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Aggie Code of Honor

For many years Aggies have followed a Code of Honor which is stated in this very simple verse:
"Aggies do not lie, cheat, or steal, nor do they tolerate those who do."

The Aggie Code of Honor is an effort to unify the aims of all A&M students toward a high code of ethics and personal dignity. For most, living under this code will be no problem, as it asks nothing of a person that is beyond reason. It calls only for honesty and integrity, characteristics which Aggies have always exemplified. The Aggie Code of Honor functions as a symbol to all Aggies promoting understanding and loyalty to truth and confidence in each other.

College of Medicine Honor Code

The College of Medicine Class of 2008 felt it appropriate for the College to have an honor code specific for medical students and created by medical students. After obtaining student input, the Class created the following honor code and it was subsequently adopted by the College.

A Texas A&M medical student is a professional who exhibits leadership, honesty, integrity, compassion, respect and self-discipline.

Introduction

As part of Texas A&M University (TAMU), the Texas A&M College of Medicine (COM) operates in accordance with general University regulations as published in Texas A&M University Student Rules. However, not all of the regulations which govern student conduct and student activities in the University are appropriate to students enrolled in the College of Medicine. Candidates for the M.D. degree are classified as "first professional students" and are subject to requirements of a well-defined curriculum that is collegiately administered by the College of Medicine. Additionally, medical students must respond to behavioral and professional standards and ethics that are imposed through professional accreditation and licensure authority. Consequently, the College of Medicine has established additional rules and regulations concerning academic, disciplinary, and student life areas within the College. Unique services provided by the College for its students are also outlined. Rules and regulations of the College of Medicine that differ from or expand on those of the University are set forth in this document as an addendum to the Texas A&M University Student Rules for evaluation, advancement, and discipline for students pursuing an M.D. degree. All other Texas A&M University rules and regulations, where applicable, govern the conduct, rights and responsibilities of students currently enrolled in the College. TAMU student rules can be found online at http://student-rules.tamu.edu. In the event of conflict between Texas A&M University Regulations and the COM Student Handbook, the Handbook will be the controlling standard. Students have the responsibility to be fully acquainted with and to comply with the Texas A&M College of Medicine regulations and the relevant regulations of TAMU. Students should also be acquainted with, and comply with, such regulations at our clinical teaching affiliates and other sites where they may receive clinical instruction. The rules, regulations and policies
contained in this publication pertain only to students enrolled in the professional curriculum leading to the M.D. degree in the College of Medicine.

*Given the foregoing introduction, it should be understood that every student in the COM is subject to multiple jurisdictions. For example, a student must meet the separate and distinct rules and standards of Texas A&M University, the College of Medicine, the Texas Medical Board (or equivalents), and the American Medical Association (and equivalents). Other entities may also apply. A single act of misconduct might be adjudicated under the rules of all of these entities, and the outcomes might be consistent or diverse, because the organizations have different goals and missions.*

This edition of the Texas A&M HSC College of Medicine Student Handbook is complete as of October 2018. Additions, deletions, and changes may occur after this date without prior notification. A current copy of this handbook may be obtained from any COM Office of Student Affairs and is also available online at [https://medicine.tamhsc.edu/academics/students/docs/med-student-handbook.pdf](https://medicine.tamhsc.edu/academics/students/docs/med-student-handbook.pdf).

**Disclaimer Notice**

Every effort has been made to verify the accuracy of information in this publication. Nevertheless, the Texas A&M College of Medicine reserves the right to change without prior notice: admission and degree requirements, curriculum, courses, teaching personnel, rules, regulations, tuition, fees, and any other matter described in this handbook. *This handbook does not constitute a contract, expressed or implied, between any student or faculty member and the Texas A&M College of Medicine or of Texas A&M University.* The guidelines set forth do not create any rights greater than those existing in current State and Federal law. The College at all times retains the right to dismiss any student who does not attain and maintain adequate academic or clinical performance or who does not exhibit the personal and professional qualifications required for the practice of medicine.

**Notice of Nondiscriminatory Policy**

*The Texas A&M College of Medicine, in compliance with applicable federal laws and regulations, does not discriminate on the basis of race, color, national origin, sex, sexual orientation, gender identity or expression, age, religion, disability or status as a veteran in any of its policies, practices or procedures. This includes, but is not limited to admissions, employment, financial aid and educational services. If you need information or have inquiries regarding such issues, please see the TAMU ADA page at [http://urc.tamu.edu/ada](http://urc.tamu.edu/ada) or email ADA.Coordinator@tamu.edu. The College of Medicine does not discriminate on the basis of an individual’s disability and complies with Section 504 in its admission, accessibility, treatment, and employment of students in its programs and activities. The College of Medicine provides academic adjustments and auxiliary aids to students with disabilities, as defined under the law, who are otherwise qualified to meet the institution’s academic requirements. The Office of Disability Services at Texas A&M University coordinates programs and efforts for the benefit of the individuals covered under the statute. For additional information, contact the office at (979) 845-1637 or visit their website at [http://disability.tamu.edu](http://disability.tamu.edu).*
ACADEMIC REGULATIONS

STUDENT ACADEMIC PRIVILEGES

Every student has a right to a course grade that represents the faculty's good faith judgment of the student's academic performance. The assignment of a course grade may include the assessment of professional attributes. A specific evaluation and grading plan will be distributed clearly at the beginning of each course or clerkship. With regards to clinical clerkships, failing any component of a clinical rotation in the domain of professional attributes may result in failure of the clerkship.

GRADING

A student's grade in every course in the curriculum of the College of Medicine may be based upon performance, professional behavior and/or participation in class or clinical rotation, laboratory work, examinations, and other activities as may be applicable to that course. The proportionate weight assigned to each factor shall be determined by the directors administering the course. The basis upon which the final grade will be determined shall be announced in writing at the beginning of the course and shall remain constant for the academic year.

In order to have grades ready for Student Promotions Committee (SPC) meetings and to comply with the Registrar's Office policy, deadlines will be set for each phase of the curriculum.

Grades used in the College of Medicine shall be as follows:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>H-Honors</td>
<td>4 grade points</td>
</tr>
<tr>
<td>P-Pass</td>
<td>3 grade points</td>
</tr>
<tr>
<td>F-Failure</td>
<td>0 grade point</td>
</tr>
<tr>
<td>F/P-Failed Course Remediated</td>
<td>1 grade point</td>
</tr>
<tr>
<td>I-Incomplete</td>
<td>no grade points</td>
</tr>
<tr>
<td>W-Withdrawn</td>
<td>no grade points</td>
</tr>
<tr>
<td>NG-No Grade</td>
<td>no grade points</td>
</tr>
<tr>
<td>S-Satisfactory</td>
<td>no grade points</td>
</tr>
<tr>
<td>U- Unsatisfactory</td>
<td>no grade points</td>
</tr>
<tr>
<td>U/S – Unsatisfactory Remediated</td>
<td>no grade points</td>
</tr>
</tbody>
</table>

A grade of Pass or Satisfactory must be attained in all required courses of the medical curriculum in order to satisfy the requirements of the M.D. degree. Once an “F” is remediated, the grade shall be recorded as “F/P”.

GRADE OF INCOMPLETE

A temporary grade of incomplete (I) for a course/clerkship at the end of a course/clerkship usually indicates that the student has completed the course with the exception of some portion of work. The instructor shall give an incomplete grade when the deficiency is due to an authorized absence or other cause beyond the control of the student or when all but a single component of the course/clerkship has been completed.

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1 References to the "course" in this Student Handbook are intended to include “block” or clerkship.
The instructor must submit a plan for the student to complete this requirement to the Student Promotions Committee for approval. The grade will be changed to a P/F/H when the course requirements are complete. The course/clerkship director must send a Change of Grade form to the Office of the Registrar.

APPEAL PROCEDURE FOR GRADES

The course or clerkship director is the primary authority with respect to a student’s proficiency and final grade in that course/clerkship. A student who believes that his or her final grade reflects a capricious, arbitrary or prejudiced academic evaluation should first discuss the matter with the course/clerkship director.

A student wishing to appeal the final grade received in a particular course or block should first attempt to resolve the matter by meeting with the pre-clerkship curriculum leader or third year course director. Students not satisfied after attempting such resolution may file a formal written appeal with the College of Medicine Executive Associate Dean for Academic Affairs (EADAA) or other Dean designee. The appeal must be made within ten (10) business days (based on the COM academic calendar) from the date the student is officially notified of the grade, and must detail the reasons for appeal. The EADAA or designee has the option of rendering a final decision on the appeal, may appoint an ad hoc appeal committee to return a recommendation about the appeal, may dismiss the appeal, or may consider another remedy. The appeal hearing process is described in more detail below.

If an ad hoc appeal committee is formed, the committee will make a recommendation to the EADAA or designee who shall then make the final decision. The EADAA or designee will review the recommendations of the committee and may meet with the student or with any faculty member prior to making a decision. Whether the EADAA or designee chooses to form an appeal panel or not, the final decision will be made by the EADAA or designee.

Appeal Hearing: If an appeal committee is formed, it will be convened by the appeal board chair and the board will hear the student’s reasons for the appeal. Witnesses may be called at the discretion of the chair. Students requested to be present as a witness by the school or by the student who is appealing the grade are not compelled to testify. No legal counsel is permitted in the appeal hearing. However, a student may request an advisor, such as a faculty member or another student, be present as an advisor. This advisor may be present to provide the student advice but may not represent the student or directly question or cross-examine witnesses. A family member may not serve in this role. The output of the appeal board will be a written recommendation to the EADAA.

After being notified of the EADAA’s decision, if the student feels that the College of Medicine did not properly follow its established procedures, then an additional written appeal may be forwarded to the TAMU First Professional Appeals Panel. The appeal notice must be filed within ten (10) business days after being notified of the decision and may only appeal the procedural issues. See TAMU Student Rule 62 for details. This step exhausts the student’s appeal options and the First Professional Appeals Panel’s decision is final.

GRADE POINT AVERAGE

Grade point average (GPA) is calculated by the Registrar’s Office using the grade points listed above. GPA is calculated at the end of each academic year.
CLASS RANK

Class rank will initially be determined at the end of the pre-clinical curriculum. It will be determined once again at the end of the student’s third year courses which will be the student’s final class rank. Class rank is computed on the basis of a weighted grade average (weighted according to how many credit hours the course is). For students who receive the grade of “F/P” for a remediated course, this will count as a “69” for calculation of weighted grade average or as 1.0 grade point for credit hour for GPA calculation. Any student who receives an “F” in a course/ clerkship for non-cognitive reasons will receive a grade of 65 for purposes of the weighted grade average. Students with the same weighted grade average are shown as having the same class rank. Advanced standing students (transfer students) will not receive an official class rank.

GOOD ACADEMIC STANDING

Good academic standing is defined as not being on probation for either academic or professional reason.

In order to enroll in any additional elective courses beyond the required curriculum, students must be in good academic standing. Exceptions may be made for summer electives or other classes that do not interfere with required curriculum or remedial work.

During the fourth year, all students are required to satisfactorily complete elective courses. All students who are on probationary status must have: (1) their fourth year courses limited to LCME accredited schools; (2) their schedules approved by the dean(s) for Student Affairs; and (3) the usual good standing letters from the Office of Student Affairs to outside institutions altered to reflect the concerns of the Student Promotions Committee about their deficiencies.

ACADEMIC DISHONESTY AND VIOLATIONS OF AGGIE HONOR CODE

As part of Texas A&M University, all College of Medicine students are subject to the Aggie Honor Code of the University, as well as the professional standards of the College.

The dean(s) for Student Affairs or a designee will do an initial assessment of complaints of academic dishonesty or other potential Aggie Honor Code violations. If it is determined that sufficient cause exists to pursue the complaint, the accused will be notified in writing and have an opportunity to be heard. The rules of the Aggie Honor System will apply, allowing an instructor to handle the sanctions themselves if it is a first offense and merely notify the Aggie Honor System Office of such. The case may also be referred to the Aggie Honor System Office for full investigation, and if deemed appropriate, adjudication, via the University rules. See https://aggiehonor.tamu.edu/ for full details and applicable rules. Upon conclusion of the Aggie Honor Code process, the incident will be referred back to the COM Student Promotions Committee for application of professional sanctions, if appropriate. As the student is under two different jurisdictions whose standards may differ, the Student Promotions Committee retains the right to enact additional sanctions up to and including dismissal, if deemed appropriate.

A student may not be promoted or graduated until any allegation of academic dishonesty or Aggie Honor Code violation has been resolved.
PROMOTION AND GRADUATION

STUDENT PROMOTIONS COMMITTEE

The Student Promotions Committee (SPC) will maintain a continuing evaluation of the academic and professional progress of each student. Recommendations for graduation are advisory to the Academic Council. The committee's options for actions include:

1) Advancement

2) Conditional advancement (promotion) dependent results of other items such as satisfactory completion of specified academic work by an established date, counseling, mandated fitness for duty evaluation, or other requirements made by the committee.

3) Retention with a specific requirement to repeat a course, component of a course, sequence of courses, or a year.

4) Concern list for continued monitoring of specific issues for correction

5) Probation

6) Dismissal

7) Completion of other requirements deemed appropriate by the Committee

APPEAL OF STUDENT PROMOTIONS COMMITTEE DECISIONS

Students have the right to appeal decisions of the Student Promotions Committee taken against a student for academic or professional reasons, failure to fully meet an academic requirement, or unprofessional conduct by filing a written appeal to the COM Executive Dean of Education & Academic Programs (EDEAP) or Dean designee within ten (10) business days (based on COM academic calendar) of the date of notification. The appeal must include the student’s basis for the appeal. Specific procedures for appeal of a dismissal or an academic failure are outlined elsewhere. Students may also appeal other adverse decisions such as probation, repeating a year, etc. to the EDEAP or designee. The EDEAP will consider these appeals on a case-by-case basis and may decide the appeal themselves or may appoint an ad hoc committee to hear the appeal and make a recommendation back to the EDEAP. The EDEAP will make a decision after considering the recommendation of the ad hoc appeal committee (if appointed), and may consult the student or other faculty and staff as needed prior to making a final decision. The decision of the EDEAP /designee is final.

After being notified of the decision, if the student feels that the College of Medicine did not properly follow its established procedures, then an additional written appeal may be forwarded to the TAMU First Professional Appeals Panel. The appeal notice must be filed within ten (10) business days after being notified of the decision and may only appeal the procedural issues. See TAMU Student Rule 62 for details. This step exhausts the student’s appeal options and the First Professional Appeals Panel’s decision is final.
The following serves as guidelines for actions by the Student Promotions Committee:

**REMEDICATION**

Remediation is appropriate in situations where the deficiency that leads to a failing grade is focal or circumscribed and does not require repeating the course. When a student receives a failing grade, the course directors then determines whether remediation is appropriate given the scope and nature of the student deficiencies.

If a student does not perform in a satisfactory manner on a portion of a course/clerkship, the student may be assigned a grade of Failure (F). The course director then determines whether remediation is appropriate and makes a recommendation to the Student Promotions Committee to satisfy the requirements of the course/clerkship. The Student Promotions Committee can accept and/or modify the plan for remediation. The Student Promotions Committee, in conjunction with the course director, shall assign the time when the student must perform the remediation.

Ordinarily, remediation shall not be scheduled during required courses/clerkships or fourth year elective courses. Remediation should generally occur during a break from classes; however, the SPC may alter this if there is reason to do so. The Student Promotions Committee may design a course of studies to remediate a student’s deficiency, specifying certain clerkships or other educational experiences during fourth year elective time or vacation time.

If a student is required to remediate more than one course, the Student Promotions Committee may mandate that the student repeat the year.

On the student’s transcript the course/clerkship entry shall be F/P. The grade of F/P will count as 1 grade point for the purposes of GPA calculation and as a 69 for purposes of weighted grade average calculation. If the remediation is unsuccessful, the grade entry will remain an F and repeat of the entire course or clerkship is usually required, or the student may face possible dismissal.

It should be understood that successfully remediating a failed class does not change the fact that it was failed. Thus, a remediated class will still be counted as a failure of a course.

**FAILURE AND REPEATING COURSES/CLERKSHIPS**

If a student does not satisfactorily complete all the requirements for a course/clerkship, or if the knowledge deficit is too broad to consider a focal remediation, the course leader may assign a grade of Failure. In this situation where focal remediation is not possible, the Student Promotions Committee reviews the student’s entire academic record and may require the student to repeat the entire course/clerkship or may take more severe action, including repeating the year or dismissal.

If a student fails more than one course, or fails a course and has marginal performance in 2 other courses/clerkships, or has marginal performance in many courses, the Student Promotions Committee may require the student to repeat the entire year. Marginal performance of students is defined as a grade equal to or below 73%.
If a student is required to repeat a year, grades from both the original courses and the repeated courses will be part of the official transcript and will be used in the GPA or WGA calculation, as applicable. If a student is mandated to repeat a year, the Student Promotions Committee may allow the directors administering courses that were successfully completed by the student to waive the repetition of that course. The directors send notice of this decision to the Office of Student Affairs at the beginning of the course. The Student Promotions Committee will make decisions on a case by case basis.

For students repeating an academic year, the expectation is that they will pass all courses by the end of the next repeated academic year. Failure of a course or clerkship while repeating an academic year may result in dismissal.

The Student Promotions Committee may require the repetition of any portion of the curriculum or an entire academic year if they deem the circumstances warrant it, regardless of GPA or other criteria.

Students are expected to complete the requirements for the MD degree in no longer than six (6) years, not counting any leave of absence or time spent pursuing additional degrees, such as a PhD or additional research experiences. Students who are unable, or deemed unlikely to be able to complete requirements within this time frame, may be reviewed by the Student Promotions Committee for further action, up to and including dismissal.

Professionalism is an integral part of the curriculum and is considered to be a component of all courses/clerkships. Failure of this domain will be considered sufficient reason to fail an entire course/clerkship, regardless of one’s numerical average. The Student Promotions Committee will review students’ professional behavior in and out of class and retains the right to invoke appropriate disciplinary measures for breeches, up to and including dismissal.

PROBATION

A student will be placed on academic probation if they fail any block/course or clerkship. A student may also be placed on probation for professionalism concerns.

The Student Promotions Committee will determine when a student should be removed from probation. Generally a student will be removed from probation after all deficiencies have been remediated, and the Committee feels the student has demonstrated stability in academic and professional performance. The Student Promotions Committee will make a deliberate decision in each individual case as to when the student may come off of probation. A student may remain on probation for longer than an academic year if concerns persist about their professional or academic progress.

All students placed on probation for any reason will be notified of such in writing. The notification will also contain an indication of the minimum amount of time or conditions necessary for consideration of their removal from probation.

Notwithstanding any provisions above, the Student Promotions Committee retains the right to place a student on probation at any time if the situation warrants it, whether it be an academic or professional matter. Failure of a course while on probation for either an academic or a professional reason may result in a decision for repeating the year or dismissal by the Student Promotions Committee. (See dismissal below)
While on probation, a student is expected to attend all required classes and activities, unless precluded by a bona fide emergency, or unless the absence is approved in advance. A physician must document any absence due to illness from a major assessment or required activity. Except for required electives in the curriculum, no electives are permitted while a student is on academic probation without approval of the Student Promotions Committee. Exceptions may be made for electives which do not interfere with required curriculum or remedial work, such as a summer preceptorship. While on probation, students may not hold an elected office in student organizations, nor officially represent the College at meetings. The student may not participate in activities that would entail absence from required classes. Additional academic failures or professionalism issues occurring while already on probation for any reason may be considered sufficient cause for additional actions, up to and including dismissal.

PROMOTION AND GRADUATION

In order to be promoted to the clinical years, a student must satisfactorily complete all the required course work of the pre-clerkship curriculum.

A passing grade in all required courses and clerkships must be achieved in order to receive the Doctor of Medicine (MD) degree. Passage of USMLE Step 1 and Step 2-CK is required for graduation. Students must pass USMLE Step 1 for promotion to the 4th year. Students must take Step 2-CS prior to graduation. For May graduates, students must take Step 2-CS by May 1st. For December graduates, students must take Step 2-CS by December 1st. Passage is not a graduation requirement, but practically speaking, it is required to enter a residency.

The Doctor of Medicine degree is awarded at the completion of the four-year program to those students who have attained at least a grade of P or S in all courses and clerkships in the medical curriculum, who are not on probation, have fulfilled all graduation requirements, and who have satisfactorily demonstrated to the faculty the personal and professional qualities essential to the practice of medicine.

Students are expected to complete requirements for the MD degree within six (6) years, not counting time away on leave of absence or pursuit of advanced degrees, such as an MD/PhD.

Students may be allowed to participate in the commencement ceremony if all requirements for graduation will be met by the date specified by the TAMU Registrar, and if the cause for delay is not related to concerns in professionalism. Typically, this date is in late May for May graduates. Nonetheless, they will not receive their diploma until graduation requirements are met.

PROBATION, REPEATING A YEAR OR DISMISSAL SUMMARY

1. Failure of any course or clerkship will result in probation.
2. Failure of two courses in the Foundations Curriculum (non-organ systems blocks) will require a student to repeat the first year and may be considered for dismissal.
3. Failure of three courses in the first academic year will require repeat of the year and may result in dismissal.
4. Failure of two courses in Semester Three/Year 2 will result in repeat of Semester Three and may result in dismissal.
5. Failure of two organ system blocks in Year 1 (for example, CV and Respiratory) will be referred to SPC for disposition.
6. Failure of two clerkships may result in dismissal.
7. Failure of one course and marginal performance in two other courses (defined as receiving a grade of 73% or less) may require repeat of the year.
8. Marginal performance in many courses (defined as receiving a grade of 73% or less) may require a student to repeat the year and may result in dismissal.
9. Failure of a course or clerkship while repeating a year may result in dismissal.
10. Failure of a course or clerkship after two separate previous failures may result in dismissal.
11. Failure of a course or clerkship while on probation for any reason may result in dismissal.
12. Failure of USMLE Step 1 or Step 2-CK can occur once. A second failure will result in dismissal.

All of the above categories will be considered and may be overruled by the Student Promotions Committee. The Student Promotions Committee can consider extenuating circumstances by which to alter the above rules.

DISMISSAL

The Student Promotions Committee may dismiss a medical student who demonstrates academic deficiency or personal irresponsibility or unprofessional behavior. A student may be evaluated at any time for continuation or dismissal. Students who demonstrate marginal performance on a number of courses/clerkships or multiple failures may be considered for dismissal. The student may appeal the Student Promotions Committee’s decision for dismissal following the procedure described below.

Students wishing to reenter after being dismissed must make formal application through the Admissions Committee. The Admissions Committee will consider such reapplication and make its recommendation to the Dean. If the Dean’s decision is favorable, the Student Promotions Committee shall recommend to the Dean the curricular placement of applicants for readmission. The respective committees may request of re-applicants any information they deem necessary for their decision.

APPEAL OF DISMISSAL

Students may appeal a Student Promotion Committee decision for dismissal for marginal or inadequate academic performance, failure to fully meet an academic requirement or unprofessional conduct by filing a written appeal to the COM Executive Dean for Education & Academic Programs (EDEAP) or Dean designee within ten (10) business days of the date of notification of dismissal (based on COM academic calendar). The appeal request shall include the student's basis for appeal.

Upon receipt of such notice of appeal, the COM EDEAP /designee will appoint an ad hoc faculty committee in consultation with the Office of Student Affairs to hear the appeal. The student may appear before the committee to elaborate on the reasons enumerated in their written appeal. The committee may question the student and call upon others for information pertinent to the appeal. Witnesses may be called at the discretion of the chair; however, students requested to be present as a witness by the school or by the student who is appealing the dismissal are not compelled to testify. Legal counsel may not be in attendance; however, a student may request a faculty member or another student to be present as an
advisor. An advisor may be present to provide the student advice but may not represent the student or directly question or cross-examine witnesses. A family member may not serve in this role. After reviewing the information and testimony at hand, the committee shall recommend to the Dean of the College of Medicine a course of action based on their professional judgment. These recommendations will be forwarded to the Dean who will review the committee’s recommendations, any documentation provided, and may meet with the student or any other pertinent individual before making a final decision.

The Dean may:
1. Accept the committee's recommendation
2. Return the recommendation to the committee with instructions for further investigation or deliberation
3. Reject or modify the committee's recommendations.

After being notified of the Dean’s decision, if the student feels that the College of Medicine did not properly follow its established procedures, then an additional written appeal may be forwarded to the TAMU First Professional Appeals Panel. The appeal notice must be filed within ten (10) business days after being notified of the Dean’s decision and may only appeal the procedural issues. See TAMU Student Rule 62 for details. This step exhausts the student’s appeal options and the First Professional Appeals Panel’s decision is final.

A student may continue in classes during the process of the appeal until a decision is reached by the Dean, unless a suspension was in effect.

NOTIFICATION OF OFFICIAL DECISIONS CONCERNING STUDENTS

Official communications to students concerning College of Medicine matters will be sent to students by U.S. mail or placed in their College mailboxes, hand delivered, or delivered via e-mail. Any University or College of Medicine official communication may be sent to the student via either their TAMU or TAMHSC email. College of Medicine students are responsible for checking their College of Medicine emails frequently, as well as their TAMU email. The dean(s) for Student Affairs may bar students from continued enrollment or re-enrollment for failure to respond in a timely manner to official notifications, if such requests are included in the notifications.

USMLE POLICY

The United States Medical Licensing Examination (USMLE) is the common evaluation system for all applicants for medical licensure in the United States.

The USMLE assesses a physician's ability to apply knowledge, concepts, and principles that are important in health maintenance and disease prevention that constitutes the basis of safe and effective patient care. The USMLE is a single examination program with three steps. Step 1 assesses the medical school student's application of knowledge and understanding of key concepts of basic biomedical science, with an emphasis on principles and mechanisms of health, disease, and modes of therapy. Step 2CK assesses the medical student's or graduate's application of medical knowledge and understanding of clinical science considered essential for the provision of patient care under supervision, including
emphasis on health promotion and disease prevention. Step 2CS assesses a student’s clinical skills. Step 3 assesses whether or not the physician can apply the medical knowledge and understanding of biomedical and clinical science considered essential for unsupervised practice management in ambulatory settings. The Step 3 exam is taken after medical school.

**Required Test Dates**

Students are expected to take Step 1 of the USMLE during the spring semester of their second year, typically in the May-June timeframe. A student deemed not ready to sit for their Step 1 exam may be held back from continuing clinical clerkships until expected proficiency is demonstrated. Step 1 must be passed prior to completion of the 3rd year (clerkship) curriculum and students will not be promoted to 4th year training prior to successful completion of Step 1.

Students are required to take Step 2-CK of the USMLE following completion of the 3rd year curriculum but no later than the end of September of year 4. Exceptions may be granted on a case by case basis by the Student Promotions Committee. Students must take Step 2-CS prior to May 1st of their M4 year. December graduates must take Step 2-CS by December 1st. Students may not graduate until Step 2-CK has been successfully passed and Step 2-CS has been taken. Students must have a passing Step 2-CK score in order to be certified for the Match. Any student without a passing Step 2-CK score by the appropriate date in the spring for certification by the COM will be withdrawn from that year’s Match. Step 3 of the USMLE is offered during post-graduate training to those who have successfully completed Steps 1 and 2.

**Policy for Curricular Alterations due to USMLE failure or need for additional preparation**

**USMLE Step 1**

*Students matriculating in 2015 and beyond*

Students will be allowed 8 weeks to study for and take the USMLE Step 1 exam in the spring of their second year. A student not ready to sit for this test may take an additional 4 weeks of study time which comes out of their allotted vacation time. Any extension beyond 12 weeks will usually result in delay of graduation.

All students must have taken Step 1 and a passing score returned by the end of the fall semester in the third year. Students who do not pass on first attempt will be granted a second attempt, but must return a passing score by the end of the spring semester, third year. If failure for a second time occurs, the case will be referred to the Student Promotions Committee for consideration of dismissal. If Step 1 is failed on first attempt, students will be placed in a USMLE study course or other approved alternative until a passing score is returned, however, they may complete the course or clerkship they are currently in when the failing score is received. If the extra study time needed extends into the following semester or academic year, the student may be required to take an official LOA until a passing score is returned.

All students must have passed Step 1 by the end of the M3 year of their clinical cohort or they will be considered for dismissal.

*Students who matriculated prior to 2013*
All students must take the USMLE Step 1 by the times specified above. If unsuccessful on first attempt, a student will be placed on independent study and will be expected to complete a second attempt by the end of the fall semester. If unsuccessful on this attempt, a student will be placed on LOA until a passing score is returned. The test must be taken and a passing score must be received by the end of the academic year. Students may not resume clerkships until a score has been returned.

If unsuccessful on the third attempt, students’ performances on the USMLE as well as their entire medical school record will be referred to the Student Promotions Committee for review and potential dismissal.

USMLE Step 2

Any student who fails Step 2-CK should repeat the examination by the end of December of the same year, unless they are off the normal academic cycle, in which case a date will be specified by the Student Promotions Committee. It is recommended that the student plan a fourth-year schedule, in consultation with a faculty advisor and the dean(s) for Student Affairs, which will permit adequate time and pertinent clinical activities to best prepare the student for the repeat examination. Students will be required to use their vacation time for study and repeat of the USMLE Step 2-CK.

For students matriculating in 2013 and beyond, Step 2-CK must be passed on second attempt or the student will be referred to the Student Promotions Committee for review and dismissal. All students must have a passing score returned for certification for participation in the Match and will be placed on LOA if a repeat test has not been taken by the end of the semester. No courses may be resumed until a passing score on second attempt has been returned, unless cleared to do so by the Student Promotions Committee.

For students who matriculate prior to 2013, if unsuccessful on the second attempt, students will require more intense preparation and remediation and will be required to delay graduation in order to adequately prepare for the examination. Fourth year curriculum cannot be resumed or completed until a passing score is returned. If successful, the student will then complete the fourth year curriculum. If unsuccessful on the third attempt, students’ performances on the USMLE as well as their entire medical school record will be referred to the Student Promotions Committee for review and dismissal by the Student Promotions Committee.

Texas Requirements and the College of Medicine Testing Schedule (USMLE)

In Texas, Step 3 may be taken only after passing Steps 1 and 2 and receiving the M.D. degree. Licensure will be granted only after passing Step 3, receiving the M.D. degree, and completion of one year of graduate medical education. Steps 1, 2, and 3 generally may not be taken more than three times each for Texas licensure. Additionally, there is a seven (7) year time limit from the taking of Step 1 until one must have completed Step 3. See the website for the Texas Medical Board for most current regulations.

Information on specific examination requirements within each state or licensing jurisdiction should be sought from the medical licensing authority of the state or jurisdiction.
WITHDRAWAL FROM MEDICAL SCHOOL

Students desiring to withdraw from medical school or suspend their medical education, must submit a written notification of withdrawal to the dean(s) for Student Affairs, complete required paperwork, and schedule an exit interview through the Office of Student Affairs. Failure to complete required paperwork and obligations to the University may result in blockage of one’s transcript or other sanctions.

Students who withdraw from the medical school, but subsequently wish to reenter the program, must make formal application using the established method for applying at the time (such as TMDSAS). The Admissions Committee will consider such reapplications along with all other applications in that cycle. If the reapplication is accepted for admission, the Admissions Committee will make its recommendation to the Dean. If the Dean’s decision is favorable, the Student Promotions Committee shall recommend to the Dean the curricular placement of applicants for readmission. The respective committees may request of re-applicants any information they deem necessary for their decision.

ATTENDANCE AND ABSENTEEISM POLICIES

PRE-CLERKSHIP ATTENDANCE & ABSENCE POLICY

Regular attendance is expected of all students studying to be physicians. Students are encouraged to ask questions and to seek clarification of points covered by the instructor during an event. Students should prepare by reading and studying the assigned materials before an event. Advanced preparation, regular in-person attendance and interaction with instructors will aid students in their medical education.

The College of Medicine recognizes the need to achieve a balance between students’ personal and academic lives. As a result, we have implemented an attendance and absence policy that reinforces learning, while providing students some degree of flexibility. Many events in the Pre-Clerkship curriculum are not mandatory, though attendance is always encouraged. Events identified as mandatory involve important learning activities, clinical exercises, group activities, or outside speakers. Absences or late arrivals to these events are detrimental to the learning environment for everyone.

The Office of Academic Affairs administers the attendance and absence policy. Requests for excused absences must be submitted though the Pre-Clerkship Absence Request Form at https://medicine.tamhsc.edu/current/absence-forms/pre-clerkship-absence.html. Course directors, teaching faculty, and educational support staff do NOT handle attendance or absence related matters, nor can they adjust decisions. Students with recurring absences (excused or unexcused) or late arrivals to events will be required to meet with Academic Affairs.

The following terms and definitions are used in this policy:

- **Non-mandatory Events** – Events not designated as “mandatory” in a course syllabus/schedule. Attendance is not recorded at non-mandatory events. In-person attendance at these events is
strongly encouraged, but students may choose to view the recording (if available) later. Students are responsible for learning the content of all non-mandatory events as it may be testable material.

- **Mandatory Events** – Events designated as “mandatory” in the course syllabus/schedule that require in-person attendance. Attendance (including tardy information) is recorded at all mandatory events. Students are expected to arrive on time and attend mandatory events to their completion.

- **Absence** – Failure to attend a mandatory event, or checking-in to a mandatory event > 10 minutes after the event’s scheduled start time

- **Tardy** – Arriving at a mandatory event after the scheduled start of the event (T=0) up to 10 minutes after the event’s scheduled start time (T=+10)

- **Semester** – For the purposes of the College of Medicine, Fall semester runs from July through December, and Spring semester runs from January through June. There are 3 semesters in the Pre-Clerkship medical curriculum.

- **Graded Activity** – Any activity designated in the grading component of a course’s syllabus.

- **Excused Absence/Tardy** – An absence/tardy in which students are allowed to make up missed course work without penalty.

- **Unexcused Absence/Tardy** – An absence/tardy in which students are **NOT** allowed to make up missed course work and may also encounter a grade penalty in that course.

**Attendance Timeline**

The following timeline is used in measuring attendance at all mandatory events except exams. Exam timelines and procedures are communicated to students before each exam.

![Attendance Timeline Diagram](image)

**Attendance Recordkeeping**

It is the student’s individual responsibility to check-in to all mandatory events. **Checking-in for another student, or circumventing the check-in geolocation technology, is considered academic dishonesty and will subject the student(s) to disciplinary action up to and including dismissal.**
Attendance (including tardy information) is recorded using one of two methods -- paper sign-in or electronic check-in. Most events utilize electronic check-in. Some events (exams, OSCEs, etc.) disallow electronic check-in or have additional security protocols which require paper sign-ins. Please remember to sign your name legibly for any events using a paper sign-in.

Students are required to document any missed check-in, or check-ins later than 10 minutes after a mandatory event’s scheduled start time (T+10), using the Pre-Clerkship Absence Request Form within 24 hours of the event. Academic Affairs will determine if the request is excused or unexcused and communicate the decision to the student and the course directors.

**Excused versus Unexcused Absence/Tardy**

An excused absence/tardy may be requested in the case of:

1. Physician-documented illness serious enough to prevent attendance
2. Participation in legal proceedings with documentation
3. Death or illness of a family member
4. Observance of a religious holy day
5. Presenting or serving as a College of Medicine delegate in a local, state, national medical/science conference
6. **Other situations may qualify as excused absences and will be evaluated by Academic Affairs on a case-by-case basis.**
7. Documentation may be required for repetitive absences even if excused

It is the student’s responsibility to provide documentation to substantiate an excused absence within 3 days of returning to school. Confidential information may be redacted from this documentation.

A student with an excused absence may view recorded materials (when available) for the mandatory event missed and is permitted to make up any graded activity for the event without penalty. The Pre-Clerkship Team coordinator assigned to the course will schedule the make-up activity in collaboration with the student and the course directors.

**Consequences of an Unexcused Absence/Tardy**

- An **unexcused absence** will result in a **1-point deduction** from the student’s individual final course grade per occurrence.
  - If a graded activity was missed during the event, the student may contact the course director to determine if the graded activity can be made up for non-graded educational purposes. Any graded activities missed will incur a grade of zero (0).

- An **unexcused tardy** will result in a **0.5-point deduction** from the student’s individual course grade per occurrence. If a student arrives tardy but in time to take an assessment, the student may complete the scheduled assessment for a grade.
• A student with more than 2 unexcused absences/tardies will be ineligible for honors designation in that course.

• A student with 3 or more unexcused absences/tardies per semester will be referred to the Student Promotions Committee. The Student Promotions Committee, at their discretion, may provide additional consequences, including but not limited to, placement on the early concern list, placement of the student on probation and possibly may include dismissal.

**Student Support/Intervention**

• Students with 2 or more attendance concerns (whether unexcused absences or tardies) in a Pre-Clerkship semester must meet with Academic Affairs.

1 Students with a chronic or recurring medical condition may contact Student Affairs to document their condition. This will preclude repetitive doctor’s notes.

**PoM Course Attendance Policies**

The Practice of Medicine (PoM) courses have separate attendance policies. Please consult specific course syllabi for these attendance policies.

**Weather Related Matters and Attendance**

When dangerous weather or road conditions are forecast for your area, please stay tuned to your email and expect announcements from block/course and/or Pre-Clerkship leaders about impending plans and/or changes to the schedule. During the third semester of Pre-Clerkship training, students will be attending classes on multiple regional campuses. There will be times when inclement weather will strike one or multiple campuses. You, therefore, need to prepare to receive campus-specific information about impending plans and/or changes to the schedule because of weather or road conditions. It is highly advisable to utilize HSC Alert services – [https://tamhsc.edu/hscalert/](https://tamhsc.edu/hscalert/). You may also access the respective HSC-COM website for additional details.

**CLERKSHIP ATTENDANCE AND ABSENCE POLICY**

Each clerkship will establish an attendance policy that meets the requirements of the curriculum. However, as a general rule, students will be required to attend all rounds, lectures and clinic duty.

Absences, with approval of the clerkship director, will be allowed for the following reasons:

1. Physician documented personal illness (of more than 2 days); however an absence from a major exam or OSCE due to an illness must be documented by a physician. Primary source verification may be required for any doctor’s note received.
2. Legal proceedings with documentation
3. Death or critical illness of an immediate family member
4. Participation in local and national meetings where the student is representing the College of Medicine (generally, this is considered to be students holding some office but other forms of representation may also qualify)
5. Personal Days for personal business, weddings, etc. (maximum of two personal days for the entire clerkship curriculum – see below for further details)
6. Observance of a religious holy day (see below for details)
7. Other extraordinary circumstances may be excused in consultation with Academic Affairs.

Documentation may be required for repetitive absences, even if excused.

Students with a chronic or recurring medical condition may contact Student Affairs to document their condition. This will preclude repetitive doctor’s notes.

Scheduled classes and conferences are mandatory and take precedence over any clinical or surgical activity.

**Personal Days** - Students are allowed up to two personal days off during their 1.5 year clerkship curriculum to tend to personal business, wedding, reunions, or other events that may not fall in the list of the routinely recognized excused absences. Students need to submit the online Clerkship Absence Form to the Clerkship Director to request these personal days, and the request must be approved by the Clerkship Director. Please note that these personal days may not be taken during an OSCE exam, NBME, or other scheduled exam. No half days or hour counts are permitted. While a specific reason for one’s personal day is not required, these must be approved in advance and approval is not guaranteed but will depend on the activities of the team and the number of students off on any given day. Students do not have personal days while in the 4th year and are expected to use vacation time for personal business.

**M3 Students must use the online Clerkship Absence Form at**
[https://medicine.tamhsc.edu/academics/students/absence-forms/m3-absence.html](https://medicine.tamhsc.edu/academics/students/absence-forms/m3-absence.html) **to request an absence.**

Absences, regardless excused or unexcused, totaling 10% or more of the days for a clerkship will require counseling and the development of a remediation plan. If absences exceed 20% of the days required for a clerkship, the student may be required to repeat the clerkship before being promoted to the fourth year. If absences exceed 20% of the days for two clerkships, the student may be required to repeat the entire year, as determined by the Student Promotions Committee. Unauthorized absences may result in a failure of the clerkship, academic probation, or dismissal by the Student Promotions Committee.

Students who are representing the college (generally considered to be in an elected office or presenting a paper) will not be charged personal days during third year, however, they may be requested to make up days missed in excess of 10%.
Note: For Bryan-College Station students in the Aggie Integrated Medicine (AIM) program, the 10% and 20% rules will be applied to each quarter of their third year. This will be the equivalent of how the policies are applied to a traditional third year student on fixed length rotations.

To assist you in the interpretation of the 10% and 20% rules, please refer to the following table:

<table>
<thead>
<tr>
<th></th>
<th>Student absent ≤ 10% of the clerkship</th>
<th>Student absent &gt; 10% and ≤ 20% of the clerkship: required remediation plan</th>
<th>Student absent &gt; 20% of the clerkship: may be required to repeat the clerkship</th>
</tr>
</thead>
<tbody>
<tr>
<td>6-week clerkships</td>
<td>1 - 3 days</td>
<td>4 - 6 days (remediate 1 - 3 days)</td>
<td>7+ days</td>
</tr>
<tr>
<td>8-week clerkships</td>
<td>1 - 4 days</td>
<td>5 - 8 days (remediate 1 - 6 days)</td>
<td>9+ days</td>
</tr>
</tbody>
</table>

**M4 Year**

The Office of Academic Affairs will approve absences and notify the elective director and coordinator. The student and/or the coordinator will notify the individual attending faculty. Unauthorized absences may result in failure of the rotation, academic probation, or dismissal, as recommended by the Student Promotions Committee.

Students may be granted an excused absence for any of the following reasons:

1. Physician documented personal illness (of more than 2 days); however an absence from a major exam or OSCE due to an illness must be documented by a physician. Primary source verification may be required for any doctor’s note received.
2. Legal proceedings with documentation
3. Death or critical illness of an immediate family member
4. Participation in local and national meetings where the student is representing the College of Medicine (generally, this is considered to be students holding some office but other forms of representation may also qualify)
5. Observance of a religious holy day (see below for details)
6. Interviews
7. Other extraordinary circumstances may be excused in consultation with Academic Affairs.

Documentation may be required for repetitive absences, even if excused.
Students with a chronic or recurring medical condition may contact Student Affairs to document their condition. This will preclude repetitive doctor’s notes.

It is understood that students will frequently require time off during the 4th year to participate in residency placement interviews. Students are encouraged to anticipate this need and to schedule their off-time during the peak interview times of November through January. However, it is understood that this time may not be adequately or appropriately placed to meet all interviewing needs. **Students that require time off from mandatory activities to interview for residency placements should notify their elective administrator and/or attending as well as Academic Affairs at least two weeks in advance if at all possible.** Students may be granted an excused absence for two weekdays during a two-week rotation and four weekdays during a 4-week rotation for interview purposes. Students must notify the Office of Academic Affairs in advance for all scheduled interviews that involve being absent from a mandatory activity. If additional time off is needed, a remediation plan should be developed by the student and the elective administrator.

**M4 Students must use the online Elective Absence Form at:**

https://medicine.tamhsc.edu/academics/students/absence-forms/m4-absence.html to request an absence from a mandatory activity.

Students who miss more than 20% of a 4th year elective for any reason (2 weekdays during a two-week rotation or 4 weekdays for 4 week rotation) will require a remediation plan or repeat of the elective.

**HOLIDAYS**

Students are reminded that the academic calendar for the College of Medicine differs from that of the general University calendar and differs for each academic year. In the event of questions, students should contact the Office of Student Affairs

Students are responsible for learning what the respective clerkships require of them on the holidays at any clinical venue. Students should not assume that a national holiday allows them to be away from scheduled rotations. The faculty physician supervising the rotation will be the final authority in deciding whether or not students are required to be present on any calendar day, holiday or otherwise.

**PARTICIPATION IN MEETINGS**

Student participation in local and national meetings of interest to the College and student body is encouraged. In order to represent the College of Medicine at any meeting or conference, a student must be in good academic standing. Approval for absences should be obtained from the clerkship directors and the Office of Academic Affairs. As with all absences, an online request must be submitted and approved.

**RELIGIOUS HOLY DAYS**

As defined in the Texas State Law, a “religious holy day” means a holy day observed by a religion whose places of worship are exempt from property taxation. The College of Medicine will excuse a student from attending classes or other required activities, including examinations, for the observance of
a religious holy day, including travel for that purpose. A student who is absent from classes for the observation of a religious holy day will be allowed to take an examination or complete an assignment scheduled for that day within a reasonable time after the absence. A student must request absence from the class for observance of the holy day. Request for absence must be submitted online to the Office of Academic Affairs. A student who is excused for holy day observance may not be penalized for the absence, but the instructor may appropriately respond if the student fails to satisfactorily complete the assignment or examination in a timely manner.

LEAVE OF ABSENCE

A Leave of Absence (LOA) for a period of time as long as 12 months or one academic year may be granted by the Dean or designee to a student for treatment of a medical condition, maternity or paternity reasons, or other exceptional circumstances. Academic difficulties, in and of themselves, will not be considered a valid reason for requesting a Leave of Absence. The student will usually be expected to repeat any course work deemed incomplete by course directors at the time the Leave of Absence begins. The exact length of the Leave of Absence may vary from case to case; however, it shall not normally exceed one (1) year. Students may initiate a Leave of Absence by writing to the dean(s) for Student Affairs. At the time such a Leave of Absence is proposed, the Dean or his/her designee shall define in writing the terms and conditions of the leave and the student’s return to medical school. The Dean has the final authority to approve the Leave of Absence, but may delegate this authority, if desired. The Dean or designee may consult with faculty and staff members before granting a Leave of Absence. Students who do not comply with the terms of their LOA may be considered for dismissal.

Students who go on leave for medical reasons will be required to provide a medical clearance stating they are fit for return to duty and are able to meet the applicable Technical Standards of the College (see Appendix IV). The clearance should also state if the student will require any accommodations upon their return. If so, the student will be responsible for requesting such accommodations through the normal pathways of TAMU Student Disability Services.

At times, a student may be placed on LOA due to circumstances such as a positive drug screen (see Alcohol and Drug Testing), failure to pass USMLE (see USMLE policy), or other circumstances. In this case, the student will be notified in writing that they have been placed on LOA and the conditions for return to the curriculum outlined.

Students who find it necessary to be absent for extended periods of time should discuss the matter with the dean(s) for Student Affairs to see if they are eligible for an LOA. Absences, for any reason, of 30 or more consecutive calendar days during any phase of the medical curriculum may constitute an automatic withdrawal from the College of Medicine. Following such an absence (withdrawal), the student must re-apply for admission into the medical program through the Office of Admissions and Student Affairs. Students are encouraged to apply for a leave of absence if extended absences are anticipated. For absences, regardless excused or unexcused, of more than 30 consecutive calendar days of any block/course, the SPC will determine if and how work missed will be made up, including the possibility of requiring a repeat of the course.
CLINICAL YEARS

PROGRAM COORDINATORS

There is a Program Coordinator for each clinical clerkship to assist with all clerkship related College of Medicine business. Students should feel free to contact them with any questions concerning a clerkship in their respective area.

CHANGES IN CLINICAL SCHEDULES

Only extraordinary circumstances merit consideration for changing the third year rotation schedule and changes are rarely permitted. Requests must be made through the Office of Student Affairs, and require the approval of the clerkship directors involved in the schedule change.

Fourth Year -
Students will be given an opportunity to request fourth year schedules that meet their individual needs. Requests must have the approval of each student's faculty advisor and/or the dean(s) for Student Affairs. Changes during the fall semester are foreseeable due to difficulties inherent in scheduling off campus electives during the prime interview season.

Schedule changes in the fourth year are allowed: to accommodate an off campus elective, to accommodate medical related issues (e.g., illness or pregnancy), to accommodate academic difficulty, a change in specialty preference, or for exceptional circumstances. Schedule changes are generally not allowed after the last Friday in January. Preferably, requests for changes should be completed a month before the change is to take place. **No change to an elective is allowed within two (2) weeks of the start of the elective** unless an emergency situation arises and changes are approved by the Office of Student Affairs. To request the change, a Rotation Change Request Form, with the appropriate signatures, should be submitted.

*A student who begins a fourth-year elective without obtaining prior approval (by completing student initiated elective form and submitting confirmation) will not receive academic credit for that elective experience.*

DUTY HOURS POLICY

A. Principles

1. The clerkship must be committed to and be responsible for promoting patient safety and student well-being and to providing a supportive educational environment.

2. The learning objectives of the clerkship must not be compromised by excessive reliance on students to fulfill service obligations.
3. Didactic and clinical education must have priority in the allotment of students’ time and energy.

4. Duty hour assignments must recognize that faculty, residents, and students collectively have responsibility for the safety and welfare of patients.

B. Duty Hours

Duty hours are defined as all clinical and academic activities related to the clerkship; i.e., patient care (both inpatient and outpatient), administrative duties relevant to patient care, the provision for transfer of patient care, time spent in-house during call activities, and scheduled activities, such as conferences. Duty hours do not include reading and preparation time spent away from the duty site.

1. Duty hours must be limited to 80 hours per week, averaged over a four-week period, inclusive of all in-house call activities.

2. Students must be provided with one day in seven days free from all educational and clinical responsibilities, averaged over a four-week period, inclusive of call.

3. Adequate time for rest and personal activities must be provided. This should consist of an 8-hour time period provided between all daily duty periods and after in-house call.


C. On-call Activities

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

2. Continuous on-site duty, including in-house call, must not exceed 16 consecutive hours. Students may remain on duty for up to four additional hours to participate in didactic activities, transfer care of patients, conduct outpatient clinics, and maintain continuity of medical and surgical care.

3. No new patients may be accepted after 24 hours of continuous duty.

4. At-home call (or pager call)
   a. The frequency of at-home call is not subject to the every-third-night, or 16+4 limitation. However at-home call must not be so frequent as to preclude rest and reasonable personal time for each student.
   b. Students taking at-home call must be provided with one day in seven days completely free from all educational and clinical responsibilities, averaged over a four-week period.
   c. When students are called into the hospital from home, the hours students spend in-house are counted toward the 80-hour limit.
D. Monitoring

1. Students complete anonymous Duty Hours questionnaires after each clerkship. They will also complete the questionnaires at the end of 4th year rotations. The only identifiers will be site and rotation.

2. Problems with compliance will be addressed by the clerkship site director or 4th-year elective administrator. Students may report problems to the site director directly, Academic Affairs, or Student Affairs.

3. Chronic or recurring problems with Duty Hours will be reported to the department chair/campus dean, and may result in removal of students from that location until problems are corrected.

FACULTY ADVISORS

Our commitment to educating medical students includes providing appropriate counseling and advice to students during their training period. It is important for members of the clinical faculty to assist students in making some very difficult and important decisions that the students must make during the final two years of their medical school experience. Part of this function is served by the faculty advisor. Students select a member of the clinical faculty to be their primary advisor during their fourth year of medical school.

Selection

Students will be asked to select a faculty advisor based on their specialty choice in the spring semester of their third year. The Office of Student Affairs maintains a list of faculty members who have agreed to serve in this capacity and have been selected by their department. The list will be updated annually and a copy given to each student in January. Students request a faculty member to serve as their faculty advisor, and faculty members are asked not to serve as advisor for more than 3 students at one time.

Students must notify the Office of Student Affairs of their choice for faculty advisor within the prescribed timeline.

The Initial Meeting

It is generally the responsibility of the students to set up appointments with their faculty advisor. It is recommended that the initial meeting between the student and the advisor be held no later than February-March of the student's third year. At the first meeting, the advisor and the student should get acquainted. The advisor should inquire as to the student's background, special interests and current career goals, and performance to date.

Responsibilities of the Faculty Advisor

It is anticipated that the relationship between the student and the advisor will be mutually enjoyable as well as very helpful for the student. Some students will have extensive contact with their faculty advisor while others will not. Of course, students are free to ask for advice from any member of the clinical
faculty at any time. Consequently, there are certain responsibilities that the effective and enthusiastic advisor must be willing to assume.

1. It is important for advisors to be open with students, understanding, friendly, and reasonably accessible.

2. During the third and fourth years the faculty advisor will be asked to review the student's academic progress and performance. The purpose is to discuss areas of strengths and weaknesses, the need for remedial activity, and the student's performance in the context of personal and career goals. If problems are identified the advisor should help the student find a solution or refer to the Office for Student Affairs.

3. The faculty advisors are to help the students plan their fourth year schedules, including electives both on and off campus, and timing of rotations. Students will use elective time for a variety of reasons that include augmenting their studies according to areas of perceived interest, career aspirations, or academic weakness; and in getting a first-hand look at possible postgraduate training positions.

4. The advisor must approve electives the students select, and therefore should review their objectives for selecting electives in the context of their academic performance and personal career goals.

5. During the third and fourth years, the faculty advisors will help students plan their future careers. They will also help the student select a postgraduate training position. The advisor should counsel the student regarding possible places to apply for postgraduate training positions, and may be asked to write letters of recommendation for the student.

6. Students should feel free to consult their faculty advisors should problems arise, regardless of the nature of the problem. The faculty advisor will help the student identify the problems and work out a solution, which in many cases is referral to an appropriate individual.

8. There occasionally will be times when the Office of Student Affairs is made aware that a particular student is having problems, and the student will usually be counseled by the dean(s) for Student Affairs. In certain instances, the dean(s) for Student Affairs will inform the faculty advisor concerning the nature of the problem, and also ask the faculty advisor to counsel with the student if it is appropriate. It is important for the faculty advisor to be fully aware of the student's progress, and in most instances to be aware of any problems that arise during the student's time on this campus.

**PROFESSIONALISM**

Students entering a formal medical education program are expected to uphold and adhere to the ethical and behavioral standards of the profession of medicine. The medical profession has long subscribed to a body of ethical statements developed primarily for the benefit of the patient. As a member of this profession, a physician must recognize responsibility not only to the patients, but also to society, to other health professionals, and to self. The following Code of Ethics adopted by the American Medical
Association is not law, but standards of conduct, which define the essentials of honorable behavior for the physician.

I. A physician shall be dedicated to providing competent medical service with compassion and respect for human dignity and rights.

II. A physician shall uphold the standards of professionalism, be honest in all professional interactions, and strive to report physicians deficient in character or competence, or engaging in fraud or deception, to appropriate entities.

III. A physician shall respect the law and also recognize a responsibility to seek changes in those requirements which are contrary to the best interests of the patient.

IV. A physician shall respect the rights of patients, of colleagues, and of other health professionals; and shall safeguard patient confidences and privacy, within the constraints of the law.

V. A physician shall continue to study, apply and advance scientific knowledge; maintain a commitment to medical education; make relevant information available to patients, colleagues, and the public; obtain consultation, and use the talents of other health professionals when indicated.

VI. A physician shall, in the provision of appropriate patient care, except in emergencies, be free to choose whom to serve, with whom to associate, and the environment in which to provide medical care.

VII. A physician shall recognize a responsibility to participate in activities contributing to the improvement of the community and the betterment of public health.

VIII. A physician shall, while caring for a patient, regard responsibility to the patient as paramount.

IX. A physician shall support access to medical care for all people.

The development and maintenance of a professional attitude is an ongoing responsibility of each student. The following is not intended to be an exhaustive list of rules or characteristics which should be adhered to or found in a professional, but rather, illustrative of some of the more important ones. Professional behavior derives not from rules or regulations but from a personal commitment to act in a way which serves the best interests of all, e.g. the clients or patients served, colleagues, the profession, and society as well as one's own family and self. Professional behavior is expected of all students.

A professional:

1. Is honest in dealing with others and endeavors to be objective and accurate.
2. Respects the personal and intellectual property of others and does not take it unlawfully or unethically.
3. Respects the feelings and rights of others and treats others with fairness and courtesy.
4. Fulfills commitments and promises in a timely, effective manner.
5. Actively supports humanitarian institutions that promote the general welfare of society.
6. Behaves in a manner that promotes collegial spirit and constructive interaction.
7. Refrains from exploiting others and attempts to reach an appropriate balance between altruism and self-interest.
8. Acts in a non-discriminatory manner with those of different age, sex, religion, color, national origin, race, sexual orientation, marital status, political belief, and mental or physical handicap.
9. Obey the law, the tenets of their profession, and the rules and regulations of institutions with whom they are affiliated. This would include the Texas A&M University System, Texas A&M University, Health Science Center, College of Medicine, and affiliated hospitals and institutions.
10. Comply in a timely manner with the directives issued by administrative officials in the course of their authorized duties.
11. Respects the privacy of others and holds in confidence information required by the profession.
12. Refrains from fraud, misrepresentation, deception and bearing of false witness.
13. Promotes the values and ethics of their profession.
14. Recognizes the unequal nature of the professional client (physician - patient) relationship and does not take advantage of the client's (patient's) dependent status.
15. Practices good personal health and hygiene.

Evaluation of professional behavior is an integral part of the curriculum and is a factor in assigning grades and determining promotion, retention or dismissal. In the training or learning process, it should be foremost in a student's mind that it is his/her responsibility to deliver quality medical care to the patient. This encompasses many facets including the efficient and appropriate ordering of diagnostic tests, proper (and economical) therapy, courteous and compassionate handling of the patients and their families throughout the patients' health care experience. A student shall be dedicated to providing competent medical service with compassion and respect for human dignity. In all instances, the student must maintain the dignity of the person, including respect for the patient's modesty and privacy.

The faculty feels that professionalism is of utmost importance and after review of the literature, have compiled a list of characteristics felt necessary in a professional. The characteristics of professionalism will be included in grades throughout the four years of the curriculum. The characteristics include:

- Altruism
- Responsibility/Reliability/Accountability
- Commitment to Competence and Lifelong learning
- Honesty/Integrity
- Respectfulness
- Empathy and Compassion

Most of the responsibilities listed below are mentioned above or elsewhere in this handbook; however, they are expanded here for easy reference by students in the clinical/academic environment. The behaviors discussed here are expected of all students.

ALTRUISM

Medical students and physicians go the “extra mile” without thought of reward and should assist team members when they can. A medical student should be willing to extend oneself but should not overextend to one’s own detriment, nor should they be selfless to the point of taking needless risks.

RESPONSIBILITY/RELIABILITY/ACCOUNTABILITY

Medical students should be prompt for their duties. They should be punctual and meet all deadlines. In addition, medical students and physicians are expected to follow all rules and policies of the hospital, school, state, or federal government.

Medical students are expected to function as a member of the team and should not avoid responsibility or work.
Additionally students should be aware of their own limitations and should seek consultation and supervision whenever their care of a patient may be inadequate because of lack of knowledge and/or experience.

It is the responsibility of the student or the physician to admit errors and to avoid being defensive, making excuses or displacing blame on others.

COMMITTMENT TO COMPETENCE AND LIFELONG LEARNING

The very title "Doctor" -- from the Latin docere, "to teach" -- implies a responsibility to share knowledge and information with colleagues and patients. It is incumbent upon those entering this profession to teach what they know of the science, art, and ethics of medicine. It includes communicating clearly with and teaching patients so that they are properly prepared to participate in their own care and in the maintenance of their health.

The following are not specific responsibilities of students; they are physicians' responsibilities, although students are frequently asked to take these on.

Students will not, at any time during the medical school experience, have sole responsibility for a patient. No hospital order or prescription will be recognized by the nursing staff or other allied health personnel without the review and co-signature of a physician (house staff or senior staff). It is the student's responsibility to obtain the review and co-signature. It is not the responsibility of the nurse or other allied health personnel to obtain the co-signature.

Students should seek feedback and actively participate in the process of evaluating their teachers (faculty as well as house staff). Students are encouraged to respond to constructive criticism by appropriate modification of their behavior.

When evaluating faculty performance, students are obliged to provide prompt, constructive comments. Evaluations may not include disparaging remarks, offensive language, or personal attacks, and should maintain the same considerate, professional tone expected of faculty when they evaluate student performance.

The student will not use alcohol or drugs in a manner that could compromise patient care. It is the responsibility of every student to protect the public from an impaired colleague and to assist a colleague whose capability is impaired because of ill health. The student is obligated to report persons of the health care team whose behavior exhibits impairment or lack of professional conduct or competence, or who engage in fraud or deception. Such reports must conform to established institutional policies.

HONESTY /INTEGRITY

Students are expected to demonstrate honesty and integrity in all aspects of their education and in their interactions with patients, staff, faculty, and colleagues. They may not cheat, plagiarize, or assist others in the commission of these acts. The student must assure the accuracy and completeness of his or her part of the medical record and must make a good faith effort to provide the best possible patient care. Students must be willing to admit errors and not knowingly mislead others or promote himself or herself at the patient's expense. The student is bound to know, understand, and preserve professional ethics and
has a duty to report any breach of these ethics by other students or health care providers through the appropriate channels. The student should understand the protocol of these channels.

A basic principle underlying all research is honesty. Scientists have a responsibility to provide research results of high quality; to gather facts meticulously, to keep impeccable records of work done; to interpret results realistically, not forcing them into preconceived molds or models; and to report new knowledge through appropriate channels. Co-authors of research reports must be well enough acquainted with the work of their coworkers that they can personally vouch for the integrity of the study and validity of the findings, and must have been active in the research itself.

Plagiarism is unethical. To consciously incorporate the words of others, either verbatim or through paraphrasing, without appropriate acknowledgment is unacceptable in scientific literature.

Information regarding an Objective Structured Clinical Exam (OSCE) or National Board Shelf Exam will not be discussed, copied, disseminated, or shared by students.

A student should accurately represent herself or himself to patients and others on the medical team. Students should never introduce themselves as "Doctor" as this is clearly a misrepresentation of the student's position, knowledge, and authority. Students are to understand the importance of the obligation to obtain informed consent from patients, but are not responsible for obtaining such consent. It is the physician's responsibility to ensure that the patient or his/her surrogate be appropriately informed as to the nature of the patient's medical condition, the objectives of proposed treatments, treatment alternatives, and risks involved. The physician's presentation should be understandable and unbiased. The patient's or surrogate's concurrence must be obtained without coercion.

In general, full disclosure is a fundamental ethical requirement. The patient must be well informed to make health care decisions and work intelligently in partnership with the medical team. Information that the patient needs for decision-making should be presented in terms the patient can understand. If the patient is unable to comprehend, for some reason, there should be full disclosure to the patient's authorized representative.

RESPECTFULNESS

The medical student will deal with professionals, staff, and peer members of the health team in a cooperative and considerate manner.

Professional relations among all members of the medical community should be marked with civility. Thus, scholarly contributions should be acknowledged, slanderous comments and acts should be avoided, and each person should recognize and facilitate the contributions of others to the community.

It is unethical and harmful for a student to disparage, without good evidence, the professional competence, knowledge, qualifications, or services of a colleague to a review (judicial) body, staff, students, or a patient. It is also unethical to imply by word, gesture, or deed that a patient has been poorly managed or mistreated by a colleague without tangible evidence.

The patient's right to the confidentiality of his or her medical record is a fundamental tenet of medical care. The discussion of problems or diagnoses of a patient by professional staff/medical students in public violates patient confidentiality and is unethical. Under no circumstances can any medical record
be removed from the institution, nor is photocopying of the record permitted. For presentations or rounds, students are permitted to extract information but not copy wholesale parts of the chart. All aspects of patient care are confidential. This includes the electronic medical record, paper information/chart and lab. Student is not to access others’ medical information inappropriately.

It is mandatory that students not release any information about a patient to any unauthorized individual or organization. Authorized individuals include the immediate members of the health care delivery team; i.e., house staff physician, medical staff physician, nursing or allied health staff directly involved with the care of that particular patient. Discussion of a patient problem should be conducted in the appropriate confines of a conference room or physician's office. At no time should the condition of a patient be discussed in an elevator or a public area of the hospital. Students should not debate the treatment plan of a patient, whether in writing (i.e., on the patient's medical chart), or verbally (i.e., in public); nor should students exhibit frustration or disagreement with a peer's medical plan in the presence of the patient.

Students should also respect each other's confidentiality by not discussing the performance of their classmates, particularly with residents.

It is unethical for a student to refuse to participate in the care of a person based on race, religion, ethnicity, socioeconomic status, gender, age, or sexual preference. It is also unethical to refuse to participate in the care of a patient solely because of medical risk, or perceived risk, to the student. It is not, however, unethical for the pregnant student to refuse to participate in activities that pose a significant risk to her fetus.

The student should be thoughtful and professional when interacting with patients and their families. Inappropriate behavior includes the use of offensive language, gestures, or remarks with sexual overtones.

All patients and their families will be treated with proper respect and compassion. Respect requires appropriate professional behavior at all times when students are near the patient and his/her family.

Students should maintain a neat and clean appearance, and dress in attire that is generally accepted as professional by the patient population served. Men are expected to wear tie, shirt and slacks; women should wear clothing similarly appropriate for a professional appearance. Students on clinical rotations are expected to wear short white jackets, with a school patch and nametag. Students are expected to be on time for all activities.

Students are prohibited from wearing surgical scrub clothes outside the hospital. Removing scrub clothes from hospital premises will subject students to disciplinary action.

Under pressure of fatigue, professional stress, or personal problems, students should strive to maintain composure. The student should seek supportive services when appropriate.

The student will not engage in romantic, sexual, or other nonprofessional relationships with a patient, even at the apparent request of a patient, while the student is involved with the patient's care. The student is expected to not tolerate inappropriate sexual behavior on the part of other medical personnel or patients.
**EMPATHY AND COMPASSION**

A physician is sensitive to the world of the patient and is able to put his or her self “in the other’s shoes” while remaining objective. A physician should consider and respect the social factors that affect the health of patients and should strive to address the fear and suffering of patients and their families in a warm, engaged and sensitive manner. Likewise, a physician strives to deliver bad news with compassion and understanding.

**DRESS CODE**

Appropriate dress is considered a professional responsibility for all students when seeing patients or interacting with the public. Not only is it a sign of respect, but appropriate dress helps to foster trust in one’s patients and is expected by your attending. As a physician in training, you serve as a role model to many. Guidelines for appropriate dress were developed by the student body and they are consistent with the guidelines of our major clinical affiliation. They are attached in Appendix II. Notwithstanding these policies, dress codes may vary in different clinical settings and the student should comply with the applicable standards for the site they are at.

**LEARNING ENVIRONMENT ENRICHMENT PROGRAM**

The Learning Environment Enrichment Program (LEEP) is an initiative housed within the Office of Medical Education focused on fostering a mutual commitment for cultivating a professional and dynamic learning environment dedicated to the Aggie Core Values of excellence, integrity, leadership, loyalty, respect, and selfless service. Under the guidance of the Director of the Learning Environment and Vice Dean of Education and Academic Programs, LEEP consists of, but is not limited to, (a) Aggie Conduct Awareness and professionalism websites; (b) conduct reporting, and awareness, system; (c) faculty and staff ombudsman; and (d) Cup of Coffee peer awareness messengers.

The Aggie Awareness and professionalism websites serve to help educate the members of our community on our community expectations regarding our core values as well as what conduct is expected and prohibited. The Aggie Awareness website provides a centralized, and widely-accessible, method to monitor the learning environment in, “real time” through the Aggie Conduct Awareness form which any member of the College of Medicine (faculty, staff, and students) can submit a report for an exemplary or concerning conduct for any member of the College of Medicine. Once a report is submitted, it promptly moves through a collaboratively developed process. In general, the reporting, or awareness, process consists of: 1) submitting a report; 2) the report is immediately is directed to a rapid response team; 3) the rapid response team collaboratively, and quickly, determines initial actions (e.g., peer messenger); and 4) an after action report is submitted and looped to a larger committee tasked with monitoring the learning environment. Concerns that related to Title VII, Title IX, or risk, fraud, and misconduct are separate from this process and directed the pertinent departments at Texas A&M University and Texas A&M University System.

Faculty and staff ombudsman serve as impartial and neutral sounding boards/resources regarding concerns of faculty and staff within the learning environment. Lastly, Cup of Coffee peer messengers help raise awareness of concerning conduct by delivering first, or second, time concerning reports to the person named in the report. The peer messenger does not investigate the facts about the report, communicate or infer credibility of the report, advise the peer, attempt to fix the issue, or engage in pushback regarding the receiver’s perceptions of the report.
The bodies within the LEEP include the Enrichment Committee (LEEC), the Rapid Response Team (LERRT), the Support Team (LEST), and the Ad Hoc Mistreatment Team. The LEEC is the overarching body made up of key personnel such as representatives from Student Affairs, Academic Affairs, staff, faculty, and Human Resources. LEEC serves as a clearinghouse for reports that come in through various inputs (e.g., Aggie Conduct Awareness form, direct reporting) and move through the awareness process. These reports are looped back to the LEEC to increase institutional awareness of the learning environment and advise the LEEP by affirming or suggesting approaches to recognizing exemplary members as well as addressing emerging issues or patterns. The LERRT is made up of a subset of members from the LEEC and is tasked with quickly reviewing, and directing, conduct reports to the appropriate process or entity (e.g., Student Promotions Committee). In addition, the LERRT communicates and coordinates with the LEEC to ensure that these concerns are handled in an appropriate and timely manner. At the direction of the LEEC or the LERRT, the LEST coordinates the professional remediation of students. LEST will also inform or, if requested, advise the entity, unit, or supervisors in regards to the professional remediation of faculty and staff. If a report of student mistreatment is submitted, it is immediately directed to the LERRT and then promptly to the Vice Dean of Faculty Affairs (VDFA) who may form an Ad Hoc Mistreatment Team to investigate, and report on, the claim (See Appendix IX).

NOTIFICATION OF ARRESTS/CONVICTIONS

Adherence to the law is considered a fundamental professional responsibility. Students must notify the COM of any arrests or convictions within five (5) working days after charge of an offense. Failure to do so, or subsequent notification during a required background check, or knowledge obtain by other means, may result in disciplinary action, up to and including dismissal.

COLLEGE OF MEDICINE HONOR CODE

The following honor code was constructed by our student body. It was approved by the student body and the Academic Council of the College of Medicine. This outlines the behavior expected of all Texas A&M medical students. It does not supplant Aggie Values or the Aggie Honor Code, but adds them them.

A Texas A&M Medical Student is a professional who exhibits leadership, honesty, integrity, compassion, respect and self-discipline.

STUDENT CODE OF CONDUCT

I) Students shall be committed to uphold the standards of professionalism stated in this Handbook and in the Honor Code.

II) All students are expected and required to obey Federal, state and local laws and to comply with rules of the TAMUS Board of Regents, rules of TAMU and rules of the HSC. Any disciplinary action imposed by the College of Medicine may precede or follow a course independent of, and may be in
addition to, any penalty imposed by any off-campus authority. The judgment and action of the College of Medicine relates to the violation as an index of professional behavior and fitness for the role as a physician rather than as a criminal or civil offense.

A) Students must notify the COM (Office of Student Affairs) of any citations, arrests or convictions (other than minor traffic violations) within five (5) business days (based on COM Academic Calendar) after charge of an offense. Failure to do so and subsequent notification during a required background check or knowledge obtained by other means may result in disciplinary action including dismissal.

B) If at the time of graduation unresolved criminal charges or proceedings are pending against a student which, in the opinion of the Senior Associate Dean of Academic Affairs (SAD-AA), if sustained, would prevent the university from conferring a degree of medicine, the SAD-AA shall withhold the degree until such time the matter is resolved. An appeal of this decision may be made to the Dean for cause. The Dean’s decision will be final. In the event the student is exonerated or the charges are dropped, the degree will be conferred.

III) Definitions. When used in this code:

A) The term “premises” means buildings or grounds owned, leased, operated, controlled or supervised by Texas A&M University (TAMU), the HSC, Scott & White facility in Temple, Baylor University Medical Center in Dallas, VA Hospital or other clinical affiliate of the medical school.

B) The term “University-sponsored activity” means any activity on or off campus that is initiated, aided, authorized or supervised by the University.

C) The term “University” or “institution” are intended to include the College of Medicine, TAMU, and the HSC.

D) The term “University official” means any administrator, faculty member, staff member and other authorized individuals of the University.

IV) Misconduct for which students are subject to discipline is outlined, but not limited to the categories below:

A) Acts of dishonesty, including but not limited to:
    1) Academic dishonesty, including but not limited to:
       (a) copying or other use of any unauthorized assistance in taking quizzes, tests, or examinations,
          (i) dependence upon the aid of sources beyond those authorized by the instructor in writing papers, preparing reports, solving problems, or carrying out other assignments,
          (ii) the acquisition, without permission, of tests or other academic material belonging to a faculty member, staff member or student of the HSC, or
          (iii) any other act designed to give a student an unfair advantage.
       (b) The term plagiarism includes but it not limited to:
          (i) the knowing or negligent use of paraphrase or direct quotation of the published or unpublished work of another person without full and clear acknowledgement and
          (ii) the knowing or negligent unacknowledged use of materials prepared by another person or by an agency engaged in the selling of term papers or other academic materials.
2) **Furnishing false or misleading information** to any University office, official, faculty member, staff member, or student acting in an official capacity, or giving false or misleading testimony or other falsified evidence at any campus disciplinary proceeding.

3) **Forgery, alteration, falsification or misuse** of any University document, record, or instrument of identification.

4) **Tampering with the election** of any University recognized student organization.

5) **Attempted or actual theft** and/or damage to property of a member of the University community or other personal or public property.

6) **Unauthorized possession, duplication, or use of keys** to any University premises or unauthorized entry to or use of University premises.

7) **Conspiring, planning or attempting** to achieve any of the above acts.

8) **Failure to report violations** of the code.

B) **Disruption or obstruction** of teaching, research, administrative, or disciplinary proceedings of the University. This includes public service or other authorized University activities on or off the University premises.

C) **Physical abuse, verbal abuse, threats, intimidation, harassment, coercion** and/or other conduct, which threatens or endangers the health or safety of any person. Speech protected by the first amendment is not a violation of this provision, although fighting words and statements, which reasonably threaten or endanger the health or safety of any person are not protected speech.

D) **Hazing** defined as an act which endangers the mental or physical health or safety of a student for purpose of initiation, admission into, affiliation with, or as a condition for continued membership in a group or organization.

E) **Illegal or unauthorized possession of firearms**, explosives, other weapons or dangerous chemicals on University premises.

F) **Illegal use, possession or distribution of narcotics** or other controlled substances, except as expressly permitted by law.

G) **Use, possession or distribution of alcoholic beverages**, except as expressly permitted by the law, University regulations, or public intoxication.

H) **Participation in a campus demonstration disrupting the normal operations** of the University and infringing on the rights of other members of the University community; leading or inciting others to disrupt scheduled and/or normal activities within any campus building or area; intentional obstruction which reasonably interferes with freedom of movement, either pedestrian or vehicular, on campus.

I) **Obstruction of the free flow of the pedestrian or vehicular traffic** on University premises or College, University or HSC sponsored or supervised function.

J) **Conduct which is disorderly, lewd, or indecent**; breach of peace; or aiding, abetting or procuring another person to breach the peace on University premises or at functions sponsored by them.

K) **Breach of computer security** or unauthorized use of computer facilities, including but not limited to:

   1) Unauthorized entry into a file, to use, read, or change the contents, or for any other purpose.
   2) Unauthorized transfer or copy of a file.
   3) Unauthorized use of another individual’s identification and password.
   4) Use of computing facilities to interfere with the work of another student, faculty member or University official.
   5) Use of computing facilities to send obscene or abusive messages.
6) Use of computing facilities to interfere with normal operation of the University computing system.

7) Negligence in protecting passwords.

L) **Abuse of the Judicial System**, including but not limited to:
1) Failure to obey the summons of a judicial body or University official.
2) Falsification, distortion, or misrepresentation of information before a judicial body.
3) Disruption or interference with the orderly conduct of a judicial proceeding.
4) Institution of a judicial proceeding knowingly without cause.
5) Attempting to discourage an individual’s proper participation in, or use of, the judicial system.
6) Attempting to influence the impartiality of a member of a judicial body or witnesses prior to, during, and/or after a judicial proceeding.
7) Harassment (verbal or physical) and/or intimidation of a member of a judicial body prior to, during and/or after a judicial proceeding.
8) Failure to comply with the sanction(s) imposed under the Student Code.
9) Influencing or attempting to influence another person to commit an abuse of the judicial system.

M) **Malicious treatment, harassment, threat or intimidation of others, including sexual harassment**. “Sexual harassment may be defined as sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly a term or condition of an individual’s employment or academic success, (2) submission to or rejection of such conduct by an individual is used as a basis for employment or academic decision affecting such an individual, or (3) such conduct has the purpose or effect of interfering with an individual’s work or academic performance or creating an intimidating, hostile, or offensive work or academic environment.
1) Examples of sexual harassment include: unwelcome sexual advances, favoritism, based upon gender, sexist jokes or slurs, the exchange of rewards for sexual favors, and malicious gossip or rumors. Sexual harassment also encompasses the use of sexist teaching materials, denied opportunities or poor evaluations because of gender, and punitive measures based upon the refusal of sexual advances.

N) **Destroying, damaging or littering** property belonging to the University or any affiliated institution or another person.

O) **Misconduct relating to official obligations**.
1) Issuance of check without sufficient funds.
2) Failure to fulfill financial obligations to the University.
3) Failure to fulfill other legally binding obligations to the University.
4) Failure to comply with reasonable directions of University officials or law enforcement officers acting in performance of their duties and/or failure to identify oneself to these persons when requested to do so.

P) **Behavior, which is determined to be unprofessional**.

Serious violations of the Student Code of Conduct may warrant dismissal from the College of Medicine. The procedures for investigating and adjudicating allegations of unprofessional behavior, academic dishonesty, or violations of the Student Code of Conduct are discussed in Appendix III, Discipline Code. Violations in the Student Code of Conduct may be reported to the TAMU Aggie Honor System Office or other appropriate University entity for monitoring or additional sanctions by the University.
MISTREATMENT POLICY

(STANDARDS OF CONDUCT IN THE TEACHER-LEARNER RELATIONSHIP)

The College of Medicine will endeavor to provide a living and learning environment in which students can meet their academic goals. The College has the responsibility of providing students with a clear understanding of its academic requirements, which are generally set forth in writing in the College catalogue and University Regulations.

The College will determine, publish and make known its rules and regulations concerning student conduct. The College has the right to determine when its rules are violated and to determine the appropriate course of action. By enrolling in the Texas A&M University Health Science Center College of Medicine, students accept the responsibility of complying with the College's authority, to respect the rights of others, and to protect private and public property.

Every student has the right to all the privileges, prestige and honors accruing to a student of this College. Students retain the rights guaranteed under the Constitution of the United States, the right to pursue an education and to receive a degree or certificate for the successful completion of its requirements.

Students are expected to conduct themselves in a professional manner, to adhere to the Student Code of Conduct and to obey the law. Students should be knowledgeable of and abide by the specific applicable University regulations and passages of State and Federal law, some of which are provided in the Appendix.

The basis for the teacher/learner relationship is mutual respect. Both parties are required to be sensitive to the needs of others as well as to differences in gender, race, sexual orientation, religion, age or disability. Belittlement, intimidation and humiliation are considered counterproductive to the learning process and serve to undermine self-esteem. Intimidation as a teaching strategy is also inappropriate.

STUDENT/FACULTY RIGHTS

1. Nondiscrimination. Students, faculty and staff are entitled to fair and equitable treatment irrespective of race, religion, ethnicity, socioeconomic status, gender, age, or sexual preference. This includes assignment of grades.

2. Confidentiality. The student has the right to restrict access to personal information such as address, phone number, etc. Grades are also confidential and are shared with faculty only on a “need to know basis.” Grades are not released to outside individuals or agencies without written permission of the student. Students should also respect each other’s confidentiality by not discussing the performance of their classmates with other students, faculty, clinical attendings or residents. Personal lifestyles should remain private, in keeping with individual wishes.

3. Honesty. Students, faculty and staff should expect honesty and integrity in all aspects of education.
4. Conflicts of Interest. A student may challenge or refuse to comply with a directive if its implementation would be contrary to his or her own ethical principles or if the directive is outside the learning experience. Students are not expected to bring gifts or to do personal favors for their teachers.

5. Sexual Misconduct. Students, faculty and staff are not expected to tolerate inappropriate sexual behavior or to be subject to sexual harassment. See definition of sexual harassment in the Student Code of Conduct.

6. Evaluation. Students should seek feedback and should actively participate in the process of evaluating their teachers. Students will receive summative and formative feedback in order to appropriately modify their performance.

STUDENT/FACULTY RESPONSIBILITIES

Faculty or staffs who are in the role of teacher will be open to sharing their knowledge with students. Teachers must actively include the student in the learning process. In addition, teachers should constantly strive to improve their skills as a teacher and to be more effective in the teacher/learner relationship.

Students must be receptive to learning and appropriately value the time and effort afforded them by their teachers. They must be willing to apply themselves to the learning process. Students must actively participate in the learning process and share the responsibility for their education.

1. Nondiscrimination. Students, faculty and staff will not discriminate based on race, gender, sexual orientation, age, religion, or disability.

2. Professionalism. The student will be thoughtful and professional when interacting with faculty members, staff, or other students. Faculty members and staff will treat the student as a future peer in an appropriate professional manner. Inappropriate behavior includes the use of offensive language, gestures or remarks. This includes remarks or behaviors with sexual overtones. Under pressure of fatigue, professional stress or personal problems, students, faculty and staff should maintain composure. Supportive services should be sought as needed.

3. Honesty. Students will not cheat, plagiarize, or assist others in the commission of these acts. Students and teachers must be willing to admit errors and not knowingly mislead others.

4. Sexual Misconduct. Students and teachers will not engage in romantic, sexual, or other non-professional relationships during the context of their teacher/learner relationship. If a teacher is compromised in the teacher/learner relationship due to a current or previous relationship, that student should be placed with a different teacher, and should not be evaluated in any way by the potentially compromised teacher.

5. Students are never to be mistreated by faculty, residents or staff. Common types of student mistreatment include belittlement, inappropriate tasks, sexual harassment, ethnic, sexual orientation, or gender insensitivity, physical abuse, or religious intolerance. Inappropriate
remarks, offensive language, or language with sexual overtones are not professional and are considered inappropriate as well.

6. Evaluation. Students, faculty and staff are encouraged to respond to constructive criticism by appropriate modification of their behavior. During evaluations, constructive comments are expected. Evaluations will not include disparaging remarks, offensive language, or personal attacks and will maintain a professional and considerate tone at all times.

EVALUATION OF BREACHES IN THE CODE OF CONDUCT IN THE TEACHER-LEARNER RELATIONSHIP

Any student or faculty member who has concerns about breaches in the code of conduct should notify the College of Medicine for evaluation of the issue. Students should feel free to report episodes of abuse without fear of retaliation. Every effort will be afforded a student or faculty member’s request for anonymity, however, anonymity cannot be guaranteed for formal investigations/ hearings. Issues of academic dishonesty, unprofessional behavior, and similar issues may also be discussed by the Student Promotions Committee, Aggie Honor Council, by a disciplinary hearing board, or other appropriate COM or University entity, if appropriate.

The College will also conduct periodic professionalism and mistreatment surveys. This and the AAMC Year Two and Graduation Questionnaires will be used to help assess the learning environment in the College of Medicine and report to the Dean.

REPORTING STUDENT MISTREATMENT

Students may report mistreatment through several avenues

1. Student Advocates
2. Office of Student Affairs
3. Office of Academic Affairs
4. Department (clerkship director, department chair, campus dean if applicable)
5. Evaluations at the end of a course/clerkship
6. COM Reporting Student Mistreatment website – Aggie Conduct Awareness Form
7. COM telephone hotline at (855)-397-9835
8. Any COM Student Affairs Dean or any Student Services Coordinator on any campus

PROCESS FOR STUDENT MISTREATMENT COMPLAINTS
(Note: This section is undergoing revisions at this time and have interim updates applied as needed.)

Reports submitted will be immediately directed to the Learning Environment Rapid Response Team (LERRT) and then promptly forwarded to the Vice Dean of Faculty Affairs (VDFA). The VDFA will initiate an internal investigation which may include other faculty members, staff, etc. as appropriate. The VDFA will prepare an inquiry report of the internal review which may include a plan of action to resolve the issue for the respondent and Dean of the COM. The Dean of the COM may impose appropriate sanctions, if warranted.
In some cases, the VDFA may convene an inquiry. The Associate Dean of Academic Affairs (AD-AA) will be notified of the need for an inquiry. An inquiry is a fact-finding mission designed to thoroughly review the complaint, and to protect the rights of the complainant as well as faculty, residents or staff alleged to have engaged in mistreatment. Anonymous claims will be confidentially investigated, maintaining complainant anonymity to the extent possible, but in some cases, anonymity cannot be guaranteed. An Ad Hoc Mistreatment Team appointed by the VDFA in consultation with the Associate Dean of Academic Affairs and the Executive Associate Dean for Student Affairs will conduct the inquiry. The Ad Hoc Mistreatment Team shall prepare a written report stating what evidence was reviewed, summarizing relevant interviews, and including any conclusions reached as a result of the inquiry. The respondent will be given a copy of the inquiry report, and if he or she chooses to comment on the report, his or her comments shall be made a part of the record.

For more information on the process for review or conducting an inquiry, please see the COM institutional policies online or appendix IX.

The College will also conduct periodic Professionalism and Mistreatment surveys. This and the AAMC Year Two and Graduation Questionnaires will be used to help assess the learning environment in the College of Medicine and report to the Dean.

AWARDS AND HONORS

GRADUATION WITH HONORS

Students who have completed the medical school curriculum with a grade point average of 3.50 or above and have had no professional breaches of the honor code will be named as honors graduates. TAMU does not round up final GPA to determine honor graduates. Students who entered the curriculum with advanced standing (transfer students) are not eligible to be named honors graduates.

ALPHA OMEGA ALPHA

Membership in Alpha Omega Alpha (AOA) Medical Honor Society is based on scholastic excellence, integrity, capacity for leadership, compassion and fairness. The number of students elected cannot exceed 1/6 (16.7%) of the total number in the class expected to graduate. Up to one half of the total number of student members (8%) may be selected by the Eta Chapter (local AOA Chapter) at the beginning of the clinical years. An additional number of student members equal to 1/6 of the graduating class are selected in the fall of the fourth year. The top 25% of the graduating class, based on class rank, is eligible for consideration for the AOA selection.

HELEN SALYER ANDERSON AWARD

The Helen Salyer Anderson award is presented to the outstanding senior for the highest achievement in four years of medical school. The award consists of a plaque, a medallion, and a monetary award. The recipient is selected by the Academic Council of the College of Medicine. The award was established in 1980 by Frank G. Anderson, Jr., M.D., in honor of his mother, Helen Salyer Anderson. This is the only College of Medicine award given at the Commencement Ceremony.
II. STUDENT SERVICES

OFFICE OF STUDENT AFFAIRS

The Office of Student Affairs is responsible for assisting students with academic, personal and social matters; and functions as a point of reference for general information, counseling and student health insurance. The staff is willing to assist students with questions or problems.

ACADEMIC SUPPORT AND TUTORING

The services of Academic Support Specialists is available to all students enrolled in the College of Medicine to enhance learning abilities in the curriculum. Routine seminars on learning styles and study skills will be conducted, especially during the earlier phases of the curriculum. In addition, academic tutoring is available through the individual course instructors, and for some courses through the Office of Academic Support. Contact COM Academic Support Services or the dean(s) of Student Affairs if you feel in need of any of these services.

COUNSELING

Counseling is viewed as a responsibility of the College of Medicine and is available for students with academic, psychological and other personal concerns. Students may seek counsel from individual faculty members at any time. Counseling services are available in broad categories described below.

GENERAL COUNSELING

Counseling is available from a number of sources within the College of Medicine. Associate and assistant deans, department heads, and faculty are available for consultation and are prepared to offer assistance to students when required. Additionally, during the third and fourth years, students are assigned a faculty advisor with whom they can meet and discuss choices of electives, residency training, and other career decisions.

PERSONAL COUNSELING

The College of Medicine has contracted with local, private counselors to provide access to confidential short-term personal counseling, at no cost to the student. The college will pay for up to six sessions per academic year at approved locations. Any sessions in excess of the six allowed will be at the expense of the student. Students on the BCS campus may also use the TAMU Student Counseling Services. The student is also free to go a counselor of their choosing, at their own expense. These counselors are independent contractors who act as agents of the student, not of the school. Counseling received is strictly between the student and counselor.

In Bryan/College Station, students should contact:
Karen Belter, PhD and Brian Stagner, PhD - (979) 268-1111
TAMU Student Counseling Center (see further info below)
In **Temple**, students should contact:
  - Gary Brooks, PhD - (254) 778-6922
  - Linda Chupik, LMFT - (254)773-4022 ext 204
  - Frank Pugliese, PhD (254) 774-8272
  - Scott and White Mental Health Clinic (254) 724-1184

In **Round Rock**, students should contact:
  - Ron Klinger, PhD – (512)917-9490
  - Norma Perez, PhD-(512) 365-4278
  - Linda Chupik, LMFT (512)201-4006
  - Danielle Witchel, LCSW (512)627-4109

In **Dallas**, students should contact:
  - Carlos Davi, PhD - (214) 691-4244
  - Angelica Tratter, PhD (972)239-4849

In **Houston**, student should contact:
  - Premier Psychological Services(713) 521-7575

Students may obtain the most current list of approved counselors from the Office of Student Affairs or their campus Student Advocates, as well as the COM website at [https://medicine.tamhsc.edu/academics/students/personal-counseling-resources.html](https://medicine.tamhsc.edu/academics/students/personal-counseling-resources.html).

Students may select counselors other than those provided by the College of Medicine, but payment for counseling will be the responsibility of the student. Students whose problems require prolonged or more in-depth psychotherapy, more in-depth psychological testing, or who have psychiatric emergencies requiring immediate stabilization will be responsible for costs of diagnosis and therapy, although portions of the cost of therapy may be covered by their insurance policy, if authorized in advance. Records of student counseling sessions with counselors contracted by the College of Medicine are strictly confidential and will not be shared with the College, and will not become part of the student's record. Only in the case of a mandated psychological evaluation and properly executed release by the student, will any personal information be shared with the College.

All currently enrolled students on the Bryan/College Station Campus are also eligible for counseling from the TAMU Student Counseling Service (http://scs.tamu.edu/). The Student Counseling Service is located in portable buildings immediately behind White Creek Apartments on the Texas A&M University west campus. Appointments may be made online or by calling (979) 845-4427. Services hours are Monday – Friday from 8 am – 5 pm. Emergent walk in help is available during normal operating hours. After hours, a Help Line is available for assistance by calling 979-845-2700.

Students on any of our campuses may also contact the UTEAP (University of Texas Employee Assistance Program) for counseling services available throughout the State of Texas at 1-800-346-3549. This can be particularly helpful when one is on an away rotation that is not at one of our campuses.

**DISABILITY COUNSELING**

Students requesting accommodations for a disability should consult the TAMU Office for Disability Services at (979)845-1637. Any students with concerns or questions should use this service. Further
information can be found at http://disability.tamu.edu. It is the responsibility of the student to seek out and inquire about these services, if they feel a need may exist. No accommodations are generally granted (temporary or otherwise) without first registering with the TAMU Office of Disability Services.

REQUIRED COUNSELING

On rare occasions, the Student Promotions Committee or the Office of Student Affairs may determine that a student's emotional status may impinge upon that student's ability to complete formal academic course work or to relate to patients. In such cases, a formal evaluation may be required to determine fitness for duty. The health care provider will be selected by the Office of Student Affairs. Written clearance will be sent to the Office of Student Affairs. The College of Medicine reserves the right to be assured of a student's fitness to continue the medical education program.

FINANCIAL AID

Admission is granted to students without regard to their financial status. Satisfactory academic progress is a term generally used in determining eligibility for continuing financial aid to a student. Maintenance of acceptable grades and a maximum limit of six years (excluding LOA) to complete the M.D. program are only a few of the details considered in determining if a student is making satisfactory progress. Generally a student must maintain a minimum of qualitative progress as measured by the Student Promotions Committee. (See Appendix I). Financial aid for all COM students is administrated by the TAMU Office of Scholarships and Financial Aid. COM students should contact this office by initially emailing financialaid.tamhs.c.edu. This will take you directly to a group within this office that specializes in handling professional students like you. Once contacted, you can may set up a time to visit with them. They are glad to do so via phone, in person, or other electronic means.

Scholarships & Financial Aid

The mission of Scholarships & Financial Aid is to provide students with information and financial resources to attend Texas A&M University, along with support programs that promote higher education and developmental opportunities. As a part of this commitment, we strive to provide financial solutions to students at all income levels and with varying academic, merit and leadership qualifications.

Need-based financial assistance programs are designed for all students who have a demonstrated financial need, as defined by the Free Application for Federal Student Aid (FAFSA), in order to assist the student in paying college expenses. All financial aid is contingent upon student enrollment and making Satisfactory Academic Progress (SAP), as defined by Scholarships & Financial Aid or the specific aid program.

Financial aid has two forms: gift aid and self-help.

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<tr>
<th>Gift Aid</th>
<th>Self-Help</th>
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<tr>
<td>Grants (Federal, State, Institutional)</td>
<td>Loans (Federal, State, Institutional, Alternative)</td>
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<tr>
<td>Scholarships</td>
<td>Student Employment (Work Study, Part-time Employment, Internships, Assistantships)</td>
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<tr>
<td>Non-resident Tuition Waivers</td>
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Texas A&M University’s packaging philosophy for need-based financial aid is to provide the greatest amount of gift aid to those students with the highest demonstrated need and to keep loan liability to a minimum. Financial aid is awarded on a first-come, first-served basis with a published priority date of March 15 prior to the fall semester for which the student is seeking aid. Financial aid offers are made based on the assumption that students will enroll full-time in the fall and spring semesters. Cost of attendance and awards will be adjusted for graduate and professional students who are enrolled less than full-time at Texas A&M University (as defined by academic program/level).

To apply for financial assistance, a student must submit a FAFSA. Students are encouraged to submit their FAFSA online at www.fafsa.gov as soon as possible. Only those students who have been accepted for admissions and whose FAFSA and other documents requested by Scholarships & Financial Aid are on file will be sent a financial aid offer.

Please visit our website for the most current information on programs and any associated deadlines.

**Loan Programs**

The Federal Direct Loan Programs are available to students who have submitted a FAFSA. Students will be notified of their eligibility for the Direct Loan program(s) through a financial aid offer letter.

Graduate and professional students seeking the Federal Direct Graduate PLUS (Grad PLUS) Loan may obtain information from our website. This program also requires the FAFSA to be on file with Scholarships & Financial Aid.

Short-term loans are available to provide assistance to students who experience temporary financial difficulties with educationally related expenses. Funding for this program is provided by The Association of Former Students, the Class of 1926 and other University resources. This program is not intended to provide long-term assistance or to replace other assistance available through Scholarships & Financial Aid. Students must be degree-seeking and enrolled at least half-time to be eligible for short-term loans.

The Emergency Tuition and Fees loan program is available to help students pay their Texas A&M University tuition and required fees. The loan is applied directly to the student’s tuition and fee account.

Please refer to our website for detailed information on all of the aforementioned programs and more.

**Scholarship Recipients and Non-Resident Tuition Waivers**

An eligible non-resident student who holds a competitive academic scholarship of at least $1000 for the academic year or summer for which the student is enrolled may be eligible to pay the fees and charges required of Texas residents without regard to the length of time the student has resided in Texas. The student must have competed with other students, including Texas residents, for the scholarship and the scholarship must be awarded by a recognized Texas A&M University college or departmental scholarship committee or university representative. For more information, please visit http://scholarships.tamu.edu.
Veterans’ Education Benefits

The Veteran Services Office assists eligible students in securing federal and state veterans’ education benefits and other educational funding including scholarships and financial aid. More information regarding their services can be found online at http://veterans.tamu.edu.

Financial Literacy - Money Education

The Money Education (ME) Center provides Aggie students with the education and resources they need to make smarter personal finance decisions during college so they can lay a foundation of financial success for a lifetime.

The ME Center teaches Aggies about:

- Eating on a Budget
- Money Management
- Buying a Home
- Preparing Financially for Graduation
- Buying a Car
- Premarital Money Discussions
- Saving and Investing
- Student Loan Repayment
- Credit Cards and Credit Scores
- Identity Theft

The ME Center provides the following services free of charge:

- Scheduled Presentations
- Group Presentations
- Classroom Presentations
- Walk-in Advising
- Appointments
- Online Resources

For more information, visit money.tamu.edu.
Withdrawal from the University and Leave of Absence

The federal government mandates that a student who officially and unofficially withdraws from all classes may only keep the financial assistance they have “earned” up to the time of withdrawal. Documentation for a student who unofficially withdraws from the University may be required. Title IV funds that were disbursed in excess of the earned amount must be returned by the University and/or the student financial aid programs. This situation could result in the student owing funds to the University, government or both. Scholarships & Financial Aid will also calculate a return of funds for state programs.

To determine the amount of federal aid the student has earned up to the time of withdrawal, Scholarships & Financial Aid will divide the number of calendar days the student attended classes by the total number of calendar days in the semester (less any scheduled breaks of five days or more). The resulting percentage is then multiplied by the total federal funds that were disbursed (either to the student’s University account or to the student directly by check or direct deposit) for the semester. This calculation determines the amount of aid earned by the student, which he or she may keep (for example, if the student attended 25 percent of the term, the student will have earned 25 percent of the aid disbursed). The unearned amount (total aid disbursed less the earned amount) must be returned. Scholarships & Financial Aid will notify and provide instructions to students who are required to return funds. In most cases, students who complete 60 percent of the semester are eligible for all of the financial aid disbursed to them.

For state and institutional aid, at the point of withdrawal, the amount the student earned will be determined in correlation with the institution’s refund policy for tuition and fees.

Students going on an approved Leave of Absence will be treated as a withdrawal and the same methodology for determining the amount of aid the student is eligible for will be applied.

Allocating Returned Title IV (Federal Aid)

Funds that are returned to the federal government are used to reduce the outstanding balances in individual federal programs.

HEALTH

STUDENT HEALTH CENTER (Bryan/College Station)

The A.P. Beutel Health Center provides health care service to all students who have paid the Texas A&M University Health Center fee on the Bryan/College Station campus. Health Center services are available Monday through Friday, 8:00am to 5:00pm. A “Dial-A-Nurse” service is available after hours or on weekends. Ambulance service may be provided in emergencies from the on-campus scene of illness or injury to the Health Center or appropriate local medical facility. Ambulance service provided by other than the University ambulance is not covered by Health Center fees and is at the expense of the individual.
STUDENT HEALTH SERVICES (other campuses)

Same day medical services/appointments are available on each primary campus for urgent issues that may arise. Care is provided at local clinics. You should identify yourself as a Texas A&M COM medical student when making your appointment.

List of same day providers/clinics can be obtained from the Student Services Coordinators on each campus and are listed on the COM website and in the COM Student Services Guide.

Visits will be charged to your insurance carrier and copays may apply. Identify yourself as a medical student when scheduling appointments. Student Affairs Coordinators on each campus keeps a current list of same day providers.

EFFECTS OF INFECTIOUS & ENVIRONMENTAL DISEASE OR DISABILITY ON MEDICAL STUDENT TRAINING

If a medical student contracts an infectious and/or environmental disease or disability after matriculation, whether or not it is a direct result of their training, the medical school will assist the student in completing their MD requirements, as long as the student is able to still meet the technical standards as outlined in the admissions policy. Students will be excused from all learning activities to address the potential risks or effects of such infections, environmental disease, or disability.

In certain situations, students with communicable diseases or conditions may not be allowed to have patient contact. This restriction may be necessary to protect the health and safety of both patients and coworkers. Additionally, see specific policies and procedures in this handbook for handling exposure to blood borne illnesses/pathogens. Individuals with the following medical conditions will not be allowed to have patient contact without a medical clearance: 1. Active chickenpox, measles, rubella, herpes zoster (shingles), hepatitis A, hepatitis B, hepatitis C, HIV/AIDS, tuberculosis 2. Oral herpes with draining lesions 3. Group A streptococcal disease (i.e., strep throat) until 24 hours of treatment received 4. Diarrhea lasting over three days or accompanied by fever or bloody stools. 5. Draining or infected skin lesions 6. Conjunctivitis 7. Viral influenza

Students who believe or have reason to believe that they are infected with HIV, HCV or HBV must report that fact to a student affairs dean prior to performing an invasive procedure where there is a risk of contact between the blood or body fluids of the student and the blood or body fluids of the patient. The student affairs dean will require confirmation from a qualified physician as to the student's diagnosis, state of health, and symptoms.

Having identified a student with HBV, HCV and/or HIV, the student affairs dean will coordinate an ad hoc committee including, if possible, the student's physician, an infectious disease specialist or credentialed HIV specialist, and the Associate Dean of Academic Affairs or appointee who is familiar with the clinical curriculum. The ad hoc committee will evaluate the student's course work and patient contact to determine appropriate clinical curricular changes based on guidelines from appropriate entities such as the Texas Department of Health (TDH), Society for Healthcare Epidemiology of America (SHEA), and the Center for Disease Control (CDC). The committee shall report any recommendations to the Student Affairs Dean who in turn will notify the student and clerkship directors, as needed, of any requirements and/or limitations placed on the student's clinical activity. Notifications will be done on a strictly ‘need to know’ basis, and all reasonable attempts will be made to safeguard the privacy of the
student. A student who fails to comply with the requirements and/or limitations will be subject to discipline up to or including a recommendation for dismissal.

All information regarding the HBV, HCV and/or HIV status of a student shall be held in strict confidence.

STUDENTS, FACULTY AND HEALTHCARE

Students have the right to see a healthcare provider of their choosing for all healthcare matters including sensitive healthcare matters and mental health. Students will be excused from any course or clerkship to access any needed healthcare. Campuses offering same day health services for students will use providers who do not teach and evaluate students.

Students also have the right to be taught and evaluated in clinical settings by faculty with whom they do not have a patient/doctor relationship. Students may at times choose to see TAMHSC COM faculty physicians and psychologists for their care. If the student is rotating on a clinical rotation with a physician or psychologist with whom the student has or has had a patient/doctor relationship, the student should request a change in preceptor or evaluator to the clerkship director or the Office of Academic Affairs and they will be automatically granted that change.

NEEDLE STICK AND EXPOSURE GUIDELINES

All students should follow universal (standard) precautions in the patient care setting and instruction on universal precautions will occur annually. While you are on your clinical rotations, needle stick or exposure injuries will be initially addressed at the facility where the injury occurs. For most hospitals, you should contact the nursing supervisor for the specific instructions. Guidelines and numbers for easy access to call will be given out at orientation to the campus or can be obtained through Student Affairs.

The student is required to also notify the Office of Student Affairs if they have had an exposure while doing a clerkship or elective as well as the faculty supervisor and clerkship director. Students will be treated as an employee for initial management of a needle stick by our clinical affiliates in terms of exposure evaluation, potential initiation of prophylaxis, and incident follow-up (on the initial lab tests), however, students are not eligible for workers’ compensation insurance. If the hospital or clinic will not cover the cost but will accept the student’s insurance, the TAMU College of Medicine will reimburse the cost of the insurance co-pay and/or deductible, or any amount not paid by insurance, up to a maximum of $500 per case. This only applies to expenses incurred at the initial visit. The expenses incurred for any follow up visits, treatment, or lab work after the initial visit will be borne by the student and their insurance. TAMU College of Medicine assumes no fiscal responsibility for the treatment of students who develop an illness as a result of an exposure. Long term management, if necessary, will be the responsibility of student and student’s private insurance. (See Appendix VII for more specific information, including how to submit claim.)

IMMUNIZATIONS

M1 students: Must have uploaded all immunizations by August 1st. Students must have either completed the three part Hepatitis B vaccine series before matriculation OR have begun the series in order to have completed the series by February 1st of the M1 year. All students must have a
quantitative titer drawn to demonstrate Hepatitis B protection. If the titer is too low, the student must repeat the series.

M1, M2, M3 and M4 students: Must have annual TB testing (or CXR documentation for TB skin test +), and complete an annual health survey for TB by August 1st, as well as uploaded the results. All students must have the flu vaccine by the third week of October annually and uploaded the documentation.
The required immunizations are equivalent to those required by other institutions of higher education and are reviewed annually and compared with CDC guidelines and State law.

Failure to complete immunizations in a timely manner may result in disciplinary measures and/or interruption of clinical training. Exemptions for medical and/or religious reasons will be reviewed on a case by case basis.

ALCOHOL AND DRUG TESTING

A. Routine alcohol and drug testing A critical part of medical education involves learning experiences in hospitals and other health care facilities. Use of these facilities in training is essential, and students must be able to complete their assigned rotations. Many hospital and health care facilities have policies requiring drug testing and/or criminal background checks for employees, students and volunteers. Facilities that provide instruction to College of Medicine students may have, or may adopt in the future drug testing and/or criminal background check policies. Some facilities provide that students who test positive for drugs, or who have certain types of information in their criminal background checks, are ineligible to work in that facility. Results of any routine drug test will be confidentially reported to the dean(s) for Student Affairs.

As stated during the admission process, students will be required to submit to and satisfactorily complete a routine drug test prior to matriculation in the COM. This test must be completed during Orientation or within 30 days preceding matriculation. A student who does not submit to or clear a routine drug test will have their offer of acceptance withdrawn.

After matriculation, students who test positive on a routine drug test will be referred to a private physician for evaluation. The physician will be designated by the COM and the evaluation will be paid for by the student. Students may not continue in classes or clinical rotations until the physician evaluation has been completed, the student has been cleared by the evaluating physician to resume classes/clerkships and a negative drug screen has been returned. Results of this evaluation will be shared with the dean(s) for Student Affairs. If a student refuses evaluation or consent to share the results of this evaluation, he/she may be subject to disciplinary procedures.

If treatment is recommended, the student will be allowed to seek treatment and remain enrolled as a student but must be cleared by an evaluating physician and have a negative drug screen prior to resuming classes/clerkships. This may delay graduation or necessitate repeating a year, course, or clerkship. Further monitoring after treatment or evaluation will be the purview of the TMA Physician Health and Rehabilitation Committee or private physician as outlined below and will not be reported to Student Affairs unless the impaired student refuses or is unresponsive to the appropriate treatment.
The use of illegal drugs or failure of a drug screen can be considered grounds for dismissal under the Disciplinary Code in Appendix III.

Any questions or concerns about routine drug testing may be shared confidentially with the dean(s) for Student Affairs.

B. **“For cause” testing**  To ensure compliance with institutional policies and to promote a safe and healthy work environment, the COM may require students to submit to drug and/or alcohol testing “for cause” based upon a) reasonable suspicion of substance abuse or b) the unauthorized use or possession of alcohol on campus or at a health care setting or c) the use of or possession of illicit drugs at any time. Reasonable suspicion of substance abuse may be based upon but is not limited to, the following criteria:

a. Direct observation of drugs or alcohol use or possession and/or demonstration of physical symptoms of the influence of drugs or alcohol
b. A pattern of abnormal or erratic behavior, consistent with alcohol or drug abuse
c. Arrest or conviction for a drug or alcohol related offense; identification as the focus of a criminal investigation into illicit drug use, possession or trafficking
d. Evidence that a student has tampered with a previous drug or alcohol test
e. Possession of drug paraphernalia
f. Credible report of substance abuse

Reporting persons must contact the dean(s) for Student Affairs and shall document the exact reason why they suspect a violation to include the symptoms or actions of the student. Every effort should be made to document the behavior and how the behavior is affecting the student’s performance and the reporting person should make every effort to document the specific facts that would lead a reasonable person to the conclusion that the student was using or was in possession of illicit drugs or unauthorized alcohol. Whenever possible, corroborating statements from other administrators, faculty, employees, or students should be obtained.

Until the results of a test are received, a student may be suspended from duties at the sole discretion of the Executive Associate Dean for Student Affairs if the continued participation of the student presents a real and present danger to personal safety or threatens the health and safety of the individual, patients/clients or peers.

1. **Procedure**  When determination to test for cause has been made, the student will be transported to the designated site for collection of a breath alcohol or urine and/or blood sample to test for drugs and/or alcohol. The student may request that a blood sample be collected in addition to a urine sample. Testing cost will be borne by the COM. Testing will be done according to standard procedure for these settings.

   Reports will be sent to the dean(s) for Student Affairs. Prior to making a final decision to confirm a positive test, the student will have the opportunity to discuss the test results and provide any documentation for a legitimate medical explanation for the positive test result.

2. **Appeal and Retesting**
Positive tests may be appealed by submitting a written request to the dean(s) for Student Affairs within three (3) business days (based on COM academic calendar) after being informed of the positive test results. The appellant has the right to have a second test performed on the original specimen for qualitative presence only at a SAMHSA certified laboratory of his/her choice and all expenses of such retest will be the responsibility of the appellant. The specimen transfer between laboratories will follow standard protocol.

Any student who fails an alcohol or drug test for cause will be subject to disciplinary sanctions and a disciplinary hearing as in the Disciplinary Code (Appendix III). These sanctions could result in dismissal. An individual’s participation in and successful completion of an approved drug or alcohol counseling program coupled with his/her consent to random testing may be considered in the disciplinary process but does not ensure that dismissal will not occur.

3. Disciplinary/Actions. Any student who fails an alcohol or drug test will be subject to disciplinary sanctions and a disciplinary hearing as in the Disciplinary Code (Appendix III). These sanctions could result in dismissal. An individual’s participation in and successful completion of an approved drug or alcohol counseling program coupled with his/her consent to random testing may be considered in the disciplinary process but does not ensure that dismissal will not occur.

4. Refusal to Consent to Testing. Any student who refuses to consent to an alcohol or drug test for cause or fails to provide an adequate specimen will be subject to discipline, up to and including dismissal.

5. Confidentiality. Every effort will be made to keep the results of alcohol and drug testing confidential. Students should be aware that test results may be used for administrative hearings and court cases and may be sent to state and /or federal agencies as required by applicable law.

POLICY FOR IMPAIRED MEDICAL STUDENTS

The Texas A&M HSC-COM desires to provide a safe and healthy work environment for our medical students. In addition, as a medical institution, the COM faculty and students must set an example to ensure the safety, health and welfare of the patients who are served by the institution.

The primary emphasis of the COM program will be toward the prevention of impairment in medical students caused by the use of alcohol or psychoactive substances. However, we recognize that medical students may carry with them or develop alcohol and other psychoactive drug use patterns and behaviors that may be diagnosed as abuse or dependence. The COM is committed to a program that will assist impaired student in regaining their health while protecting the well-being of classmates and patients in our care.

However, the Texas A&M HSC-COM is unequivocally opposed to substance abuse and prohibits the abuse, unlawful possession, distribution and illegal use of drugs and/or alcohol by students. Furthermore, this policy is intended to delineate disciplinary sanctions that the COM may impose on students who violate the Student Code of Conduct in regards to alcohol or substance abuse.
Terms:
The term “substance abuse is defined as:
   a) reporting to work or school while affected by alcohol or drugs. Students should not consume alcohol while on call or in the clinics or within at least 4 hours prior to being on call in the clinics.
   b) chemical dependency on alcohol or other drugs where job performance, participation in academic programs or safety of employees, students or patients may be adversely affected.
   c) the use of illegal drugs

The term “illegal drugs” as used in this policy includes but is not limited to:
   a) marijuana, cocaine, heroin, opiates, amphetamines and similar drugs whose possession and use are prohibited under state or federal law.
   b) prescription drugs unless validly prescribed by the student’s physician.
   c) designer drugs, look-alike synthetic drugs and similar substances.

The term “impaired student” is defined as any student who demonstrates behavior that interferes with the normally expected performance as a medical student in the healthcare delivery system, whose actions endanger the public or himself/herself, and who violates the rules, traditions and ethics of the COM.

I. Substance Abuse Self-Identification
The COM does not condone the abuse of alcohol or illegal drugs and has developed policies and procedures to promote a drug free environment. However, the COM recognizes that students may develop substance abuse problems that can be treated successfully before critical incidents occur (e.g. arrest, usage on campus property, or intoxication in the classroom or health care setting).

The COM encourages students who have developed substance abuse problems to voluntarily identify themselves and to seek immediate treatment. To further this policy:

A. A student who voluntarily self-identifies as an abuser may be permitted to continue his/her current course of study without suspension provided:
   1) This self-identification occurs PRIOR to any incident that is grounds for suspension or dismissal under institutional policy.
   2) The student immediately enters an institution approved program for the disorder.
   3) The student’s conduct and academic performance remain consistent with the demands of the curriculum and profession.

B. A student who voluntarily self-identifies as an abuser and who, by his/her own admission, by the testimony of approved abuse counselors, or by the determination of institutional authority is no longer capable of acceptable academic and professional conduct will be required to take a medical leave of absence from the COM. Nothing in this paragraph will preclude the COM from suspending, dismissing or taking other appropriate action against the student for unacceptable academic performance or lack of professional conduct.

C. Any student who is given the option to participate in a rehabilitation program will comply with the treatment and rehab requirements set forth below:
   1) Satisfactorily participate in a substance abuse assistance program or rehabilitation program approved by the COM for this purpose.
   2) Provide evidence satisfactory to the COM or TMA PHR (Physician Health and Rehabilitation) of continued outpatient therapy in an approved program appropriate to the treatment recommendation.
   3) Remain substance free after completing a rehabilitation program for chemical
dependency and participate in random drug screening during rehabilitation through the TMA Drug Screening Program and the TMA PHR for the duration of their medical education at the COM or as recommended.

4) Failure to comply with these requirements may result in dismissal.

III. Notification of Arrests/Convictions
Students must notify the COM of any drug or alcohol related arrests or convictions within five (5) working days after charge of an offense. Failure to do so and subsequent notification during a required background check or disclosure by other means may result in disciplinary action including dismissal.

UNIVERSAL PRECAUTION GUIDELINES

All students must complete instruction on Universal Precautions annually. Guidelines change frequently and students are expected update their knowledge at least annually to assure your personal safety and the safety of your patients.

INSURANCE INFORMATION

DISABILITY INSURANCE

Students are not required to carry disability insurance; however, they are strongly encouraged to consider purchasing it. The Office of Student Affairs maintains a file on available policies and will assist interested students.

HEALTH INSURANCE

All Texas A&M Health Science Center medical students are required to carry and maintain health insurance which meets or exceeds the minimum criteria set by the College. Students who are found to not have current health care coverage may be barred from continuing courses or being in clinical settings until this is taken care of. Students are strongly encouraged to provide coverage for all dependents. Students who presume they are still covered on their parents’ policies are well-advised to confirm this with their insurance carriers. Some policies automatically delete coverage for family members who: reach a certain age, become married, no longer reside with parents, etc. Knowing these conditions in advance will permit time to obtain coverage elsewhere. Under optimal conditions for a healthy individual it may take a month or more to obtain coverage. Among the considerations in selecting a health insurance policy is whether or not a policy can be continued after graduation.

All students are required to sign a document verifying they have coverage meeting the minimum standards and signifying that they understand they will be responsible for any medical expenses incurred beyond what their insurance will pay. It is important for students to realize that medical expenses for care provided by hospitals affiliated with the College of Medicine, including laboratory procedures and emergency care, are the responsibility of the student and not the College of Medicine or the University. Insurance coverage should also include “maternity benefits” and “coverage for an occupational injury” that might put the individual at risk for a blood borne infection such as hepatitis B, hepatitis C, or HIV infection. Students must show proof of coverage annually.
Students are encouraged to consider insurance coverage in excess of the required minimum.

Although the Office of Student Affairs does not endorse any specific carrier, it does have information on various health insurance policies available to medical students. As information becomes available, it is added to this resource.

PROFESSIONAL LIABILITY INSURANCE

The College of Medicine requires each student to purchase professional liability insurance prior to working with patients. Currently, we are self-insured and payment of liability insurance fees is included in your tuition bill. Students may not perform clinical activities without this coverage. Activities outside the College curriculum are not covered, unless they occur in a recognized COM activity. Approved away rotations are considered part of the curriculum and are covered by the self-insurance policy.

STUDENT RECORDS

LOCATION OF RECORDS

A student’s permanent academic records are held by the Registrar of Texas A&M University. In addition, portions of the record may reside in the COM Office of Student Affairs.

THE ROLE OF THE REGISTRAR

Maintenance of academic records is the responsibility of the Office of the Registrar. Access to these records is granted in accordance with the Family Educational Rights and Privacy Act of 1974 (FERPA). FERPA is a federal law that provides minimum standards for the management of student education records for universities receiving funds made available under the federal program administered by the U.S. Commissioner of Education. Additional details about FERPA are available in the Texas A&M University Graduate & Professional Catalog and on the Office of the Registrar’s website. Questions concerning FERPA may be referred to the Office of the Registrar.

DIRECTORY INFORMATION

The following directory information may be made public unless the student desires to withhold any or all of this information: the student’s name, UIN (Universal Identification Number), local address, permanent address, email address, local telephone number, permanent telephone number, dates of attendance, program of study, classification, previous institution(s) attended, degrees received, honors and awards received, participation in officially recognized activities and sports, medical residence location, and medical residence specialization.

Currently enrolled students wishing to withhold any or all directory information items may do so by going to the My Record tab in the Howdy portal, clicking on "Withhold Directory Information" in the My Information channel and submitting a completed form.
Directory information may be released unless a “Withhold Directory Information” request is submitted by the student. The request remains in effect until the student revokes it or is deceased. Only currently enrolled students may request directory information be withheld.

NOTIFICATION OF RIGHTS UNDER FERPA

Texas A&M University encourages students to exercise their rights under FERPA. Operating under the premise that the educational process is a cooperative venture between a student and the University, we emphasize the following rights of eligible students:

1) The right to inspect and review, with certain limited exceptions, the student's educational records, including the right to receive explanations and interpretations of the records and to obtain copies of the records when such are needed to allow the student to effectively exercise his/her right of inspection and review;

2) Consent to disclosures of personally identifiable information contained in the student's education records, except to the extent that FERPA authorizes disclosure without consent.
   a) One exception which permits disclosure without consent is disclosure to school officials with legitimate educational interests. A school official is a person or entity:
      i) employed by the university or the university system in an administrative, supervisory, academic or research, or support staff position;
      ii) serving on a university governing body or duly authorized panel or committee; or
      iii) employed by or under contract to the university to perform a special task, function, or service for the university.
   b) A school official has a legitimate educational interest if the information requested is necessary for that official to
      i) perform appropriate tasks that are specified in his/her position description or in the performance of regularly assigned duties by a lawful supervisor;
      ii) fulfill the terms of a contractual agreement;
      iii) perform a task related to a student's education;
      iv) perform a task related to the discipline of a student; or
      v) provide a service or benefit relating to the student or student's family, such as health care, counseling, financial aid, job placement, or former student-related activities.
   c) Disclosure to a school official having a legitimate educational interest does not constitute university authorization to transmit, share, or disclose any or all information received to third parties unless such disclosure is permitted or required by law.

3) The right to correct a student's education records when the records are inaccurate, misleading or otherwise in violation of FERPA;
4) The right to report violations of FERPA to the Department of Education;

REVIEW OF STUDENT RECORDS

All students have the right to inspect their academic record. For records held by the TAMU Registrar, please refer to Texas A&M University Standard Administrative Procedure on Student Records for information regarding how to request such a review. Records can be reviewed within 45 days. For records held by the College of Medicine, the student should make their request to the Office of Student Affairs. Reviews of records from this office can generally be accomplished in 14 days or less.

The College of Medicine reserves the right to refuse access to letters and statements of recommendation to which the student has waived the right of access.

AUTHORIZED NON-STUDENT ACCESS TO STUDENT RECORDS

COM instructors or personnel are allowed access to student’s educational records only if there is determined to be a legitimate educational need to know. All requests for access should be directed to the COM Office of Student Affairs or the TAMU Registrar, depending on what is desired. For any COM-based records, the Executive Associate Dean of Student Affairs & Admissions, with consultation of others if needed, will determine if educational need to know exists.

Texas A&M University may disclose education records in certain other circumstances:

- to comply with a judicial order or a lawfully issued subpoena;
- to appropriate parties in a health or safety emergency;
- to officials of another school, upon request, in which a student seeks or intends to enroll;
- in connection with a student's request for or receipt of financial aid, as necessary to determine the eligibility, amount, or conditions of the financial aid, or to enforce the terms and conditions of the aid;
- to certain officials of the U.S. Department of Education, the Comptroller General, to state and local educational authorities, in connection with certain state or federally supported education programs;
- to accrediting & licensing organizations to carry out their functions;
- to organizations conducting certain studies for or on behalf of the Texas A&M University to the alleged victim of a violent crime when the records include the results of an institutional disciplinary proceeding against the alleged perpetrator with respect to that crime.
TRANSCRIPTS

Official transcripts are available from The Texas A&M University Office of the Registrar. A fee is assessed for transcripts.

Official transcripts or copies of other documents may be withheld under the following circumstances:

- The student has an unpaid financial obligation to the school.
- There is an unresolved disciplinary action against the student.
- The student is in default on a Federal loan.
- The student has not completed clearance or other professional obligations to the school.

STUDENT ORGANIZATIONS

Only students in good academic standing (overall GPA 2.5 or above for the current semester and the semester immediately prior to election/appointment and not on probation for any reason) may hold or run for office in student organizations, serve on councils and committees, or represent the College at meetings or conferences.

CLASS OFFICES

Elections of class officers are held in the spring prior to final examinations, with the exception of the first year (M1) class elections, which are held in the fall after the second round of exams. Each position is re-elected every year, with the exception of those specifically mentioned below. Each year, all presidents and treasurers are required to take online training sessions through the TAMU Office of Student Activities.

Class offices are described below. For each class, there will be one class president and there will be a campus executive officer on all campuses where the entire year long curriculum is delivered. The class president will represent his/her class as a whole and the campus executive officer will represent the needs of the class on his/her respective campus. For campuses where there are thirty or more students, there will be a full slate of officers. For campuses where there are fewer than thirty students, only the campus executive officer, vice president and student advocate positions will be elected.

President

- Represents the class to the Office of Student Affairs, other administrative offices, professors and academic departments
- Serves to promote class unity for all campuses
- Serves as member of the TAMSA Executive Committee
  - M4 Class President – Executive President - writes agenda for and runs Executive meetings
  - M3 Class President – Executive Vice-President – serves in absence of Exec President
  - M2 Class President – Executive Treasurer – keeps accurate accounting of TAMSA Exec funds
  - M1 Class President – Executive Secretary - takes and distributes minutes for TAMSA Executive meetings
• Corresponds on behalf of the class
• Serves on the President’s HSC Advisory Board (M2 & M3)
• Organizes/delegates authority for planning class/campus activities
• Serves as the class representative for Awards and Hooding Ceremony, Match Day and Commencement Committee (M4)
• Holds regular officer and class meetings

Campus CEO

• Represents the class to the Office of Student Affairs, other administrative offices, professors and academic departments on their respective campus and in the president’s absence
• Serves to promote class unity for all campuses
• Serves as member of the TAMSA Executive Committee
• Serves as the Interest Group Council Coordinator (M3) and Treasurer (M2)
• Serves as alternate for President’s Student Advisory Board (M3)
• Corresponds on behalf of the class for their respective campus
• Organizes/delegates authority for planning class/campus activities
• Serve as class representatives for Senior Banquet, Match Day and Commencement Committee (M4)
• Holds regular officer meetings

Vice-President

• Organizes and directs class fundraising activities
• Works with the Office of Student Affairs to ensure all fundraising regulations are followed
• Plans Cadaver Ball (M1)
• Assists in organizing Campus Preview Days as needed
• Serves as the class representatives for Awards and Hooding Ceremony, Match Day Celebration and Commencement Committee (M4)

Secretary

• Records, approves, and posts minutes of all class officer meetings
• Corresponds on behalf of the class
• Serves as assistant historian
• Organizes, edits, prints and distributes class newsletter

Treasurer

• Oversees all financial activities of the class -- must keep accurate records!
• Works with the Coordinator of Student Services for class deposits and withdrawals from Student Organization Finance Center Account
• Works with the Office of Student Affairs to ensure all financial regulations are followed
• Works with Coordinator of Student Services to ensure payment of annual taxes on sales

Historian
• Takes pictures at all class events
• Coordinates collection, organization and documentation of photos, etc. for yearbook
• Creates Cadaver Ball slideshow (M1)
• Coordinates class yearbook (M4)

Community Service Representative(s)

• Organizes and coordinates community service projects for class
• Facilitates involvement in joint community projects

Social Relations Representative(s)

• Organizes class social events

Intramural Representative

• Organizes class teams for intramural/community sports competition
• Posts/distributes Rec Sports information
• Distributes TAMU Sports Pass information and helps coordinate weekly ticket pulls

Student Advocates

• Provide confidential assistance and referral for professional help to students who are abusing alcohol or drugs, or experience psychiatric-emotional problems
• Provide support for the COM Societies
• Be an active participant in the Wellness Initiative to promote student health and wellbeing
• Be an Administrator for the Student Wellness Website when it comes online
• This position is a one year position (M1) and then a three year position M2-M4 on each clinical campus.

Technology Chair

• Serve as liaison between the class and Class President with regards to IT issues
• Offer assistance to classmates during class if having technical problems
• Assist Student Advocates with the building and updating of the Student Wellness website

Organization of Student Representatives Representative

• Serves as AAMC-OSR liaison to class (collects and distributes information from/to class for AAMC-OSR representative
• This is a four year position

Curriculum Committee Student Representative
• Serve as a student representative on the Curriculum Committee which is the body charged with leading, directing, coordinating, controlling, planning, evaluating and reporting on the curriculum leading to the degree, Doctor of Medicine
• M2 and M4 representative will be voting members
• M1 and M3 representatives will be ex-officio members; however they will serve as backup to the voting members if the latter are not present

STUDENT ORGANIZATIONS

Numerous student organizations exist for extra-curricular activities and the COM encourages students to be involved in outside activities as your time permits. Please see the Student Services Coordinator on your campus for listings of the current organizations. The student governance of all organizations is coordinated by the TAMSA Executive Committee.

TAMSA Executive Committee
The TAMSA Executive Committee serves as governance for the student body and functions to set agendas and distribute TAMSA funds to organizations for projects or travel based on priority and need. The committee approves new organizations wishing recognition, reviews organizations on probation and annually appraises all organizational activities. The executive committee is made up of class presidents, CEOs and Vice Presidents.

Wellness Committee

The Wellness Committee was created to address the overall individual wellness of medical students, including Physical, Interpersonal, Emotional, Spiritual, Intellectual, and Service related issues. The committee is comprised of student advocates, with support from the Student Affairs Office and Gold Humanism Honor Society.

STUDENT ACTIVITIES

There are traditional activities which involve students, faculty and staff. These occur throughout the academic year; are sponsored by student organizations, and planned in consultation with the Office of Student Affairs. The requirements for participation are as follows:

Requirements

1. Student(s) representing the College of Medicine in any College-sponsored activity must be in good academic standing.
2. Student(s) must be active members of the organization they represent.
STUDENT ACTIVITY FUNDING PROCEDURE

Student organizations desiring funding for activities during the year must submit a funding request and justification to the TAMSA Executive Committee. Funding request forms can be obtained in the Office of Student Affairs. All requests will be reviewed and voted on by the TAMSA Executive Committee.

Procedure:

1. Student organizations desiring funding for organizational activities must submit a funding request form and a budget for the activities for the entire academic year.
2. Funding Request Form must be submitted and approved, prior to a specific budgeted activity, e.g., student(s) representing the College of Medicine at state and national meetings, Cadaver Ball, M1 Retreat, etc. Approval of requests will be based on the extent to which the activity will benefit the student body and the College of Medicine. In order to avoid problems, please confer with the Office of Student Affairs prior to traveling or purchasing an item to be paid for with College of Medicine funds.

   a. Student Travel Reports and Reimbursement:
      Following a school sponsored trip, student(s) must submit original itemized bills/receipts (hotel, airline, taxi, etc.) for travel reimbursement. Students and organizations receiving funding are required to participate in the annual Research Symposium hosted by the TAMSA Executive Committee. Participation may be in the form of a poster or oral presentation. The content should include: (1) general information or a printed program describing the event, (2) name(s) of student(s) attending and/or participating, (3) summary of activities, (4) benefit to the student body and the College of Medicine. It should answer certain questions: was there a keynote speaker, what was the topic of their message; what transpired which would benefit students; what information obtained would have an effect on medical students and/or health care. It is important to summarize the activities of the student(s) participating, rather than to only list the schedule or itinerary of the event. Sufficient details of programs and events attended must be included to establish student participation.

   b. Student Activity Expense Payments:
      Original invoices (not copies) for expenses for student activities, previously approved as outlined above, must be billed to TAMHSC College of Medicine in order to be tax exempt and paid through the Office of Student Affairs from a College of Medicine account.

FUNDRAISING ACTIVITIES

Student fundraising is challenging, fun, and useful for class projects. However, students are reminded that sales of items require the collection of and accounting for State sales tax if the organizations’ gross sales are more than $5,000 in a calendar year.

Since apparel/merchandise is a popular fundraising effort, and to avoid copyright infringement, specific guidelines are in place to assure student organizations are following approved logo designs. Specific guidelines:
1. Old TAMHSC Component Seals and logos are not to be used on T-shirts.
2. Designs must not look like a new logo is trying to be created.
3. Any version of the Aggie Athletics “Block T” outside of the official logo is not to be used.
   a. Aggie Athletics owns the rights to the Block T which is why we are not able to use any design that might resemble it.
4. When purchasing graphics off of istockphoto.com (recommended by HSC Governmental and Public Affairs), check with the Marketing department before making the purchase to make sure they have not already purchased the graphics for another use. If they have, we will be able to use the graphic and not have to purchase it.
5. Once a design has been created for merchandise, students must gain approval from their designated contact in the Office of Student Affairs who will then seek further approval as necessary.
6. When in doubt, check with HSC Governmental and Public Affairs for any questions or final approvals.

Students should investigate copyrighting any designs they create for fund-raising projects. The Office of Student Affairs and HSC Governmental and Public Affairs can provide information on fund-raising procedures, activities, and logo use.

OFF-CAMPUS ACTIVITIES

The College of Medicine is supportive of student activities both on and off campus. Volunteer work in the local community or field trips to other communities are encouraged, subject to certain conditions. If the College of Medicine's name is either used or implied or if College or University property or facilities are used in such endeavors, prior approval must be obtained from the Office of Student Affairs. In addition to approval, participants in College related trips off campus must complete a statement releasing the College of Medicine from any liability associated with the trip. Release forms are available in the Office of Student Affairs. No reimbursement for expenses or disbursement of funds will be approved unless these requirements are met.

RESEARCH OPPORTUNITIES

The Texas A&M Health Science Center offers opportunities for all medical students to obtain research experience and training. This experience is invaluable to students interested in pursuing careers in biomedical research and academic medicine. Students not interested in research careers will also find the experience rewarding. Programs providing research experience include the following:

M.D. /Ph.D. Program- This is a six to eight year combined degree program in which student complete the requirements for the Doctor of Medicine and Doctor of Philosophy degrees in a biomedical discipline. The curriculum integrates the requirements for the two degrees.

M.D. Plus Program- This program allows the student to also obtain value-added degrees, in addition to the M.D. degree. Opportunities exist to earn Masters degrees in Business (MBA), Public Health (MPH), and in Medical Science Research (MS). For more information, see https://medicine.tamhsc.edu/degrees/md-plus.html.
Research experience and training can be obtained in research laboratories within many research departments within the College of Medicine. A variety of research is being conducted by faculty in each of these departments. In addition, there are basic science research institutes located in the Texas A&M Health Science Center. For more information, contact Dr. Gloria Conover, Director of Medical Student Research.

TUITION & REGISTRATION

REGISTRATION

Because of the established curriculum schedule, registration for the student is relatively easy. Prior to registration, each first year student must have provided to the COM: (1) a final copy of their complete undergraduate transcript (2) a copy of their health record with evidence of required immunizations and (3) proof of adequate health insurance, or an application in process. A student may be blocked from registering if the foregoing is not supplied to the College in a timely manner.

Students may be blocked from registration because of unpaid financial obligations to the College or University, such as fees, short-term loans and parking fines, failure to provide adequate proof of required immunizations or insurance coverage, or failure to comply with official notifications.

PAYMENT

Tuition and fees for medical students are based on a fixed amount for the academic year and are not determined by the number of credit hours taken.

Tuition and fees for each term are payable in full or in three installments with one-half payable prior to the first day of class and the remainder payable in two equal payments during the term. A service charge will be assessed for use of the installment plan. Scholarships and grants are credited to the student's account in equal payments prior to each term. Loans are usually disbursed in equal payments, at the beginning of each semester.

Emergency tuition and fee loans are available for students who have applied for, but have not received, financial aid. These loans must be repaid when the financial aid is received. There are severe penalties for failure to pay installments by their specified due dates. If a payment is delinquent when a semester ends, the student will be disenrolled and will not receive credit for academic work performed that semester. Students will not be readmitted until all past due balances, including late charges, are paid. A $50.00 late fee will be assessed for overdue payments. If a student is disenrolled for failure to pay tuition and fees, a $100.00 reinstatement fee will be assessed in addition to any other late fees or penalties already incurred, and it must be paid before the student is reinstated.

REFUNDS

Refund of tuition and fees shall be made to students withdrawing, being dismissed, or taking a leave of absence from the College of Medicine according to the following refund schedule. This is based on the total amount due for the term:
Prior to the first day of class 100 percent
During the first five class days 80 percent
During class days 6-10 70 percent
During class days 11-15 50 percent
During class days 16-20 25 percent
After 20 class days None

STATE RESIDENCY CLASSIFICATION

Students are responsible for registering under the proper residence classification and for providing documentation as required by the institution. If there is any question about the right to classification as a resident of Texas, it is the student's obligation, prior to the time of enrollment, to ask for an official determination by administrative officials of the institution. An applicant whose classification as a resident of the State of Texas is not clearly established should request a Residency Questionnaire from TAMU Admissions.

There are many factors that affect residence status. Generally, students who have resided in the state and have been employed for twelve (12) consecutive months immediately preceding the time of enrollment are classified as residents, unless they are in the state primarily for the purpose of attending an educational institution. Individuals who reside in Texas for educational purposes are classified as non-residents. Dependents whose parent(s) or guardian(s) have resided in Texas for the twelve (12) months preceding enrollment are classified as residents.

Non-residents who may qualify to pay Texas resident tuition rates include:

1. Military personnel assigned to duty in Texas, and their spouses and children.
2. Faculty employed at least one-half time on a regular monthly basis at state institutions of higher education in Texas, and their spouses and children.
3. Teaching or research assistants employed by state colleges or universities in Texas at least one-half time in positions which are related to the assistants' degree programs under institutional regulations, and their spouses and children.
4. Students who hold competitive academic scholarships for at least $1000 which were awarded in competition with Texas students by a recognized university scholarship committee.

III. STUDENT LIFE

STUDENT SAFETY

Before and after the hours of 7:00 a.m. and 6:00 p.m., security system prohibits unauthorized entry to the building. Students of the College of Medicine are assigned building access cards during First Year Orientation. These cards are the property of the College and are to be returned by students before graduation or upon withdrawal from the College. Should a student lose or destroy an access card, the Office of Student Affairs should be notified immediately.

Card or security access is also provided for college buildings on your clinical campuses.

Students must assume responsibility for the safety of their personal property.
PARKING

Students are required to park only in designated parking areas at all college and clinical affiliate locations. Unauthorized parking in patient or visitor spaces is considered a breach of professionalism. Violators will be reported to the office of Student Affairs who may inform the Student Promotions Committee.

EMAIL MAIL AND BULLETIN BOARD NOTICES

Individual mailboxes are located in Bryan, Round Rock, Dallas, Houston and Temple facilities for students assigned to each campus. Mailboxes are not to be used as storage and should be cleaned out daily. Bulletin boards are available on which items of interest to students should be posted. Please date all items posted so that outdated items may be removed. Students are responsible for checking mailboxes periodically, as well as noting information on the bulletin board. In addition, students should check their e-mail at least daily. The College reserves the right to determine the items to be posted on bulletin boards, in classrooms, hallways, or other places. Unauthorized items will be removed.

COMPUTER ACCESS

Students are allowed access to computing facilities on all campuses. Each student is required to activate an e-mail account as a part of First Year Orientation. Most communication is done by e-mail and it is the responsibility of the student to check their accounts daily and be sure their mailbox will allow receipt of incoming mail.

Students' use of computers and/or accessing data stored on a computer system without proper authorization is subject to disciplinary action, as stipulated in the Texas A&M University Regulations:

1. Unauthorized Use of Computer Accounts or System Access -- Unauthorized use of computers includes free standing as well as networked computers. It is to be emphasized that giving one's password or other log-on information to an unauthorized user of the system is unauthorized system access. Regardless of the purpose or the intent of unauthorized access, Texas A&M will recommend the filing of appropriate charges in the Criminal Justice System for all such violations.

2. Unauthorized Viewing or Changing of Data -- only authorized users are to have access to data. "Browsing" of data by unauthorized users is a violation of the State Penal Code, and such actions will be prosecuted. This statement covers all administrative systems on campus, including the Student Information System. Unauthorized access of another person's account to view that person's files comes under this heading as well. Such access includes, but is not limited to, accessing another student's files, accessing a professor's file and accessing a patient's file without proper authority.

3. Unauthorized Copying of Software and Data -- all commercial software and data are covered by copyrights of some form. Duplication of software and/or data covered by such copyrights is a violation of the copyright law.
4. Computers should not be used for the unauthorized downloading of pornographic or offensive material. Unapproved programs should not be placed on the computer.

STUDENT LOCKERS

Lockers are provided for students on each campus. Lockers not used by medical students may be assigned to graduate students, faculty, or departments. Users may need to furnish their own locks. At the end of each year, students should remove all items and locks from their lockers. During the summer any remaining locks and items will be removed in preparation for locker assignment the following year.

APPENDIX I

SATISFACTORY ACADEMIC PROGRESS (SAP) FOR FINANCIAL AID ELIGIBILITY

In order to maintain eligibility to receive financial aid, students must meet the following requirements:

- Must be a degree-seeking student.
- Must meet Satisfactory Academic Progress (SAP).
- Must be enrolled at least half-time.

Scholarships & Financial Aid monitors SAP each semester for graduate students (master and doctoral levels) and annually after spring grades are posted for professional medical (MD) students. Students who do not meet the requirements for SAP have the opportunity to appeal and provide information about extenuating circumstances that may have hindered academic progress. Appeals are reviewed on a case-by-case basis. SAP and minimum enrollment requirements for individual financial aid program eligibility may vary.

In addition to potentially affecting current semester financial aid, drops and withdrawals are considered unsuccessfully completed coursework when determining SAP and will impact completion rate. Students who drop below the necessary completion rate may lose eligibility for financial aid in future terms.

SAP Components

There are three components to SAP. Failure to comply with any component may result in a loss of aid eligibility. The three components are as follows:

Minimum Grade Point Average (GPA)

- Graduate Students: 3.0
- Medical Students: 2.0

Completion Rate (Deficit Hours)

While students are expected to enroll full-time to be eligible for financial aid, each student must successfully complete at least a minimum percentage of all credit hours attempted. This percentage includes all institutional and transfer credit hours, regardless of whether or not financial aid was received. Grades of W, F, I, U, Q, X, NG, and grade exclusions are not considered to be adequate grades for completion.

- Graduate Students: 67%
- Medical Students: 67%

Maximum Hours (Excessive Hours)

Students are expected to complete their degree pursuits within a maximum timeframe, including transfer hours earned as well as institutional attempted hours. Students may not receive financial assistance beyond the following:
• Graduate Students 150% of degree program requirements
• Medical Students 285 hours

Credit hours are cumulative; thus, students working towards obtaining more than one degree in the same category (e.g. MD/PHD) may reach this maximum timeframe before completing their course of study and may need to appeal eligibility.

After one semester of not meeting the SAP standards, graduate students will be issued a warning and will be permitted to receive financial aid for the next semester. However, after the one semester of warning, graduate students who fail to meet any one or a combination of the SAP components will be ineligible for financial assistance. Financial aid warnings do not apply to professional medical students.

Students who fail to meet minimum SAP standards are not eligible to receive financial aid. Students will be notified of the reason(s) for the loss of eligibility through a letter sent to the permanent address on file with the University as well as via the Scholarships & Financial Aid Portal.

 Appeals

Students may appeal their ineligibility by providing information on extenuating circumstances, indicating what has changed to allow successful academic progress. However, the submission of an appeal is only a request and does not guarantee that scholarship or financial aid eligibility will be reinstated. The appeal must be submitted online through howdy.tamu.edu, click the My Finances tab and enter the Scholarships & Financial Aid Portal. The student should provide evidence of the extenuating circumstances that occurred.

Students who graduate from Texas A&M University but do not meet Scholarships & Financial Aid Satisfactory Academic Progress minimums will be denied aid eligibility for additional coursework taken at the same degree level, but may visit with a Scholarships & Financial Aid advisor to determine continuing eligibility. Academic progress for students beginning a new degree level (i.e. undergraduate to professional, or graduate to professional) will be evaluated based on coursework/performance at the new level.

 Eligibility and Beginning Attendance

Federal financial aid regulations require Scholarships & Financial Aid to confirm whether or not a student began attendance in at least one course order to establish eligibility for federal student loans. Based on the information we receive, adjustments to financial aid awards may be necessary and will likely result in a balance due to the University.

Instructors will confirm which students began attendance/participated in their courses through the Howdy portal. Instructors may reference attendance records, graded assignments, quizzes, exams, or papers to confirm that the student began academic participation. If the instructor confirms beginning attendance in the class there will be no adjustment to financial aid awards. If Scholarships & Financial Aid does not receive confirmation of beginning attendance in the course(s), it is required to adjust financial aid based on the remaining hours enrolled. If Scholarships & Financial Aid does not receive confirmation of beginning attendance for ANY enrolled course, it is required to cancel ALL federal financial aid.

In addition to potentially affecting current semester financial aid, drops and withdrawals are considered unsuccessfully completed coursework when determining Satisfactory Academic Progress (SAP) and will impact completion rate. Students who drop below the necessary completion rate may lose eligibility for financial aid in future terms.

For more information on SAP, please visit http://financialaid.tamu.edu.
APPENDIX II

DRESS CODE
Dress Guidelines for the Clinic

These guidelines are published in the Texas A&M HSC College of Medicine Student Handbook. (Revised June 2014)

**Dress/Skirts**
These should be no more than approximately 1 inch above the knee. Slits should be no more than approximately 1 inch above the knee. No very short skirts or dresses. Denim dresses and skirts are allowed.

No shorts/skorts.

**Pants**
Khaki, twill and polyester blend pants are acceptable as long as they are not “skin tight” and look professional.

No denim jeans, capri’s, “cropped”, stretch denim, spandex, overalls or hip-huggers.

No wind suits or sweat suits.

**Blouses/Shirts**
Polo or denim shirts are acceptable. Shirts and blouses should meet or come below the waistband when you are standing with arms to your side. All necklines should be modest and tasteful showing NO cleavage at all. Ties are not required.

NO sleeveless shirts, tank tops, spaghetti straps or sleeveless blouses unless under a jacket/sweater or white coat that is worn at all times in the clinic.

NO see-through shirts are allowed without another shirt worn underneath.

NO t-shirts or shirts with advertising.

**Shoes**
Non-canvas tennis shoes are acceptable and should be kept neat and clean. Open back shoes are acceptable and do not have to be worn with hosiery.

NO open-toe shoes are allowed.

NO “Doc Martin” type sandals/slides or canvas tennis shoe/slides.

NO flip-flops, thong sandals or beach shoes.
**Personal Hygiene/Miscellaneous**

Perfume/powder/body sprays/cologne should be kept to an absolute minimum due to allergies of patients and/or co-workers.

Hair should be clean, combed and dry during work hours. Wet hair is not professional. No odd hair colors (i.e. purple, green, etc.) or flamboyant/distracting hair styles (i.e. spiked, Mohawks).

Always present yourself in a professional manner.

Fingernails should be short, clean and neatly maintained. Artificial nails, including any product applied to the nails other than standard polish or nail jewelry is prohibited. If polish is worn, it should be chip free and in good condition. NOTE: No nail polish or nail jewelry of any kind is to be worn while on Surgery or OB/GYN rotations.

All visible body piercing, **with the exception of ears**, is unacceptable. All visible piercing paraphernalia, **except for ears**, with be removed during working hours (i.e. eyebrows, tongue, nose, etc.)

All visible tattoos will have to be covered during working hours.

*Anything deemed inappropriate by the management team*
APPENDIX III

DISCIPLINE CODE

I) Student Code of Conduct Rules and Regulations
A) Disciplinary regulations within the College of Medicine are set forth in writing in order to give students general notice of prohibited conduct. These regulations should be read broadly and are not designed to define prohibited conduct in exhaustive terms.
B) Violation of any municipal ordinance, law of the State of Texas or law of the United States or TAMU or TAMUS HSC Regulation may result in disciplinary action as defined hereinafter. Any disciplinary action imposed by the College of Medicine may precede or follow a course independent of, and shall be in addition to, any penalty that might be imposed by any off-campus authority.
C) Violations of the Student Code of Conduct or behavior which is unprofessional may result in disciplinary action.
D) Definitions. When used in this code:
   1) The term "premises" means buildings or grounds owned, leased, operated, controlled or supervised by the TAMU, the TAMUS HSC, Scott & White facility in Temple, VA Hospital or any other clinical affiliate of the medical school.
   2) The term "University sponsored activity" means any activity on or off campus that is initiated, aided, authorized or supervised by the University.
   3) The term "University" or "institution" are intended to include both College of Medicine and Texas A&M University, and the HSC.
   4) The term "University official" means any administrator, faculty member, staff member and other authorized individuals of the University.
E) Any student found to have committed misconduct as defined by the Student Code of Conduct is subject to the disciplinary sanctions outlined under "Disciplinary Action."

A) Initial Procedure
   1) Upon becoming aware of a possible violation, the COM Office of Student Affairs will initially look into the matter. In any case where it appears that a COM student has potentially engaged in academic dishonesty or other behavior that risks violating the TAMU Aggie Honor Code, the case will be initially be investigated more fully by and handled by the TAMU Aggie Honor System Office under the rules that govern such. Following final disposition by the Aggie Honor System Office processes, the case will be referred to the COM Student Promotions Committee for possible addition of any professional sanctions. Given that COM students are held to a different and higher set of professional standards than other University students, sanctions of the COM may exceed or differ from those applied by the Aggie Honor System. Additional sanctions may include dismissal.
   2) In any case where a student is accused of unprofessional behavior or violation of the COM Student Code of Conduct, and does not dispute the facts upon which the charges are based, and does not request a hearing as provided herein within seven days of being notified of the complaint, the Executive Associate Dean for Student Affairs or a designee may assess a penalty pursuant to Section III below that is appropriate to the charges and shall inform the student of such action in writing. For violations that may lead to dismissal, the Student Affairs dean is precluded from assessing such a major sanction. In cases where there is no
dispute of the facts, but dismissal is a realistic possibility, or in any other undisputed case at the discretion of the Student Affairs dean, the matter will be referred to the Student Promotions Committee for review and assessment of appropriate penalties. If the SPC votes for dismissal, that decision may be appealed using the process described earlier in this Handbook for appeal of SPC dismissals.

3) If the Executive Associate Dean for Student Affairs or designee assesses the penalty per above, that decision regarding punishment may be appealed in the same manner as a decision rendered subsequent to a hearing and in accordance with Section II.D below. The appeal is limited to the issue of penalty only.

4) For cases not routed to the Aggie Honor Council, if a student disputes the facts upon which the charges are made, a disciplinary hearing will be afforded the accused. Except in those cases where immediate interim disciplinary action has been taken under authority of Section II.B., the accused student shall be given at least ten days’ notice of the date, time, place for such hearing, and the name of the judicial officer.

5) The notice shall include a written statement of the charge(s) and a summary statement of the evidence supporting such charge(s). The notice shall be delivered in person to the student or sent to the student by verifiable delivery service at the last address appearing in the records of the Dean's office. Email may be considered a valid notification option, if the student acknowledges receipt of the email.

6) Hearings held following interim disciplinary action under Section II.B. will be held under the same procedures, but will be held as soon as practicable within ten days after the interim disciplinary action has been taken.

7) The institution has the burden of going forward with evidence and the burden of proving the charges by the greater weight of the credible evidence.

B) Interim Suspension Action

1) In certain circumstances, the Executive Associate Dean for Student Affairs, or a designee, may impose a suspension prior to the hearing. Interim suspension may be imposed only
   (a) to ensure the safety and well-being of members of the College of Medicine community or preservation of the College of Medicine
   (b) to ensure the student's own physical or emotional safety and well-being, or
   (c) if the student poses a definite threat of disruption of or interference with the normal operations of the College of Medicine.

2) During the interim suspension, students shall be denied access to student housing and/or campus and/or all other College of Medicine activities or privileges for which the student might otherwise be eligible, as the Executive Associate Dean for Student Affairs may determine to be appropriate.

C) Rights in Disciplinary Action

1) The following rights apply to a student in legal or administrative proceedings that might result in expulsion, dismissal or suspension under the disciplinary code. Students subject to less severe sanctions may be afforded, but are not guaranteed, the following rights, at the discretion of the Executive Associate Dean for Student Affairs or a designee.
   (a) Right to be informed in writing of all charges at least three class days before any hearing may proceed.
   (b) Right to waive the three-day notice of charges.
   (c) Right to reasonable access to the case file, which shall be maintained in the Office of Student Affairs.
   (d) Right to remain silent.
(e) Right to the consultation of an attorney. An attorney may appear at an administrative hearing with the accused student to provide advice, but may not represent the student or directly question or cross-examine witnesses.

(f) Right to question witnesses against the accused.

(g) Right to review all evidence brought against the accused.

(h) Right to present witnesses.

(i) Right to an open hearing.

(j) Right to a written statement of the findings of the hearing.

2) The focus of inquiry in disciplinary proceedings shall be the guilt or innocence of those accused of violating College regulations. Formal rules of evidence shall not be applicable, nor shall deviations from prescribed procedures necessarily invalidate a decision or proceeding unless significant prejudice to the student or College may result.

3) In all proceedings, the accused shall be presumed innocent until it is proven that a violation of College regulations occurred.

4) In all judicial proceedings, the burden of proof shall rest with those bringing the charges, and such burden of proof shall be by a preponderance of the evidence.

5) A student may not be expelled, dismissed or suspended (except interim suspension as provided for above) prior to an administrative hearing. However, when the Executive Associate Dean for Student Affairs believes that the presence of a student on campus poses a continuing danger to persons or property or presents a threat of disrupting the academic process, an interim suspension may be imposed. An administrative hearing will be scheduled as soon thereafter as practicable.

D) Disciplinary Hearing Procedures

1) Hearings shall be conducted by a judicial body consisting of one or more persons appointed by the Dean of the College of Medicine or designee according to the following guidelines:

(a) Hearings normally shall be conducted in private.

(b) Admission of any person to the hearing shall be at the discretion of the judicial body and/or its chairperson. All procedural questions are subject to the final decision of the chairperson of the judicial body.

(c) In hearings involving more than one accused student, the chairperson of the judicial body, in his or her discretion, may permit the hearings concerning each student to be conducted separately.

(d) The complainant and the accused have the right to be assisted by any advisor they choose, at their own expense. The advisor may be an attorney. Complainants and/or the accused are responsible for presenting their own case and, therefore, advisors are not permitted to speak or to participate directly in any hearing before a judicial body. If the accused chooses to have an attorney present, the Executive Associate Dean for Student Affairs shall be notified not later than one week prior to the hearing.

(e) The complainant, the accused and the judicial body shall have the privilege of presenting witnesses, subject to the right of cross-examination by the judicial body.

(f) Pertinent records, exhibits and written statements may be accepted as evidence for consideration by a judicial body at the discretion of the chairperson.

(g) There shall be a single verbatim record, such as a tape recording of all hearings before a judicial body. The records shall be the property of the University.

(h) After the hearing, the judicial body shall determine (by majority vote if the judicial body consists of more than one person) whether the student has violated each section of the Student Code of Conduct which the student is charged with violating. The judicial body's
determination shall be made on the basis of whether it is more likely than not that the accused student violated the Student Code.

(i) The judicial body shall recommend to the Dean of the COM one of the following actions:

(i) Acquittal
(ii) Expulsion
(iii) Dismissal
(iv) Suspension
(v) Deferred suspension
(vi) Alternate sanctions they feel may be appropriate
(vii) Minor action(s) as defined below.

(ii) The Dean may:

(i) Accept the recommendation of the judicial body;
(ii) Not accept or modify the recommendation of the judicial body;
(iii) Return the recommendation to the judicial body with recommendations for further action.
(iv) The decision of the Dean is final.

(iii) After being notified of the final decision, if the student feels that the College of Medicine did not properly follow its established procedures, then an additional written appeal may be forwarded to the TAMU First Professional Appeals Panel within 10 business days (based on COM academic calendar). The rules for this Panel are found in TAMU Student Rule 62. This step exhausts the student’s appeal options and the First Professional Appeals Panel decision is final.

III) Disciplinary Penalties

A) Disciplinary penalties are categorized as major and minor actions. Once students have been finally assessed a major disciplinary action as punishment, no more severe major action may be assessed against them by any higher University authority.

B) Major Actions (in order of decreasing severity):

1) Expulsion: Separation of the student from the University whereby the student is not eligible for readmission to this University.

2) Dismissal: Separation of the student from the University for an indefinite period of time. Readmission to the University may be possible in the future, but no specific time for a decision is established.

3) Suspension: Separation of the student from the University for a definite period of time. The student is not guaranteed readmission at the end of such period of time, but is guaranteed a review of the case and a decision regarding eligibility for readmission.

4) Deferred Suspension: The sanction of Suspension may be placed in deferred status. If the student is found in violation of any University regulation during the time of Deferred Suspension, the Suspension takes effect immediately without further review. Additional disciplinary action appropriate to the new violation also may be taken. A student who has been issued a Deferred Suspension sanction is deemed "not in good standing" with the University. "Being not in good standing" includes the following restrictions:

(a) Ineligibility to hold an office in any student organization recognized by the College or to hold any elected or appointed office of the University.
(b) Ineligibility to represent the College of Medicine to anyone outside the University community in any way, including representing the University at any official function, intercollegiate athletics or any forms of intercollegiate competition or representation.
(c) Ineligibility to receive a College administered scholarship when the length of the Deferred Suspension is greater than one semester.

(d) Additional restrictions or conditions also may be imposed, depending on the nature and seriousness of the misconduct.

C) Minor Actions (no order of severity is established for minor actions)

1) Conduct Probation: An official warning that the student's conduct is in violation of the College of Medicine's Student Code of Conduct, "Basic Policy," or the Penal Code of the State of Texas but is not sufficiently serious to warrant expulsion, dismissal or suspension. A student on conduct probation is deemed "not in good standing" with the University. This sanction includes the same restrictions listed in Section 1.d. above.

2) Loss of Campus Housing Privilege: Removal from College housing for disciplinary reasons.

3) Deferred Loss of Campus Housing Privilege: The sanction of Loss of Campus Housing Privilege may be placed in deferred status. If a student is found in violation of any regulation during the time of the deferred sanction, removal from housing takes effect immediately without further review. Additional disciplinary action appropriate to the new violation also may be taken.

4) Letter of Enrollment Block: A letter stating that the student may not reenter the College of Medicine without prior approval through the Senior Associate Dean for Student Affairs if enrollment has been blocked for a previous disciplinary problem or for medical reasons.

5) Letter of Reprimand: A letter that makes a matter of record any incident that reflects unfavorably on the student or the College.

6) Warning: Admonition of a student for actions unbecoming to the College of Medicine community.

7) Community/University Service: A student may be offered an opportunity to complete a specified number of hours of Community/University Service in lieu of other sanctions. The type of Community/University Service must be approved by the hearing officer/panel.

8) Restrictions: The withdrawal of specified privileges for a definite period of time, but without the additional stipulations contained in the imposition of conduct probation. The restrictions involved will be clearly defined.

9) Restitution: A payment for financial injury to an innocent party in cases involving theft, destruction of property or deception. The assessed costs to be paid may be in addition to receipt of any of the above sanctions.

10) Loss of Parking Privileges on Campus: Revocation of campus vehicle registration and forfeiture of permit.

11) Other sanctions or stipulations appropriate for the violation.

12) Malicious Complaints: If it is determined that a complaint or allegation is totally without foundation, the complainant may be subject to disciplinary action.

D) All sanctions or penalties, either minor or major, may be reported to the Aggie Honor System Office for monitoring. Additional sanctions are possible by the University.
APPENDIX IV
TECHNICAL STANDARDS FOR COMPLETION OF THE CURRICULUM

It is the policy of the Texas A&M Health Science Center (TAMHSC) College of Medicine that no person shall be denied admission nor graduation on the basis of any disability, provided that the person demonstrates the abilities to meet the minimum standards set forth herein. Standards are developed as criteria to achieve the Doctor of Medicine degree in preparation for post-graduate training in any of the varied fields of medicine and for licensure as a practicing physician. Further, the safety of the patient, on whom the medical education process is largely focused, must be guarded as the final and ultimate consideration. Therefore, it is not only reasonable but essential for good patient care to require minimum standards for the education of physicians.

The College of Medicine recognizes that certain student disabilities can be accommodated without compromising the standards required by the College and the integrity of the curriculum. The College of Medicine is committed to the development of innovative and creative ways of opening the curriculum to competitive and qualified disabled candidates, while protecting the care of patients.

Development of the Medical Curriculum
The faculty of the College of Medicine is charged to: devise a curriculum that provides the student with the fundamental principles of medicine, acquire the skills of critical judgment based on evidence and experience, and develop an ability to use principles and skills wisely in solving problems of disease. In designing the curriculum, the faculty introduces current advances in the basic and clinical sciences, including therapy and technology, changes in the understanding of disease, and the effect of social needs and demands on medical care. The faculty should foster in students the ability to learn through self-directed, independent study throughout their professional lives.

Finally, the faculty of each discipline should set the standards of achievement for all students in the study of that discipline. Examinations should measure cognitive learning, mastery of basic clinical skills, the ability to use data in realistic problem solving, and respect for the rights and dignity of patients. This institution has in place a system of assessment which assures that students have acquired and can demonstrate on direct observation the core clinical skills and behaviors needed in subsequent medical training.

Abilities and Skills Requisite for Completion of the College of Medicine Curriculum
In the selection of students and in their progress through the curriculum, the College of Medicine faculty is guided by standards set by the Liaison Committee for Medical Education (LCME). The faculty places strong emphasis on the academic achievements of applicants, including performance in the sciences relevant to medicine. This includes evidence of satisfactory scholastic achievement as indicated by grade point averages (GPA) and scores on the Medical College Admission Test (MCAT).

Breadth of education and life experiences are deemed important in the selection process. The faculty is equally cognizant of its responsibilities to patients who will be a part of the educational process and to future patients who will entrust their welfare and lives to medical school graduates. They, therefore, consider carefully the personal and emotional characteristics,
motivation, industry, maturity, resourcefulness, and personal health required of all students so that they become effective physicians.

Because the M.D. degree signifies that the holder is a physician prepared for entry into the practice of medicine within postgraduate training programs, it follows that graduates must acquire a foundation of knowledge in the basic and clinical sciences that will permit the pursuit of a variety of careers in medicine.

Candidates for the M.D. degree must have somatic sensation and the functional use of the senses of vision and hearing. Candidates must have the functional use of the senses of equilibrium, smell, and taste so as to be able to diagnose patients’ problems. Additionally, they must have sufficient exteroceptive sense (touch, pain, and temperature), proprioceptive sense (position, pressure, movement, stereognosis and vibratory) and motor function to permit them to carry out the activities described in the sections which follow. They must be able consistently, quickly, and accurately to integrate all information received by whatever sense(s) employed, and they must have the intellectual ability to learn, integrate, analyze and synthesize data.

A candidate for the M.D. degree must have abilities and skills in six essential areas: (1) observation, (2) communication, (3) motor, (4) intellectual-conceptual, integrative, and quantitative, (5) behavioral and social, and (6) ethical. Technological compensation can be made for disabilities in some of these areas; but a candidate should be able to perform in a reasonably independent manner. The use of a trained intermediary to observe or interpret information or to perform procedures compromises the essential function of the physician and may jeopardize the safety of the patient. The six areas of abilities/skills are detailed as follows:

**Observation:** The candidate must be able to observe demonstrations and experiments in the basic sciences. A candidate must be able to observe a patient accurately at a distance and close at hand. Observation necessitates the functional use of the sense of vision and somatic sensation. It is enhanced by the functional use of the sense of smell.

**Communication:** A candidate should be able to speak; to hear; and to observe patients in order to elicit information, to describe changes in mood, activity and posture; and to perceive non-verbal communications. A candidate must be able to communicate effectively with patients. Communication includes not only speech but reading and writing. The candidate must be able to communicate effectively and efficiently in oral and written form with patients and with all members of the health care team.

**Motor:** Candidates should have sufficient motor function to elicit information from patients by palpation, auscultation, percussion, and other diagnostic maneuvers. A candidate should be able to execute motor movements reasonably required to provide general care and emergency treatment to patients. Examples of emergency treatment reasonably required of physicians are cardiopulmonary resuscitation, administration of intravenous medication, application of pressure to stop bleeding, opening of obstructed airways, suturing of simple wounds, and 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 clinical skill demanded of physicians, requires all of these intellectual abilities. In addition, the candidate should be able to comprehend three-dimensional relationships and to understand the spatial relationships of structures.

**Behavioral and Social Attributes:** A candidate must possess the emotional health required for full utilization of his/her intellectual abilities; the exercise of good judgment; the prompt completion
of all responsibilities attendant to the diagnosis and care of patients; and the development of mature, sensitive, and effective relationships with patients. Candidates must be able to function effectively under stress. They must be able to adapt to changing environments, to display flexibility and to learn to function in the face of uncertainties and ambiguities inherent in the clinical problems of many patients. Compassion, integrity, concern for others, interpersonal skills, interest and motivation are all personal qualities that should be assessed during the admissions and educational processes. 

**Ethical Standards:** A candidate must demonstrate professional demeanor and behavior, and must perform in an ethical manner in all dealings with peers, faculty, staff, and patients. Questions of breech of ethical conduct will be referred to the Associate Dean for Student Affairs and Admissions for resolution under the Student Code of Conduct. 

In determining the minimum standards for completion of the medical curriculum, the TAMHSC College of Medicine recognizes that certain disabilities can be accommodated without compromising the standards required by the College of Medicine or the integrity of the curriculum. The College of Medicine is committed to the development of innovative and creative ways of opening the curriculum to competitive and qualified disabled candidates, while protecting the care of patients. At the same time, the college recognizes the essential need to preserve the standards and integrity of the curriculum, requisite for the competent and effective physician. Since the treatment of patients is an essential part of the educational program, the health and safety of those patients must be protected at all costs. Therefore, it is not only reasonable but essential for good patient care to require minimum standards for the education of physicians.
APPENDIX V

APPEAL OF CAMPUS SELECTION

Students will be generally assigned to a clinical campus prior to matriculation when possible, or as soon as campus numbers are known thereafter. Assignment is done by a Campus Designation Committee which takes into account student preference requests. The Committee has representatives from each clinical campus, two fourth year student representatives who are Student Advocates, and receives assistance from the Office of Student Affairs & Admissions. Assignments are subject to campus minimum and maximum capacity numbers determined each year by the COM administration. Students may also be selected for individual clerkship rotations at a campus other than their primary site for one or more clerkships.

Occasionally, issues may arise after assignment where a student would wish to request a change of their clinical campus designation. An opportunity will be given to students to request such a change from their original assignment approximately six months prior to the end of their first pre-clinical year. After this point, changes are generally done only for very pressing reasons. Such requests should be forwarded in writing to the Office of Students Affairs who will also consult with the Campus Designation Committee, as needed.

Any student who wishes to change campuses for a select rotation may do so by requesting, in writing, a change to the dean(s) for Student Affairs. Requests are routinely reviewed prior to clinical rotation selections and requests are granted on a space available basis.

Students may also request a change of campus designation for the 4th year and requests may be granted on a space available basis. All requests to change a campus designation after matriculation are reviewed by the Campus Designation Committee. The decision of the Committee is final.

It should be understood that the College of Medicine will try its best to honor a student’s campus selection request; however, given the need to balance numbers at different location or rotations, this may not always be possible. A student wishing to appeal their initial campus designation may file a written appeal request through the Office of Admissions who will share it with the Campus Designation Committee. Their decision is final. Students wishing to appeal a campus designation after final assignments are made may submit an appeal to Committee for reconsideration. If the request is denied, the student may lodge a final appeal with the Executive Associate Dean for Education & Academic Programs whose decision is final. Again, it must be understood that these decisions are often subject to very real and inflexible campus minimum and maximum numbers.
APPENDIX VI

COMPUTER CRIMES

§ 33.01. Definitions

In this chapter:

1. "Access" means to approach, instruct, communicate with, store data in, retrieve or intercept data from, alter data or computer software in, or otherwise make use of any resource of a computer, computer network, computer program, or computer system.

2. "Aggregate amount" means the amount of:

   (A) any direct or indirect loss incurred by a victim, including the value of money, property, or service stolen or rendered unrecoverable by the offense; or

   (B) any expenditure required by the victim to verify that a computer, computer network, computer program, or computer system was not altered, acquired, damaged, deleted, or disrupted by the offense.

3. "Communications common carrier" means a person who owns or operates a telephone system in this state that includes equipment or facilities for the conveyance, transmission, or reception of communications and who receives compensation from persons who use that system.

4. "Computer" means an electronic, magnetic, optical, electrochemical, or other high-speed data processing device that performs logical, arithmetic, or memory functions by the manipulations of electronic or magnetic impulses and includes all input, output, processing, storage, or communication facilities that are connected or related to the device.

5. "Computer network" means the interconnection of two or more computers or computer systems by satellite, microwave, line, or other communication medium with the capability to transmit information among the computers.

6. "Computer program" means an ordered set of data representing coded instructions or statements that when executed by a computer cause the computer to process data or perform specific functions.

7. "Computer services" means the product of the use of a computer, the information stored in the computer, or the personnel supporting the computer, including computer time, data processing, and storage functions.

8. "Computer system" means any combination of a computer or computer network with the documentation, computer software, or physical facilities supporting the computer or computer network.

9. "Computer software" means a set of computer programs, procedures, and associated documentation related to the operation of a computer, computer system, or computer network.

10. "Computer virus" means an unwanted computer program or other set of instructions inserted into a computer's memory, operating system, or program that is specifically constructed with the ability to
replicate itself or to affect the other programs or files in the computer by attaching a copy of the unwanted program or other set of instructions to one or more computer programs or files.

(11) "Data" means a representation of information, knowledge, facts, concepts, or instructions that is being prepared or has been prepared in a formalized manner and is intended to be stored or processed, is being stored or processed, or has been stored or processed in a computer. Data may be embodied in any form, including but not limited to computer printouts, magnetic storage media, laser storage media, and punch cards, or may be stored internally in the memory of the computer.

(12) "Effective consent" includes consent by a person legally authorized to act for the owner. Consent is not effective if:

(A) induced by deception, as defined by Section 31.01, or induced by coercion;

(B) given by a person the actor knows is not legally authorized to act for the owner;

(C) given by a person who by reason of youth, mental disease or defect, or intoxication is known by the actor to be unable to make reasonable property dispositions;

(D) given solely to detect the commission of an offense; or

(E) used for a purpose other than that for which the consent was given.

(13) "Electric utility" has the meaning assigned by Section 31.002, Utilities Code.

(14) "Harm" includes partial or total alteration, damage, or erasure of stored data, interruption of computer services, introduction of a computer virus, or any other loss, disadvantage, or injury that might reasonably be suffered as a result of the actor's conduct.

(15) "Owner" means a person who:

(A) has title to the property, possession of the property, whether lawful or not, or a greater right to possession of the property than the actor;

(B) has the right to restrict access to the property; or

(C) is the licensee of data or computer software.

(16) "Property" means:

(A) tangible or intangible personal property including a computer, computer system, computer network, computer software, or data; or

(B) the use of a computer, computer system, computer network, computer software, or data.

§ 33.02. Breach of Computer Security

(a) A person commits an offense if the person knowingly accesses a computer, computer network, or computer system without the effective consent of the owner.
(b) An offense under this section is a Class B misdemeanor unless in committing the offense the actor knowingly obtains a benefit, defrauds or harms another, or alters, damages, or deletes property, in which event the offense is:

(1) a Class A misdemeanor if the aggregate amount involved is less than $1,500;

(2) a state jail felony if:

(A) the aggregate amount involved is $1,500 or more but less than $20,000; or

(B) the aggregate amount involved is less than $1,500 and the defendant has been previously convicted two or more times of an offense under this chapter;

(3) a felony of the third degree if the aggregate amount involved is $20,000 or more but less than $100,000;

(4) a felony of the second degree if the aggregate amount involved is $100,000 or more but less than $200,000; or

(5) a felony of the first degree if the aggregate amount involved is $200,000 or more.

(c) (Blank).

(d) A person who is subject to prosecution under this section and any other section of this code may be prosecuted under either or both sections.

§ 33.03. Defenses

It is an affirmative defense to prosecution under Section 33.02 that the actor was an officer, employee, or agent of a communications common carrier or electric utility and committed the proscribed act or acts in the course of employment while engaged in an activity that is a necessary incident to the rendition of service or to the protection of the rights or property of the communications common carrier or electric utility.

§ 33.04. Assistance by Attorney General

The attorney general, if requested to do so by a prosecuting attorney, may assist the prosecuting attorney in the investigation or prosecution of an offense under this chapter or of any other offense involving the use of a computer.
The purpose of this document is to establish Texas A&M University Health Science Center College of Medicine policy for the initiation of prophylaxis after exposure to the human immunodeficiency virus (HIV), hepatitis B virus (HBV), and hepatitis C virus (HCV).^ Updated US Public Health Service Guidelines for the Management of Occupational Exposure to HIV and Recommendations for Postexposure Prophylaxis; published Sept. 25, 2013. http://stacks.cdc.gov/view/cdc/20711

A bloodborne pathogen exposure potentially occurs when there is:

- percutaneous injury (e.g., needlestick; laceration or puncture with a sharp object),
- contact with mucous membranes or ocular membranes, or
- contact with non-intact skin (e.g., skin that is chapped, abraded)

with blood, tissue, or other potentially infectious fluid: cerebrospinal, synovial, pleural, peritoneal, pericardial, and amniotic.

Feces, nasal secretions, saliva, sputum, sweat, tears, urine, and vomitus are not considered potentially infectious unless they are visibly bloody. Semen and vaginal secretions have not been implicated in occupational transmission from patients to healthcare providers.

Risk of HIV infection: The average risk of HIV infection due to all types of reported percutaneous exposures to HIV-infected blood is 0.3% and 0.09% from a mucous membrane exposure. A percutaneous exposure is defined as a needlestick or laceration/ puncture with a sharp object. The risk appears to be greater than 0.3% for exposure to HIV positive patients involving deep injury, visible blood on the device causing the injury, a device previously placed in the source patient’s vein or artery, or the source patient dying of AIDS within 60 days post-exposure.

Initiation of prophylaxis is recommended for high risk exposure to HIV. Examples include:

- when source is known to have HIV or rates of HIV infection in the patient population are high (e.g., IV drug users, men who have sex with men, Haitians); large bore hollow needle or deep injury; visible blood on the injury device; or injury with a needle that had been placed in a source patient’s artery or vein.

Risk of Hepatitis B infection: The average risk of Hepatitis B virus (HBV) infection in susceptible persons after percutaneous exposure to HBV-infected blood is 6-30%. Hepatitis B vaccine will protect you if you have developed antibodies.

Risk of Hepatitis C infection: HCV is most efficiently transmitted through large or repeated percutaneous exposure to infected blood (e.g., through transfusion of blood from unscreened donors or through use of injecting drugs). There is no vaccine against HCV and no treatment after an exposure that will prevent infection. Neither immune globulin nor antiviral therapy is recommended after exposure.
Precautions to take during the period after the exposure incident for a known HIV positive case or high risk exposure:

- Do not share a toothbrush or a razor.
- Avoid pregnancy until HIV infection is ruled out.
- Use safe sex practices with condoms for barrier protection until HIV infection has been ruled out.
- Do not donate blood, plasma, organs, tissue, or semen during the follow up period.
- Seek medical evaluation of any acute illness that occurs during the follow up period.

Students will be treated as an employee for initial management of a needle stick by our clinical affiliates in terms of exposure evaluation, potential initiation of prophylaxis, and incident follow-up (on the initial lab tests), however students are not eligible for workers’ compensation insurance. If the hospital or clinic will not cover the cost but will accept the student’s insurance, the TAMU College of Medicine will reimburse the cost of the insurance co-pay and/or deductible, or any amount not paid by insurance, up to a maximum of $500 per case. This only applies to expenses incurred at the initial visit. The expenses incurred for any follow up visits, treatment, or lab work after the initial visit will be borne by the student and their insurance. TAMU College of Medicine assumes no fiscal responsibility for the treatment of students who develop an illness as a result of an exposure. Long term management, if necessary, will be the responsibility of student and student’s private insurance.

In order to be eligible to receive the Needle Stick Policy reimbursement, each student must comply with the following requirements:

1. Student must first submit expenses and seek reimbursement from the student’s private insurance company
2. Student must submit the Student Accident and Needlestick Injury Report Form to the respective campus student services coordinator or the Office of Student Affairs
3. Student must initiate the request for reimbursement from TAMU College of Medicine within 30 days from the date the student’s insurance claim is approved/denied. A request for reimbursement must be submitted in writing along with a copy of student’s medical bill(s) and proof of payment for out of pocket expenses, to the respective campus student coordinator or the Office of Student Affairs.

Updated July 1, 2017
CHECKLIST:

If you experienced a needlestick or sharps injury or were exposed to the blood or other body fluid of a patient during the course of your work, immediately follow these steps:

☐ Wash needlesticks and cuts with soap and water; flush splashes to the nose, mouth, or skin with water; irrigate eyes with clean water, saline, or sterile irrigants

☐ Notify each of the following as soon as possible:
  ☐ Your Faculty Supervisor—request time off for immediate post-exposure care
  ☐ Your Clerkship Director
  ☐ Student Affairs Office (through the Student Coordinator for you campus) and fill out the Student Accident and Injury Report.

☐ Seek post-exposure care:
  ☐ While you are on your clinical rotations, needle stick injuries will be initially addressed at the facility where the injury occurs. For most hospitals, you should contact the nursing supervisor or charge nurse for specific instructions, and go to the ER for exposure management as soon as possible. You will be assisted with filling out the proper paperwork.

☐ Post Exposure Prophylaxis (PEP) should ideally be started as soon as possible for high risk HIV exposure, preferably within hours of exposure (but may be initiated up to 72 hours post exposure). A regimen containing 3 (or more) drugs is now recommended. The most up-to-date procedure, recommended by the Centers for Disease Control and Prevention (CDC), should be followed for management of this exposure.

Normally this is a 28-day course of anti-retroviral medications, with an initial prescription for 3 to 5 days while source blood is tested. Be sure to mention if you have a sulfa allergy, have intolerance to certain antivirals previously administered, or might be pregnant. Pregnant women should reserve prophylaxis for high risk exposures and seek clearance from their obstetrician to take the medications.

☐ After an exposure, your blood should be collected for baseline testing for HIV, HBV and HCV serological status.

☐ HBV vaccine should be offered if source is known to be positive for hepatitis B or is high risk for hepatitis B, and student has not been vaccinated against HBV. Student should be offered HBIG if they did not develop antibodies after prior HBV vaccination.

☐ Tetanus/diphtheria booster for percutaneous injury if none within last 10 years.

☐ A follow-up visit should be scheduled within 72 hours to review the results of baseline testing (if rapid tests are not used), provide additional counseling and support, assess medication side effects and adherence, and provide additional medication if appropriate (with an altered regimen if indicated by side effects or laboratory test results). If the source-patient HIV

* http://aidsinfo.nih.gov/contentfiles/lvguidelines/aa_recommendations.pdf Guidelines for the Use of Antiretroviral Agents in HIV-1-Infected Adults and Adolescents
status is determined to be **negative**, prophylaxis will be discontinued and no follow up lab for HIV is necessary.

- **If PEP is initiated, the student should be monitored for drug toxicity by testing at baseline and again 2 weeks after starting PEP.** This should include a CBC and renal and hepatic function tests.

- Additional follow up visits are determined by the results of the initial baseline lab work drawn on the source of the occupational exposure. Any additional testing cost is borne by the student.
  - Source is **known HIV positive**: obtain HIV antibody at 6 weeks, 3 months, and 6 months
  - Source is **known HCV positive**: obtain HCV antibody at 6 wks, 3 months, and 6 months
  - **Unknown source**: obtain HIV and HCV antibody at 3 months and 6 months

- Submit request to Office of Student Affairs for reimbursement for medical expenses for initial visit not paid for by your insurance within 30 days of receiving the final insurance payment for services.
APPENDIX VIII

Miscellaneous Complaints

Formal processes are outlined elsewhere in this Student Handbook for complaints and problems such as academic and grade issues, professionalism issues, challenging what is in one’s written record, etc. For miscellaneous complaints a student wishes to bring to the attention of the College that do not fit into those areas where formal mechanisms are outlined, one may pursue a complaint via a number of different venues listed below. NOTE: This policy only applies to complaints for which defined processes do not exist elsewhere.

1. Informally – One should always first try to resolve the problem informally by talking with the person in charge over that area or their supervisor. This is the preferred route and is the one apt to be the most successful.

2. Formally – If one has attempted resolution via an informal route without success and one would like to pursue the matter further, a formal complaint may be filed in writing with the COM Office of Student Affairs. This office will try to help resolve the matter. If it cannot be easily resolved, a formal appeal may be filed.

3. Appeal – If there has been no resolution to the complaint after following the above process, then if one wishes, the decision may be appealed by submitting a formal complaint in writing to the Executive Associate Dean for Education and Academic Programs of the College of Medicine. The Dean may resolve the complaint, dismiss it, or form a faculty appeal panel to make a recommendation prior to making a final decision. The decision of the Executive Dean is final. The procedure followed for such an appeal panel will be identical to that for grade appeals.
APPENDIX IX

TEXAS A&M HEALTH SCIENCE CENTER
COLLEGE OF MEDICINE INTERNAL POLICY

Mistreatment of Students
Approved by Dean’s Executive Committee: February 2, 2012
Approved by Academic Council: February 14, 2012
Revised: 10/11/18

NOTE: At the time of publication of this COM Student Handbook, new initiatives were being placed into effect regarding the learning environment. These will alter procedures for how reports of mistreatment are handled and adjudicated. As such, the process below is being changed and updated. Interim updates will be published as new procedures are developed.

I. Preface

The College of Medicine is committed to providing a positive learning environment in which students can meet their academic goals based on mutual respect in the teacher/learner relationship. Both parties must be sensitive to the needs of others and differences in gender, race, sexual orientation, religion, age or disability. As outlined in the Standards of Conduct in the Teacher-Learner Relationship, belittlement, intimidation and humiliation are unacceptable for effective learning and undermine self-esteem. Breaches involving student mistreatment may result in a faculty or staff member being sanctioned or the loss of faculty and/or staff appointment. The College of Medicine internal policy for dealing with claims of student mistreatment or unprofessional behavior is described here. This policy addresses student mistreatment involving College of Medicine employees. However, we realize that a student may experience mistreatment from residents, affiliate staff, or patients. These instances will be discussed in Section V of the document.

II. Definitions

Mistreatment: mistreatment refers to unprofessional behavior in the teacher/learner relationship, including belittlement, intimidation, humiliation, discrimination based on race, religion, ethnicity, socioeconomic status, gender, age and sexual orientation, and sexual harassment.

Inquiry: the assessment of whether an allegation of mistreatment has substance. An inquiry may lead to different outcomes ranging from exonation and dismissal of the claim, to the verification of the claim requiring corrective and/or punitive actions.

Complainant: individual who initiates the procedures described in this internal policy by reporting possible mistreatment.

Respondent: individual who is the subject of information provided by a complainant; this term includes faculty members, residents, staff, affiliate staff, patients, others.
1) **Reporting**

Students may report mistreatment or unprofessional conduct by faculty members, residents, other staff members, nurses, affiliate staff, patients, or others through multiple mechanisms, such as, but not limited to, the Office of Student Affairs, the Office of Academic Affairs, the Aggie Conduct Awareness Form on the Reporting Student Mistreatment COM website, student advocates, and clerkship directors.

2) **Policy for Resolution of Claims of Mistreatment**

All reports of student mistreatment will be immediately directed to the Learning Environment Rapid Response Team (LERRT) and then promptly forwarded to the Office of the Vice Dean of Faculty Affairs (V DFA). Upon receipt of a written report from a student reporting mistreatment, the Vice Dean of Faculty Affairs (V DFA), in consultation with the Associate Dean for Academic Affairs and the Executive Associate Dean for Student Affairs, will determine the nature and severity of the complaint in order to institute an appropriate resolution process.

The V DFA will initiate an internal investigation which may include, as necessary, Phase/Block Leaders, Clerkship Directors, Department Chairs, the respondent, and if appropriate, the complainant. The V DFA will prepare a summary report of the internal review which may include the plan of action to resolve the issue. The Dean of the College of Medicine is periodically informed of breaches in conduct through review of the AAMC Questionnaires and the professionalism and mistreatment surveys prepared by the Office of Evaluation and Assessment.

In some cases, the V DFA may convene an inquiry. The Associate Dean of Academic Affairs will be notified of the need for an inquiry. An inquiry is a fact-finding mission designed to thoroughly review the complaint, and to protect the rights of the complainant as well as faculty, residents or staff alleged to have engaged in mistreatment. Anonymous claims will be confidentially investigated, maintaining complainant anonymity to the extent possible, but in some cases, anonymity cannot be guaranteed. An Ad Hoc Mistreatment Team appointed by the V DFA in consultation with the Associate Dean of Academic Affairs and the Executive Associate Dean of Student Affairs will conduct the inquiry. The team may utilize the services of other individuals and entities in order to make a complete inquiry as to whether evidence of mistreatment exists which may warrant a reprimand, sanctions or loss of faculty appointment. The team shall prepare a written report stating what evidence was reviewed, summarizing relevant interviews, and including any conclusions reached as a result of the inquiry. The respondent will be given a copy of the inquiry report, and if he or she chooses to comment on the report, his or her comments shall be made a part of the record.

The written record of the inquiry shall be forwarded to the Dean of the College of Medicine. If the findings of the inquiry provide sufficient basis for a major breach of the *Standards of Conduct of the Student-Learner Relationship*, the Dean of the College of
V. Resolution of claims when the respondent is not a TAMHSC College of Medicine employee

On occasions when the complainant raises an issue concerning a resident, nurse, patient, or others, and the respondent is not a College of Medicine employee, the complaint will be handled in the same manner as described in Section IV above. However, the employer of the complainant will be a part of the inquiry. The College of Medicine will treat the complaint with the same seriousness as internal complaints and will work with the employer to make sure that the process is thorough, fair, and protects the rights of the students and the respondents.

VI. Appeals Process

Respondents may appeal the Dean’s decision according to the guidelines found in TAMHSC Internal Policy 32.01.01.Z0.01 Complaint and Appeal Procedures for Faculty. Appeals must be made on the basis that the decision was: (i) a violation of Texas A&M University System policies or TAMHSC rules, (ii) a violation of academic freedom of the respondent, (iii) made after inadequate consideration of the complaint; or (iv) made for an illegal reason. An illegal reason is defined by TAMHSC Policy 32.01.01.Z0.01 as a decision based on race, sex, age, national origin, religion, creed, color, or disability unrelated to the performance of teaching duties. The respondent must file a written appeal with the TAMHSC Office of the Vice President of Academic Affairs (VPAA). The VPAA will submit the appeal to a Faculty Grievance Committee comprised of members of the TAMHSC Committee on Academic Freedom, Ethics, Responsibilities, Rights and Tenure (CAFERRT). The Faculty Grievance Committee will forward its recommendations to the VPAA. The decision of the VPAA is final. Respondents who are not College of Medicine employees will have access to appeals procedures as defined by the affiliated institution.

VII. Responsibilities

Vice Dean of Faculty Affairs (VDFA):
1. Determine the severity of any potential claim of student mistreatment;

2. Define the scope of the internal investigation or inquiry in accordance with the terms of this policy;
3. Identify and secure the necessary and appropriate faculty members to carry out a thorough and authoritative evaluation of the relevant evidence should an inquiry be required;

4. Take precautions to ensure the impartiality of those involved in an inquiry;

5. Prepare and maintain all documentation gathered or generated during an internal investigation or inquiry. This documentation shall be maintained in a secure location for a period of three years after the conclusion of an internal review or inquiry.

**Associate Dean of Academic Affairs:**
1. Assist in the determining the severity of any potential claim of student mistreatment;

2. Identify and secure the necessary and appropriate faculty members to carry out a thorough and authoritative evaluation of the relevant evidence should an inquiry be required.

**Senior Associate Dean for Student Affairs:**
1. Assist in the determining the severity of any potential claim of student mistreatment;

2. Identify and secure the necessary and appropriate faculty members to carry out a thorough and authoritative evaluation of the relevant evidence should an inquiry be required.

3. Provide support and ensure due process is followed on behalf of the complainant.

**Dean, College of Medicine:**
1. Review the Record of Inquiry, and if necessary, implement appropriate corrective or punitive action.

**VIII. Overall Office of Responsibility**

Faculty Affairs
Appendix X

Dean’s Letter Information

Part of applying to residency is submission of your Medical Student Performance Evaluation (MSPE), often called your ‘Dean’s Letter’. This letter is created by your school and summarizes your performance during your medical school career. Specifically, it ends with your last third year course. It does not include fourth year rotations, unless you are off cycle, in which case it will only include fourth year rotations from your spring semester.

Typically, this letter is written by one of your Student Affairs Deans. It should be understood that this letter is not a letter of recommendation, nor it is our personal evaluation of you; rather, it is a summary of how you were evaluated by others as you progressed through our curriculum. Additionally, the format for this letter is proscribed by the Association of American Medical Colleges (AAMC) and the guidelines for what must be in it are followed by all schools. At Texas A&M, your letter will usually be written by whichever Student Affairs Dean is the primary one designated for your home campus. Given the fixed format and how this is not a personal letter of recommendation, it should end up sounding about the same, regardless of who wrote it. Nevertheless, if for any reason you prefer a dean on another campus write it, you are welcome to make that request directly to them. They will be glad to do it, if time and space to work you in permits. For most students, you should plan on contacting the Student Affairs Dean for your campus to schedule a time to meet.

Once your letter has been submitted, it cannot be changed. If you go back into the match in the future, we can add an addendum to the original letter that ends at graduation. The original letter is not changed unless the original information was in error at the time it was written.

Information regarding your clerkship performance will be taken verbatim from your end of clerkship grade summary sheet. We do not add comments from individual evaluations; only what is written in the textbox on the final grade form will be cut and pasted verbatim. It is our policy to not redact any comments. “Below the line” comments on that form are not included. These are intended to provide suggestions for your continued development only. Electives done before the end of the third year are included with summative comments, also cut and pasted verbatim.

The new AAMC MSPE guidelines require us to make comments on your professionalism, including any issues you have had in that area. The specific guidelines we have been given to follow are:

- If the student was cited for unprofessional behavior, please describe the incident and any actions taken to remediate the professionalism concerns. If the student received commendations for exemplary professional behavior, please describe the behavior.
- Describe how the medical school defines professionalism and what it assesses in students.

With regards to any professionalism concerns, it is also a requirement by the National Residency Matching Program (NRMP) to share any professionalism issues that we are aware of which might be reasonably expected to influence one’s ability to match or be licensed. Not to do so is considered to be a Match violation by the school. Further, the NRMP rules require all schools to issue an addendum to the MSPE if such an incident occurs after the October 1 upload of the document. The policy of the COM is to report any incidents that resulted in an action taken by the
COM Student Promotions Committee or if a formal disciplinary action was taken by the COM or the University. This is generally defined as an adverse action. The wording for such a report will be based on what is directed by the AAMC and NRMP Guidelines and will be agreed upon by a group of representatives from both Student Affairs and Academic Affairs.

You will have an opportunity to review your letter prior to its October 1 submission date. You will be able to suggest modifications; however, the final wording will be at the discretion of the letter writer. Please understand that clerkship comments will not be changed and always stand as written, excepting corrections of obvious typographical or factual errors. You are responsible for reviewing your letter prior to the cutoff date for doing so. If you choose not to, your letter will automatically be uploaded as is with all others on October 1. We will do our best to ensure accuracy, but we cannot be responsible for any errors if you did not review it in a timely fashion.