

# STUDENT HANDBOOK



2022-2023

UNIVERSITY OF MISSISSIPPI SCHOOL OF MEDICINE

## CONTENTS

PURPOSE OF STUDENT HANDBOOK .....	4
HISTORY AND GOVERNANCE .....	4
STATEMENT OF PURPOSE .....	4
SCHOOL OF MEDICINE MISSION .....	5
VISION STATEMENT .....	5
FACILITIES .....	5
The University Hospitals and Health System; Jackson Medical Mall; Affiliated Hospitals	
ADMINISTRATION .....	6
EQUAL OPPORTUNITY STATEMENT .....	6
DIVERSITY AND INCLUSION STATEMENT .....	6
PROCEDURE ON RELIGIOUS DIVERSITY .....	7
EDUCATIONAL PROGRAM OBJECTIVES .....	7
PROGRAM .....	9
TECHNICAL STANDARDS: ADMISSION, RETENTION, PROMOTION AND CERTIFICATION .....	10
Observation; Communication; Motor; Intellectual, Conceptual, Integrative, and Quantitative Abilities; Behavioral and Social Attributes	
PROFESSIONALISM .....	11
A COVENANT FOR MEDICAL EDUCATION .....	11
MEDICAL STUDENT PROFESSIONALISM CODE .....	12
PROFESSIONAL APPEARANCE GUIDELINES .....	13
POLICY AND PROCEDURE ON PROFESSIONAL BEHAVIOR .....	15
CODE OF HONORABLE AND PROFESSIONAL CONDUCT .....	16
POLICY AND PROCEDURE ON ACADEMIC INTEGRITY .....	17
POLICY ON GRADING PROGRESSION AND ACADEMIC STATUS .....	20
ACADEMIC ACHIEVEMENT POLICY AND PROCEDURE .....	23
ATTENDANCE POLICY .....	24
POLICY ON STUDENT DUTY HOURS .....	25
COURSE SYLLABI .....	26
PODCASTING GUIDELINES .....	26
EVALUATION.....	26
REGISTRATION .....	26
Tuition and Fees, Refunds	

STUDENT SERVICES .....	27
THE ROWLAND MEDICAL LIBRARY .....	27
STUDENT FINANCIAL AID .....	27
ORGANIZATIONS FOR STUDENTS .....	27
Honor Societies, Professional Organizations, Student Council, Associated Student Body	
INTRAMURALS .....	28
FOOD AND NUTRITION SERVICES: Cafeterias; Fast Foods .....	29
STUDENT UNION .....	29
MEDICAL CENTER BOOKSTORE .....	29
Textbooks; Reference and Review Books; Textbooks and Special Equipment; Medical Supplies; Office Supplies and School Apparel	
TECHNOLOGY REQUIREMENTS: Required Laptops .....	30
MEDICAL STUDENT LOUNGES .....	30
POSTAL SERVICE .....	30
MAILBOXES .....	31
LOCKERS .....	31
PICTURE IDENTIFICATION .....	31
COMMUNICATIONS AND MARKETING .....	31
POSTING OF NOTICES .....	31
UMMC POLICE AND PUBLIC SAFETY DEPARTMENT .....	31
CAMPUS SECURITY ACT OF 1992 .....	31
PARKING .....	32
Violations; Bicycles, Motorcycles	
FACULTY ADVISEMENT .....	32
COUNSELING SERVICES .....	32
ACADEMIC SUPPORT .....	32
TUTORING SERVICES .....	33
STUDENT COUNSELING AND WELLNESS CENTER .....	33
STUDENT ASSISTANCE PROGRAM .....	33
INTERNATIONAL TRAVEL .....	34
STUDENT DISABILITY INSURANCE .....	34
ACADEMIC ACCOMMODATIONS .....	34
MEDICAL INSURANCE REQUIREMENT .....	34

STUDENT AND EMPLOYEE HEALTH .....	35
Services, Non-Involvement of Providers of Student Health Services in Student Assessment	
IMMUNIZATION REQUIREMENT .....	36
DRUG PROGRAM .....	36
LEGAL SANCTIONS UNDER LOCAL, STATE OR FEDERAL LAW .....	37
TOBACCO PRODUCT USE .....	37
FIREARMS POLICY .....	37
UMMC SAFETY PRECAUTIONS .....	37
Personnel, Equipment, Teaching Laboratories, Behavior Risk	
POLICY ON REPORTING OBLIGATIONS FOR STUDENTS WITH BLOOD BORNE DISEASES .....	38
MISTREATMENT POLICY .....	39
General Mistreatment; Discrimination; Sexual Misconduct	
CONFIDENTIALITY .....	40
PUBLIC WIRELESS ACCESS POLICY AND PROCEDURE .....	41
EMAIL POLICY .....	42
PROCEDURE REGARDING SOCIAL MEDIA .....	44
FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT OF 1974 .....	45
Student Access to Records; Release of Information; Accuracy of Educational Records	
EMERGENCY PROCEDURES .....	46
Fire; Tornadoes or Severe Weather; Suspicious Persons	
LOST AND FOUND .....	46
STUDENT COMPLAINTS .....	46
MEDICAL CENTER PROPERTY .....	47
MEDICAL CENTER TELEPHONE SYSTEM DIALING INSTRUCTIONS .....	48
EMERGENCY NUMBERS .....	48
UMMC CAMPUS MAP .....	49

## 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 University of Mississippi School of Medicine is committed to training skilled and compassionate physicians to provide high-quality and equitable health care particularly to the state's residents, including diverse and underserved populations. The school prepares learners to provide excellent care through programs of innovative education, state-of-the-art research and comprehensive clinical practice.

*Approved by the Executive Faculty, April 28, 2011.*

*Updated by the Executive Faculty, August 20, 2018.*

## VISION STATEMENT

A healthier Mississippi and beyond through education, patient care and discovery.

*Approved by the Executive Faculty, August 20, 2018.*

## 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, Dentistry and Population Health 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. The Translational Research Center was opened in 2017 along with the new School of Medicine Education Building. 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 School of Population Health was established in 2017.

## 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 the Kathy and Joe Sanderson Tower, 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. Dermatology and a Dermatology Psoriasis Specialty Clinic also see patients at the Jackson Medical Mall. 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.

## **ADMINISTRATION**

The University answers to the Board of Trustees through the University's administrative head, Chancellor Glenn Boyce, 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; Dr. Mike McMullan, associate dean for student affairs (601) 984-5012; Dr. Lyssa Weatherly, assistant dean for student affairs (601) 984-5610; Dr. Jimmy Stewart, associate dean for graduate medical education (601) 984-5770; Dr. J. Marc Majure, assistant dean for graduate medical education (601) 984-1113; Dr. David R. Norris, assistant dean for academic affairs (601) 984-5006; Dr. Brad Ingram, assistant dean for graduate medical education (601) 984-5210; Dr. Demondes Haynes, associate dean for admissions (601) 984-5010; Dr. Kathryn Schneider, assistant

dean for admissions (601) 815-8418; and Dr. Patrick Smith, associate dean for faculty affairs (601) 984-5003.

## **EQUAL OPPORTUNITY IN EDUCATION AND EMPLOYMENT POLICY STATEMENT**

The University of Mississippi Medical Center provides equal opportunity in any employment practice, education program, or education activity to all qualified persons. The Medical Center complies with all applicable laws regarding equal opportunity and affirmative action and does not unlawfully discriminate against any employee, student, or applicant based upon race, color, gender, sex, sexual orientation, gender identity or expression, religion, creed, national origin, age, disability, veteran status, marital status, socioeconomic status, culture, or genetic information. Inquiries or complaints may be referred to the Office of the Director, Employee Relations, 2500 North State Street, Jackson, MS 39216-4505.

## **DIVERSITY AND INCLUSION STATEMENT**

The University of Mississippi Medical Center (UMMC) School of Medicine (SOM), part of Mississippi's only academic health science campus, is committed to the education and training of compassionate, considerate, and competent physicians who provide quality health care aimed at achieving health equity within the state. We believe that the inclusivity of different dimensions of diversity is integral to our missions and we remain committed to fostering a climate of respect, belonging, and excellence in the academic learning environment.

To become culturally responsive to our patients and create a diverse workforce reflective of our state's population, we concentrate recruitment and retention efforts on groups traditionally underrepresented in medicine which include: Black/African American, Hispanic/Latino, rural, educationally and/or economically disadvantaged students. We utilize pipeline and outreach

recruitment programming that provides pre-application counseling, academic preparation, pre-matriculation, and professional development. These efforts are sustained through long-standing partnerships and engagement with school districts and higher education institutions throughout the state and region.

Holistic admissions offers accepted and matriculating students a rich educational experience and brings forth new ideals and diverse perspectives in the learning environment. Academic support and counseling services are strong contributors of student retention. Students are also afforded opportunities to: receive generous scholarship awards; participate in service-learning and community engagement activities; hold leadership positions within their class and the University's student governing body; be inducted into honor societies; become members of local chapters of national professional organizations; and attend national meetings. Student-elected diversity representatives are tasked with ensuring the interests of all groups within the class are represented, promoting multi-cultural programs and opportunities, and addressing incidences of discrimination or complaints about cultural sensitivity or inclusion.

The School of Medicine recognizes the educational benefits of diversity among students as well as basic science and clinical faculty, staff, and senior administrators. As has been demonstrated in the literature, a diverse faculty is better equipped to promote an academic learning environment that prepares culturally-competent physicians who are aware of and committed to addressing health disparities and care for patients who are from different backgrounds. As such, the SOM targets the recruitment, retention, and promotion of African Americans and women among faculty and senior administrators. These efforts include support for early and mid-career faculty in professional development.

Our comprehensive academic program is designed to create a physician workforce to address health disparities, develop lifelong learners, contribute to biomedical research, and utilize technology to improve patient care and

health outcomes. These goals support our mission of creating a healthier Mississippi.

*Approved by the Executive Faculty, January 24, 2011;  
Updated by the Executive Faculty, September 16, 2019.*

## PROCEDURE ON RELIGIOUS DIVERSITY

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 to the material discussed and are responsible for the educational content of the session.

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.

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

- Demonstrate knowledge of the normal



structure and function of the human body and each of its major organ systems.

- Demonstrate an understanding of the molecular, biochemical and cellular mechanisms which help maintain the body's homeostasis.
  - Synthesize the various causes (genetic, developmental, metabolic, toxic, microbiologic, autoimmune, neoplastic, degenerative, and traumatic) of diseases and the ways in which they impact on the body (pathogenesis).
  - Demonstrate 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.
  - Apply principles of epidemiological sciences in establishing the causation of disease and efficacy of traditional and nontraditional therapies.
- II. Graduates must utilize 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:
- Obtain an accurate medical history that covers all essential aspects of the patient's history, including issues related to age, gender, ethnic and socioeconomic status.
  - Perform both a complete and an organ system specific examination, including one for mental status.
  - Perform routine technical procedures including, at a minimum, venipuncture, inserting an intravenous catheter, airway management, inserting a nasogastric tube, inserting a Foley catheter and suturing simple lacerations.
  - Interpret results of commonly used diagnostic tests and procedures, i.e., laboratory, roentgenographic, electrocardiographic.
- Utilize knowledge of the most frequent manifestations of common disorders.
  - Reason deductively in solving clinical problems.
  - 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.
  - Identify 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.
  - Recognize and outline initial management for patients with conditions requiring critical care.
  - Apply knowledge about how to relieve pain and ameliorate suffering of patients.
  - Communicate effectively, both orally and in writing, with patients and their families.
- III. Graduates must demonstrate 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:
- Apply knowledge of theories and principles that govern ethical decision making, and of 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.
  - Demonstrate honesty and integrity in all interactions with patients, families, colleagues and others with whom physicians must interact in their professional lives.
  - Advocate the interests of one's patients over one's own interests at all times.
  - Analyze the threats to medical professionalism posed by the conflicts of interest inherent in various financial and organizational arrangements for the practice of medicine.

- Evaluate and accept limitations in one's knowledge and clinical skills, and commit to continuously improve one's knowledge and abilities.
- IV. Graduates must employ systematic approaches for promoting, maintaining and improving the health of individuals and population. At the completion of the medical school curriculum, students must be able to:
- Identify the important non-biological determinants of poor health and of the economic, psychological, social and cultural factors that contribute to the development and/or continuation of maladies.
  - Apply 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.
  - 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.
  - Retrieve 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.
  - Demonstrate knowledge of various approaches to the organization, financing and delivery of health care.
  - Provide care to patients who are unable to pay and to advocate for access to health care for members of traditionally underserved populations.
- V. Graduates must demonstrate the ability to engage in an interprofessional team in a manner that optimizes safe, effective patient- and population-centered care. At the completion of the medical school curriculum, students must be able to:
- Establish and maintain a climate of mutual respect, dignity, diversity, ethical integrity and trust among health professionals.
  - Communicate effectively, both orally and in writing, with colleagues and health care team members with whom physicians must exchange information in carrying out their responsibilities.
  - Provide compassionate and nonjudgmental treatment of all patients, and respect for the privacy and dignity of all patients.
  - Demonstrate 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.
- VI. Graduates must demonstrate the qualities required to sustain lifelong personal and professional growth. At the completion of the medical school curriculum, students must be able to:
- Engage in lifelong learning to stay abreast of relevant scientific advances.
  - Assess self-awareness of knowledge, skills, and emotional limitations to engage in appropriate help-seeking behaviors.
  - Demonstrate leadership skills that enhance team functioning and the learning environment.
  - Develop an understanding of skills and strategies to maintain work life integration.
- Updated by the School of Medicine Curriculum Committee, November, 2019.*

## 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 to the material discussed

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, 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.

## **A COVENANT FOR MEDICAL EDUCATION**

### **THE TEACHER-STUDENT RELATIONSHIP**

Preparation for a career in medicine requires the acquisition of a large base of knowledge. It also demands the virtues that form the basis of the doctor-patient relationship and sustain the profession of medicine as a moral enterprise. This covenant serves as both a commitment and a reminder to teachers and students that their conduct in fulfilling their mutual obligations is the medium through which the profession instills its ethical values.

### **PRECEPTS**

Medical educators have a duty to convey the knowledge and skills required to deliver the profession's contemporary standard of care and to instill the values and attitudes required to preserve the medical profession's social contract across the generations. The learning environments conducive to conveying professional values must be grounded in integrity. Students learn enduring lessons of professionalism by observing and emulating role models who epitomize authentic professional values and attitudes. Fundamental to the ethic of medicine is respect for every individual. Mutual respect between learners, as novice members of the medical profession, and their teachers, as experienced and esteemed professionals, is essential for nurturing that ethic. Given the inherently hierarchical nature of the teacher-student relationship, teachers have a special obligation to ensure that students are always treated with respect.

### **COMMITMENTS OF FACULTY**

- We pledge our utmost efforts to ensure that all components of the educational program for medical students are of the highest quality.
- As mentors for our student colleagues, we pledge that we will maintain high professional standards in all of our interactions with patients, colleagues, and staff.
- We pledge that we will respect all students as individuals, without regard to gender, race, national origin, religion, age, or sexual orientation; we will not tolerate anyone who manifests disrespect or who expresses biased attitudes toward any student.
- We pledge that students will have sufficient time to fulfill personal and family obligations, to enjoy recreational activities, and to obtain adequate rest; we will monitor time required for "call" on clinical rotations.
- In nurturing both the intellectual and the personal development of students, we pledge to celebrate expressions of exemplary professional attitudes and behaviors, as well as achievement of academic excellence.

- We pledge that we will not tolerate any abuse or exploitation of students.
- We pledge that we will encourage any student who experiences mistreatment or who witnesses unprofessional behavior to report the facts immediately to appropriate faculty or staff; and we pledge that we will treat all such reports as confidential and will not tolerate reprisals or retaliations of any kind.

### COMMITMENTS OF STUDENTS

- We pledge our utmost efforts to acquire the knowledge, skills, attitudes, and behaviors required to fulfill all educational objectives established by the faculty.
- We pledge that we will cherish the professional virtues of honesty, compassion, integrity, fidelity, and dependability.
- We pledge to respect all faculty members and all students as individuals, without regard to gender, race, national origin, religion, age, or sexual orientation.
- As physicians in training, we pledge that we will embrace the highest standards of the medical profession and conduct ourselves accordingly in all of our interactions with patients, colleagues and staff. We pledge to respect all individuals without regard to gender, race, national origin, religion, age, or sexual orientation.
- In fulfilling our own obligations as professionals, we also pledge to assist our fellow students in meeting their professional obligations.

*Adapted from the Association of American Medical Colleges' Compact Between Teachers and Learners of Medicine.*

## MEDICAL STUDENT PROFESSIONALISM CODE

As a student of Medicine, I am now a member of the medical community, and as a member, I accept responsibility for my conduct and expect the highest standards of myself. I will also support others in upholding these standards. I understand that the behavior and attitudes of the individual

medical student reflects on our classmates, our school, our families, our communities, and our profession. I recognize that it is an honor and a privilege to be a part of the medical profession. As a medical student in lecture, lab, small group, an administrator's office, support staff's office, clinic, or the hospital, whether patients are present or not, I will act in a professional manner.

I pledge to uphold the following tenets of professionalism:

### Honesty and Integrity

- I will demonstrate truthfulness and fidelity in academic and clinical activities, including examinations, evaluation, and any other representation of my work.
- I will not participate in or be a party to unfair advancement of academic standing.
- I will be truthful in all interactions with patients, peers, and faculty.
- I will be honest in the collection, interpretation, and reporting of data pertinent to academic work or patient care.
- I will adhere to the highest standard of integrity in professional relationships, including those with industry representatives.

### Respect for Others

- I will demonstrate the highest standards of ethical and professional behavior in the academic and clinical setting.
- I will not discriminate against patients or their families based on race, ethnicity, religion, age, gender, sexual orientation, disability, diagnosis, socioeconomic status, or ability to pay.
- I will treat my classmates, staff, those of various medical disciplines, and all health care team members with respect.
- I will display and expect non-discriminatory behavior toward and from my supervisors, my peers, and staff with whom I work.
- I will respect that faculty have devoted their time and experience to teaching medical students in lectures, labs, small groups, simulations, clinics, and hospitals.

- I will show respect in all oral, written, and e-mail communications, including patient presentations, clinical documentation, course evaluations, and challenges to grades or test questions.
- I will protect patient confidentiality, discussing information with no one who does not have legitimate need to know.
- I will uphold the dignity of our patients.
- I will show respect for others by dressing appropriately, including wearing a clean white coat and appropriate identification during all anticipated patient or simulated patient contact. The Professional Appearance Guidelines for University Hospitals and Clinics can be found in the Student Handbook.

### Reliability and Responsibility

- I will maintain patient well-being as my main focus and primary responsibility.
- I will fulfill responsibilities assigned to me with careful consideration of consequences to both patients and colleagues, recognizing that my failure to contribute fully increases the workload of others and may compromise the well-being of our patients.
- I will be punctual.
- I will educate myself about the ethical standards of my profession and the legal standards that may apply to my patients.
- I will acknowledge my strengths as well as my limitations, offering assistance when I am able and seeking assistance when necessary.
- I will not be under the influence of alcohol or other drugs while performing academic or clinical responsibilities.

### Commitment to Self-Improvement

- I will continue to strive for knowledge, skills, competence, and best practices.
- I will prepare to the best of my ability for class, labs, small groups, clinic, and rounds.
- I will commit to participate through attendance in class, labs, small groups, and clinical settings.
- I will demonstrate willingness to share in the learning process with peers, faculty, and staff to

promote the student-teacher relationship and to assist others in meeting professional obligations.

- I will seek assistance from colleagues or professionals for any problems that adversely affect my education, quality of patient care, or service to society.
- I will willingly assess my progress and identify areas for improvement and issues for continued learning.
- I will incorporate feedback into self-improvement.
- I will effectively use technology to manage information for patient care and self-improvement.
- I will continue to strive to become an honest, responsible, and compassionate member of the medical profession, with service to and well-being of the patient as my guide.

Finally, as a student, I will adhere to UMMC policies on professionalism, conduct, personal appearance, patient confidentiality, and compliance

*Adapted from the University of Minnesota Medical Student Professionalism Code, 2002, by the University of Mississippi School of Medicine Curriculum Committee, Professionalism Subcommittee, November 2006.*

## PROFESSIONAL APPEARANCE GUIDELINES

### 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.

**ID Badge:** UMMC policy requires 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.



## 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 (e.g. political statements). 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. Jeans, cargo pants and capris are acceptable. Pants should not be excessively clinging; leggings and spandex are appropriate if worn under a dress, shirt or skirt of appropriate length.

**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 acceptable.

**Skirts:** Skirts must be of sufficient length to reach an ID card placed vertically at the knee.

**Shoes:** All footwear should be clean and in good condition. Sneakers 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. Garments such as sweat suits, jogging suits, camouflage or any type of pants and top worn for sportswear are not appropriate.

## PROFESSIONAL DRESS GUIDELINES (to include in person and online/video encounters)

**Shirts:** Men should wear button-down shirts with all buttons buttoned; however, if a tie is not worn, the top button may be open. Women's shirts should not be low cut or excessively clinging; these tops must have sleeves. Bare shoulders are not acceptable.

**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.

**Accessories:** Nail polish should be tasteful and neat in appearance. As a health precaution, no false 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. Earrings should not exceed one-and-a-half inch in size. Nose-rings are permitted for cultural customs. 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.

## ONLINE/VIDEO ENCOUNTERS

In addition to professional dress, encounters that occur online or using video involve other components for which attention must be given. Consider your background to ensure you present a neat space that is free from distracting or inappropriate materials (e.g., posters/murals). Ensure that the space is appropriately secure to exclude excessive or distracting background noise and ensure an appropriate level of confidentiality when appropriate.

## SUMMARY

These recommendations for dress are expected to be adhered to any time the students are in the classroom, hospital/clinical/online/video 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 AND PROCEDURE ON PROFESSIONAL BEHAVIOR

### PURPOSE:

As one of the core competencies for the practice of medicine, professionalism is an academic matter within the School of Medicine. Students must demonstrate the professional behaviors expected of a physician. Students are evaluated in the areas of attentiveness, maturity, cooperation, responsibility, professional appearance, respect (i.e., for administration, faculty, residents, peers, patients, patient family members, and other members of the health care team), communication, judgment, ethics, honesty, morality, as well as other characteristics of professionalism important for a career in medicine.

**SCOPE:** All School of Medicine Students

### POLICY:

Professionalism is an academic matter within the School of Medicine. Medical students will encounter a number of people who will note their behaviors. These observers may report compliments or concerns related to the professional behavior of a student through verbal, written, or other mechanisms.

Examples of report sources include faculty, residents, nurses, other health care providers, other medical center employees, medical school peers, patients, or patient family members. Reports of exemplary professional or unprofessional behaviors or concerns should be made to any of the deans in the Office of Medical Education or Office of Student Affairs.

### PROCEDURE:

When a student receives a report of a concern related to unprofessional behavior, the assistant or associate dean for student affairs, the assistant dean for academic affairs, or the vice 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, the assistant dean for academic affairs, or the vice dean for medical education, the following actions will be taken:

1. If a single incident is considered minor (for example when it is unlikely to affect patient care, the academic performance or well-being of other

students, or to negatively impact the medicolegal well-being or reputation of the faculty, school, and institution):

- The initial counseling session may suffice as an intervention. If warranted, further monitoring by a dean or member of the faculty will be arranged.
  - Documentation will be maintained in the administrative offices, but will not be reportable on the Medical Student Performance Evaluation, unless additional incidents occur.
  - If the reported incident is found to be frivolous or invalid, this fact will be clearly documented in the student's file.
2. If the incident is of serious concern (for example, when patient care could be compromised, the academic performance or well-being of other students affected, or if the medicolegal well-being or reputation of the faculty, school, or institution is at risk) or if there have been any prior incidents, one (1) or more of the deans in the School of Medicine will investigate and counsel the student and may:
- Arrange for the student to undergo drug testing through Student-Employee Health.
  - Refer the student to the Medical Student Honor Council for peer review of the allegations and the determination of further action. Resulting recommendations will be presented to the Dean's Council for review.
  - Recommend the incident(s) be reviewed by the Dean's Council without prior referral to the Medical Student Honor Council.

Upon review by the Dean's Council, the student may be placed on remediation or probation; suspended or dismissed from the School of Medicine; or subject to other sanction as deemed appropriate.

All recommendations, regardless of content, will be presented to the Dean of the School of Medicine who may accept, reject, modify, or return the decision to the Deans Council for further consideration. A student who returns after a suspension, dismissal or withdrawal for unprofessional behavior will be on academic probation for at least one (1) academic year.

For the purposes of this policy and procedure, the following definitions are used:

- **Warning:** A verbal or written message to the student that there are concerns regarding their demonstration of the academic competency of professionalism. Documentation of warnings are maintained in the administrative offices but are not reportable to any outside body. Warnings may be used to demonstrate a pattern of unprofessional behavior if additional concerns are raised.
- **Remediation:** The student is required to participate in an individualized, formal improvement plan to address the professionalism concerns. The specific requirements of the plan will be provided to the student in writing and documentation will be maintained. Remediation is not reportable to any outside body but may be used to demonstrate a pattern of unprofessional behavior if additional concerns arise.
- **Probation:** Students on probation must participate in improvement plan as described in remediation. In addition, placement on professionalism probation is reportable to outside agencies, including the Medical Student Performance Evaluation (e.g., the "Dean's Letter").

### **MECHANISM FOR APPEAL:**

Warnings and remediation decisions may not be appealed as there is no potential for future repercussions if no further professionalism concerns are raised. Other sanctions, including placement on probation, may be appealed.

Following approval by the Dean, the vice dean for medical education or their designee shall notify the student via letter or email within five (5) working days of the decision. From the time of sending the notice, the student shall have an additional ten (10) working days to notify the vice dean for medical education of their intent to appeal. If no response is received from the student after this period has passed, the decision will be final, and the right to appeal shall have been waived.

An appeal committee shall be assembled by the Office of Medical Education and composed of five (5) faculty members who currently serve as program directors or associate program directors of physician residency programs at the medical center. The

student shall have the right to appear before this committee and present any statements, evidence, or witnesses of their choosing. Legal counsel may be present, at the student's own expense, but may serve only in an advisory capacity and may not address the appeal committee, present evidence, or make any statements. Decisions shall be rendered by majority vote. The appeal committee shall have the right to uphold or revoke the previous decision, apply a harsher or gentler sanction, or set criteria for the student to meet to continue with the educational program.

*Approved by SOM Executive Faculty February 22, 2005.  
Updated and Approved by SOM Executive Faculty June 15, 2021.*

## **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:

**<https://umc.edu/SOM-Resources>.**

*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.*

*Revised February 26, 2017.*

## POLICY AND PROCEDURE ON ACADEMIC INTEGRITY

### **PURPOSE:**

To establish clear expectations and processes to maintain academic integrity within the School of Medicine.

**SCOPE:** All School of Medicine Students

This document replaces the previous Policy and Procedure on Personal Belongings during Exams in its entirety.

### **POLICY:**

As professionals, physicians hold positions of great trust within society. It is the responsibility of professionals and professional students to avoid situations that may negatively impact this trust. Integrity is core to the professional competency of professionalism and must be maintained at all times. Even the appearance of impropriety negatively impacts the trust between patient and physician and must be avoided.

Students in the School of Medicine must not give or receive any assistance or access any resources on any assignment, paper, quiz, or examination, including OSCEs/clinical skills examinations and NBME/USMLE examinations, unless explicitly authorized to do so by the responsible faculty or staff via written or verbal instructions. This expectation stands regardless of whether or not a secure browser/application is utilized for assessment administration or a proctor is physically present. Examples of inappropriate resources or behaviors include, but are not limited to:

- Reviewing or attempting to review textbooks, review books, or notes during an assessment.
- Accessing or attempting to access websites or performing web searches during the assessment.
- Communicating or attempting to communicate with other students verbally, in writing, electronically, through signals, or by any other means, during an assessment.
- Adding notes to scratch paper before an assessment has begun.
- Claiming as your own, ideas, words, data, documentation, or product of an assignment done by someone else. Examples include

improper citation of referenced works, the use of commercially available scholarly papers, failure to cite sources, or copying another person's ideas or assignment.

- Self-plagiarism on written assignments or in clinical documentation. For example, submitting the same work for credit in more than one course or a repeat of the same course, regardless of whether or not such submission occurs within the same term, unless an exception has been granted in writing by the responsible instructor.
- Unauthorized possession or sharing of testing materials with other students, including verbal sharing.
- Attempting in any manner to unfairly gain an advantage over other students by accessing resources that are not generally permissible or preventing others from accessing resources that are permissible for a given assignment or examination.
- Having knowledge of any form of academic dishonesty committed by another and not making a report to the appropriate individual(s).

### **PROCEDURE:**

To ensure a fair assessment environment and assist students in eliminating concerns about academic integrity, the School of Medicine requires faculty, staff, and students to follow the procedures outlined below. These are considered a minimum, and course directors/faculty may impose additional requirements. The administration of standardized examinations are subject to the test security requirements published by the NBME or other national academic agency responsible for the examination.

As applicable, these standards apply to in-person & at-home examinations, quizzes, and assessments, as well as OSCEs/Clinical Skills Examinations, and any other assignments or activities for which a numeric or pass/fail grade is awarded. Additionally, this is not an exhaustive list and students should at all times consider how their actions may be perceived by others and behave in a manner during assessments that is beyond potential reproach.

### **Prior to the Assessment**

Each year, the Office of Medical Education will designate assigned seats for first- and second-year

students who will take examinations in the lecture halls SM122 and SM124. When taking an examination in these rooms, students must utilize these seats. Failure to do so will be considered a testing procedure violation.

To minimize confusion, utilization of bandwidth, and ensure that proctors are able to focus their attention on examination takers, students must download examinations to their device prior to their arrival in the testing location, if applicable.

Students must leave backpacks, hoodies, head coverings (except those worn for religious purposes), blankets, outwear, and all electronic devices in their lockers, excluding the device they will take the examination and its charger. These items should not be stored in the testing room, classrooms, or other public spaces.

Electronic devices include cellular telephones, laptops, tablet computers, calculators, smart pens/styluses, or any other device that draws power from a battery, regardless of storage or wireless communication abilities. Devices used to compensate for a diagnosed disability or health condition (e.g., hearing aids, continuous blood glucose monitors, insulin pumps) are not restricted by this policy. However, the use of such devices that could be misconstrued as an attempt to violate testing procedure should be disclosed to the assistant dean for academic affairs and, if the student is comfortable, to the course director/administrator and examination proctor.

No drinks or snacks should be brought into the testing space for examinations that are less than one (1) hour in duration. For longer examinations, students may bring a clear water bottle with them, but must be willing to allow inspection of the water bottle by a proctor upon request. Snacks should be transported in clear, zip-lock bags.

Students may not bring scratch paper into the testing location. If scratch paper is allowed, the proctor must provide it. Students may bring two (2) pens or pencils with them.

To ensure appropriate proctor availability, schedules must be followed. Students must arrive at the testing location at least five (5) minutes before the scheduled start time. Regardless of arrival time, students will remain subject to the prescheduled end time and will not receive any additional time

to complete the assessment due to having arrived tardy.

Upon arrival students should proceed immediately to their testing location, set up their device and plug it in. Each device should be rebooted and any applications that could interfere with assessment software should be closed. The only application(s) or web browser tab(s) open on the device should be those necessary to complete the assessment.

### **During the Assessment**

The assessment is considered to have begun when the chief proctor passes out scratch paper or begins providing instructions, whichever is first. There should be no talking or other communication between students from this time.

At least one (1) proctor must be present in the testing area for every thirty-five (35) students. Proctors should move around the room at random intervals. A lower proctor-to-examinee ratio may be required by certain external testing authorities such as the NBME.

A chief proctor must be designated by the course director or assistant dean for academic affairs, who may be any member of the faculty or staff. The chief proctor is responsible for beginning/ending the assessment, sharing needed codes or passwords, troubleshooting problems, and making any necessary decisions during the examinations. If deemed appropriate, students who violate testing procedures or engage in dishonest or disruptive behavior may be instructed to leave the examination area and will receive scores of zero (0) for the assessment. Decisions of the chief proctor are final and may only be appealed on the grounds that such decisions were arbitrary or capricious.

Students should maintain their focus on their computer screen and should avoid the appearance of looking at other monitors. If they need to look away, their line of site should clearly demonstrate they are not attempting to gain an unfair advantage.

Students must receive permission to go to the restroom during assessments. For assessments lasting ninety (90) minutes or less, students will not be allowed to exit and return to the testing location.

Once completed, students should demonstrate submission of the assessment to the proctor and then immediately depart the testing location.

## After the Assessment

Students should not congregate in areas adjacent to testing locations and should be mindful of how their actions/behaviors could disrupt others still testing. No discussions about the contents of the assessment should occur.

No attempts to document the contents of the examination from memory or any other method should be made. Furthermore, similar attempts should not be made during opportunities to review the examination content, unless explicitly permitted by the course director.

Students who come into possession of unauthorized test materials should turn these into the course director, Office of Medical Education, or Office of Student Affairs and under no circumstances should these be shared with future classes.

## Other Assessment Types

### Written Assignments

Plagiarism of written assignments is unacceptable in an academic environment and disrupts the free flow of thoughts, information, and ideas. This includes cases of self-plagiarism, in which a student submits an assignment previously submitted for the same or another course, including those taken at other institutions. Plagiarism can also occur in the clinical environment when all or portions of notes are copied forward or from other documentation. This could include notes written by other individuals or by the student on previous days. All documentation in the medical record completed by medical students should be completed de novo each day.

Citation of other's work is acceptable for appropriate assessment types (i.e., written papers), but should be cited using the appropriate professional formatting and should be used to explain or highlight the student's original work, thoughts, or analysis.

### Simulations, Clinical Skills Examinations, and OSCEs

Sharing knowledge of patient presentations, physical findings, differential diagnoses, or any other component of any simulated patient encounter with students who have not yet completed a given simulated case or experience is in violation of the integrity expected of medical students.

## Reporting Testing Procedure Violations or Academic Dishonesty

Medicine is a self-policing profession, in which physicians and medical students must hold one another accountable for the provision of the highest quality patient care using morally-sound ethical decision making. Any decision to withhold a suspected lack of knowledge, observed unprofessional behavior, or other impairment can put a patient's life in danger.

Therefore, chief proctors, faculty, staff, and students are required to report testing procedure violations or other cases of suspected academic dishonesty to the course or clerkship director and the assistant dean of academic affairs. Students who are aware of academic dishonesty or testing procedure violations and do not report them are subject to the same penalties as those who committed the procedure violation or dishonest act. All student reports of procedure violations or academic dishonesty by students are confidential. Staff members/faculty members who similarly fail to report academic dishonesty or testing procedural violations will be referred to their supervisor for appropriate intervention and disciplinary action.

## Managing Academic Dishonesty and Violations of Testing Procedures

Following a report of academic dishonesty or violations of testing procedures, the assistant dean for academic affairs will investigate as appropriate and discuss the findings with the course director. If the course director and assistant dean agree that the offense is minor the student will receive zero (0) credit for the assignment without further sanction. Documentation will be maintained in the student record in the Office of Medical Education. If no further incidents occur, the documentation will not be reported in the Medical Student Performance Evaluation, though the course director may elect to include it in evaluation comments on professionalism.

In cases of a second minor incident or of a single major incident (as determined by the assistant dean and course clerkship director, or in any case in which the violation occurred on a block or final examination, or any other assignment accounting for >2.5% of the final grade), the student will receive a grade of zero for the assignment and the assistant dean for academic affairs will refer



the case to the Medical Student Professionalism Council for review via its standard policies and processes as outlined in the council's bylaws and Student Handbook. Sanctions imposed by the Professionalism Council must be upheld or modified by the School of Medicine Deans Council.

Should a second major incident or an extreme incident occur (such as cheating or violation of testing procedures on an NBME/USMLE examination or end-of-year-clinical skills examination, or in cases that could cause the integrity of the School of Medicine or institution's to be questioned by the public), the assistant dean for academic affairs will refer the case for review by the School of Medicine Deans Council. The council may, at its sole discretion, apply any combination of no sanction, failure of the assignment or course, repetition of the academic year, academic probation, or dismissal from the school of medicine. If applicable, the incident will be reported to the relevant national examining body, who may apply additional sanctions, some of which could make the student ineligible for continued progression toward the Doctor of Medicine degree, which would result in an automatic dismissal from the School of Medicine.

## **POLICY ON GRADING, PROGRESSION, AND ACADEMIC STATUS**

### **POLICY**

Grading and satisfactory student progress in the School of Medicine program are determined by recognized standards. The faculty and administration hold ultimate authority to determine student grades. Students have the right to fair and articulated standards and to accuracy in the recording and official records of their grades.

### **PROCEDURE ON GRADING, PROGRESSION, AND ACADEMIC STATUS**

**Satisfactory Progress:** Students must satisfactorily complete all requirements for promotion and graduation within seven (7) years of their initial matriculation to the School of Medicine program. All students who, upon the date of commencement seven (7) years

following their matriculation, have not successfully completed the required course of study and passed the requisite examinations will be reviewed by the Promotions Executive Committee who may recommend the student be dismissed from the program, placed on academic probation, or continue without sanction based on the individual merits of the student's situation.

Students actively enrolled in the MD/PhD programs co-sponsored by the School of Medicine and the UMMC School of Graduate Studies in the Health Sciences and the UMMC School of Population Health, who have satisfactorily completed all requirements of their programs by the scheduled deadlines, do not require this review.

To begin coursework in the third year, students must have scheduled the United States Medical Licensing Examination (USMLE) Step 1 to occur prior to the start of that academic year. Students who fail to take the USMLE Step 1 within the third year will be referred to the Promotions Committee for review. Students who receive three (3) failing scores on any combination of the United States Medical Licensing Examination (e.g., Step 1 and Step 2) and/or National Board of Medical Examiners Subject or Customized Examinations in the basic or clinical sciences, will also be referred to the Promotion Committee for review.

Students failing any component of the licensing examinations required for progression and graduation from the School of Medicine shall have one year from the date of the initial failure to re-take and receive a passing score on the examination. If the examination is not passed within one year, the student will be dismissed from the program.

Students failing one of the National Board of Medical Examiners Subject or Customized Examinations in the clinical sciences must schedule a repeat administration of the examination with the Office of Student Affairs within one (1) month of the date of the initial failure. Such repeat administration must take place within three (3) months of the date of the original failure. Students who fail a second attempt on a National Board of Medical Examiners examination will be required to repeat the clerkship and pass a third attempt at the

examination before progressing to the next stage of training. Students who fail on the third attempt will be referred to the Promotions Committee for potential dismissal from the School of Medicine program.

**Grading:** The director of each course shall specify the requirements of that course and standards by which students are evaluated in the course syllabus. Grades are calculated as a percentage of the total number of available points within the course. This calculation is completed to one hundredth of a decimal point, with a grade of 70.00% the minimum passing grade. If specified in the syllabus, the course director may adjust calculated grades based on the manner in which the student demonstrates the quality of professionalism. The potential for such adjustments must be clearly outlined in the course syllabus.

For courses in the first three (3) years, the Curriculum Committee has designated the following scale:

90.00-100%: A

80.00-89.99%: B

70.00-79.99%: C

<70.00%: F

For courses in the fourth year, the Curriculum Committee has designated the following scale:

≥97.00%: Honors

70.00-96.99%: Pass

≤69.99%: Fail

### **Submission of Grades**

Final grades shall be electronically submitted within the student data management system within either 30 days of the end of the course or 30 days after receipt of national, standardized examination scores for courses in which such examinations are utilized.

**Incomplete & Repeated Coursework:** A grade of Incomplete will be assigned when, at the end of the regular course period, additional work is required due to non-completion of course requirements. If no extenuating circumstances exist, the actual grade will be recorded. A grade of Incomplete must be removed within 12

months, otherwise, a final grade of 65.00% will be assigned.

Students who receive a failing grade in any course will be required to repeat the course unless the student is dismissed from the School of Medicine. For repeated courses, both the initial grade and the subsequent grade are recorded on the student's permanent record. The initial grade is used to compute class rank and grade point average (GPA). These data are used as a means to determine honors, awards, and scholarships.

### **Grade Appeals**

The course director holds authority over all matters affecting the content and processes of the course, including assignment and reporting of grades. The course director shall be presumed to have assigned and reported the correct grade until proven otherwise. The burden of proof to the contrary rests with the student.

Students who disagree with the grade assigned in the student data management system should first communicate directly with the course director. If the situation cannot be resolved, any dispute regarding the assignment of grades must be filed, in writing, with the course director's department chair within 10 working days of the grade being reported to the student data management system. Once 10 working days have passed from the time of grading reporting, the right to dispute the grade shall be waived and the grade shall be final. Upon receipt of a grade dispute, the department chair shall respond to the student in writing within 10 additional working days. If the student feels the matter has not been resolved appropriately, a written appeal may be made to the dean or designee within five (5) working days of receipt of the department chair's decision.

Students filing a grade dispute with a department chair should notify the Office of Medical Education.

### **Leave of Absence (LOA)**

Students may request a LOA from academic responsibilities for up to one (1) calendar year by submitting a request in writing to the dean or administrative designee, for any of the following reasons:

1. Training as a medical scientist, including the pursuit of research, or to complete a Masters or PhD degree. Students enrolled in one of the two MD/PhD programs sponsored by the School of Medicine do not need to follow this process.
2. Personal, familial, or financial
3. Health
4. Academic
5. Other special circumstances

Students requesting a LOA for health reasons will be required to submit a letter from their treating physician stating the medical necessity of the leave. A second letter clearing the student to return will also be required before coursework can resume.

Students taking any LOA that have any unremediated academic deficiencies (e.g., failing grades in any ongoing courses, failures on any portion of the United States Medical Licensing Examination), may be required to complete certain tasks before returning to coursework, regardless of the reason for the LOA. Examples of such requirements include, but are not limited to, evaluation and treatment by a mental health professional or educational psychologist and successful passage of a failed USMLE Step examination). Failure to fulfill these obligations by the end of the LOA will result in dismissal from the School of Medicine.

In the event the student is unable to return from leave at the end of one (1) calendar year, an additional year of leave may be requested within the same parameters; otherwise the student will be dismissed from the School of Medicine. Students unable to return to coursework within this two-year period will be dismissed from the School of Medicine.

### **Grade Documentation for LOAs**

Final grades for any completed courses (defined by the latter of the temporal end of the course or having taken the final examination or national standardized examination) will be recorded by the Office of Enrollment Manage at the beginning of the leave. Courses in progress shall be reported as "Withdrawn."

### **Return from Leave**

In general, students returning from a prolonged LOA join the next class/cohort at the beginning of their next academic term. This includes courses already completed. Exceptions to this may be granted by the dean or designee prior to approval of the leave.

### **Withdrawal**

Students may withdraw of their own volition at any time. At the time of withdrawal, final grades for any completed courses (defined by the temporal end of the course or having taken the final examination or national standardized examination) will be recorded by the Office of Enrollment Management at the beginning of the leave. Courses in progress shall be reported as "Withdrawn."

Any withdrawal by a student shall be presented to the Promotions Executive Committee, which shall determine conditions under which a student may be readmitted, if any, and shall make such recommendations to the Dean and Executive Faculty.

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

Such students may apply for readmission by petitioning the Dean, stating why they believe they are able to pursue academic studies successfully. This petition shall become a part of the student's permanent record.

In the event of withdrawal prior to the end of the first semester of the first year, the student will not be eligible for readmission except by application for admission to the first-year class as any other new student.

## Dismissal

Students dismissed from the School of Medicine shall not be eligible for readmission in advanced standing. Such students may apply for readmission to the first-year class, as any other new candidate. Decisions regarding student dismissal may be rendered by the Promotions Executive Committee or the School of Medicine Deans Council, as determined by applicable policies. All decisions require approval of the Executive Faculty.

Dismissal from the School of Medicine may be considered for:

1. Academic failure: Included are: (a) students who have academic deficiency in the current school year, (b) students who have a repeat failing grade in any repeated course or block or who failed any course or block in a repeated year, (c) other failure as determined by the Promotions Executive Committee.
2. Failure of progression: Included are (a) students who fail to remediate academic deficiencies within one (1) year of the date they were initially recorded; (b) students who fail to pass any portion of the USMLE within one (1) year of the date on which they were initially taken; and (c) students who do not take the USMLE Step 1 by the date of the commencement that happens during their third year of training.
3. Health reasons. In this category are 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.
4. Conviction of a felony
5. Conduct deemed to be other than honorable or ethical (i.e., cheating on examination, taking credit for work not one's own, etc.)
6. Commission of an unlawful act on or off the Medical Center campus or legal conduct that discredits the Medical Center in any way
7. Any performance in a manner incompatible with the accepted norms of professional medical practice
8. Violation of any Medical Center or School of Medicine policies or procedures for which dismissal is listed as a potential repercussion
9. Failure to complete the training program within seven (7) years of matriculation or failure to pass any portion of the United States Medical Licensing Examination within one (1) year of the initial attempt unless an extension is granted by the Promotions Executive Committee.
10. A cumulative three (3) failures on any combination of United State Medical Licensing Examinations (e.g., Step 1 and Step 2 and/or National Board of Medical Examiners Subject or Customized Examinations in the Basic or Clinical Sciences) or failure to schedule remediation.
11. Any other circumstances determined by the Promotions Executive Committee and upheld by the Executive Faculty to merit dismissal.

*Approved by the Executive Faculty on March 10, 2021.*

## ACADEMIC ACHIEVEMENT POLICY AND PROCEDURE

### Policy

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 dean for medical education. If so recommended by the dean, the student must, without exception, participate in this program.

### Procedure

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 assistant dean for academic affairs 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. The student may be required to be evaluated by Student Health;
4. Once enrolled in the AAP, students will remain until completion of all M2 requirements.
5. Any student enrolled in the AAP who does not perform in a manner consistent with passage of Step I, determined by a successful predictive score on the National Board of Medical Examiner's Clinical Basic Science Shelf Assessment to be administered in May, will be required to submit to an approved study program.

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.*

*Revised July 24, 2019.*

## 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 Office of Student Affairs by completing an absence request form in MedHub. Additionally, the student is responsible for notifying the course/clerkship director of the absence including anticipated time out and the

plan for making up missed assignments.

*Approved by SOM Executive Faculty September 23, 2004.*

### **The instructions for completing the absence request form are as follows:**

#### **For M1 and M2 Students:**

Absences must be logged in the SEAtS app or on the website ([ummc.seats.cloud](https://ummc.seats.cloud)). Students still must communicate with the appropriate course personnel regarding the absence and whether or not it will be excused.

#### **In the app:**

Click on the 3 dots in the upper left hand corner.

Select "Add Absence".

Enter the date(s) and time(s) the absence will cover.

Select the appropriate absence type. If required, fill in comments about the absence.

Click on Send.

#### **On the website:**

Click on the Calendar tab in the upper left hand corner.

Select "Add Absence".

Enter the date(s) and time(s) the absence will cover.

**On the website only, students may choose to CC their course directors/administrators and enter notes with details about the absence.**

M1 and M2 students no longer need to use the MedHub form to log absences. **Students who test positive for COVID and are quarantined per Student Employee Health still need to log their absences in SEAtS and should also communicate with course personnel.**

#### **For M3 and M4 Students:**

1. Login to MedHub (<https://umc.edu/MedHub>)

2. Click on the Evaluations tab.

3. Choose "Initiate Self Evaluation" on the right side. (Note: This is not used as an actual evaluation and nothing from it will be used on the MSPE)

4. For most students, the information will correctly prepopulate. For students on clinical rotations, they may need to set the Course to UMMC School of Medicine and the Evaluation Form to Absence Request.
  5. Click submit.
  6. Fill out the form, making sure to provide all required information.
  7. Click submit.
- 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.

## POLICY ON STUDENT DUTY HOURS

- Duty hours are defined as all scheduled clinical and academic activities related to the training program, i.e., patient care (both inpatient and outpatient), administrative duties related to patient care, the provision for transfer of patient care, time spent inhouse 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.
- Scheduled duty hours are limited to 80 hours per week, averaged over a four-week period, inclusive of all inhouse activities.
- Students are to be provided with one day in seven free from responsibilities to the program, averaged over a four-week period, inclusive of call and free from all clinical, educational, and administrative activities (other than reading and preparation time). One day is defined as one calendar day.
- Students should have 10 hours free of duty, and must have 8 hours off between Scheduled Duty Periods.

### On-Call Activities

The objective of oncall 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 work day when students are required to be immediately available in the assigned institution.

- Students may be scheduled for Inhouse call no more frequently than every third night (when averaged over a four-week period).
- Continuous onsite duty, including inhouse call, must not exceed 24 consecutive hours. In unusual circumstances, students, on their own initiative, may remain beyond their scheduled period of duty to continue to provide care to a single patient.
- Students are limited to no more than 28 hours continuous duty in the hospital (24 hours in house call, plus 4 hours to complete post call patient care responsibilities).
- No new patients may be accepted after 24 hours of continuous duty.

### Oversight

- Each Clerkship must have written policies and procedures consistent with the Institutional Requirements for duty hours. These policies must be distributed to the students and the faculty. Monitoring of scheduled duty hours is required with frequency sufficient to ensure an appropriate balance between education and service.
- To monitor compliance with applicable institutional policies and requirements, the Office of Medical Education (OME) will assess each required clerkship at least annually. The extent and frequency of monitoring for each clerkship will be determined by the OME based upon the clerkship's duty hour history and data collected by the OME.

### Documentation of Duty Hours

- Documentation of duty hours will be completed for all clerkships that have a clinical component in the M3 and M4 years.
- Students will log duty hours electronically utilizing the system designated by the OME at a frequency determined by the Curriculum Committee.

*Approved by the SOM Curriculum Committee  
May 23, 2019.*



## COURSE SYLLABI

Course syllabi are issued by each course coordinator/director 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 director/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, MedHub 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 Enrollment Management. 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.

### **Tuition Payment and Refunds**

By registering for classes students acknowledge that they are entering into a legally binding contract to pay all tuition and fees, including late fees and service charges on past due accounts, collection fees, and legal fees should their account have to be referred to an outside agency for collection. Students are expected to pay their accounts in full by the term's payment deadlines. Students who withdraw, take a leave of absence, or are dismissed during an academic term may still be responsible for payment of all or part of the tuition and fees assessed for that term. Refunds will be based upon the date of cancellation of enrollment and should be documented by the school. Refund dates are included in the academic calendar and are also posted on the student portal. See the Tuition Payment and Refund Policy for the penalties for not paying tuition and related charges.

## 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 SM001 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. The main level of Rowland Medical Library is open by badge access 24/7. The Access Services Desk is open Monday-Friday, 7:00 a.m. - 4:30 p.m. The Access Services Desk 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 find your educational costs: <https://umc.edu/Financial-Services>. 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 members 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.

**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, Population Health, 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, Population Health, 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 a variety of intramural athletics during the academic year beginning with flag-football in the fall. Students desiring to form a team should have a representative attend the organizational meeting for each sport. 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. Chick-fil-A One® 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, University Hospital, and the School of Medicine Education Building.

## 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: <https://umc.edu/Bookstore>.

### Reference and Review Books

A wide variety of reference and review books for all disciplines are available. Approximately 2000 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 one to two 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 or dissection kits). Non-stock specialty equipment or specialty-sized scrubs and lab coats may be custom ordered.

## 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 others are designed generally for the Medical Center.

## TECHNOLOGY REQUIREMENTS

### Required Laptops

As you prepare to attend classes at the University of Mississippi Medical Center, be sure you are ready technologically. All medical students are required to own a laptop computer. Consider purchasing a Windows-based machine as Apple computers have been more likely to experience technological malfunctions during online examinations. To ensure you have proper access to the learning applications used here, we recommend the following minimum standards.

### Minimum Technology Standards:

- Operating System:  
PC: Windows 10  
Mac: Mojave v. 10.14 (must be 2015 model or newer)
- CPU: Intel Core i3-10300 (Core i5 recommended) or any Apple Silicon chip
- Memory: 8Gb (16 Gb recommended)
- Storage: 10Gb available space, NvME SSD recommended
- Screen Resolution: 1024x768 resolution, 13"

- Graphics: Intel HD Graphics 4600 with 2Gb VRAM
- Audiovisual: Webcam and Microphone
- Network Adapter: Wifi standard 802.11ac. Ethernet port recommended.
- Home Internet Access: 12Mbps or better per person.
- Input Ports: USB-A or USB-C port with adapter

**Note:** While iPads and other tablets are useful resources, they are not supported by several of the platforms utilized and will not be sufficient to meet student technology needs. Inability to take examinations or complete assignments will not be excused due to hardware or internet access that does not meet these specifications.

Students will need an iPhone or Android device capable of running the SEATS Attendance Management Software. Though not a formal recommendation from SEATS, we have found that any version iPhone prior to iPhone 7 has difficulty running the application.

Inability to take an examination or complete another assignment will not be excused due to hardware or internet access that does not meet these specifications.

## MEDICAL STUDENT LOUNGES

The medical student lounges (N039, SM005) are open to medical students 24 hours a day. These medical student spaces include kitchens, a shower, lounge areas, group meeting areas, and student study space.

## POSTAL SERVICE

The Post Office, in room N019 in the basement of the hospital's north wing, operates as a contract station of the US 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 US 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 and SM222 of the School of Medicine Education Building. Access to the mailroom is controlled and will require a valid identification badge.

## LOCKERS

During the first two years of medical school, each student is provided with a locker in the School of Medicine Education Building. Lockers in the north wing are assigned to medical students at the beginning of their clinical training. Information about locker assignments will be available during orientation periods. Students are responsible for locks. A \$20 deposit is required for student 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.

## COMMUNICATIONS AND MARKETING

Communications and Marketing is the only authorized channel for the release of Medical Center information to the news media. They welcome 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.

## UMMC POLICE AND PUBLIC SAFETY DEPARTMENT

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. 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 are only authorized to park at the Mississippi Veterans Memorial Stadium which includes Lots A, B, C, E, and Overflow. Stadium parking is free and available 24 hours a day, seven days a week. The only exception is home football games for Jackson State University (JSU). Advanced notification for any parking challenges for game days will be provided. Employee Relations will assist in the efforts of arranging parking accommodations at the Stadium for students with verified disabilities and medical needs. Students will not pull a ticket from any parking ticket machine and park for any length of time. Parking citations will be issued to violators, and continued violation of parking policy will lead to increases in administrative fines, vehicle immobilization devices (boots), academic holds through Student Accounting, and referrals to deans for disciplinary action up to and including dismissal proceedings.

Students can obtain evening parking access to Lot 21 after 4:45 pm until 1:00 am Monday through Friday, and all day Saturday, Sunday, and UMMC officially observed holidays. Parking in Lot 21 outside these hours by pulling a ticket is not allowed. Students can register vehicles and activate UMMC Student ID badges by sending a request via email [parking@umc.edu](mailto:parking@umc.edu) that includes: Vehicle Make, Model, Year, Color, License Plate #, License Plate State/County, Student ID, and Student Name.

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 <https://umc.edu/Shuttle>. Students who must go to the stadium parking lot after hours can call Campus Police at (601) 984-1360 to arrange an escort and transportation.

## BICYCLES AND MOTORCYCLES

Bicycles provide a handy way of getting around campus. When parked on campus, a bicycle should be locked in institutionally provided bicycle racks to prevent theft. Bicycle racks are available at the north entrance of the School of Medicine Building

and in other areas of the campus. The designated areas may change during construction. Students can park motorcycles between the Clinical Sciences Building and the Learning Resources Building 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 assistant and associate deans, course/clerkship 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 vice 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 <https://umc.edu/Academic-Consult>.

## 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 <https://umc.edu/U-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](mailto:scwc@umc.edu) or (601) 984-6936.

## STUDENT ASSISTANCE PROGRAM

Humana EAP and Work-Life Services is the student and employee assistance program. These services are confidential, and there is no cost to UMMC students or employees.

To access these services, call 1-866-219-1232 (TTY:711) or visit <https://www.eapwl.com> (username: ummc, password: ummc).

The Student Employee Assistance Program offers short-term counseling, up to three visits per issue per year, to help UMMC students and employees and members of their households manage everyday life issues. Assistance with the following is available.

- Everyday needs and life events
- Emotional issues
- Relationship concerns
- Family relationships
- Coping with a serious illness
- Weight control
- Sleeping difficulties
- Loss of a loved one
- Eating disorders
- Workplace concerns
- Smoking cessation

Work-Life Services include extensive assistance, information, and support to achieve a better balance between work, life, and family. Assistance with the following is available.

- Convenience services
- Housing options
- Child care
- Financing college
- Home ownership

- Caregiving from a distance
- Moving and relocation
- Finding colleges and universities
- Services and education for children with special needs
- Adoption, pregnancy, and infertility
- Adjusting to retirement
- Locating services and care for older adults
- Pet care
- Finding schools
- Tutors and test prep
- Child development
- Recreational activities
- Consumer Education
- Legal and Financial Services

## 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 (<https://umc.edu/Travel-Advisories>). 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 <https://umc.edu/Academic-Accom>.

## MEDICAL INSURANCE REQUIREMENT

Medical 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 (SEH)

The Student and Employee Health Department is responsible for occupational health services for students and employees including immunizations, preventive trainings, and initial treatment for on the job injuries. The main office is located in N136. Hours are 7:00 a.m.-4:30 p.m. Monday-Friday, except on official UMMC holidays. Contact SEH at (601) 984-1185.

If students or employees experience an on the job injury after normal workday hours, they are encouraged to seek care at UMMC's Emergency Department, if necessary.

### Services

**Vaccines:** Influenza vaccine is free. Tetanus/Tdap, MMR, and Varicella and Hepatitis B vaccines are administered at a cost.

**TB screening:** An annual TB skin test or blood test is required of all students. Students who have had prior BCG vaccination are screened with a TB blood test. There is no charge for TB screens.

SEH provides immunizations such as influenza, tetanus/ Tdap, MMR, Varicella, and Hepatitis B vaccines. Cost may apply for student and contractor vaccinations. Refer to Students Vaccine Charges. Pay at Student Accounts and bring a receipt. Students' Hepatitis B vaccine series must

be completed by the end of the first semester.

SEH also conducts annual tuberculosis screening and respirator fit testing as needed based on current guidelines.

SEH provides initial assessment and treatment of non-urgent workplace injuries for UMMC students and employees. There is no health care provider fee for assessment and initial treatment of workplace injuries in Student and Employee Health. However students may be responsible for laboratory, radiologic, or other fees. Bring your medical insurance card. Injuries requiring ongoing treatment will be referred to the appropriate provider as needed.

For blood-borne pathogen exposures, report to Student and Employee Health as soon as possible. If exposure occurs after 3:45 p.m. or on weekends/holidays initial care for Blood Borne Pathogen exposure is provided in the UMMC Emergency Department.

SEH does not treat acute or chronic medical conditions (colds, sinus infections, hypertension, diabetes, ADHD, etc.) that are not work related. Treatment for such conditions should be obtained from the individual's personal health care provider.

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

Children are not allowed into Student Employee Health waiting area unless the children are being served in the outpatient lab located in SEH.

### Primary Care Services

Student and Employee Health does not provide primary care services. A Quick Care Clinic for UMMC employees, their immediate dependents, and UMMC students is located on the second floor of the Lakeland Medical Building, 764 Lakeland Drive. UMMC employees and their immediate families who need to see a physician for minor illnesses can get an appointment within 24 hours through Quick Care Clinic. Most patients will be seen the same day they call for an appointment. The clinic, staffed by the Department of Family Medicine, handles common and acute illnesses, such as sore throat, earache, upper respiratory,

urinary tract infections, flu, and gastrointestinal infections as well as minor emergencies, such as sprains or rashes, and yearly preventive medicine physicals.

Physicians and other staff members in the Quick Care Clinic have no role in any student's academic advisement, evaluation, or promotion.

To schedule an appointment call (601) 984-2273 or (601) 984-6800 to request an appointment to see health care providers.

As an additional option for UMMC employees and their immediate dependents, UMMC 2 You is a benefit under the Blue Cross and Blue Shield State and School Employees' Health Plan for online minor medical care.

### **Non-Involvement of Providers of Student Health Services in Student Assessment**

UMMC health professionals who provide health services to a medical student should have no involvement in the academic assessment, evaluation, or promotion of that medical student. If you find yourself in a situation where this may potentially occur, please contact the Office of Student Affairs for an alternate academic plan.

## **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.

## 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, ethyl morphine, 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 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).

## UMMC 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.

### 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 ON REPORTING OBLIGATIONS FOR STUDENTS WITH BLOOD BORNE DISEASES**

### **Policy**

The SOM has a commitment to provide the following:

- Protection of the individual rights of all members of the SOM.
- Education for all students and the SOM community about blood borne diseases.
- A humane response to those with a blood borne disease.
- Reasonable precautions in order to maintain a safe environment on campus.

This policy is consistent with state and federal laws and has been developed with guidance from various national organizations and academic health care institutions, such as the Centers for Disease Control (CDC); the American College of

Health Associations (ACHA); the American Public Health Association (APHA); and the Society of Healthcare Epidemiology of America (SHEA).

### **Definitions**

Blood borne pathogen is an agent that is transmitted via blood and body fluid route. Most often HIV, HBV, and HCV are involved but other pathogens might include malaria, human lymphotropic viruses, certain viral hemorrhagic fever viruses, or leptospirosis.

Blood borne disease is an infection known to be transmitted by blood, including but not limited to organisms as HBV, HCV, and HIV.

### **Procedure on Infection Reporting**

**Non-discrimination:** In compliance with Sections 503 and 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990, students living with blood borne diseases are to be treated like anyone else having a "disability" for purposes of admission and retention by the SOM. The SOM is committed to non-discrimination of disabled individuals and make reasonable accommodations to enable them to complete their medical education. The SOM has determined that reasonable accommodations may be made in the MD degree program for infected students so that they will not necessarily be prevented by their blood borne disease status from completing an MD degree. Infected students, like all students, must meet the "Technical Standards for Admissions, Retention, Promotion, and Certification" outlined in the Bulletin of the SOM.

**Screening for blood borne pathogen infections:** The SOM does not mandate testing for any student. However, the SOM encourages voluntary testing because early identification of infection may minimize its transmission and allow early treatment which may prolong life expectancy and enhance quality of life.

**Retention:** Students with a blood borne disease will not be excluded from regular classroom attendance as long as they meet the "Technical Standards" as noted above. If a student's personal health status deteriorates to the point where he/she is no longer capable of fulfilling the "Technical Standards," he or she will be dismissed from the SOM.

**Health of the Student:** A student with a blood borne disease must report the infection to the Student and Employee Health Department for an evaluation. While students infected with a blood borne pathogen can continue to attend classes and participate in educational settings, a case-by-case evaluation of each infected student should be made in order to determine the student's ability to perform educational functions, (i.e., "Technical Standards"). Therefore, it is the responsibility of the student to notify the Student and Employee Health Department of his/her status to ensure proper evaluation. Six-month follow-up evaluations by the student's private physician with expertise in management of blood borne pathogen infections or the director of the Student and Employee Health Department (or designee) are required to provide a written health clearance to ensure the student's educational capabilities have not been limited by the progression of the blood borne disease. Any reassignment or limitation of duties will be in accordance with the Society for Healthcare Epidemiology of America (SHEA) Guideline for Management of Healthcare Workers Who Are Infected with Hepatitis B Virus, Hepatitis C Virus, and/or Human Immunodeficiency Virus.

The student must waive physician/patient confidentiality and permit his/her private physician or the director of the Student and Employee Health Department (or designee) to provide a report to the assistant dean for academic affairs of the SOM (or designee) containing information pertinent to the appropriateness of the student's continued enrollment in the SOM.

**Treatment and Counseling Services:** Students with blood borne diseases will be informed of the availability for voluntary and confidential treatment and counseling services through the SOM. Students with blood borne infection are provided counseling about appropriate health care treatment and are referred to the appropriate specialist(s). In cases for which a medical student has a psychiatric/psychological issue result from the infection, the medical student is referred to the Student Counseling and Wellness Center.

**Confidentiality:** The student's blood borne

disease status will be provided on a "need to know" basis.

## **MISTREATMENT POLICY**

The School of Medicine seeks to ensure a safe and professional learning environment for medical students that is free of mistreatment. All mistreatment is serious and is strictly prohibited. The School of Medicine provides well-defined mechanisms for medical students to report violations, for the School of Medicine to address violations, and for the education of standards of conduct for faculty, students and those with whom medical students interact during the medical education program. Reports of mistreatment are encouraged, and the School of Medicine does not tolerate retaliation of any kind for reports of mistreatment.

### **PROCEDURE**

UMMC maintains an educational environmental and workplace free from any type of mistreatment. Whatever the circumstance, students who believe they were mistreated are strongly encouraged to bring it to the attention of appropriate institutional officials. Categories of mistreatment include: general mistreatment, discrimination and sexual misconduct. The procedure for reporting mistreatment applies to students, faculty, staff, and residents. Individuals may consult the director of student services at any time for assistance. Such informal consultation will always be confidential, unless precluded by safety of the student or institutional policy. All complaints of mistreatment are responded to within a maximum of 48 hours. Additionally, the office of student affairs provides a web-based mechanism for students to report negative behaviors and mistreatment anonymously at <https://umc.edu/Student-Complaints>.

### **General Mistreatment**

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. Formal complaints of general mistreatment regarding faculty, residents, or staff are made through the student affairs officer for the school to the chief human resources officer or the assistant director of equal employment opportunity when appropriate. Formal complaints of general mistreatment regarding other students are made to the student affairs officer for the school. All reported incidents will be investigated thoroughly. All complaints of mistreatment are responded to in a maximum of 48 hours.

### **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 or veteran status. Allegations of discrimination (in any category) against a student must be reported immediately through the student affairs officer for the school and to the chief human resources officer or the assistant director for equal employment opportunity when appropriate. The institution responds and investigates 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. Students who believe they have been a victim of sexual misconduct are encouraged to contact the student affairs officer for their school and/or the Title IX Coordinator. Students also are encouraged to immediately contact the UMMC Police Department if they have been sexually assaulted and to seek immediate medical attention.

## **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.

## PUBLIC WIRELESS ACCESS POLICY AND PROCEDURE

### POLICY

**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 of Mississippi or local laws, including:

- The transmission or receiving of child pornography or harmful material. Access to or display of obscene language and sexually explicit graphics as defined in section § 97-5-33 and § of the Mississippi Code is not permitted.
- Fraud-users are prohibited from 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.
- 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 University of Mississippi Medical Center, the customer acknowledges that he/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.

### PROCEDURE

#### Terms and Conditions of Use:

- You will need a notebook/laptop computer or other device equipped with a wireless card that supports the WiFi standard (IEEE 802.11b/802.11g)
- The Medical Center assumes no responsibility

for the safety of equipment. Users must keep their equipment with them at all times and may only use electrical outlets in public areas.

- **PLEASE NOTE:** Printing access is not available via the wireless connection. If users need to print, they should save their work to a portable storage device (e.g., floppy disk, USB storage device) or wait to print a document on a home printer. An alternative to printing is to email files to one's email account.
- UMMC staff will not provide technical assistance. UMMC assumes no responsibility for laptop configurations, security or changes to data file resulting from connection to the Medical Center's network and cannot guarantee that a user's hardware will work with the Medical Center's wireless connection.
- If a user has problems accessing the Internet over these connections, UMMC staff will not assist in making changes to the user's network settings or perform any troubleshooting on the user's own computer. Users should refer to their owner's manuals or other support services offered by their device manufacturer.
- The Medical Center has tried to ensure wireless access is available throughout its public facility areas. However, users may encounter occasional "dead spots" where wireless reception may be limited or too many users are attempting to access from a particular access point. If you have trouble accessing the Internet or staying online, please move to a different location on campus.

#### Security Considerations:

Wireless access is by nature an insecure medium. As with most public wireless networks, any information being sent or received over the Medical Center's wireless network could potentially be intercepted by another wireless user. Cautious and informed wireless users should not transmit their credit card information, passwords and any other sensitive personal information while using any wireless "hot spot."

Anyone using the wireless network provided by UMMC is forewarned that there can be no expectation of privacy when using the wireless network, whether accessed from an external or internal site. Users assume all associated risks

and agree to hold harmless the University of Mississippi Medical Center and its employees for any personal information (e.g., credit cards) that is compromised, or for any damage caused to users' hardware or software due to electric surges, security issues or consequences caused by viruses, malware or hacking. All wireless access users should have up-to-date virus protection on their personal laptop computers or wireless devices.

### **Employee Usage:**

Employees utilizing wireless access must adhere to all University policies including but not limited to the University Information Policy and the University HIPAA Privacy policies.

### **Disclaimer:**

The University of Mississippi Medical Center is providing public wireless connectivity on its campus as a public service and offers no guarantees or representations that any use of the wireless connection is in any way secure, or that any privacy can be protected when using this wireless connection. Use of this wireless connection is entirely at the risk of the user, and the Medical Center is not responsible for any loss of any information that may arise from the use of the wireless connection, nor is the Medical Center responsible for any loss, injury, or damages resulting from the use of the wireless connection.

## **EMAIL POLICY**

Electronic mail (email) services are provided to the University of Mississippi Medical Center (UMMC) community in support of the educational, research, and health care missions and administrative functions of the university. Users of the email system are expected to comply with Email Policy, Information Policy, and all other UMMC policies. The email system may not be used for illegal or unlawful activities. Email users are required to use the services in a professional and respectful manner.

### **This Policy applies to:**

- All electronic mail systems and services provided or owned by UMMC
- All users, holders, and uses of UMMC email services

- All UMMC email records in the possession of UMMC employees or other users of electronic mail services provided by UMMC
- Electronic mail only in its electronic form. This policy does not apply to printed copies of electronic mail. Other UMMC records management policies, however, do not distinguish among the media in which records are generated or stored. Electronic mail messages, therefore, either in their electronic or printed forms, are subject to those other policies, including provisions of those policies regarding retention and disclosure.
- Transactional information (such as email headers, summaries, addresses, and addressees) associated with email records, as it does to the contents of those records

### **PROCEDURE**

In general, use of UMMC electronic mail services is governed by policies that apply to the use of all UMMC facilities. In particular, use of UMMC electronic mail services is allowable subject to the following conditions.

### **Restrictions**

UMMC electronic mail services may not be used for:

- Unlawful activities
- Commercial purposes not under the auspices of UMMC
- Personal financial gain
- 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.

### **Representation**

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

### **False Identity**

UMMC email users shall not employ a false identity. Email may, however, be sent anonymously, provided this does not violate any

law, this or any other UMMC policy, and does not unreasonably interfere with the administrative business of UMMC.

### **Protected Health Information (PHI)**

Un-encrypted 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.

Use Only the UMMC Email System for Official UMMC Email Messages.

Other email provider services may be compromised without the knowledge or awareness of UMMC. This information could then be released for criminal activities or to the public at large.

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

### **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:

- Send or forward email chain letters.
- "Spam", that is, to exploit list servers or similar broadcast systems for purposes beyond their intended scope to amplify the widespread distribution of unsolicited email.
- "Letter-bomb", that is, to resend the same email repeatedly to one or more recipients to interfere with the recipient's use of email.
- Send pornographic, offensive, harassing, or abusive material.
- Send non-encrypted message containing PHI to a recipient not connected to the UMMC email network.

### **Personal Use**

UMMC electronic mail services may be used for incidental personal purposes provided that the user does not:

- Directly or indirectly interfere with the UMMC operation of computing facilities or electronic mail services.
- Burden UMMC with noticeable incremental cost.
- Interfere with the email user's employment or other obligations to UMMC.
- Email records arising from such personal use may, however, be subject to the presumption of a UMMC Email Record, regarding personal and other email records. Email users should assess the implication of this presumption in their decision to use UMMC electronic mail services for personal purposes.

### **Security and Confidentiality**

The confidentiality of electronic mail cannot be assured. Users, therefore, should exercise extreme caution in using email to communicate confidential or sensitive matters:

- UMMC email may be disclosed as a result of a court order, judicial proceeding, or other legal or other law enforcement requirement.
- Email may be disclosed as required to comply with the Mississippi Public Records Act.
- Email may also be disclosed when there is a substantiated reason to believe that a violation of law or UMMC policy has occurred.
- Members of the UMMC community are strongly encouraged to use the same personal and professional courtesies and considerations in electronic mail as they would in other forms of communication.

### **Archiving and Retention**

UMMC maintains electronic mail archives of all electronic mail sent or received. Retention periods will be governed by regulation and UMMC business requirements and are subject to change.

Electronic mail is normally backed up to assure system integrity and reliability, not to provide for future retrieval, although back-ups may at times serve the latter purpose incidentally.

Email users should be aware that generally it is not possible to assure the longevity of electronic

mail records for record-keeping purposes, in part because of the difficulty of guaranteeing that electronic mail can continue to be read in the face of changing formats and technologies and in part because of the changing nature of electronic mail systems.

Email users and those in possession of UMMC records in the form of electronic mail are cautioned, therefore, to be prudent in their reliance on electronic mail for purposes of maintaining long term records.

### **Enforcement**

Abuse of UMMC policies or standards, abuse of UMMC information technology resources, or abuse of other sites through the use of UMMC information technology resources may result in termination of access, disciplinary review, expulsion, termination of employment, legal action, and/or other appropriate disciplinary action.

Notification will be made to the appropriate UMMC office, (e.g., appropriate office for student conduct matters, UMMC Human Resources, UMMC General Counsel, the campus police department) or local and federal law enforcement agencies.

### **Additional Information**

Any inquiries relating to this Email Policy should be directed to the Executive Director of Information Security.

## **PROCEDURE REGARDING SOCIAL MEDIA**

Please be advised that the following actions are forbidden:

- You may not present the personal health information of other individuals. Removal of an individual's name does not alone constitute proper de-identification of protected health information. Inclusion of data such as age, gender, race, diagnosis, date of evaluation, or type of treatment or the use of a highly specific medical photograph (such as 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.

- You may not report private (protected) academic information of another student or trainee.
- You may not present yourself as an official representative or spokesperson for the institution.
- You may not represent yourself as another person, real or fictitious, or otherwise attempt to obscure your identity as a mean to circumvent the prohibitions listed above or below.
- 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.
- Posting of potentially inflammatory or unflattering material on another individual's website.

Individuals should make every effort to present themselves in a mature, responsible, and professional manner. Discourse should always be civil and respectful. Please be aware that no privatization measure is perfect and that undesignated persons may still gain access to your networking site. Future employers (residency or fellowship program directors, department chairs, or private practice partners) often review these network sites when considering potential candidates for employment.

Finally, although once-posted information can be removed from the original social networking site, exported information cannot be recovered. Any digital exposure can "live on" beyond its removal from the original website and continue to circulate in other venues. Therefore, think carefully before you post any information on a website or application. Always be modest, respectful, and professional in your actions.

This policy shall not be construed to impair any constitutionally protected activity, including speech, protest or assembly.

*\* Adapted in part from the University of Florida's Official Policy regarding Use of Social Networking Sites.*

## **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; specifically, the "Emergency" tab located on the upper right corner or at <https://intranet.umc.edu/Emergency>.

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.

### 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 UMMC Campus Police and Public Safety Department provides lost and found services to the Medical Center. Call (601) 984-1360.

## STUDENT COMPLAINTS

### POLICY

Students have the right to complain without fear of retribution or retaliation. Students have the right to expect a timely response. Per the University of Mississippi Medical Center (UMMC) Student Complaints policy, a student seeking to resolve an academic or misconduct complaint may seek resolution through the school's published administrative channels, entering at the appropriate level and proceeding in the order stated.

### PROCEDURE

The academic and misconduct complaint process is outlined below.



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 academic affairs. 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 director of student services. In such cases, the director of student services 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 associate/assistant dean for student affairs

shall communicate in writing the recommendation of the *ad hoc* grievance review committee to the associate vice chancellor for academic affairs. The decision of the associate vice chancellor for academic affairs 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://umc.edu/Student-Complaints>. 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 director of student services 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

- 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

### UMMC POLICE AND PUBLIC SAFETY DEPARTMENT:

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

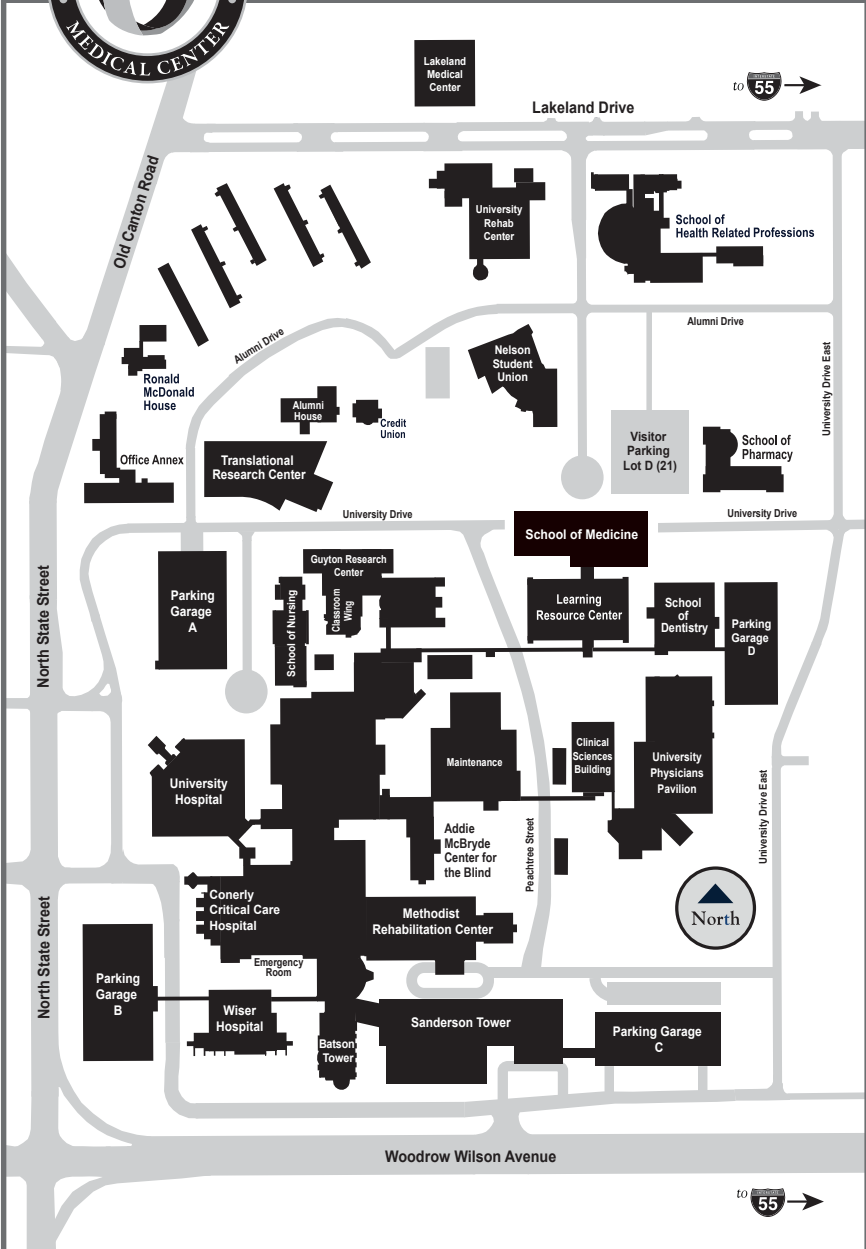
### FIRE EMERGENCY:

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

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



# CAMPUS MAP



2500 N. State Street, Jackson, Mississippi 39216-4505

