial meeting with the assistant or associate dean for student affairs or the assistant or associate dean for medical education, the following actions will be taken:

1. If the incident is considered minor:
   - The initial interview and counseling session, as well as further monitoring of a student's performance in the area of concern, may suffice.
   - Other assistant or associate deans in the School of Medicine may be asked to participate in counseling and meeting with the students. The counseling session will be documented in the student's file in the office of the assistant or associate dean for student affairs or the office of the assistant or associate dean for medical education, but the report will not carry forth to future evaluations if the behavior does not recur and if there are no other reports of unprofessional behavior.
   - If the reported incident, upon investigation, is found to be frivolous and not valid, this fact will be clearly documented in the student's file.

2. If the incident is of serious concern or if there has been a pattern (greater than two) of minor incidents, the assistant or associate dean for student affairs or the assistant or associate dean for medical education, or other assistant or associate deans in the School of Medicine will interview and counsel the student as above and may:
   - Discuss the incident with the Dean's Council and recommend that the student be placed on leave of absence;
   - Discuss the incident with the Dean's Council and recommend that the student be placed on probation for unprofessional behavior;
   - Discuss the incident with the Dean's Council and recommend that the student repeat the course;
   - Discuss the incident with the Dean's Council and recommend the student repeat the academic year; or
   - Discuss the incident with the Dean's Council and recommend the student be dismissed from the School of Medicine.

These recommendations will be presented to the dean of the School of Medicine for approval. The mechanism for appeal is outlined in the School of Medicine Student Handbook. A student who
returns after a suspension, dismissal or withdrawal for unprofessional behavior will automatically be on academic probation for at least one academic quarter.

A student dismissed from the School of Medicine for unprofessional behavior may appeal for re-admission to advanced standing. Approved by SOM executive faculty February 22, 2005.

CODE OF HONORABLE AND PROFESSIONAL CONDUCT

In the tradition of high standards of professional and personal conduct described by Hippocrates, the students of the University of Mississippi School of Medicine created a code of honorable and professional conduct. They have dedicated themselves to the study and practice of medicine for the benefit of humanity. To maintain the altruistic spirit of this enterprise, students commit to upholding the principles of this code. In so doing they show respect for personal honor, morality, order and the rights of others, both at and outside the University. It is their goal, through the principles outlined in the code, to set standards and patterns of behavior that will serve them well in their growth toward excellence in the practice of medicine. Accordingly, faculty and staff have collectively agreed to endorse the spirit of the standards set forth in this code of honorable and professional conduct. A copy of the code is available at: http://somacadaff.umc.edu/policies/documents/HonorPolicy.pdf. Adopted by the Medical Student Council, May 11, 2009. Approved by the School of Medicine Dean’s Council, June 22, 2009. Presented to Executive Faculty, July 21, 2009.

POLICY ON ACADEMIC STATUS

A. Promotions Committee

The Promotions Committee shall be the primary body to act upon matters of student academic evaluation for promotion, recommendation for graduation, withdrawal and dismissal. The committee shall consist of faculty members in the appropriate teaching departments in the School of Medicine. The chairman of the Promotions Committee shall be appointed or designated by the dean. The Promotions Committee shall be responsible for decisions regarding promotion and academic status in each year and for recommendation for graduation to receive the M.D. degree. These recommendations shall be sent to the dean and shall be presented to the Executive Faculty of the School of Medicine for review before final implementation or notification of the student.

B. Grading

Each department directing a course or clinical block shall specify the requirements of that course or block, and the standards by which students of that course or block are evaluated and shall submit electronically in Systems, Applications and Products (SAP) in Data Processing for each student a numerical percentage grade for that course, with 70.0 the minimum passing grade.

Each department shall submit grades in completed courses electronically in SAP within 30 days of the final examination. When national testing examinations are to be used in the compilation of final grades, student grades must be submitted within 30 days of receipt of the results of such examinations. A grade of incomplete will be given when, at the end of a regular course period, additional work is required due to non-completion of a portion of the course requirements (i.e., lost time or missed examination because of illness or other extenuating circumstances). A grade of incomplete may be removed by completing missed work and/or by successfully completing examinations, whichever is appropriate.

A grade of incomplete must be removed within 12 months. A grade below 70.0 is a failing grade and is given when a student demonstrates deficiency in required
performance. It will require significant make-up work, reexamination, and/or repeating the course.

If a student is required to repeat a portion of a course including examination(s), an entire course or an entire year, the initial grade and the subsequent grade will both be recorded on the student’s permanent records, with the initial grade used to compute class academic rank and grade point average (GPA). At the end of each academic year, a weighted average will be computed to determine a class ranking that may provide a means to determine honors, awards and scholarships specifying an academic rating as a stipulation, or that may be used in transfers to other schools.

Student performance at UMMC is evaluated according to academic criteria, not on the basis of opinions or conduct in matters unrelated to academic standards. A course director (defined as one who has responsibility for a class or directed individual study) is given the authority over all matters affecting the academic conduct of that instructional unit, including the assignment of grades. The course director shall be presumed to have assigned the proper grade until it is proven otherwise. The burden of proof to the contrary rests with the student. Students shall have protection against prejudiced or capricious academic evaluation. It is expected that the method of grading by course directors will be made clear to students and course directors will be required to justify disputed grades. All records on which grades are based are expected to be retained on file for a minimum of six months following the scheduled completion of any instructional unit. Disputes associated with the assignment of grades must be filed in writing with the course director’s chair/department head and the School of Medicine within 10 working days of the receipt/posting of the grade. The chair/department head will have 10 working days to respond to the student’s dispute. After this response, if the student still feels the matter has not been resolved appropriately, a written appeal shall be made to the dean (See MECHANISM FOR APPEAL).

C. Promotion

To be eligible for promotion, a student must achieve a grade of not less than 70.0 in each course, have no incomplete grade and have a weighted average of 75.0 or higher. Sophomore students must also pass Step 1 of the United States Medical Licensing Examination (USMLE) to be eligible for promotion to the junior year. Senior students must also have passed USMLE Step 2 (Clinical Knowledge and Clinical Skills) to be eligible for graduation.

At the end of the year, a student who has no failing grades but has a weighted average below 75.0 will be required to satisfactorily complete remedial work before being promoted or graduated; in such a case, remedial work may include the possibility that an entire academic year must be repeated.

A student must satisfactorily complete all requirements before being promoted to the next higher academic year and before beginning courses in the next higher academic year. An exception to the latter may temporarily be made when grades are not immediately available, as in the case of delayed national test results. Under no circumstances will a student with known and unremedied academic deficiencies be allowed to begin courses in the next higher academic year.

Students with failing grades in one or more courses shall be placed on academic probation, and if not dismissed, will be required to remove probationary status by reexamination, by repeating a course or by repeating the year, as required by the Promotions Committee, executive faculty and dean. The Promotions Committee shall take into account a student’s overall performance and extenuating circumstances before reaching a final decision in this regard. Students with incomplete grades
Students who are required to repeat an entire year shall register for the actual credit hour value of that year and shall pay the usual fees of a full-time student for the period of time specified.

Sophomore students satisfactorily completing all course work for the second (M2) year may begin the junior (M3) year on a contingent basis pending receipt of the results of their initial USMLE Step 1 and upon completion of the M3 Boot Camp. A student who fails Step 1 may continue with the junior year, completing the rotation that is in progress if the student is in passing status. At the end of said rotation, the student will be placed in independent study for a period not to exceed eight total weeks. Students who receive a passing score on USMLE Step 1 during this period will qualify for promotion and may resume their junior (M3) year on the next available block. A passing score on the repeated attempt must be received before a student can resume the junior (M3) year and begin clinical work. No junior (M3) medical student will be allowed to miss more than eight weeks, including time spent in independent study, without being required to repeat the junior (M3) year.

Students who fail to receive a passing USMLE Step 1 score and miss more than eight total weeks of the junior (M3) year will be placed on leave and required to repeat the junior (M3) year in its entirety. To be eligible for a repeated attempt of the junior (M3) year, students must take USMLE Step 1 by May 1, allowing them to restart the junior (M3) year from its beginning with the next class. Students who fail to follow this process will be dismissed from the School of Medicine.

Senior students, satisfactorily completing all course work for graduation but failing to receive a passing score on USMLE Step 1, will be given one year beyond the original expected date of graduation to pass Step 2 and to receive their degree. Students failing to pass Step 2 within that year will no longer be eligible for the M.D. degree without additional coursework at this school. Such additional coursework shall consist of a remedial third (M3) year of medical school, which must be taken and passed in its entirety with all examinations. Any failed course or National Board examination in the remedial year may not be repeated and such a failure will result in the student’s dismissal from medical school. Following satisfactory completion of the entire remedial year, students again become eligible for the M.D. degree and have one additional year to pass the USMLE Step 2. Thereafter, students are no longer eligible for the M.D. degree and will be dismissed from the School of Medicine. Commencement ceremonies for the School of Medicine are in late May of each year to recognize degree candidates. Students are responsible for maintaining an appropriate course load and completing all requirements in time to be eligible for participation in the commencement activities. These include but are not limited to: technical skills requirements, a passing score on USMLE Step 2 Clinical Knowledge, a passing score on USMLE Step 2 Clinical Skills, four senior required courses, four senior elective courses and Senior Seminar. In the event a student has completed all degree requirements except for a scheduled June required or elective course, upon petition of the Dean’s Office, the student may be granted permission.
to participate in graduation activities. The School of Medicine strictly enforces this commencement policy. Participation in the commencement ceremony is not a guarantee or an indication of degree completion. To officially graduate from the institution, students must satisfy all university, school and course requirements.

D. Leave of Absence

A leave of absence from medical school may be granted by the dean or administrative designee for the following:

1. Students in good academic standing seeking to pursue training as a medical scientist (i.e., to pursue research experience or to complete a Masters or Ph.D.).

2. Students with academic, personal, financial or medical problems seeking a leave for special circumstances.

If the leave of absence is granted during the academic year for the remainder of that academic year with the potential of returning to repeat the entire academic year, final grades in courses which have been completed will be recorded in the Office of the Registrar. Grades in courses in progress shall be reported to the Office of the Registrar as “withdrawn.”

E. Withdrawal

A student with academic, personal or health problems precluding satisfactory performance or continued enrollment which require more than one academic quarter of leave may be allowed to withdraw. At the time of withdrawal, final grades in courses that have been completed will be recorded in the Office of the Registrar. Grades in progress shall be returned to the Office of the Registrar with a determination of “withdrawn.”

Any withdrawal by a student shall be presented to the appropriate promotions committee, which shall determine conditions under which the student may be readmitted, if at all, and shall make such recommendations to the dean and executive faculty. The student shall be informed of readmission eligibility status and requirements.

Students who voluntarily withdraw may not be readmitted except as a beginning first-year student (i.e., no advanced standing) if more than two years have elapsed since the withdrawal. If two years or less have elapsed since the withdrawal, a student may be admitted to advanced standing but must repeat entirely any course/block not previously completed. Alternatively, depending on academic standing and the time elapsed, a student may be required to repeat the entire academic year from which he or she withdrew.

In the event of withdrawal before the end of the first semester of the first year, the student will not be eligible for readmission except that he or she may apply for admission to the first year class as any other new student.

A student who withdraws and has been declared eligible for readmission must apply for readmission by petitioning the dean, stating the reasons for his or her withdrawal and why he or she now believes he or she is able to pursue academic studies successfully. This petition shall become a part of the student’s permanent record.

F. Dismissal

A student dismissed from the School of Medicine shall not be eligible for readmission in advanced standing. Such students shall not be precluded from applying for readmission to the first-year class as any other new candidate. Dismissal from the School of Medicine may be for:

1. Academic failure. This includes students who have academic deficiency in the current school year, students who have a repeat failing grade in any repeated course or block or who failed any course or block in a repeated year, or students with other failures as determined by the Promotions Committee.
2. Health reasons. This includes students who by reason of health, including behavioral and psychiatric disorders, are precluded from satisfactory academic performance or satisfactory performance as a physician in the practice of medicine.

3. Conviction of a felony.

4. Conduct deemed to be other than honorable or ethical (i.e., cheating on examinations, taking credit for work not one’s own, etc.)

5. Commiting an unlawful act on or off the Medical Center campus or for conduct discrediting the Medical Center in any way. The student will be subject to disciplinary action up to and including dismissal.

MECHANISM FOR APPEAL

The executive faculty shall act as an appeal body for all academic and/or unprofessional behavior matters that concern grades, promotion and conditions imposed by suspension, dismissal or withdrawal. Students shall be notified of adverse academic decisions such as the requirements for remedial work, the conditions upon withdrawal or dismissal. Each student shall be notified of his or her right to appear before the executive faculty to appeal such decisions. Any request for appeal must be by written petition to the dean within 14 days of the recommendation of the sanction. Failure to make a written appeal within this 14-day time period shall constitute a waiver of the appeal right and shall result in the sanction becoming final as recommended. During an appeal hearing before the executive faculty, the student shall be permitted at his or her expense to have an adviser or legal counsel at the hearing and through all other stages of the disciplinary process. The role of the counsel shall be limited to an advisory capacity only. The counsel will not be permitted to make opening or closing statements or questions, choose witnesses or make concluding statements on the student’s behalf. The student is entitled to present witnesses or other evidence, question opposing witnesses and make opening and concluding statements on his or her own behalf. The executive faculty shall record all hearings and the record shall be preserved until all avenues of appeal available to the student have expired. The executive faculty shall have the right to approve the recommended sanction, impose a lower sanction or no sanction, or impose a harsher sanction than recommended. The executive faculty shall render a written decision within 10 working days of the completion of the hearing and shall notify the student with a copy of the written decision. All decisions by the executive faculty concerning academic matters are final. The student shall have the right to file a procedural appeal in writing to the associate vice chancellor for medical education/provost within five working days. If a procedural violation is found to have occurred, the case will be returned to the point of procedural issue and readdressed.

ACADEMIC ACHIEVEMENT POLICY

The academic achievement policy for the School of Medicine ensures that students with academic difficulty participate in the UMMC Academic Achievement Program. Any student who maintains a grade of less than 70.0 in any single course or who maintains a weighted average grade of less than 75.0 for all courses will be referred to the associate dean for medical education. If so recommended by the dean, the student must, without exception, participate in this program. Once enrolled in the Academic Achievement Program, a student must fulfill the following requirements:

1. Meet with the appropriate course director(s) and/or course faculty to obtain an assessment of performance and guidelines for improvement;

2. Meet with the director of academic counseling to discuss appropriate academic assistance that is available to students, both directly and on a referral basis;

3. Meet with the associate dean for medical education or assigned administrative advisor. The student will communicate with his or her administrative advisor on a minimum monthly basis to give an update of progress, and the student may be required to be evaluated by Student Health;
4. Remain enrolled in the AAP until completion of all M2 requirements; and
5. Perform in a manner consistent with passage of Step 1, determined by a successful predictive score on the National Board of Medical Examiner’s Clinical Basic Science Shelf Assessment to be administered in May. Students who do not perform in like manner will be required to submit to an approved study program.

A student’s failure to actively participate in the Academic Achievement Program will be communicated to the School of Medicine Promotions Committee and will be considered in decisions regarding promotion.

Approved by SOM Curriculum Committee February 22, 2007.
Approved by SOM executive faculty February 27, 2007.

POLICY REGARDING PERSONAL BELONGINGS DURING EXAMS

The purpose of this policy is to provide clear guidelines and communication to students and faculty regarding appropriate and inappropriate use or presence of personal belongings in the examination setting at the School of Medicine. The presence of such items may not only be distracting to other students, but may also give the impression of unprofessional behavior.

A student’s personal items (e.g. book bags) should be stored prior to entry into the examination room.

Students may not bring certain personal belongings into the testing area, including the following (unless specifically permitted by the course director):
- mechanical or electronic devices capable of receiving, storing or transmitting information, such as cell phones, hand-held computers, laptop computers, etc.;
- watches with computer communication and/or memory capability;
- electronic paging devices;
- recording or filming devices;
- hats with bills or brims; or
- books, notes, study materials or scratch paper.

The proctor may take these items and store them in the room until the student has finished the examination. The proctor and/or the University of Mississippi Medical Center are not responsible for items left with the proctor.

Individual departments may impose other restrictions not detailed above; in such cases, these restrictions will be detailed in the departments’ respective course syllabi.

The National Board of Medical Examiners (NBME) provides specific instructions for the administration of the Subject National Board Examinations that are used by the School of Medicine. Students will be informed of these instructions before the start of these examinations will be required to adhere to those instructions.

Non-adherence to this policy in the School of Medicine will be considered unprofessional behavior on the part of the student and will be reviewed in accordance with the policy on academic status.

Approved by Executive Faculty March 23, 2004 Revised on June 25, 2018.

ATTENDANCE POLICY

Participation in the educational program of the School of Medicine is limited to highly qualified and motivated individuals who seek the knowledge, skills, attitudes and behaviors required for physicians to provide competent and compassionate care to a culturally diverse patient population. Students are expected to attend and participate in medical education opportunities. Student evaluation may be partially based upon participation if so stated in the course syllabus and approved by the Curriculum Committee.

All excused absences for medical treatment are coordinated through the Student Employee Health Clinic (R136, 601-984-1145). The school makes every effort to provide reasonable accommodations in order to access health services.
Students with three unexcused absences from mandatory classes or activities will be viewed as demonstrating unprofessional behavior, triggering the School of Medicine's Policy on Professional Behavior.

Approved by SOM Executive Faculty September 23, 2004.

POLICY ON STUDENT DUTY HOURS

The University of Mississippi Medical Center and its affiliated hospitals are committed to providing excellent patient care and outstanding education for medical students.

a. Duty hours of medical students enrolled in the M3 and M4 years are defined as all scheduled clinical and academic activities related to the educational component of the rotation, including patient care (both inpatient and outpatient), administrative duties related to patient care, time spent in-house during call activities, and scheduled academic activities such as conferences.

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

b. Scheduled duty hours for M3 and M4 students must not exceed the duty hours for residents (80 hours per week, averaged during a four-week period). M3 students should be allowed time to prepare for required examinations.

c. M3 and M4 students are to be provided with one day in seven free from responsibilities averaged over a four-week period, inclusive of call. One day is defined as one continuous 24-hour period free from all clinical, educational and administrative activities.

On-Call Activities

The objective of on-call activities is to provide students with continuity of patient care experiences throughout a 24-hour period. Inhouse call is defined as those duty hours beyond the normal workday when students are required to be immediately available in the assigned institution.

a. In-house call should occur no more frequently than every third night, averaged over a four-week period.

b. Continuous on-site duty, including inhouse call, should not exceed 24 consecutive hours. Students may remain on duty for up to six additional hours to participate in didactic activities, transfer care of patients, conduct outpatient clinics and maintain continuity of medical and surgical care.

c. No new patients should be assigned immediately after 24 hours of continuous duty.

Oversight

a. The School of Medicine policies and procedures are consistent with the LCME Accreditation Standards for the educational program and student work environment. Monitoring of scheduled duty hours will be done with a frequency sufficient to ensure an appropriate balance between education and service.

b. To monitor compliance with institutional duty hours policies and requirements, the Office of Medical Education will assess each UMMC clinical department at least annually. The extent and frequency of monitoring for each clinical rotation will be determined by the Office of Medical Education based upon data collected from the students and other data sources identified by the Office of Medical Education. Duty hours assessment also will be a component of the clinical rotation evaluation.

Approved by the SOM Curriculum Committee May 27, 2005.

Approved by the SOM Executive Faculty June 29, 2005, Revised by the SOM Executive Faculty, January 20, 2009.

COURSE SYLLABI

Course syllabi are issued by each course coordinator/department to students enrolled in each class at the beginning of the course. The syllabus is a course guide only and is not a contract. To meet varying educational and time requirements, the syllabus may be changed or modified by the course coordinator/department at any time without prior notice.
PODCASTING GUIDELINES
Currently, the didactic sessions are podcast via a student-run organization. The faculty appreciate that students find these podcasts invaluable and will make every effort to assure didactic sessions are accurately recorded. There will be times, however, when the content delivered will not be amenable to podcasting. Some examples include using the whiteboard, small group discussions and other active-learning activities. As the curriculum evolves there may be content presented in didactic session that will not be podcast but will be included in examinations. Faculty have the right to create examinations based on any material presented in the curriculum regardless of podcast or transcript availability.

EVALUATION
The School of Medicine evaluates the educational experience through various optional and required surveys, evaluations and questionnaires. Currently, E*Value is the web-based system that is used to manage most evaluations throughout all four years. The results of these evaluations are used on an ongoing basis to assess student achievement, ensure quality, improve curriculum, address concerns and guide growth and changes. A subcommittee of the Curriculum Committee has the charge of evaluating program effectiveness, monitoring content and workload in each discipline and reviewing objectives of courses and clerkships to assure congruence with overall School of Medicine objectives.

REGISTRATION
To receive credit for any course, a student must be registered for that course in the Office of Student Records and Registrar. Students will be denied class attendance and examinations for failure to pay registration fees.

Tuition and Fees
Tuition and fees are assessed at the beginning of each quarter or other academic session. Statements will be mailed to the most current address; however, non-receipt of a bill does not alter a student's responsibility for paying fees on time. Payment is due at registration unless financial aid is forthcoming.

Students who have checks returned due to insufficient funds will be charged $30 and may lose check-writing privileges in the Student Accounting Office. Students will not be allowed to register for a new academic term if they have an outstanding tuition or fee from a prior academic term. Students who withdraw or are on a leave of absence from classes and have outstanding tuition and fee balances will be subject to collection activities, including credit bureau reporting and assignment to collection agencies. Students will be responsible for all costs incurred in the collection of delinquent accounts.

The Medical Center will not issue transcripts or certify academic records for any persons whose financial obligations to the Medical Center are due and unpaid. This includes student accounts and student loans.

Refunds
A student who officially withdraws from the School of Medicine after enrollment may obtain a proportional refund of tuition (University of Mississippi Medical Center Bulletin, page 15). A refund of all fees paid will be made in the event the student is involuntarily ordered to active duty in military service; however, refunds are calculated on a percentage of the term completed.

STUDENT SERVICES
The University of Mississippi Medical Center offers a comprehensive program of student services. The campus leadership believes these services are an important adjunct to the total educational program and essential to the continuing fulfillment of the institution's purpose. The School of Medicine Office of Student Affairs is located in room N145 and serves as an important conduit for students in the coordination of these services.

THE ROWLAND MEDICAL LIBRARY
Named in honor of Dr. Peter Rowland, a former professor of pharmacology who was primarily
responsible for its establishment, the library serves all Medical Center schools and programs. All library operations are fully automated by the computer system, Rowland Medical Online (RoMeO), which provides access to the online catalog of library holdings and several bibliographic and reference databases, such as MEDLINE, CINAHL, HEALTH and AMA FREIDA. The library serves as headquarters for the Mississippi Health Sciences Information Network, a statewide electronic system for health sciences information access and delivery. It also functions as a resource library within the National Network of Libraries of Medicine Southeastern/Atlantic Region. The library is located in the Verner Smith Holmes Learning Resources Center. It contains more than 237,735 print volumes and receives 2,403 current periodicals and serial publications. Fall Hours are 7 a.m.–midnight Monday–Thursday; 7 a.m.–9 p.m. Friday; 8 a.m.–7 p.m. Saturday; and noon–midnight Sunday. Summer hours are 7 a.m.–10 p.m. Monday–Thursday; 8 a.m.–7 p.m., Saturday; and 2–10 p.m. Sunday. The library is closed on official Medical Center holidays.

STUDENT FINANCIAL AID

There are a number of financial aid options to help students pay for educational expenses. Financing their education is a partnership between students and the Financial Aid Office. The financial aid website is an excellent place to begin research on how to your educational costs: ([http://financialaid.umc.edu/student_financial_aid/StepsIncoming.html](http://financialaid.umc.edu/student_financial_aid/StepsIncoming.html)). Students will find information about available aid programs, applying for student financial aid, and estimates of the education costs they will incur. The Financial Aid Office is dedicated to assisting students with financing their education. The Office staff are happy to provide answers to all questions concerning the financial investment students are about to make in their future.

ORGANIZATIONS FOR STUDENTS

HONOR SOCIETIES

Alpha Omega Alpha, a national honorary medical society, was installed on the Medical Center campus in 1958. Undergraduate membership is based entirely on scholarship, personal honesty and leadership potential. Alumnus membership is granted for distinctive achievement in the art and practice of scientific medicine, and honorary membership is granted to eminent leaders in medicine and allied sciences.

The Society of the Sigma Xi, a national honorary society dedicated to the encouragement of original investigation in the pure and allied sciences, was installed as a chapter in May 1967. Membership requirements include noteworthy achievement as an original investigator in a pure or applied science.

Phi Kappa Phi, a national honorary scholastic fraternity installed on the Oxford campus in 1959, is open to medical, dental, graduate, nursing and health related students who qualify.

The Carl G. Evers Society, established in 1996, is comprised of medical students elected by their peers from the four medical school classes. The society administers and compiles evaluations of courses in each of the four years of medicine; facilitates communications between the medical student groups, faculty and administration; and honors excellence in teaching through the selection of outstanding pre-clinical and clinical faculty each year.

The Gold Humanism Honor Society, installed on the Medical Center campus in 2005, honors senior medical students, residents, role-model physician teachers and others for demonstrated excellence in clinical care, leadership, compassion and dedication to service. Members are selected by a peer and faculty nomination process.

Professional Organizations

Active chapters of the American Medical Association-Medical Student Section, the American Medical Student Association and the Student National Medical Association provide students with the opportunity to participate in a variety of programs. Through the University Medical Society, a component society of the Mississippi
State Medical Association, official voting delegates participate in the House of Delegates of the Mississippi State Medical Association. Medical students also participate as voting delegates of the Organization of Student Representatives of the Association of American Medical Colleges. There are active organizations for spouses of medical and dental students to promote closer fellowship through informational programs and service projects to help prepare them for their roles in the health care community.

**Medical Student Council**

To facilitate the process of student leadership and government, a number of class officers are elected by each medical school class. Two executive officers from each class and two at-large representatives of the entire medical student body make up the Medical Student Council. This organization serves as the voice of the School of Medicine student body. It investigates and discusses issues of interest to students of the School of Medicine regarding education and student life and offers constructive courses of action that benefit all while striving to protect the quality and integrity of the institution.

**Associated Student Body**

The Associated Student Body is comprised of elected representatives and designated officers from the Schools of Medicine, Nursing, Health Related Professions, Dentistry, and Graduate Studies in the Health Sciences. Each school also elects its own student council. As the official Medical Center student government organization, the ASB meets with and provides information and opinions on student concerns to the administration and faculty. The ASB also develops activities related to academic programs and sponsors extracurricular activities, including intramural sports and publication of the Medic campus yearbook, and the Murmur student newspaper.

**ASB Executive Council**

The ASB Executive Council serves as the governing council of the ASB and serves as a liaison between the students, administration and faculty of the Medical Center and the communities in and surrounding Jackson. Officers for the council include a president, vice-president, secretary and treasurer, all elected annually by the student body at large. ASB voting members also include elected class officers and/or representatives from the Schools of Medicine, Nursing, Health Related Professions, Dentistry, and Graduate Studies in the Health Sciences. The ASB Executive Council strives to represent the students by addressing academic, financial, social and other issues that may directly or indirectly affect students' learning experience. ASB Executive Council meetings are scheduled on the first non-holiday Monday of each month. These meetings are open to all students. Because the council's effectiveness is directly related to its leadership and student participation, students are encouraged to take an active part in the future direction of this council.

**INTRAMURALS**

The ASB regularly sponsors intramural athletics during the fall (football) and winter (basketball). Students desiring to form a team should have a representative attend the organizational meeting for each season (football in early September and basketball in late January). A class with insufficient players to form a team is encouraged to join with one or more other classes so that all may participate. The Medical Center (including its agents and employees), the University of Mississippi and the Board of Trustees are not responsible for any personal injury, death or loss of property students may suffer while playing, practicing, participating in or observing recreational sports activities. Recreational sports activities often involve severe cardiovascular stress and, possibly, violent physical contact. Safe participation in these activities requires being in good physical health. The Medical Center, University of Mississippi and the Board of Trustees do not provide medical and accident insurance for participants.

**FOOD AND NUTRITION SERVICES**

**Cafeterias**

The main cafeteria for students, employees and
visitors provides three meals a day and is open 24 hours a day. Short orders, salads and desserts are available all night. Students with I.D. badges receive a discount on all cafeteria items.

The Wiser Hospital Dining Room is located on the first floor of the Winfred L. Wiser Hospital for Women and Infants.

**Fast Foods**

The Student Union Grill is in the Norman C. Nelson Student Union. McDonald’s is on the first floor of University Hospital near the Methodist Rehabilitation Center. Subway is on the first floor of the Addie McBryde Rehabilitation Center near the main cafeteria. Specialty coffee kiosks are in the University Physicians Pavilion, Methodist Rehabilitation Center, and University Hospital.

**STUDENT UNION**

The Norman C. Nelson Student Union is a two-story, 53,354-square-foot building that houses the campus bookstore, and a fast-food court. A gymnasium is on the first floor and includes a full-sized basketball court, locker rooms and showers. A walking-running track on the second level above the basketball court is skirted by rooms for aerobic exercise and weightlifting. A student lounge with a game room, a TV room and a study room are adjacent to the gymnasium. The ASB offices and conference rooms are on the second floor, as well as a large multipurpose meeting room with a seating capacity of 400 that can be subdivided into six smaller meeting rooms. For luncheons and receptions, a kitchen adjoins this meeting room. The ASB Suite on the second floor is available for study purposes 24 hours a day.

**Medical Center Bookstore**

The bookstore is on the first floor of the student union. Bookstore hours are Monday-Friday, 7:45 a.m. to 4:30 p.m. Accepted forms of payment include cash, check and all major credit cards. Bookstore gift cards are available in any amount and can be used toward any purchase. An extension bookstore location is at Meds & Threads in the main University Hospital across from the central elevators. Meds & Threads offers a selection of scrubs, lab coats, monogramming services and medical instruments. The hours of operation for this location is Monday-Friday, 8:30 a.m.-5:00 p.m.

**Textbooks**

Medical students must provide their own required textbooks. Required and recommended textbooks are available for all courses offered throughout the Medical Center. Because academic programs operate on quarters and semesters and because there is limited space in the bookstore, a large quantity of books may not be available for the entirety of the term. Generally, books are available from one to two weeks before the class start date and six to eight weeks into the term. Required textbooks cannot be returned but recommended textbooks may be returned in new condition within three days of purchase. All books are new and no used books are sold. Students also can access textbook lists, view rental options and preorder textbooks for pickup in the store using the bookstore website: www.umc.edu/bookstore.

**Reference and Review Books**

A wide variety of reference and review books for all disciplines are available. About 1,500 titles are housed in the bookstore and about 50,000 additional titles can be accessed through the bookstore’s computer database. Books not currently in stock may be ordered by special request. Delivery for special orders takes 1-2 weeks.

Books also can be shipped to customers for an additional shipping charge. Review books cannot be returned, but reference books may be returned in new condition within three days of purchase.

**Special Equipment**

Students must provide their own special equipment, such as stethoscopes and dissecting instruments, as specified throughout the course of study. These items are normally available at the bookstore.

**Medical Supplies**

A variety of medical supplies and replacement parts are available. Some items are only available seasonally in the bookstore, according to usage in the curriculum. Medical supplies can be special ordered if not available in stock (i.e., articulators
Office Supplies and School Apparel
Like most college bookstores, the bookstore carries an assortment of supplies needed for the classroom and office. Many specialty items also may be ordered. An assortment of T-shirts, jackets and other insignia items are available for purchase. Some are school specific (i.e., School of Medicine), and other are designed generally for the Medical Center.

TECHNOLOGY REQUIREMENTS

Required Laptops
Entering medical students are required to own a laptop computer that meets the annually revised UMMC School of Medicine Minimum Laptop Specifications. These specifications may be viewed at: http://somacadaff.umc.edu/policies/StudentComputerPolicy.html.

Funds budgeted in the student financial aid package allow students to purchase a laptop computer. Students should purchase a laptop meeting or exceeding the UMMC minimum specifications from regular retail channels. High-end laptops from any IBM-PC or APPLE-compatible manufacturer should be acceptable. Students will be personally responsible for maintenance and repair of their laptop, therefore a three-year maintenance and repair contract purchased from the original equipment manufacturer or vendor is recommended. All students are required to use and maintain UMMC-approved antivirus/spyware software to access the UMMC public wireless network and resources. Students should acquire their laptops before the first week of August. Students will need to bring their functional laptops to a computer orientation during registration/orientation before classes begin.

Required Clickers
Entering medical students also are required to purchase a Turning Technologies personal response device ("clicker") from the UMMC bookstore before the beginning of classes. Models from other manufacturers or from previous years will not be compatible with the classroom participation systems used during medical school classes.

Questions about required products or laptop specifications should be emailed to Dr. William L. Lushbaugh, School of Medicine e-Learning director at: wlushbaugh@umc.edu.

MEDICAL STUDENT LOUNGE
The medical student lounge (N039) is open to medical students 24 hours a day. This student space includes a kitchen, showers, lounge area, group meeting area and student study space.

POSTAL SERVICE
The Post Office, in room N019 in the basement near the medical school elevators, operates as a contract station of the U.S. Post Office and offers all standard services, including registered and insured mail and money orders. It is open to students from 10 a.m. to 4 p.m. Monday-Friday.

A U.S. Post Office drop box at the main entrance to University Hospital may be used for weekend, holiday and after-hours mailing.

MAILBOXES
Each medical student is assigned a mailbox for school and on-campus communication. Mailboxes are in Room N147 on the first floor of the research wing. Access to the mailroom is controlled and will require a valid identification badge.

LOCKERS
Lockers in the North wing are assigned to medical students at the beginning of the academic year. Information about locker assignments will be available during the orientation period. Students are responsible for locks. No deposits are required for lockers. Any items left in lockers at the end of the academic year will be removed and discarded.

PICTURE IDENTIFICATION
Each student will be issued an identification
badge with a photograph. The identification badge is to be worn at all times while on campus or in any clinical setting. The identification badge may be used for check cashing in the bookstore, library checkouts, security identification purposes, a discount in the cafeteria, and access to certain areas of the Medical Center.

PUBLIC AFFAIRS
The Division of Public Affairs in room U015 is the only authorized channel for the release of Medical Center information to the news media. The division welcomes suggestions from medical students for media stories or ideas for the Medical Center’s own publications.

POSTING OF NOTICES
Medical Center policy prohibits the posting of notices on painted walls or any other painted surfaces and on the entrance doors to any building. All departments have bulletin boards for the posting of authorized notices. Public bulletin boards are located throughout the Medical Center.

CAMPUS POLICE
Campus Police uses advanced equipment and techniques for crime prevention and to carry out a number of programs and services to promote safety and security. State law grants Campus Police the power to enforce all state and federal criminal statutes. Officers are certified in compliance with state law to assist in providing effective campus security. The department works in conjunction with local law enforcement authorities. All reports of criminal activity will be handled and investigated in an appropriate and professional manner. Headquarters for Campus Police is in trailer 14, in front of the James D. Hardy Clinical Sciences Building. Campus Police officers provide 24-hour assistance to students, employees and the public. Campus Police will escort students at night or on weekends to or from destinations on campus or the Veterans Memorial Stadium parking lot. Students who wish to be escorted should contact Campus Police at (601)-984-1360 (or extension 4-1360 if calling on campus) or by contacting a campus Police officer on duty.

Police officers may request to check packages, purses or briefcases of an employee or student leaving the Medical Center. Signs are posted at entrances to Medical Center buildings advising that routine package checks may be conducted. Employees and students must comply with a police officer’s request to check a package.

CAMPUS SECURITY ACT OF 1992
The Campus Security Act of 1992 requires the Medical Center to have procedures for disciplinary action in place in case of alleged sexual assault or rape. Students who may be the subject of a sexual assault on campus should contact Campus Police at (601)-984-1360 (or extension 4-1360) and the campus Title IX coordinator for assistance, reporting and help in contacting other authorities as necessary. If a medical student is suspected of committing a sexual assault/offense on campus, Campus Police will notify the associate dean for student affairs and Title IX coordinator.

PARKING
Students may park in the Mississippi Veterans Memorial Stadium parking lot across from the campus on North State Street. There is no charge for parking at the stadium. Parking is not available for students near the School of Medicine; however, a free shuttle bus runs regularly from the stadium parking lot to all designated stops on campus. Current shuttle bus hours and routes are posted on the Department of Parking and Transportation Services website at http://physfac.umc.edu/shuttle_service.html.

Students who must go to the stadium parking lot after hours can call Campus Police at 984-1360 to arrange an escort and transportation. Arrangements for handicapped students are made on an individual basis by Human Resources. Students are not authorized to park in campus garages or gated lots. This space is principally reserved for patients, patient families, residents and attended physicians. Cars parked illegally on campus may be ticketed or towed at the owner’s
expense. Any student who violates Medical Center parking policies is subject to disciplinary action.

VIOLATIONS
Campus Police will issue tickets for such offenses as illegal parking, reckless driving, speeding and failure to report accidents or to observe traffic signs. Tickets are sent to the Hinds County Justice Court for adjudication. Cars parked in traffic lanes or illegally parked in pay or gated lots or in other areas on campus will be towed away. The owner must pay the towing charge to reclaim the vehicle.

BICYCLES AND MOTORCYCLES
Bicycles provide a handy way of getting around campus. When parked on campus, a bicycle should be locked to prevent theft. Bicycle racks are available at the north entrance of the School of Medicine and in other areas on campus. The designated areas may change during construction. Students can park motorcycles in Lot 14 using the designated spaces. Once those spaces are filled, motorcycles should be parked at the stadium parking lot.

FACULTY ADVISEMENT
Faculty advisers are important academic, career and personal counseling resources for UMMC students. Faculty advisers are available to all students in the School of Medicine. School of Medicine associate deans, course directors, residency program directors and other faculty are available to assist students in academic and career counseling.

COUNSELING SERVICES
The dean, associate and assistant deans, the director of student health, faculty advisors in the basic and clinical sciences, and other professional staff are available to medical students for counseling services throughout the students’ careers. The associate dean for medical education and the associate dean for student affairs serve as advisors for the Association of American College’s "Careers in Medicine" program, which provides students with a decision-making process and resources to assist them in making informed career decisions. Career counseling is provided by the associate and assistant deans, faculty advisors and other professional staff.

ACADEMIC SUPPORT
The Office of Academic Support provides academic consulting services to students, residents and fellows currently enrolled at the Medical Center. Academic consultants meet individually with students and provide assistance with developing the skills and behaviors that are essential to academic success and professional development. Services are available at no charge to students and may address a wide range of issues, including transition to professional school, time management, study skills, stress management, testing strategies, interpersonal and communication skills, clarifying career goals and coping strategies. Individuals may initiate contact with the office or be referred by faculty. To make an appointment, individuals should go to the Office of Academic Support webpage and complete the Request Academic Consultation online form at http://www.umc.edu/academic_consulting/.

TUTORING SERVICES
The Office of Academic Support manages University Tutoring Services, the peer tutoring program available at no cost to all students currently enrolled in any of the six schools at the Medical Center. This program is designed to promote academic excellence through supportive instruction by peers with similar educational experiences and backgrounds. Tutor scheduling on UMMC’s campus is negotiated by the student and his or her assigned tutor. Students must be registered in the course for which they request tutoring to be eligible for the services. Tutors are not available for all courses at the institution. Once students have submitted the Request Tutoring form, they will be notified if tutoring is available for the requested course and will receive further information about the program. To request tutoring or to receive more information about available courses, students should visit the Office of Academic Support webpage and complete the Request Tutoring online form at http://www.umc.edu/University_Tutoring/.
STUDENT COUNSELING AND WELLNESS CENTER

The Student Counseling and Wellness Center exists to help UMMC students manage the stresses and difficulties of daily life inside and outside the classroom.

Services are available to all UMMC students by appointment. Services include stress and anxiety; depression and grief; and adjustment, family and relationship issues.

Available interventions include evaluation, medication consultation, brief motivational and solution-focused therapy, wellness counseling, cognitive behavioral therapy and behavioral activation. With only a few exceptions allowed by law, the services students receive at the Student Counseling and Wellness Center are confidential.

Staff members at Student Counseling and Wellness Center have no role in any student’s academic assessment, evaluation or promotion.

Contact: scwc@umc.edu or (601) 984-6936.

STUDENT ASSISTANCE PROGRAM

LifeSynch (a Humana company) is the Student and Employee Assistance Program at the Medical Center. Services are provided for all students and employees and their families and household members. To access information about many mental health, life, family, legal, money, and work issues, visit the LifeSynch website at lifesynch.com/eap; username UMMC; password UMMC.

Students also can call LifeSynch to talk with trained professionals any day, any time at (866) 219-1232. These professionals will ask about the student’s situation, offer support and connect them with experts who can help. Generally, students will be offered a short list of providers, and may choose one based on location or specialty area. Once the expert has been chosen, the student will receive up to three face-to-face sessions at no cost. The student’s personal information will be kept confidential. Staff members at the Student Assistance Program have no role in any student’s academic assessment, evaluation or promotion.

The LifeSynch Student and Employee Assistance Program confidentiality complies with state and federal requirements. After the three sessions, many professionals will be able to continue offering their services to students using the student’s Blue Cross Blue Shield benefits. Since these services are provided by a contractual agreement, any student who is not satisfied with the services rendered should inform the director of Employee-Student Health at the Medical Center.

INTERNATIONAL TRAVEL

As citizens or permanent residents of the United States, students have the right to travel from the US to any country they wish as long as the students comply with the laws of the United States and the country to which they will travel. The School of Medicine cannot endorse or encourage travel by our students to unsafe parts of the world. The School of Medicine will not give academic credit for rotations taken in countries on the State Department’s “Travel Warnings” list (http://travel.state.gov/travel/cis_pa_tw/tw_1764.html). Students who go to one of these countries are considered on their own, against the advice of the School of Medicine, and any medical rotations they take there will simply be for their own “pleasure” because no academic credit will be given. This website is an extremely good resource for students traveling to any country. All students are encouraged to check the website anytime they are traveling outside of the United States. Standard health insurance that covers students while in the US can be worthless while traveling to a foreign country, and may not cover things like flying to the nearest hospital, bringing the student back to this country if he or she is injured, etc. While School of Medicine students doing international electives are not required to do so, they are strongly urged to purchase some type of medical assistance coverage.

STUDENT DISABILITY INSURANCE

Participation in the School of Medicine’s group disability insurance plan is a requirement of enrollment as recommended by the school’s accrediting agency. Premiums for this policy will be assessed in the fall of each year by the Student Accounting Office.
ACADEMIC ACCOMMODATIONS

The Office of Academic Support manages academic accommodations at the Medical Center. The Medical Center is committed to ensuring equal access to a quality education for qualified students through the provision of reasonable academic accommodations that support UMMC standards and academic integrity. UMMC policy provides for reasonable academic accommodations to be made for students with verified disabilities on an individualized and flexible basis as specified under Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990 (ADA). UMMC provides reasonable academic accommodations to students on campus who request accommodations and who meet eligibility criteria. For more information or to request academic accommodations, individuals should visit the Office of Academic Support webpage and complete the Request Academic Accommodations online form at [http://www.umc.edu/Academic_Accommodations/](http://www.umc.edu/Academic_Accommodations/).

MEDICAL INSURANCE REQUIREMENT

Hospitalization insurance is mandatory for students attending the Medical Center. Students may enroll in the group plan offered by the Medical Center, or else they must demonstrate comparable coverage under another provider. Students not enrolled in the UMMC Student Group Health Insurance Plan will be required to sign a waiver specifying the name of their insurance carrier. All applications, changes in coverage and deletion requests must be submitted to the Student Accounting Office. Applications for coverage must be received in time to be forwarded to the insurance carrier within 30 days of the student’s initial registration. Applications after that period must be due to a special qualifying event such as loss of other coverage or by acquiring a dependent, and special rules apply. Open enrollment is during the month of August, with coverage effective September 1. Contact Student Accounting for specific enrollment questions. Cancellations cannot be made for partial months or retroactively. Students will be automatically dropped from the policy after graduation or other separation from enrollment, unless they qualify and apply for continuation of coverage. Students may have their coverage cancelled for nonpayment of premiums. This could result in permanent loss of coverage under the Student Group Insurance Plan. Students and parents should be aware of open enrollment in the UMMC Student Group.

STUDENT AND EMPLOYEE HEALTH

The Student Employee Health Department is responsible for student health and school related injuries. The clinic is located in Room N136. Hours are 7 a.m.-5 p.m. Monday-Friday, except on official UMMC holidays. Medical care for acute illnesses and minor injuries is provided at no charge to students. There is a charge for blood tests and radiological exams. SEH does not treat chronic medical conditions (hypertension, diabetes, ADD, ADHD, etc.). If students become ill or sustain injury after normal workday hours, they are encouraged to seek care at UMMC’s Emergency Department. In case of class conflicts, appointments can be scheduled by calling (601) 984-1185.

The SEH Department monitors the institutional immunization policy. The department offers a variety of immunizations to keep student healthy. The Influenza vaccine is free. Tetanus/Tdap, MMR, and Varicella and Hepatitis B vaccines are administered at a cost. The Hepatitis B vaccine series must be completed by the end of the first semester. An annual TB skin test or blood test is required at no charge to the student.

For blood borne pathogen exposures, students should report to the SEH Clinic as soon as possible. Go to the ER after 3:45 p.m. All excused absences for medical treatment are coordinated through the Student Employee Health Clinic. The school makes every effort to provide reasonable accommodations in order to access health services.

Staff members at Student Employee Health have no role in any student’s academic assessment, evaluation or promotion.
IMMUNIZATION REQUIREMENT

The Board of Trustees of State Institutions of Higher Learning, in cooperation with the Mississippi Department of Health, has issued regulations requiring that all students born after 1957 provide proof of immunity to measles (rubeola), mumps and rubella before being allowed to enroll in class. This proof must consist of the following:

- Documented history of two doses of measles (rubeola), mumps and rubella vaccine given after January 1, 1968, usually given as MMR; the first dose must have been given on or after the first birthday and the second dose at least one month or more thereafter; or
- Written documentation of serologic evidence of immunity to measles (rubeola) and rubella (a blood test); or
- Documentation of a history of physician-diagnosed measles (rubeola); a history of rubella is not satisfactory to imply immunity.

Students admitted to health education programs that cause them to be potentially exposed to blood or body fluids are required to provide proof of hepatitis B vaccination. All foreign students shall provide proof of current test screening for tuberculosis by chest x-ray. “Current” shall mean a chest x-ray taken within three months before enrolling at an institution of higher learning and after arriving in the United States.

A standardized report of a recent physical examination is required for admission to any Medical Center educational program.

DRUG PROGRAM

Pursuant to the Anti-Drug Abuse Act passed in October 1988 and the Drug-Free Schools and Communities Act Amendments of 1989 (Public Law 101-226), the Medical Center is committed to maintaining a drug-free work place and to implementing a drug awareness program to prevent the illicit use of drugs and the abuse of alcohol by students and employees. Medical students are to be aware of the Medical Center’s Drug Awareness Program and abide with the policy concerning substance abuse.

POLICY:

1. Students are prohibited from being under the influence of alcohol or illegal drugs while on campus; in other training sites such as affiliated hospitals and clinics; and in extramural settings for elective courses.

2. The possession, transfer, purchase or sale of illegal drugs is a violation of the law and is strictly prohibited; such action will be reported to law enforcement officials and to licensing agencies when appropriate.

3. The use, sale or possession of an illegal drug by a medical student is cause for his or her dismissal from medical school.

4. Any student who commits an unlawful act on or off the Medical Center campus or whose conduct discredits the Medical Center in any way will be subject to disciplinary action, up to and including termination.

5. No alcoholic beverage may be brought or consumed on the Medical Center premises.

6. Prescription drugs may be brought and used by students on the Medical Center premises only in the manner, combination and quantity prescribed, as long as their ability to perform as a medical student is not affected.

7. Any student whose on- or off-duty abuse of alcohol, illegal drugs or improper use of prescription drugs interferes in any way with his or her performance as a student will be required to undergo evaluation and/or testing in Student Health Services.

8. The institution reserves the right to require a drug test from a student when there is a reasonable suspicion that the institution’s drug policy has been violated. Individuals failing to submit to a drug test will be subject to disciplinary action, up to and including dismissal.

EMPLOYEE/STUDENT DRUG AWARENESS PROGRAM

The Medical Center maintains an Employee/Student Assistance Program administered by
Student Employee Health. Any medical student who uses alcohol or illegal drugs, who misuses prescription drugs or who may be dependent on or addicted to alcohol or drugs is encouraged to seek confidential counseling and assistance from the director of Student Employee Health. When recommended by the director of Student Employee Health, the student may be granted a leave of absence from medical school to undergo treatment in an approved program. A student seeking medical attention for alcohol or drug addiction is entitled to the Medical Center’s Student Group Health Insurance Plan, subject to restrictions and limits of this plan. Rehabilitation itself remains the responsibility of the student.

A drug is defined in the Drug Awareness Program as any chemical substance that produces physical, mental, emotional or behavioral changes in the user. Drug abuse signifies use of any substance in a manner that deviates from the accepted medical, social or legal patterns within a given society. Examples of common drugs of abuse include alcohol (ethyl alcohol), amphetamines, benzodiazepines, barbiturates, cannabis, cocaine, opioids, etc. The use of alcohol and drugs is associated with a variety of significant health risks.

LEGAL SANCTIONS UNDER LOCAL, STATE OR FEDERAL LAW

It is unlawful to possess alcohol on the UMMC campus. The use, sale, purchase, transfer, theft or possession of an illegal drug is a violation of the law for which considerable legal sanctions may be imposed. A violation involving Schedule I or II drugs (e.g. opioids, marijuana, cocaine, amphetamine, etc.) may result, for example, in imprisonment upon conviction for up to 30 years and fines up to $1,000,000. A violation involving Schedule III or IV drugs (e.g., barbiturates, diazepam, etc.) may result in imprisonment for up to 20 years and fines up to $250,000. A violation involving Schedule V drugs (e.g., relatively small amounts or low concentrations of codeine, ethylmorphine, opium, etc.) may result in imprisonment, upon conviction, for up to 10 years and fines up to $50,000.

Additional Information/Questions

Copies of the Medical Center’s Drug Awareness Program for Employees and Students are available in the Office of the Associate Dean for Student Affairs. Questions regarding the program should be addressed to the director of Student Employee Health.

TOBACCO PRODUCT USE

Medical Center policy prohibits smoking or the use of any tobacco products in all buildings on campus and in all of its leased buildings off campus. This policy includes the ban of all substitute smoking materials (e.g. e-cigarettes).

FIREARMS POLICY

Because of the unreasonable and unwarranted risk of injury or death to employees, students, visitors and patients and in accordance with Sections 45-9-101 and 97-37-17 of the Mississippi Code of 1972, as amended, the Medical Center prohibits the possession of pistols, firearms or other weapons in any form by any person other than those duly authorized (i.e., Campus Police officers).

MEDICAL CENTER SAFETY PRECAUTIONS

PERSONNEL

Since many people with HIV infections are not identified in advance, universal precautions—as defined by the Centers for Disease Control and by OSHA—guide Medical Center procedures for the handling of blood and body fluids of any student, employee or patient. Questions regarding these safety guidelines should be directed to the director of Student Employee Health or to the dean of the school in which the student is enrolled.

EQUIPMENT

Manuals and procedures already in use at the Medical Center cover the precautions that should be taken when handling infectious materials. Some of these procedures that pertain to the possible transmission of HIV infection are re-emphasized. All Medical Center personnel, including students,
will use disposable, one-user needles and other equipment if the skin or mucous membranes of patients, employees or students will be punctured. If disposable equipment is not available, needles or other implements that puncture the skin or mucous membranes should be steam sterilized by autoclave before re-use. Extreme caution should be exercised when handling sharp objects, particularly in disposing of needles. All used needles should be placed in a puncture-resistant container designated for this purpose. Needles should never be bent or recapped after use. Blood-soiled articles should be placed in puncture-proof bags and labeled prominently before being sent for reprocessing or disposal in accordance with Medical Center infection control guidelines.

TEACHING LABORATORIES
Laboratory courses requiring exposure to blood, such as courses in which blood is obtained by finger prick for typing or examination, must use disposable equipment. No lancets or other bloodletting devices should be reused or shared.

BEHAVIOR RISK
Medical Center students who are HIV positive and aware of their condition and engage in behavior that threatens the safety and welfare of other students, patients or Medical Center personnel may be subject to disciplinary action. More specific, written guidelines and procedures are the responsibility of the individual schools and may be developed, as needed, by the deans and department heads. All unit policies must comply with those for the institution as a whole.

POLICY REGARDING STUDENT PARTICIPATION IN CARE OF PATIENTS WITH BLOOD BORNE PATHOGENS
The School Medicine acts to create a safe environment for faculty, staff and students. However, clinical care is provided in hospitals and clinics with patients who might have blood-borne pathogens. Students are required to participate in the care of all patients assigned to them, including patients with known blood-borne pathogens, to a level commensurate with their level of training. Universal precautions will be used with all patients and when handling samples of blood and body fluids. Students are expected to understand and adhere to infection control policies. The greatest risk to students is from patients who are positive for a blood-borne pathogen but are not yet known to be so. In addition, it is not uncommon for patients to have false-negative results early in the course of an infection. Clerkship directors will determine the role of students in the care of patients. This will be specifically delineated in the syllabus so students are aware when they will be allowed to perform invasive procedures on patients with known blood-borne pathogens.

Approved by the SOM Curriculum Committee November 20, 2014.
Approved by the Executive Faculty December 15, 2014.

BLOOD BORNE PATHOGEN EXPOSURES
Students should report to the Student Employee Health Clinic (N136) as soon as possible. Please go to the Emergency Room after 3:45 p.m. https://www.umc.edu/HR/files/needlestick_protocol_and_procedure.pdf

MISTREATMENT POLICY
All mistreatment is of serious concern at this institution and is strictly prohibited. It is the policy of the Medical Center and the School of Medicine to maintain an educational environmental and workplace free from any type of mistreatment. The School of Medicine recognizes that in some instances, the perception of the individual who believes he or she was mistreated and the intent of the other person(s) involved are conflicting. Whatever the circumstance, students who believe they were mistreated are strongly encouraged to bring it to the attention of appropriate institutional officials (see below). Categories of mistreatment include general mistreatment, discrimination and sexual harassment.
GENERAL MISTREATMENT

The individual considering making a report of general mistreatment should first, if at all possible, attempt to resolve the matter directly with the alleged offender. Students may consult the associate dean for student affairs and/or the vice dean for medical education at any time for assistance. Such informal consultation always will be confidential, unless precluded by safety of the student or institutional policy. Students have the right to report such incidents without fear of retribution or retaliation. General mistreatment comes in many forms, including but not limited to verbal abuse, public humiliation, intentional neglect, assignment of tasks in retaliation, belittlement and unreasonable/intentional exclusion from an educational opportunity. For conduct to violate this policy and be considered general mistreatment, it must be more than merely offensive; it must be so objectively offensive and/or repeated, pervasive or severe that it effectively denies the victim access to UMMC’s resources and opportunities, unreasonably interferes with the victim’s environment or deprives the victim of some other protected right. Formal complaints of general mistreatment regarding faculty, residents and staff are made through the associate dean for student affairs and/or the vice dean for medical education to the director of human resources or the assistant director for equal employment opportunity. Formal complaints regarding other students are handled through the School of Medicine’s Policy on Professional Behavior and made through the associate dean for student affairs and/or the vice dean for medical education. All formal complaints must be in writing and will be investigated. The institution investigates and responds to all reported incidents in a timely fashion.

SEXUAL MISCONDUCT

UMMC prohibits sexual misconduct in any form, including sexual assault or sexual abuse, sexual harassment and other forms of nonconsensual sexual conduct. Title IX of the Education Amendments of 1972 prohibits discrimination based on sex in education programs and activities. It is the position of UMMC that sexual misconduct in any form will not be excused or tolerated. Criminal, civil and university disciplinary processes are available to a student or employee with a complaint. UMMC is committed to prompt, effective and fair procedures to investigate and adjudicate reports of sexual misconduct and to the education of the university community about the importance of responding to all forms of sexual misconduct. Special emphasis is placed on the rights, needs and privacy of the student or employee with the complaint, as well as the rights of the accused. At the same time, UMMC adheres to all federal, state and local requirements for intervention and crime reporting related to sexual misconduct. Students who believe they have been a victim of sexual misconduct are encouraged to contact the associate dean for student affairs and should submit a complaint against the accused in writing or in person to the Title IX coordinator, Office of Human Resources, (601) 815-5150. Students also are encouraged to immediately contact the UMMC Police Department (601) 815-7777 and/or call 911 if they have been sexually assaulted and to seek immediate medical attention. Students should seek medical attention even if they do not wish to pursue criminal charges or otherwise pursue a complaint against their alleged attacker. Students are strongly encouraged to read the entire UMMC Sexual Misconduct, Sexual Assault and Sexual

DISCRIMINATION

Under Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act and their implementing regulations, no individual may be discriminated against solely on the basis of age, race, gender, religion, national or ethnic origin, disability, sexual orientation or veteran status. Allegations of discrimination (in any category) against a student must be reported immediately through the associate dean for student affairs and/or the vice dean for medical education to the director of human resources or the assistant director for equal employment opportunity. All formal complaints must be in writing and will be investigated. The institution investigates and responds to all reported incidents in a timely fashion.
Harassment Policy and Procedure (Title IX) for Students and Employees at https://www.umc.edu/Education/Academic_Affairs/Current_Students/Mistreatment_Policy.aspx.

The UMMC Office of Student Affairs provides a web-based version of a student comment box at http://studentservices.umc.edu/comments.html. This email account is used to collect and track student issues and concerns. Students are promised a response within 48 hours.

CONFIDENTIALITY

All patient records and any other information of a private or sensitive nature are considered confidential. Confidential information should not be read or discussed by any student unless pertaining to his or her specific patient care responsibilities. Discussions of confidential information must take place in private settings away from patients or members of the public. Students may not discuss or reveal confidential information to friends or family members or to other individuals who do not have a legitimate need to know. The disclosure of a patient's presence in the University Physicians Pavilion, clinics, hospitals or other campus facility may indicate the nature of the illness and jeopardize confidentiality. Confidential information should be disposed of by shredding. Students should not record confidential information in any portable device that does not have password protection. Protecting passwords is critical. Never share passwords with anyone.

The unauthorized disclosure of confidential information by a student may subject the institution and/or the student to legal liability. Disclosure of confidential information to unauthorized persons, or unauthorized access to or misuse, theft, destruction, alteration or sabotage of such information, is grounds for immediate disciplinary action up to and including termination or dismissal from school. Medical students are responsible for understanding and abiding by the Health Insurance Portability and Accountability Act of 1996 and its implementing regulations.

INFORMATION POLICY

The purpose of the Medical Center Information Policy is to establish management direction and requirements to ensure the accomplishment of the UMMC mission through the appropriate protection of all UMMC information from accidental or intentional misuse or unauthorized access, modification, destruction or disclosure. The policy is available at http://dis.umc.edu/docs_forms/InformationPolicy.pdf.

SCOPE

The UMMC Information Policy applies to all UMMC-related information in all forms, whether observed, written, spoken, electronic or printed. It also applies to UMMC electronic resources, including hardware, software and networks. All electronic equipment that is connected in any manner, directly or indirectly, intermittently or continuously, to the campus network or any computer subnet is subject to the UMMC Information Policy. The UMMC Information Policy applies to all individuals accessing UMMC information on or off campus, including but not limited to employees, contractors, consultants, volunteers, temporaries, students, faculty, third-party affiliates, business associates, affiliated campus organizations, authorized visitors and nonprofit groups. Departmental or other institutional policies may further define certain aspects of information access and use but may not be less restrictive than the UMMC Information Policy.

RESPONSIBILITIES

All individuals and organizations that come in contact with UMMC information are responsible for its appropriate management and protection. Levels of accountability facilitate compliance with the UMMC Information Policy. To achieve a more secure environment, appropriate segregation of responsibilities must be established.

Responsibilities of individuals include but are not limited to:

- Protecting sensitive or confidential information at all times;
Complying with controls specified by UMMC, the owner and the security administrator;

Securing access to UMMC systems when logged on, whether unattended or not;

Reporting information errors, anomalies and security vulnerabilities and violations to their supervisor, the security administrator, OIS or the Office of Compliance;

Completing required training;

Complying with the UMMC Information Policy, Rules and Procedures for the UMMC Web Environment and the Compliance Plan, as well as federal, state and local rules, laws and regulations, accreditation criteria and all other institutional policies; and

Signing the Information Policy Acknowledgment and Non-Disclosure Agreement Form.

**PASSWORDS**

Passwords are the primary method of access security and are a major key to the success of information security at UMMC. Under Mississippi law, it is a crime to use another person’s password or disclose passwords to another person for the purpose of obtaining unauthorized access to protected information.

Passwords must:

- Be difficult to predict;
- Be a combination of at least six alphabetic and numeric characters;
- Be changed frequently, at least once every 180 calendar days, when initially assigned, and upon first use after reset;
- Never be reused; and
- Be kept secure and not shared with anyone.

**LOG-IN/LOG-OFF**

Individuals must:

- Access secured systems by using their assigned logon ID;
- Assume responsibility for anything that occurs under their assigned logon ID;
- Log off or secure systems when a system is unattended; and
- Refrain from using information or systems unless authorized.

**PERSONAL USE**

Limited personal use of certain types of information resources is permitted, if such use does not:

- Interfere with UMMC operations;
- Generate additional incremental costs to UMMC;
- Negatively impact job performance;
- Involve any activities not sanctioned by UMMC;
- Violate UMMC codes of conduct, bylaws or policies;
- Violate federal, state and local laws, regulations and rules;
- Display, print or transmit information that is offensive;
- Disrespect the rights of others; or
- Compromise the integrity of UMMC systems and related physical resources.

**DIGITAL AND ELECTRONIC COPYRIGHT POLICY**

Students may not use UMMC computing or telecommunications systems to violate copyright law. Copyright law limits the right of a user to copy, download, distribute, edit or transmit electronically another’s intellectual property, including written materials, images, videos, software, games, sounds, music and performances, even in an educational context, without permission. Violations of copyright law may include giving others unauthorized access to copyrighted materials by posting that material on social networking sites; illegal downloading, or downloading from Internet websites or through peer-to-peer file sharing any material owned by another without the owner’s permission; or sharing files that include copyrighted material with others through peer-to-peer software or networks. Peer-to-peer (P2P) is a method of file sharing that allows normal users (peers) to connect directly to other users to share files. This can be contrasted with a server-based distribution method, where users connect to a server (such as a Web server via their Web browser) to download files. Students
who have P2P file-sharing applications installed on their computers may be sharing copyrighted works without even realizing it. Even if students do not intend to engage in infringing activity, installing P2P software on a computer can easily result in their unintentionally sharing files (copyrighted music or even sensitive documents) with other P2P users, and the students may then be personally responsible for the legal and financial consequences.

PUBLIC WIRELESS ACCESS POLICY

The Medical Center provides free Internet access points or “hot spots” throughout its facilities for users with portable computers or devices capable of receiving wireless signals. These access points allow users to access the Internet from their laptop computers when sitting within range of the access points.

Acceptable Use

All users are expected to use the Medical Center’s wireless access in a legal and responsible manner consistent with the educational and informational purposes for which it is provided.

While using this wireless access, users should not violate federal, state or local laws, including:

- The transmission or receiving of child pornography or harmful material. Accessing or displaying obscene language and sexually explicit graphics as defined in section § 97-5-33 and § 97-29-45 of the Mississippi Code is not permitted.
- Misrepresenting themselves as another user; attempting to modify or gain access to files, passwords or data belonging to others; seeking unauthorized access to any computer system or damaging or altering software components of any network or database; or
- Downloading copyrighted material. U.S. copyright law (Title 17, U.S. Code) prohibits the unauthorized reproduction or distribution of copyrighted materials, except as permitted by the principles of “fair use.” Users may not copy or distribute electronic materials without the explicit permission of the copyright holder.

By using this wireless access network at the Medical Center, the customer acknowledges that he or she is subject to and agrees to abide by all laws and all rules and regulations of the State of Mississippi and the federal government that is applicable to Internet use. The institution’s complete Public Wireless Access Policy is available at http://dis.umc.edu/documents/public_wireless_access_policy.pdf.

EMAIL POLICY

In general, use of UMMC electronic mail services is governed by policies that apply to the use of all UMMC facilities. The policy in its entirety is available at: http://dis.umc.edu/docs_forms/EmailPolicy.pdf. In particular, use of UMMC electronic mail services is allowable subject to the following conditions:

1. Restrictions. UMMC electronic mail services may not be used for unlawful activities; commercial purposes not under the auspices of UMMC; personal financial gain; or uses that violate other UMMC policies or guidelines. The latter include but are not limited to policies and guidelines regarding intellectual property or regarding sexual or other forms of harassment.

2. Representation. Electronic mail users shall not give the impression they are representing, giving opinions or otherwise making statements on behalf of UMMC or any unit of UMMC unless appropriately authorized.

3. False Identity. UMMC email users shall not employ a false identity. However, email may be sent anonymously, provided this does not violate any law or any other UMMC policy and does not unreasonably interfere with the administrative business of UMMC.

4. Protected Health Information (PHI). Unencrypted PHI must not be sent through the UMMC email system to a recipient outside of the UMMC email network. As previously stated, email is not a secure method of sending messages.

5. Use. The UMMC email system for Official UMMC email messages only. Other email provider services may be compromised without
the knowledge or awareness of UMMC. This information could then be released for criminal activities or the public at large.

6. Authorized Use. When conducting UMMC-related business, education, research or health care services, individuals must use only authorized UMMC electronic mail accounts.

7. Prohibited Uses. UMMC email services shall not be used for purposes that could reasonably be expected to cause, directly or indirectly, excessive strain on any computing facilities or unwarranted or unsolicited interference with others’ use of email or email systems. Such uses include but are not limited to the use of email services to:
   a. send or forward email chain letters;
   b. “spam” or exploit list servers or similar broadcast systems for purposes beyond their intended scope to amplify the widespread distribution of unsolicited email;
   c. “letter-bomb”, or resend the same email repeatedly to one or more recipients to interfere with the recipient’s use of email;
   d. send pornographic, offensive, harassing or abusive material; or
   e. send non-encrypted messages containing PHI to a recipient not connected to the UMMC email network.

8. Personal Use. UMMC electronic mail services may be used for incidental personal purposes provided the user does not:
   a. directly or indirectly interfere with the UMMC operation of computing facilities or electronic mail services;
   b. burden UMMC with noticeable incremental cost;
   c. interfere with the email user’s employment or other obligations to UMMC; or
   d. send email records arising from such personal use: the records may, however, be subject to the presumption of a UMMC email record, regarding personal and other email records. Email users should assess the implications of this presumption in their decision to use UMMC electronic mail services for personal purposes.

SOCIAL MEDIA*

The Medical Center recognizes social media is an important and timely means of communication. Students who use these websites must be aware that posting certain information is illegal. Offenders may be subject to criminal and civil liability and adverse institutional actions. Offenders also may be subject to adverse academic actions up to and including dismissal.

The purpose of this policy is to:

1. Provide guidelines outlining how Medical Center students can engage in the appropriate use of social media platforms;
2. Minimize the business, legal and personal risks that may arise from an individual’s use of social media; and
3. Protect the privacy and safety of UMMC patients, students, employees and contractors.

The following actions are forbidden:

• Students may not post the personal information or photograph of any patient at UMMC. Removal of an individual’s name does not constitute proper de-identification of PHI. Inclusion of data such as age, gender, race, diagnosis, date of evaluation, types of treatment or the use of a highly specific medical photograph (such as a before/after photograph of a patient having surgery or a photograph of a patient from one of the medical outreach trips) may still allow the reader to recognize the identity of a specific individual. Posting of patient information could violate state or federal laws, such as the Health Insurance Portability and Accountability Act (HIPAA).

• Students may not post private (protected) academic information of a student or trainee.

• Students may not post vulgar, false, obscene, harassing statements or statements disparaging the race, religion, age, sex, sexual orientation or disability of any individual with whom they come into contact as a result of their role at UMMC.
• Students may not disclose any financial, proprietary or other confidential information of UMMC.
• Students may not present themselves as an official representative or spokesperson for UMMC.
• Students may not use UMMC’s trademarks or logos.
• Students may not represent themselves as other persons, real or fictitious, or otherwise attempt to obscure their identity as a means to circumvent the prohibitions included herein.
• Students may not use their official UMMC email addresses for social media purposes unless specifically authorized to do so by the Division of Public Affairs.
• Students in patient care roles may not initiate requests to connect with patients through social media.

In addition to the absolute prohibitions listed above, the actions listed below are strongly discouraged. Violations of these suggested guidelines may be considered unprofessional behavior and may be the basis for disciplinary action.

• Display of vulgar language;
• Display of language or photographs that imply disrespect for any individual or group because of age, race, gender, ethnicity or sexual orientation;
• Presentation of personal photographs or photographs of others that may reasonably be interpreted as condoning irresponsible use of alcohol, substance abuse or sexual promiscuity.

Individuals should make every effort to present themselves in a mature, responsible and professional manner. Discourse should always be civil and respectful. No privatization measure is perfect and undesignated persons may still gain access to your networking sites. Future employers (residency or fellowship program directors, department chairs or private practice partners) often review these network sites when considering potential candidates for employment. Any digital exposure can “live on” beyond its removal from the original website and continue to circulate in other venues. Students should think carefully before they post any information on a website or application and consider their goals in participating. Students should make sure they are choosing the most relevant platform and adding value to the discussion. Students should listen before they engage and always be modest, respectful and professional in their actions.


**FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT OF 1974**

**STUDENT ACCESS TO RECORDS**

Each year, the Medical Center informs entering students of their rights of access to their official records as stated in federal law. By written request to the Registrar’s Office, medical students who are or who have been in attendance may review recorded information maintained by the institution for use in making decisions about students.

Recorded information includes grades; copies of correspondence sent to the students by the educational programs and other institutional offices; requests from prospective employers and other agencies seeking verification of dates of attendance and degrees awarded; correspondence from currently enrolled students and former students requesting transcripts; letters of academic standing; and completion of licensure applications. The recorded information also includes an electronically stored transcript of courses and grades and a folder containing application materials and supporting documents such as transcripts from previous schools and supplementary material submitted with the application.

Confidential letters or statements of recommendation to which students have waived access rights are not available for inspection. As defined by federal law, students do not have access to medical, psychiatric or comparable records if
these are used exclusively for treatment purposes. However, students may designate an appropriate professional to examine these records. Students do not have the right to see parents’ financial records submitted to the institution. Students do not have access to: instructional, supervisory, and administrative personnel records which are not accessible or revealed to any other individual; campus security records which are used exclusively for law enforcement purposes, and which are not disclosed to individuals other than law enforcement officials; and employment records except when such employment requires that the person be a student.

Under federal law, students may not see confidential letters or statements of recommendation written before January 1, 1975, and may but are not required to waive the right of access to future confidential letters of recommendations. The institution secures from students their instructions regarding their access rights to confidential letters or statements of recommendation written on their behalf while enrolled at the Medical Center. These signed statements are permanently filed in the students’ folders. Any questions concerning student access to records should be directed to the registrar.

**RELEASE OF INFORMATION**

The institution is prohibited from releasing educational information or personally identifiable information other than directory information about the students without their written consent, except to specified agencies and persons such as school officials and certain federal or state offices as defined in federal law. Directory information includes students’ names; the educational program they are enrolled in and their classification; home and local addresses; and local telephone numbers. Students who wish to exclude themselves from the directory must file a written request with the Registrar’s Office within two weeks after the beginning of the school year.

**ACCURACY OF EDUCATIONAL RECORDS**

The Family Educational Rights and Privacy Act of 1974 allows students to challenge the contents of their educational records on the basis of accuracy. Students who request that information be amended or deleted from their records on the basis of incorrect information should first file their request with the official primarily responsible for the information. If the matter is not resolved to their satisfaction, students may request a formal hearing before an appropriate institutional body or consult Section 99.36 of the law’s regulations for additional grievance procedures. The registrar will furnish a copy of the Family Educational Rights and Privacy Act of 1974 upon request.

Notification of rights guaranteed under PL 93-380 and policies and procedures pertaining to educational records is provided to all students through this catalog section, by a memorandum distributed at the time of registration and in the orientation sessions for the school year.

**EMERGENCY PROCEDURES**

In the event of an emergency, important information is shared via the web on the institution’s website at [http://www.umc.edu/emergency.html](http://www.umc.edu/emergency.html). The Medical Center operates an emergency notification system for students, faculty and staff. In the event of a campus emergency, important safety information will be sent using a number of communication methods. Students can increase the effectiveness of this service by maintaining incoming text service and an up-to-date cell phone number in the student data system. The institution’s comprehensive emergency management plans can be found at [http://disasterplan.umc.edu/](http://disasterplan.umc.edu/).

**FIRE**

In the event of a fire in the School of Medicine or other buildings on campus, the central fire alarm system will activate. Any fire emergency should be reported immediately by dialing 911. Fires also can be reported by using the fire pull boxes located in hallways. If the fire is small and contained (for example, in a trash can), a fire extinguisher may be used to attempt to extinguish the fire; however, no one should ever endanger themselves by attempting to put out a
fire. The first responsibility of students and other personnel in the event of a fire is to report it and evacuate the area.

When the fire alarm sounds, personnel should close the window(s) to the office or room, leave the lights on, check the hallway for smoke or fire, close the door leading into the hallway, and exit the building as quickly and safely as possible. Personnel on elevators should exit the elevators at the nearest elevator stop and proceed out of the building via the nearest safe exit. When classes are in progress, it is the responsibility of the faculty member to assure that all students have been vacated from the classroom or laboratory before he or she leaves the classroom or laboratory.

TORNADOES OR SEVERE WEATHER
In the event of tornadoes or other severe weather that require protective action, all personnel should proceed to the interior hallways and away from windows as quickly as possible. Notification will be made once the severe weather conditions have cleared.

SUSPICIOUS PERSONS
Do not physically confront a suspicious person. Do not let anyone into a locked building or office area. Do not block a suspicious person’s access to an exit. Call 911 from a campus phone as soon as possible. Provide as much information as possible about the person and his or her direction of travel.

LOST AND FOUND
The Department of Campus Police in trailer 14 provides lost and found services to the Medical Center.

COMPLAINTS
A student seeking to resolve an academic or misconduct complaint, should seek resolution through the school’s published administrative channels, entering at the appropriate level and proceeding in the order stated. All decisions by the school’s dean or executive faculty concerning academic matters are final. Procedural appeals may be filed with the associate vice chancellor for medical education. In case of a procedural violation, the case will be returned to the point of the procedural issue and readdressed. Information on academic and conduct complaints are published in the bulletin and are included in the individual school’s handbook.

A student seeking to resolve a non-academic or non-misconduct complaint should seek resolution through the appropriate office on campus designated to address the particular student concern. Issues involving such matters as sexual harassment, discrimination, disability, employment or mistreatment fall under the institutional policies handled by specific offices, such as the Office of Human Resources or the Equal Employment Opportunity Office.

In the event that a student believes the nonacademic or non-misconduct complaint has not been resolved satisfactorily, he or she may file a written grievance with the chief student affairs officer. In such cases, the chief student affairs officer will work to ensure a fair and equitable process and solicit a written response to the grievance from the appropriate institutional representative within 10 working days.

An ad hoc grievance review committee will be convened to review the complaint and to make a recommendation.

The ad hoc grievance review committee may:
I. Recommend rejection of the grievance and deny the requested outcome;
II. Support the grievance and recommend approval of the requested outcome; or
III. Support the grievance and recommend approval of a revised outcome.

The chief student affairs officer shall communicate in writing the recommendation of the ad hoc grievance review committee to the associate vice chancellor for medical education. The decision of the associate vice chancellor for medical education is final and completes the grievance review process. All parties will be notified in writing of the final decision within 10 working days.
The Office of Student Affairs provides a Web-based version of a student comment/complaint box at https://www.umc.edu/Education/Academic_Affairs/Current_Students/Student_Comments_and_Complaints.aspx. This email account is used to collect and track student issues and concerns. Best efforts will be made to respond within 48 hours, unless the student wishes to remain anonymous.

The Student Affairs Council will maintain a protected record of all non-academic and non-misconduct student complaints in a proactive effort to identify institutional opportunities for improvement. The associate dean/director of student affairs from each school will report all non-academic and non-misconduct complaints that rise to the level of the individual school dean's office to the Student Affairs Council on a quarterly basis. The chief student affairs officer will report all student complaints that rise to the institutional level to the Student Affairs Council on a monthly basis.

**MEDICAL CENTER PROPERTY**

Medical students are not permitted to remove Medical Center property from the premises. Any Medical Center property used by a medical student must be properly assigned to or checked out by a faculty member. Any medical student who possesses, uses and/or removes Medical Center property from the premises for any reason must have a completed authorization form in hand. Personal use of Medical Center property is prohibited. Medical students using or possessing Medical Center property can be financially responsible for the damage or loss of the property due to negligence. Any damage, loss or theft of the property should be promptly reported to the faculty member in charge.

**MEDICAL CENTER TELEPHONE SYSTEM DIALING INSTRUCTIONS**

The Medical Center’s telephone system is an AT&T System 85.

- To call outside locally: Listen for dial tone; dial 9 and the desired number.
- To dial a number on campus: Listen for the dial tone; dial the five-digit station number.
- To call message operator for hospital paging: Listen for the dial tone; dial 41001.
- To call the Veteran’s Affairs Medical Center: Listen for the dial tone; dial access code 319; listen for dial tone; dial desired station number. Alternatively, dial 9 and (601) 362-4471.

**EMERGENCY NUMBERS**

**CAMPUS POLICE:**

Emergency ........................................... 911
Nonemergency ....................................... 41360
Cardiac Arrest Team ............................... 41111
Chemical Spills ................................. 41981

**FIRE EMERGENCY:**

Fire, Smoke, Heat, Drill .......................... 911
Medical Emergency .............................. 41111
(Hospital Area) ................................. 41111
Medical Emergency ............................ 911
(Outside Hospital Area) ..................... 911
Poison Control ................................. 41675 or 1-800-222-1222

For other numbers refer to the Medical Center Telephone and Referral Directory.