

*Howard University
College of Medicine*



*Policies and Procedures
Manual*

*Howard University
Washington, DC*

2020 - 2021

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CONTENTS

| | |
|---|-----------|
| GLOSSARY | 1 |
| SECTION I | 2 |
| INTRODUCTION..... | 2 |
| SECTION II | 3 |
| HOWARD UNIVERSITY STUDENT HANDBOOK..... | 3 |
| SECTION III | 4 |
| ACCREDITATION STATEMENT..... | 4 |
| SECTION IV | 5 |
| HOWARD UNIVERSITY COLLEGE OF MEDICINE..... | 5 |
| SECTION V | 6 |
| HISTORY OF THE COLLEGE OF MEDICINE..... | 6 |
| SECTION VI | 9 |
| MISSION, VISION AND CORE VALUES..... | 9 |
| SECTION VII | 10 |
| INSTITUTIONAL EDUCATIONAL OBJECTIVES..... | 10 |
| SECTION VIII | 13 |
| REGISTRATION INFORMATION..... | 13 |
| A. Registration for New Entrants, Transfers, and Former Students Returning..... | 13 |
| B. Former Students Returning (FSR)..... | 13 |
| C. Evidence of Official Enrollment..... | 13 |
| D. Absence from the University..... | 13 |
| E. Financial Aid Refunds..... | 13 |
| F. Policies on Payment of Tuition and Fees..... | 13 |
| G. Payment Plans..... | 13 |
| H. Factoring in Financial Aid..... | 14 |
| I. Credit Balance Funds..... | 15 |
| J. Third-Party Sponsors/Special Billing..... | 15 |
| K. Office of Student Financial Services Frequently Asked Questions..... | 15 |
| L. Penalties for Nonpayment or Late Payment..... | 16 |
| M. Financial Clearances..... | 16 |
| N. Orientation..... | 16 |
| SECTION IX | 17 |
| HOWARD UNIVERSITY STUDENTS WITH DISABILITIES..... | 17 |
| A. Eligibility for Services..... | 17 |
| B. Applying for Services..... | 17 |
| C. Determining Accommodations..... | 17 |
| D. Reasonable Accommodations or Lack Thereof..... | 17 |
| E. Filing a Grievance..... | 17 |
| F. Responsibilities of the Office of Student Services..... | 17 |
| G. Responsibilities of the Student..... | 17 |
| H. Responsibilities of the Faculty..... | 18 |

| | | |
|---|---|-----------|
| I. | <i>Guidelines for Documenting Medical Disabilities (Mobility, manual, hearing and visual)</i> | 18 |
| J. | <i>Guidelines for Documenting Learning Disabilities</i> | 18 |
| K. | <i>Interpreting Services</i> | 21 |
| L. | <i>Learning Disability Screening</i> | 21 |
| M. | <i>Note-Taking Assistance</i> | 21 |
| N. | <i>Reading Services</i> | 21 |
| O. | <i>Test Accommodations</i> | 22 |
| OFFICE OF THE PROVOST AND CHIEF ACADEMIC OFFICER | AMERICAN WITH DISABILITIES ACT (ADA) | 23 |
| A. | <i>Purpose</i> | 23 |
| B. | <i>Accommodating Students with Eligible ADA</i> | 23 |
| C. | <i>Commitment</i> | 24 |
| SECTION X | | 25 |
| STUDENT MISTREATMENT POLICY AND THE EDUCATIONAL ENVIRONMENT | | 25 |
| A. | <i>Responsibilities of Teachers</i> | 25 |
| B. | <i>Responsibilities of Learners</i> | 25 |
| C. | <i>Institutional Responsibilities</i> | 26 |
| D. | <i>Mutual Responsibilities</i> | 26 |
| E. | <i>Procedures for Filing Complaints</i> | 27 |
| SECTION XI | | 29 |
| PROFESSIONALISM | | 29 |
| A. | <i>Introduction</i> | 29 |
| B. | <i>Requirements for Professional Behavior</i> | 29 |
| C. | <i>“Early Warning” Incident Reports</i> | 31 |
| CODE OF HONOR, PROFESSIONALISM, AND ETHICS | | 32 |
| A. | <i>Preamble</i> | 32 |
| B. | <i>Statement of the Code of Honor, Professionalism and Ethics</i> | 33 |
| C. | <i>Application of the Code of Honor, Professionalism and Ethics</i> | 34 |
| D. | <i>Honor Council Membership</i> | 34 |
| E. | <i>Procedures for Reporting and Investigating Violations</i> | 35 |
| F. | <i>Order of Honor Council Proceedings</i> | 36 |
| G. | <i>Rules Governing Proceedings</i> | 37 |
| H. | <i>Decision and Penalties</i> | 37 |
| I. | <i>Amendments to the Honor Code</i> | 38 |
| RESOLUTION OF STUDENTS ON PROFESSIONAL STANDARDS..... | | 39 |
| SECTION XII | | 40 |
| STUDENT DRESS CODE..... | | 40 |
| A. | <i>General</i> | 40 |
| B. | <i>Preclinical Guidelines</i> | 40 |
| C. | <i>Clinical Guidelines</i> | 40 |
| D. | <i>Enforcement of Guidelines</i> | 41 |
| SECTION XIII | | 42 |
| ATTENDANCE AND CONDUCT DURING EDUCATIONAL SESSIONS | | 42 |
| SECTION XIV | | 43 |
| CLOSURE OF THE UNIVERSITY | | 43 |
| A. | <i>Scheduled Closure</i> | 43 |

| | |
|---|-----------|
| B. <i>Unscheduled Closure</i> | 43 |
| SECTION XV | 45 |
| EVALUATION AND GRADING | 45 |
| A. <i>Formative and Summative Evaluations</i> | 45 |
| B. <i>Narrative</i> | 45 |
| C. <i>Evaluations by Students</i> | 45 |
| D. <i>Grading</i> | 45 |
| E. <i>First and Second Years</i> | 45 |
| F. <i>Third and Fourth Years</i> | 46 |
| G. <i>Unexcused absence/lateness from Active learning sessions for All Students</i> | 46 |
| H. <i>Professionalism</i> | 46 |
| I. <i>Non-Involvement of Providers for Student Evaluations</i> | 47 |
| J. <i>Official Grades</i> | 47 |
| K. <i>Right to Appeal</i> | 47 |
| SECTION XVI | 48 |
| EXAMINATIONS AND QUIZZES | 48 |
| J. <i>Written Examinations and Quizzes</i> | 48 |
| B. <i>Clinical Skills Examinations for Courses and Clerkships</i> | 49 |
| C. <i>Third Year Clinical Skills Examination</i> | 50 |
| D. <i>Unscheduled Closure and Delayed Opening of the University</i> | 50 |
| E. <i>Reexaminations</i> | 52 |
| SECTION XVII | 54 |
| UNITED STATES MEDICAL LICENSING EXAMINATIONS (USMLE) | 54 |
| A. <i>USMLE Step 1</i> | 54 |
| B. <i>USMLE Step 2</i> | 56 |
| C. <i>Failure of USMLE Step 1 or Step 2 Three Times</i> | 57 |
| SECTION XVIII | 58 |
| SATISFACTORY ACADEMIC PROGRESS | 58 |
| SECTION XIX | 59 |
| ACADEMIC ENHANCEMENT PROGRAMS | 59 |
| A. <i>Student Academic Support Program (SASP)</i> | 59 |
| B. <i>Medical Student Taught Academic Review (MedSTAR)</i> | 59 |
| C. <i>Summer Directed Study Program (SDSP)</i> | 59 |
| D. <i>Reexaminations</i> | 59 |
| E. <i>Repeat Clerkship or Elective</i> | 60 |
| F. <i>Repeat an Academic Year</i> | 60 |
| G. <i>Change in Rotation Schedule (Clinical Years)</i> | 60 |
| H. <i>Personal Challenges</i> | 60 |
| I. <i>Academic Difficulty</i> | 60 |
| SECTION XX | 61 |
| REPEATING STUDENTS | 61 |
| SECTION XXI | 62 |
| ABSENCES | 62 |
| A. <i>Excused Absences from Examinations, Classes, and Rotations</i> | 62 |

| | |
|--|-----------|
| B. <i>Procedures Governing Excused Absences and Make-up Examinations</i> | 63 |
| C. <i>Unapproved absence from the College of Medicine</i> | 64 |
| SECTION XXII | 65 |
| WORK LOAD AND DUTY HOURS | 65 |
| A. <i>Work Load for Years One and Two Students</i> | 65 |
| B. <i>Duty Hours for Years Three and Four Students</i> | 65 |
| SECTION XXIII | 67 |
| PROMOTIONS, HONORS AND OATHS, AND GRADUATION | 67 |
| A. <i>Promotion and Graduation</i> | 67 |
| B. <i>Freshman and Sophomore Years</i> | 67 |
| C. <i>Junior year</i> | 68 |
| D. <i>Senior Year/Graduation</i> | 68 |
| E. <i>Appeal of Clinical Grades</i> | 69 |
| F. <i>Honors and Oath</i> | 69 |
| G. <i>Commencement</i> | 69 |
| H. <i>Graduation</i> | 69 |
| SECTION XXIV | 70 |
| TIME LIMIT TO COMPLETE THE REQUIREMENTS FOR THE M.D. DEGREE | 70 |
| SECTION XXV | 71 |
| APPEALS | 71 |
| A. <i>Preamble</i> | 71 |
| B. <i>General Procedures for filing appeals</i> | 71 |
| C. <i>Appeal of Promotions Committee Decisions</i> | 71 |
| D. <i>Appeal of a Grade or Other Evaluation</i> | 72 |
| E. <i>Appeal of Administrative Decisions Made by Associate and Assistant Deans</i> | 73 |
| F. <i>Appeal of the Decision of the Honor Council</i> | 73 |
| G. <i>Challenge to questions and or answers to questions on examinations</i> | 74 |
| H. <i>ExamSoft Score Release/Challenge Procedure</i> | 74 |
| I. <i>Procedure to Appeal an Educational Site or Curricular Assignment</i> | 74 |
| SECTION XXVI | 75 |
| UNIVERSITY POLICY ON ACADEMIC GRIEVANCE PROCEDURES | 75 |
| A. <i>The Informal Procedure Process</i> | 75 |
| B. <i>The Formal Process</i> | 75 |
| SECTION XXVII | 76 |
| LEAVE OF ABSENCE AND WITHDRAWAL | 76 |
| A. <i>Procedures to Request Leave of Absence</i> | 76 |
| B. <i>Procedures to Request Withdrawal</i> | 76 |
| C. <i>University Policy on Total Withdrawal</i> | 77 |
| D. <i>Additional University Policies on Total Withdrawal</i> | 78 |
| E. <i>Unapproved Absence from Classes or Clinical Rotations</i> | 78 |
| SECTION XXVIII | 79 |
| READMISSION | 79 |
| A. <i>Eligibility for Readmission</i> | 79 |
| B. <i>Procedures for Readmission</i> | 79 |

| | |
|--|-----------|
| C. <i>Stipulations of Readmission</i> | 80 |
| SECTION XXIX | 81 |
| SMOKING POLICY | 81 |
| UNIVERSITY POLICY ON SMOKING | 81 |
| SECTION XXX | 82 |
| HEALTH SERVICES | 82 |
| A. <i>Student Health Center</i> | 82 |
| B. <i>Immunizations</i> | 82 |
| C. <i>Appointments</i> | 82 |
| D. <i>Students with Disabilities</i> | 82 |
| E. <i>Student Health Insurance and Disability Income Plans</i> | 83 |
| SECTION XXXI | 84 |
| HEALTH CLEARANCE AND MANAGEMENT PLAN/POLICY (INCLUDING STUDENT EXPOSURE TO INFECTIOUS AND ENVIRONMENTAL HAZARDS) | 84 |
| A. <i>Health Screening</i> | 84 |
| B. <i>Non-Occupational Illness</i> | 84 |
| C. <i>Occupational Injury</i> | 85 |
| D. <i>Medical Treatment for Students</i> | 85 |
| E. <i>Effects of Infectious and Environmental Disease or Disability on Medical Student</i> | 86 |
| F. <i>Financial Responsibility of Students</i> | 87 |
| G. <i>Visiting Students</i> | 87 |
| H. <i>Health Clearance</i> | 87 |
| SECTION XXXII | 88 |
| SOCIAL MEDIA POLICY | 88 |
| SECTION XXXIII | 89 |
| POLICY ON RELIGIOUS HOLIDAYS | 89 |
| SECTION XXXIV | 90 |
| POLICY ON TRANSFER STUDENTS | 90 |
| SECTION XXXV | 91 |
| POLICY ON STUDENT EDUCATION RECORDS | 91 |
| SECTION XXXVI | 92 |
| LOUIS STOKES HEALTH SCIENCES LIBRARY | 92 |
| SECTION XXXVII | 93 |
| UPDATED POLICIES AND PROCEDURES | 93 |
| SECTION XXXVIII | 94 |
| STUDENTS' CONTACT INFORMATION | 94 |
| SECTION XXXIX | 95 |
| ADMINISTRATIVE CONTACT INFORMATION | 95 |

GLOSSARY

| Acronym | Meaning |
|----------------|--|
| AAMC | Association of American Medical Colleges |
| ABIM | American Board of Internal Medicine |
| ACGME | Accreditation Council for Graduate Medical Education |
| ADA | Americans with Disabilities Act |
| ADSAA | Associate Dean for Student Affairs and Admissions |
| AI | Acting Internship |
| ANSI | American National Standard Institute |
| CK | Clinical Knowledge |
| COM | College of Medicine |
| CS | Clinical Skills |
| DAC | Data Analysis Center |
| EEO | Equal Employment Opportunity |
| EO | Equal Opportunity |
| FERPA | Federal Education Records Privacy Act |
| FSR | Former Students Returning |
| FWS | Federal Work Study |
| GPA | Grade Point Average |
| H-Book | Howard University Student Handbook |
| HIPAA | Health Insurance Portability and Accountability Act |
| HU | Howard University |
| HUCM | Howard University College of Medicine |
| HUSEP | Howard University Student Employment |
| IEP | Individualized Educational Plan |
| LCME | Liaison Council on Medical Education |
| LOA | Leave of Absence |
| M1, M2, M3, M4 | Medical Student Year 1, 2, 3, 4 |
| MBA | Master of Business Administration |
| MedSTAR | Medical Student Taught Academic Review |
| MSPE | Medical Student Performance Evaluation |
| NBME | National Board of Medical Examiners |
| NRMP | National Residency Matching Program |
| ODSSS | Office of the Dean for Special Student Services |
| OME | Office of Medical Education |
| PARP | Pre-Academic Reinforcement Program |
| PBL | Problem-Based Learning |
| PHI | Protected Health Information |
| ROL | Rank Order List |
| SAP | Satisfactory Academic Progress |
| SASP | Student Academic Support Program |
| SDSP | Summer Directed Study Program |
| SGL | Small Group Learning |
| TBL | Team Based Learning |
| USMLE | United States Medical Licensing Examinations |

SECTION I

INTRODUCTION

THIS PUBLICATION ENTITLED “HOWARD UNIVERSITY COLLEGE OF MEDICINE POLICIES AND PROCEDURES MANUAL” IS AVAILABLE TO ALL MEDICAL STUDENTS, FACULTY, ADMINISTRATORS AND STAFF

This manual contains policies and procedures affecting students. The publication has been compiled for the benefit of students, faculty, administrators and staff in the College of Medicine. The policies and procedures contained herein include extracts from existing announcements previously issued separately. All students, faculty, administrators and staff are expected to become thoroughly familiar with these policies and procedures.

Other informational announcements may be made available by memorandum (written or electronic) from time to time during the year. Any modifications of the policies or procedures contained herein, or new policies or procedures will be announced as they are approved. In addition to the policies contained herein, medical students, faculty and staff are expected to be familiar with the Howard University Student Handbook (H-Book) updated annually. The most recent version of the H-Book: <https://studentaffairs.howard.edu/sites/studentaffairs.howard.edu/files/pdf/howard-university-student-handbook-2019-2020.pdf#page=11>

Howard University Hospital, affiliated Hospitals and other sites where students rotate for approved educational experiences also have policies and procedures that students from Howard University College of Medicine must observe. If there are any questions regarding policies from the other sites, students should contact the Senior Associate Dean for Academic Affairs at Howard University College of Medicine.

Care has been taken to ensure accuracy of the information contained in this publication. Contact information and website addresses may change after this manual is published. Please contact the Office of the Dean for updated information. Errors, omissions, or other corrections will be corrected and distributed as they are discovered.

While students may be reminded of the policies and procedures by the Dean or his/her designee from time to time, each student shall be bound by the policies even if the student is not reminded of the policies by the Dean or his/her designee.

The information within this manual **does not constitute a contract**. The College of Medicine reserves the right to modify, delete or add policies and procedures as necessary before or during matriculation, or at any time during the academic year.

This publication and subsequent announcements shall be retained by all for reference.

For the 2020-2021 Academic Year, Policies and Procedures will be fluid related to the impact of the COVID-19 Pandemic. The curriculum will be delivered on-site and virtual following the guidance from the AAMC, CDC and the University. All students are asked to be familiar with the following document: Howard University Re-opening Plan for Fall 2020. Please note that professional schools such as the College of Medicine will have different schedules.

<https://home.howard.edu/reopen>

SECTION II

HOWARD UNIVERSITY STUDENT HANDBOOK

The university publishes a student handbook that applies to all students in the university with limited exceptions. The policies and procedures contained in this manual, which apply to the students of the College of Medicine, are supplements to the policies and procedures described in the Howard University Student Handbook (H-Book).

The H Book can be accessed at:

<https://studentaffairs.howard.edu/sites/studentaffairs.howard.edu/files/pdf/howard-university-student-handbook-2019-2020.pdf#page=11>

Updated July 2020



SECTION III

ACCREDITATION STATEMENT

Howard University is accredited by the Middle States Association of Secondary Schools and Colleges. The College of Medicine is accredited by the Liaison Committee on Medical Education (LCME) of the Association of American Medical Colleges (AAMC) and the American Medical Association (AMA).



SECTION IV

HOWARD UNIVERSITY COLLEGE OF MEDICINE

For over 150 years, The Howard University College of Medicine has long been in the forefront of medical education. Founded in 1868, the College takes pride in its long and illustrious history of training students to become competent and compassionate physicians who provide health care in medically underserved communities. While the College offers excellent research and research training opportunities, the major emphasis is on preparing students to deliver patient care in communities that have a shortage of physicians and public health professionals.

The College of Medicine is fortunate to be in the nation's capital and can draw upon the immense medical resources of this area, including the National Institutes of Health and the National Library of Medicine.

The College of Medicine is also fortunate to be a part of Howard University, the only comprehensive research university with a predominantly African American constituency. Although the University community has traditionally been predominantly black, Howard has been a diverse and cosmopolitan institution throughout its history, with students, faculty and staff of all ethnicities from the United States and many foreign nations. All must meet the high standards of excellence of Howard University, which has the largest concentration of black faculty and student scholars in the country.

In addition to the College of Medicine, the Howard University Health Sciences Center includes the Howard University Hospital; College of Dentistry; College of Pharmacy, College of Nursing and Allied Health Sciences; Health Sciences Simulation and Clinical Skills Center; Louis Stokes Health Sciences Library; and the Student Health Center. The University is also composed of the College of Arts and Sciences (COAS); the Schools of Business; Communications; Education; Law; Divinity; Social Work; Engineering, Architecture, and Computer Sciences; and the Graduate School. The latter offers master's and Ph.D. programs in several disciplines. Greater than 10,000 students are enrolled annually at Howard University.

The College of Medicine is proud of its achievements. Its more than 5,000 living alumni are testimony to the excellent medical education at Howard. The College has graduated a large percentage of the black practicing physicians in this country. Although opportunities for minority students have increased at other medical schools, the College uniquely addresses the special health care needs of medically underserved communities and continues to produce a significant number of the nation's minority physicians.

By any objective or subjective measure, the College is meeting or exceeding national standards for medical education. The future of the College is indeed bright, and it accepts with enthusiasm the continuing challenge of service to this nation and the world.

SECTION V

HISTORY OF THE COLLEGE OF MEDICINE

Howard University is named for Major General Oliver Otis Howard, a native of Maine and a graduate of Bowdoin College and West Point. He was a Union Army hero, having served in several major battles of the Civil War, including First and Second Bull Run, Antietam, Chancellorsville, and Gettysburg. In May 1865, he was appointed as Commissioner of the Bureau of Refugees, Freedmen, and Abandoned Lands, more commonly referred to as the Freedmen's Bureau. This appointment brought Gen. Howard to the city of Washington. A deeply religious man, he joined others in helping to establish the First Congregational Church of Washington at 10th and G Streets, N.W.

On November 20, 1867, eleven members of the church gathered at the home of Deacon Henry Brewster for a missionary meeting. While there, they resolved to establish a seminary for the training of African American ministers, especially for the South and Africa. Soon thereafter, General Howard was brought into the deliberations. After further discussion, the mission broadened to include the training of black teachers and the name of the proposed institution became "The Theological and Normal Institute". The concept of the proposed school as a mere institute did not last long. Other fields of study were considered, and the concept of the school was enlarged to that of a university. The name "Howard University" was proposed in honor of General Howard, who was highly regarded as a hero and humanitarian and who played an important role in the institution's conceptualization. On March 2, 1867, a Charter approved by the 39th United States Congress to incorporate Howard University was signed into law by President Andrew Johnson. Seventeen men, including General Howard, were named as Trustees in the Charter and are considered as the University's founders. The Charter specified the following departments: normal and preparatory, collegiate, theological, medicine, law, and agriculture.

While clearly the intent of the founders was to uplift African Americans, especially those recently freed from slavery, the university was established on the principle that it would be open to all races and colors, both sexes, and all social classes. On May 1, 1867, Howard University opened with five white female students, daughters of two of the founders. On November 5, 1868, the first opening exercise for the Medical Department was held at the First Congregational Church. On Monday, November 9, 1868, at 5:00 p.m., classes began with eight students and five faculty members.

At the time of its founding, the Medical Department included degree programs in medicine and pharmacy. The medical curriculum was three years in length and the pharmacy program two years. A degree program in dentistry was introduced in the early 1880's. James T. Wormley graduated from the pharmacy program in 1870 and was the first graduate of the Medical Department. Five medical students graduated in 1871 (two blacks and three whites).

Medical education in this country was drastically altered by the Flexner Report of 1910, as it set new and higher standards for the training of physicians based on the Johns Hopkins University model of medical education. Of the seven black medical schools in existence at the time, only Howard and Meharry survived the Flexner Report and its aftermath.

From the time of Howard's founding in the 1860's until the 1960's, Howard and Meharry Medical College trained most of the African American physicians of this nation. For most of the first half of the twentieth century, many medical schools (including all medical schools in the South except Meharry) did not accept black students. Medical schools outside of the South provided only limited opportunities for minority students. Since the 1960's, opportunities have expanded for minorities at majority medical

schools, and two other medical schools focused on the training of minority physicians opened, the Charles R. Drew University of Medicine and Science in Los Angeles and the Morehouse School of Medicine in Atlanta.

Howard has a long history of training women physicians. Over the years, women have been afforded opportunities to study medicine here to a greater extent than at most other U.S. medical colleges. The first woman graduate was Mary Spackman, Class of 1872, a white student from Maryland. The first black woman to graduate was Eunice P. Shadd, Class of 1877, who was from Chatham, Ontario, Canada. Howard University has also been noted for educating individuals from the West Indies and Africa in the medical professions.

The history of the Howard University College of Medicine is linked closely to that of Freedmen's Hospital. In 1862, the War Department established a hospital at Camp Barker, which was located at 12th and R Streets in the city of Washington. In 1869, the hospital was moved to the campus of Howard University. During the period 1904-1908, a new facility was erected for Freedmen's Hospital on a site north of the medical school. In 1975, the new Howard University Hospital opened just south of the College of Medicine on the former grounds of Griffith Stadium, which for many years was the home of the Washington Senators baseball team, Washington's football team, as well as Negro League baseball teams, including the Homestead Grays. The Howard University Hospital, which replaced the Freedmen's Hospital, serves today as the College of Medicine's major teaching facility.

Many famous physicians and scientists have been affiliated with the College of Medicine over the years. Among them are Dr. Daniel Hale Williams and Dr. Charles R. Drew. Dr. Daniel Hale Williams, the first physician to successfully perform heart surgery with the repair of a stab wound to the pericardium, served as Chief Surgeon of Freedmen's Hospital during the 1890's. Dr. Charles Drew, well-known for his groundbreaking research on and authoritative knowledge of banked blood and for his leadership of the "Blood for Britain" project during World War II, served as head of the Department of Surgery from 1941 until his death in an automobile accident in 1950.

Excellence in alumni and/or faculty extends to the late Dr. LaSalle D. Leffall, Jr., Professor of Surgery and first African-American President of the American Cancer Society and American College of Surgeons; the late Dr. Roselyn Payne Epps, Pediatrician, the first African-American President of the American Medical Women's Association and the late Dr. Walter Lester Henry, Jr., a Master of the American College of Physicians, to name a few. Dr. Wayne A.I. Frederick, a triple alumnus (Liberal Arts (COAS), Medicine and Business) is the current and 17th President of Howard University. Howard University College Medicine alumni are located all over the United States and the world.

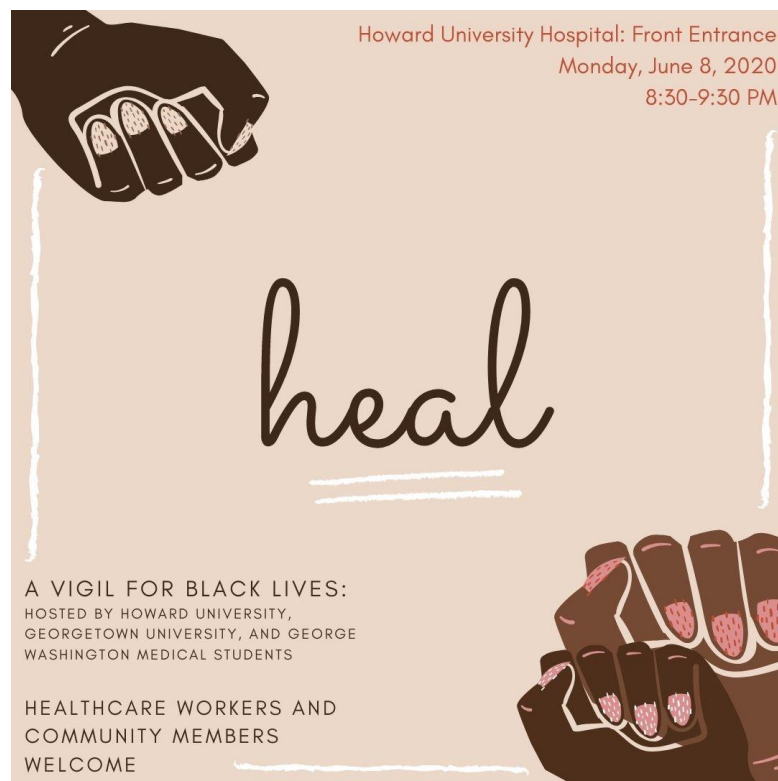
The College of Medicine is an integral part of Howard University Health Sciences which includes the Colleges of Dentistry, Pharmacy, Nursing and Allied Health Sciences; The Louis Stokes Health Sciences Library and the Interdisciplinary Research Building which opened in 2015. In addition, the health sciences complex houses the Center for Sickle Cell Disease, the Cancer Center, the National Human Genome Center and the Student Health Center. The HUCM collaborative research mission focuses on the identification and eradication of health disparities that disproportionately affect disadvantaged and underserved communities and people of color. Major NIH grant awards have been made to support research on sickle cell disease, HIV, pediatric health disparities, clinical and translational research (CTSA) infrastructure development (Research Centers in Minority Institutions).

While most African American physicians now graduate from majority medical schools, Howard continues to graduate more minority physicians than any other medical school in the country. It still stands as a leader in the education of minority physicians and students from disadvantaged

backgrounds. It also serves as one of the few medical schools in the country whose mission is focused on the training of physicians and other health professionals for underserved communities especially in primary care specialties. Since 2008, the College has adopted new and evolving trends in medical education, including small group instruction, an integrated medical curriculum, and use of an accredited state-of-the-art simulation and clinical skills center. In 2018, The College of Medicine celebrated its 150th anniversary.

During the 2020-2021 academic year, a novel coronavirus arrived in the United States. This virus resulted in the COVID-19 pandemic. The world and our nation were impacted hard. The case numbers multiplied, and the mortality was significant. However, the Howard University Hospital and others rose to the occasion to care for SARS-CoV-2 patients. These front-line heroes continue to fight this battle to this day for a condition that disproportionately affects African Americans. To slow the spread of the virus, Howard University College of Medicine along with the nation's institutions of higher learning sent all students home and modified both didactic and clinical education to an online model. For the start of the 2020-2021 academic year, the HUCM will deliver the medical curriculum in a hybrid format: onsite and virtual education.

In addition, in the midst of a public health pandemic, the United States faced growing social anger and unrest following the brutal killing of George Floyd, Breonna Taylor and Ahmaud Arbery to name a few. The result has been ongoing demonstrations and marches to end racism. The events of 2020 have will forever be a part of the history of Howard University.



SECTION VI

MISSION, VISION AND CORE VALUES

The College of Medicine dates from 1868 and serves a broad constituency, with about 70% of the student body being U.S. underrepresented minorities and a substantial number being from foreign countries. There are over 5,000 living alumni, making up a large percentage of the black physicians practicing in this country.

Mission Statement

Howard University College of Medicine provides students of high academic potential with a medical education of exceptional quality and prepares physicians and other health care professionals to serve the underserved. Particular focus is on the education of disadvantaged students for careers in medicine. Emphasis is placed on developing skills and habits of life-long learning and producing world leaders in medicine. Special attention is directed to teaching and research activities that address health care disparities.

The College also seeks to improve the health of America and the global community through public health training programs and initiatives. Our mission also includes the discovery of new knowledge through research. Lastly, the College supports the education and training of postgraduate physicians, other health care providers, and graduate students in the biomedical sciences.

Vision Statement

The goal of the Howard University College of Medicine is to enhance our global recognition as a medical school of the first rank, known for the excellence of our teaching, research and service. We will continue to be a world leader in the training of competent, compassionate physicians and other health professionals for medically underserved communities and populations. In addition, the College envisions that it will be an exemplar in eliminating health disparities and in finding solutions through research and public health programs for medical problems disproportionately found in disadvantaged communities, both in this nation and abroad.

Core Values Statement

The core values of the Howard University College of Medicine are:

- Fidelity to our mission and a strong and confident belief in our work
- Excellence and integrity in all that we undertake--teaching, research, and service
- Leadership in medical education and health care, especially for African Americans, other minorities, and the economically disadvantaged
- Service to our community, the nation, and the world through public health programs, medical care, and health education
- The unrelenting pursuit of knowledge through research and life-long learning
- A commitment to cultural diversity among faculty, staff, and students, and to ensure a respectful and ethical academic environment

SECTION VII

INSTITUTIONAL EDUCATIONAL OBJECTIVES FOR THE MD DEGREE

The Curriculum Committee, composed of faculty, students and staff, has defined the medical education program objectives in outcome-based terms that allow the assessment of medical students' progress in developing the competencies that the profession and the public expect of a physician. Medical education objectives are statements of the knowledge, skills, behaviors, and attitudes that medical students are expected to exhibit. The medical school makes these medical educational objectives known to all medical students, faculty, residents and staff.

1. Demonstrate understanding of current core knowledge of basic biomedical science through an interdisciplinary approach to the understanding of the processes that support normal development, structure and function of the human organism
ACGME Competency: Medical Knowledge
2. Demonstrate understanding of current core knowledge of normal and altered structure and function of organ systems, in order to apply that knowledge to the recognition and management of common and complex clinical conditions
ACGME Competency: Medical Knowledge
3. Demonstrate the ability to evaluate patients and properly manage their medical problems by: (a) completing comprehensive histories and physical examinations, (b) obtaining focused histories and perform relevant physical examinations (c) to correctly identify patients' medical problems through critical thinking and to formulate hypotheses as to etiology and solutions; (d) successful development of diagnostic strategies; and (e) formulation and implementation of a management plan
ACGME Competencies: Patient Care, Medical Knowledge, Interpersonal and Communication Skills, Professionalism
4. Apply knowledge of the scientific method in medical diagnosis and treatment and in research. The student should be able to evaluate published findings and to apply scientific evidence-based reasoning to the solution of medical problems
ACGME Competencies: Medical Knowledge, Practice-Based Learning and Improvement
5. Demonstrate understanding of the impact of the various stages of life, as well as the effects of gender, lifestyle, socioeconomic status, nutritional factors, genetic characteristics, psychosocial and epidemiologic factors, and culture upon the quality of human health and the prevalence of disease, disease prevention and health maintenance
ACGME Competencies: Patient Care, Medical Knowledge, Systems-Based Practice
6. Demonstrate an understanding of the fundamental concepts of continuity of care (preventive, rehabilitative and end-of-life) in addition to the diagnosis of acute medical problems, and be able to apply these concepts to clinical practice on a local, regional, national or international level
ACGME Competencies: Patient Care, Systems-Based Practice

INSTITUTIONAL EDUCATIONAL OBJECTIVES FOR THE MD DEGREE...CONT.

7. Demonstrate mastery of a variety of skills, such as effective communication during interviewing patients and educating patients about their diseases and communicating with their families. The student must also demonstrate appropriate skills during physical examinations (proper use of instruments; application of manual techniques) and in utilization of laboratory resources (ordering appropriate tests; interpreting values)
ACGME Competencies: Patient Care, Interpersonal and Communication Skills, Professionalism
8. Exhibit appropriate professional behavior in interactions with patient and their families, peers and other healthcare professionals to adhere to professional standards of ethical behavior, and to function harmoniously and respectfully as a member of an interprofessional health care team
ACGME Competencies: Interpersonal and Communication Skills, Systems-Based Practice, Professionalism
9. Demonstrate mastery of the curriculum essential to enter and pass USMLE Step 1 and progress to and pass USMLE Step 2 (CK and CS) along the pathway toward licensure for the practice of medicine
ACGME Competencies: Patient Care, Medical Knowledge, Practice-Based Learning and Improvement, Professionalism; Interprofessional and Communication Skills; Systems-Based Practice
10. Display skills of independent, life-long, and progressive learning
ACGME Competency: Practice-Based Learning and Improvement
11. Manifest self-awareness, self-care, self-assessment, and personal growth sufficient to be a role model for others and maintain a state of wellness
ACGME Competency: Professionalism
12. Show sensitivity toward the need to address and resolve health disparities at all levels
ACGME Competencies: Systems-Based Practice, Professionalism, Interprofessional and Communication Skills
13. Show mastery of the scholarly expectations of the medical faculty of the College of Medicine as determined by appropriately designed and applied assessment methodologies, including but not limited to written examination performance, practical clinical skills, and technical skills
ACGME Competencies: Medical Knowledge, Interpersonal and Communication Skills, Professionalism

The faculty of the COM use the following instructional methods to deliver components of the medical curriculum to enable the medical student to achieve the objectives and competencies listed above: **didactics, small group discussions, problem-based learning, team-based learning, standardized patients, simulation, demonstration, role modeling, case-based discussions, patient encounters and self-directed learning.**

Medical students are evaluated using a variety of methods to include, but not limited to, the following: **faculty-generated exams (multiple choice questions), NBME customized examinations, NBME**

shelf examinations, quizzes, direct observation by faculty/residents, standardized patients, and objective structured clinical examinations (OSCE).

In addition to the HUCM-specific Educational Objectives, the faculty of the COM assures that all medical students completing the medical curriculum have acquired the **13 AAMC's Core Entrustable Professional Activities**. These are 13 activities that all medical students should be able to perform upon entering residency, regardless of their future career specialty. The Entrustable Professional Activities (EPAs) are as follows:

1. Gather a history and perform a physical examination
2. Prioritize a differential diagnosis following a clinical encounter
3. Recommend and interpret common diagnostic and screening tests
4. Enter and discuss orders and prescriptions
5. Document a clinical encounter in the patient record
6. Provide an oral presentation of a clinical encounter
7. Form clinical questions and retrieve evidence to advance patient care
8. Give or receive a patient handover to transition care responsibility
9. Collaborate as a member of an interprofessional team
10. Recognize a patient requiring urgent or emergent care and initiate evaluation and management
11. Obtain informed consent for tests and/or procedures
12. Perform general procedures of a physician: placement of an intravenous catheter, venipuncture, basic airway maneuvers, placement of a genitourinary catheter, and placement of a nasogastric tube
13. Identify system failures and contribute to a culture of safety and improvement

To access the complete document please visit: <https://www.aamc.org/initiatives/coreepas/>

The Curriculum Committee formally accepted these Educational Objectives as a working document on February 3, 2003. Reviewed and revised in 2008, 2011 and 2015. The Curriculum Committee reviewed and edited the document August 2017, June 2019 and December 2019.

SECTION VIII

REGISTRATION INFORMATION

A. **Registration for New Entrants, Transfers, and Former Students Returning**

New admitted students who have sent the required enrollment fee to the University within 30 days of acceptance, and former students returning who have been readmitted, will be permitted to register.

B. **Former Students Returning (FSR)**

Former Students Returning are required to file the appropriate application no later than 30 days prior to the beginning of late registration in order to be considered for admission for a particular semester. A student who was suspended for academic reasons should apply well in advance of the 30 days before registration and petition the dean of the school or college last attended for readmission so that the appropriate faculty committee will have time to consider his or her application.

C. **Evidence of Official Enrollment**

Students are not officially enrolled until all designated charges for tuition/fees, previous balances, etc., are paid. Mere possession of a document of your confirmed schedule is not considered proof of official enrollment. The appropriate and acceptable evidence of your official enrollment is the appearance of your name on the class lists issued by the Records Office. For more information, consult the Howard University Student Handbook and College of Medicine Schedules Booklet.

D. **Absence from the University**

Failure to attend classes, or abandonment of a residence hall space to which one has been assigned, or one's non-return to classes for an upcoming semester for which one is already academically and financially registered in advance, does not constitute official discontinuance or withdrawal. The student should effect total withdrawal in person or request that it be done on his/her behalf.

E. **Financial Aid Refunds**

Usually, the Office of Student Financial Services will not make refunds or other adjustments in a student's account after the end of the current academic year of the student's enrollment. All individuals who need assistance in this regard should telephone, write or confer with the Dean for Special Student Services, Howard Center, at (202) 238-2420.

F. **Policies on Payment of Tuition and Fees**

All University students must pay tuition and fees in accord with the deadlines established by the Office of Student Financial Services. The Board of Trustees of Howard University reserves the right to change tuition, fees and charges at any time. The University is committed to giving students financial aid to the extent that need is demonstrated, financial aid resources are available and as Federal regulations permit. Howard University also offers a 5-month Installment Payment Plan.

G. **Payment Plans**

- **Payment in Full:** All charges must be paid in full by the due date: Fall semester, July 1st and spring semester, December 17th. Any outstanding balances will be assessed a \$100.00 late payment fee each month the balance remains.
- **Installment Plan:** Howard University offers a 5-month installment plan for the fall and spring semesters. When registration opens for the plan in May and October, students can sign up for the 5-month installment plan via BisonWeb. There is a \$45 non-refundable enrollment fee and

monthly payments are made on the fifth of each month. This plan is managed by TouchNet and offers several benefits:

- Payments may be made by Discover, MasterCard or American Express or automatic bank payment (ACH)
- Convenience – Automatic payments deducted from a checking/savings account or credit/debit card
- Easy Access – The installment plan can be monitored online, or you can call a dedicated customer service representative
- Peace of Mind – Arrangements are made to satisfy the semester charges and students who have secured validation

Note: Payments may be made by credit card (Visa, American Express, MasterCard, Discover), cash, money order, cashier's check, certified check or wire transfer. A fee will be charged for all reversed credit card payments and returned checks. Subsequent checks will not be accepted. Checks and money orders should include the student's name and Howard University Identification Number.

The fall installment plan begins in June and the last payment is scheduled for October; the spring installment plan begins in November and the last payment is scheduled for March. If you sign up after the first established deadline, a down payment will be required. If a credit card/debit card is used, a convenience fee, in addition to the enrollment fee, will be assessed.

For additional help, customer service representatives are available Monday through Thursday, 8:30 am to 8:00 pm (EST) and Friday 8:30 am to 6:00 pm. They can be reached at 1-800-609-8056. Howard University maintains a special address to expedite processing. The bill, along with payment, must be mailed in the special envelope. Failure to enclose the bar-coded bill will delay processing time. Students who have a pin number and Howard University ID number may pay by credit card on the internet by logging on to <http://www2.howard.edu>. Billing inquiries should be mailed to:

Howard University Office of Student Financial Services
MSC 590501
Washington, DC 20059

H. Factoring in Financial Aid

Authorized financial aid is factored into the registration payment and per Federal regulations *must* be applied to tuition and fees first. The following aid *cannot* be used in computing your registration payment:

- Federal Work-Study (FWS)
- Howard University Student Employment (HUSEP)
- Assistantship
- Unauthorized Federal Loans
- Parent Loan (PLUS)
- Private Loans and Scholarships
- Sample Computation of Registration Payment In Full (with authorized Financial Aid/Scholarship)

I. Credit Balance Funds

These funds are created when a student's account is overpaid, and refunded to the students as follows:

- Credit Card Payments credited back to the credit card.
- Direct Deposit funds are transmitted directly to the specified bank account if the student has enrolled for this method with the Assistant Treasurer's Office.
- Credit Balance Checks created for all other accounts are disbursed by the Office of Assistant Treasurer.

J. Third-Party Sponsors/Special Billing

Third-Party Contracts must be submitted to the Office of Student Financial Services/Student Accounts by the appropriate sponsoring agency or organization. The Third-Party Agent is billed once a month. If the sponsor does not submit payment the student is responsible for satisfying the account.

K. Office of Student Financial Services Frequently Asked Questions

1. What is third party billing?

When an organization makes a commitment to pay your educational expenses, they are considered a third-party sponsor. The sponsor is then billed by the University after the student is validated and after the University's add/drop period.

2. What does it mean to be validated?

Validation means that you are registered for a course(s) AND have satisfied your financial obligation to the University, either by paying the balance in full, making the first deferred payment, or on the University payment plan. If a student has a third-party sponsor, the sponsor may pay the student account balance in full upon receipt of an invoice from the University. If the sponsor will pay only a portion of the semester charges, the student is responsible for paying the difference by the due date in order to be validated.

3. What do I need to know about third party sponsorships?

You will need to find out what your sponsor's requirements are to receive your funds and what charges the sponsor commits to pay on your behalf. The University bills the sponsor for sponsored expenses on your behalf. You are responsible for paying your portion of the bill by the due date; otherwise, validation may be impacted, and late payment fees may be assessed.

4. How does a sponsorship work?

The sponsor provides a billing authorization to the Office of Student Accounts. Your University student account is then set up on a third-party contract for the amount the sponsor will pay on your behalf. After validation and the add/drop period, we bill your sponsor on your behalf. Any restrictions or contingencies on the authorization are unacceptable. For instance, if the agency requires grade or transcript review before paying, the University will not authorize third party billing. In such cases, the student must pay the original bill and be reimbursed by the sponsoring agency. If the sponsor does not pay your bill, you will be responsible for your account balance, including any late and/or deferred payment fees. An unpaid bill may result in your inability to obtain transcripts or register for future terms, cancellation from classes, or similar issues.

5. What is a billing authorization?

A billing authorization may be a letter (on company letterhead), purchase order, or voucher in which a sponsor commits to pay designated educational expenses for you. The authorization from the sponsor should include the following:

- a. Student's Name
- b. Howard University ID #
- c. What and how much they will pay, i.e. tuition, fees, books, room and board, etc.
- d. Period of coverage i.e. fall semester, entire academic year e) Contact/authorizing person's name, phone number, fax number, email address, and billing address

Sponsors usually send the authorization to us directly, but some sponsors send the authorization to the student. It is the student's responsibility to ensure the proper billing authorization has been provided to the University. The University does not notify the student or sponsor when an authorization expires at the end of the term or effective date. The sponsor and student are responsible to ensure that an authorization is received before the end of the add/drop period to avoid late payment fees.

6. What is the deadline to submit the billing authorization?

Billing authorizations must be submitted by the end of the add/drop period. If it is submitted after this time, you may be subject to a late and/or deferred payment fee. Billing authorizations *will not* be accepted for previous academic years. The student will need to work with the agency to receive any funds.

7. Why are the sponsors billed after validation and the add/drop period?

A student must be validated to be an official student at the University. As well, many students add or drop classes during the add/drop period. Since changes in registration often correlate with changes in tuition charges, Howard waits until after this period ends in order to ensure that all invoices are accurate. This delay is taken into account when considering late fees on the sponsored portion of a student's tuition. Please note: Students must pay the portion of their tuition for which they are responsible by the due date; otherwise, validation may be impacted, and/or late payment fees may be assessed.

8. Can I get a refund if my account shows a credit balance?

Amounts received from third party payments are non-refundable to the student. Only loans, scholarships, and grants paid in excess of the semester charges may be refunded.

9. What happens if my sponsor does not pay?

You are legally responsible to pay the full cost of your educational expenses if your sponsor does not pay. A hold will also be placed on your record that prevents transcript release and registration.

10. Do you send grades or transcripts to my sponsor?

The relationship between the sponsors and the University involves billing and payment matters only. You are responsible for providing all other information required by your sponsor.

L. Penalties for Nonpayment or Late Payment

Only students who have satisfied their accounts, notified the Office of Student Account of Third-Party Billing or enrolled in the Installment Plan will be validated. Only registered students who have paid the room rent may live in the residence halls. Nonregistered persons will be required to immediately vacate the residence halls. Degrees, transcripts, or any other official documents will not be released to any student with a delinquent student account or loan balance. No University loans will be made to students who have existing outstanding loans in a delinquent payment status. Furthermore, students cannot complete registration until such delinquent payments are made.

M. Financial Clearances

Financial clearances for transcripts, graduation, and former students returning (FSR) are granted by the Office of Students Financial Services.

N. Orientation

All students are expected to attend all orientation sessions.

SECTION IX

HOWARD UNIVERSITY STUDENTS WITH DISABILITIES

A. **Eligibility for Services**

All students attending Howard University with a documented disability are eligible and encouraged to register for services.

B. **Applying for Services**

As soon as you are admitted to the University, you must submit a Self-Disclosure of a Disability form to the Office of Students Services (OSS) along with:

1. A copy of the documentation of your specific disability must be provided at the time of intake
2. Information regarding your academic history (transcripts, IEP, etc.)
3. A copy of the class schedule (if applicable)

C. **Determining Accommodations**

Accommodations are determined as a result of a comprehensive individualized assessment, including a review of medical reports, psychological reports, academic background and an interview with the student.

D. **Reasonable Accommodations or Lack Thereof**

OSS strives to provide reasonable accommodations and works to facilitate an agreeable working relationship between you and the University. If you feel that you are not being treated fairly because of your disability, you are encouraged to contact our office and make an appointment to discuss the issue.

E. **Filing a Grievance**

You may contact the Office of Student Services (OSS) to request a grievance form and instructions and timelines regarding filing a grievance will be provided to you.

F. **Responsibilities of the Office of Student Services**

1. Determine eligibility
2. Identify appropriate accommodations (academic, auxiliary aids, etc.)
3. Develop accommodations plan and complete faculty notification forms with student
4. Work with faculty to insure delivery of accommodations (arranging testing, use of auxiliary aids in classrooms, classroom modification, etc.)
5. Maintain detailed confidential records that document the plan for the provision of selected accommodations
6. Assist students in development of self-advocacy
7. Development and revise policies/guidelines for accommodating students with disabilities.

G. **Responsibilities of the Student**

1. Meet with OSS and provide appropriate documentation in a timely manner. It is recommended that students provide documentation at least eight weeks prior to the start of the semester for which they are requesting services. Students should schedule an appointment with OSS during the first few weeks of classes so that accommodations can be finalized.
2. Submit proper forms requesting services (Braille, interpreters, etc.).
3. Follow guidelines regarding use of accommodations/OSS services.

4. Consult with the OSS, within five business days regarding any problems encountered during the semester.
5. Attend all classes.
6. Organize time.
7. Follow course syllabi.
8. Meet with OSS Advisor at least twice a semester.

H. Responsibilities of the Faculty

1. Adopt teaching practices and evaluation methods which promote equal access.
2. Must comply with the student's accommodations letter.
3. Collaborate with the OSS and ADA Coordinator for your school to provide accommodations.
4. Contact your ADA Coordinator for your school or the OSS with any questions or problems.
5. Treat all matters related to students with disabilities in a confidential manner.
6. Consult with the Associate Dean for Student Affairs of your school or the OSS if a disagreement between a student and faculty member regarding an accommodation is not resolved.
7. May request a written agreement before allowing the student to record the lecture/class unless specified in the accommodations letter.
8. Do not provide academic adjustments unless a faculty notification form has been processed by OSS.

I. Guidelines for Documenting Medical Disabilities (Mobility, manual, hearing and visual)

In compliance with the law (Section 504, Rehabilitation Act and the American with Disabilities Act, "ADA"), Howard University is committed to providing its students with disabilities reasonable accommodations. There are specific guidelines for the acquisition of accommodations and services under ADA. This brochure explains in detail the information you will need to request and receive them. Please read this information carefully and share it with the professional who will be conducting your testing and evaluation or providing you will the results of prior evaluations.

1. The clinician appears to be qualified to make the diagnosis in the area of specialization and is not a member of the student's family.
2. The evaluation is written on professional letterhead, is current and contains the date of the last appointment with the student.
3. The clinician clearly indicates a claimed disability that is covered under the ADA.
4. Documentation clearly supports the claimed disability with relevant medical and other history.
5. The evaluation contains a description of current medications, treatments and assistive devices and technologies with estimated effectiveness in ameliorating the impact of the disability, i.e., extent of effectiveness of corrective lenses, use of crutches, etc.; and history of medication side effects known to have affected the student.
6. Give a description of the functional limitations resulting from the disability, which specifically addresses a postsecondary residential and educational setting.
7. The documentation clearly supports the direct link to and need for the requested accommodations.

J. Guidelines for Documenting Learning Disabilities

1. **A Qualified Professional Must Conduct the Evaluation**
Professionals conducting assessments and rendering diagnoses of specific learning disabilities and making recommendations for appropriate accommodations must be qualified to do so. For

example, the following professionals would generally be considered qualified to evaluate specific learning disabilities provided that they have additional training and experience in evaluating adolescent/adult learning disabilities: clinical or educational psychologists; school psychologists; neuropsychologists; learning disabilities specialists; medical doctors with training and experience in the assessment of learning problems in adolescents and adults. It is not appropriate for professionals to evaluate members of their own families. All reports should be on letterhead, typed, dated, signed, and otherwise legible.

2. Testing Must Be Current

Because the provision of all reasonable accommodations and services is based upon assessment of the current impact of the student's disabilities on his or her academic performance, it is in a student's best interest to provide recent and appropriate documentation. In most cases, this means that testing usually was conducted within the past three years.

3. Comprehensive Documentation Necessary to Substantiate the Learning Disability Must Be Provided

Prior documentation may have been useful in determining appropriate services in the past. However, documentation must validate the need for services based on the individual's current level of functioning in the educational setting. A school plan such as an individualized educational plan (IEP) or a 504 plan is insufficient documentation in and of itself but can be included as part of a more comprehensive assessment battery. A comprehensive assessment battery and the resulting diagnostic report should include a diagnostic interview, assessment of aptitude, academic achievement, and information processing.

4. Diagnostic Interview

Because learning disabilities are commonly manifested during childhood, though not always formally diagnosed, relevant historical information regarding the student's academic history and learning processes in elementary, secondary, and postsecondary education must be investigated and documented. An evaluation report should include the summary of a comprehensive diagnostic interview by a qualified evaluator. By using a combination of student self-report, interviews with others, and historical documentation such as transcripts and standardized test scores, the diagnostician should provide a summary of the following:

- i. A description of the presenting problem(s);
- ii. Developmental history;
- iii. Relevant medical history including the absence of a medical basis for the present symptoms;
- iv. Academic history including results of prior standardized testing; reports of classroom performance;
- v. Relevant family history, including primary language of the home, and the student's current level of fluency of English;
- vi. Psychosocial history;
- vii. Relevant employment history;
- viii. A discussion of dual diagnosis, alternative or co-existing mood, behavioral, neurological, and/or personality disorders along with any history of relevant medication and current use which may impact the individual's learning; and exploration of possible alternatives which may mimic a learning disability when, in fact, one is not present.

5. Assessment

The neuropsychological or psychoeducational evaluation for the diagnosis of a specific learning disability must provide clear and specific evidence that a learning disability does or does not

exist. Assessment, and any resulting diagnosis, must consist of and be based on a comprehensive assessment battery, which does not rely on any one test or subtest.

- i. *Aptitude/ Cognitive Ability.* A complete intellectual assessment with all subtests and standard scores reported is essential.
- ii. *Academic Achievement.* A comprehensive academic achievement battery is essential with all subtests and standard scores reported for those subtests administered. The battery must include current levels of academic functioning in relevant areas such as reading (decoding and comprehension), mathematics, and oral and written language.
- iii. *Information Processing.* Specific areas of information processing (e.g., short- and long-term memory; sequential memory; auditory and visual perception/ processing; processing speed; executive functioning; motor ability) should be assessed.
- iv. *Other Assessment Measures.* Non-standard measures and informal assessment procedures or observations may be helpful in determining performance across a variety of domains. Other formal assessment measures may be integrated with the above instruments to help rule in or rule out the learning disability to differentiate it from co-existing neurological and/or psychiatric disorders, i.e., to establish a differential diagnosis. The evaluator should address why these assessments were included in addition to the standard measures. In addition to standardized tests, it is also very useful to include informal observations of the student during the test administration.

6. The Documentation Must Include a Specific Diagnosis

Nonspecific diagnoses, such as individual "learning styles," "learning differences," "academic problems," "computer phobias," "slow reader," and "test difficulty or anxiety," in and of themselves do not constitute a learning disability. It is important to rule out alternative explanations for problems in learning, such as emotional, attentional, or motivational problems, that may be interfering with learning but do not constitute a learning disability. The diagnostician must use direct language in the diagnosis and documentation of a learning disability, avoiding the use of such terms as "could possibly" "suggests" or "is indicative of." If the data indicates that a learning disability is not present, the evaluator must state that conclusion in the report.

7. All Actual Test Scores from Standardized Instruments Must be Provided

Standard scores and/or percentiles must be provided for all normed measures. Reports of grade equivalents must be accompanied by standard scores and/or percentiles. The data must logically reflect a substantial limitation to teach which the student is requesting the accommodation. The particular profile of the student's strengths and weaknesses must be shown to relate to functional limitations that may necessitate accommodations. The tests used should be reliable, valid, and standardized for use with an adolescent/adult population. The test findings must document both the nature and severity of the learning disability. Informal inventories, surveys, and direct observation by a qualified professional may be used in tandem with formal tests in order to further develop a clinical hypothesis.

8. Each Accommodation Recommended by the Evaluator Must Include a Rationale

It is important to recognize that accommodation needs can change over time and are not always identified through the initial diagnostic process. Conversely, a prior history of accommodation, without demonstration of a current need, does not in and of itself warrant the provision of a like accommodation. The diagnostic report must include specific recommendations for accommodation(s) as well as a detailed explanation of why each accommodation is recommended. The evaluator(s) must describe the specific impact the diagnosed learning disability has on a specific major life activity as well as the degree of significance of this impact on the individual's academic abilities. The evaluator(s) should support recommendations with specific test results or clinical observations. If no prior accommodation(s) has been provided, the

qualified professional and/or the student should include a detailed explanation of why no accommodation(s) was used in the past and why an accommodation(s) is needed at this time. If an accommodation(s) is not clearly identified in the diagnostic report, OSS will seek clarification, and, if necessary, more information. OSS will make the determination as to whether appropriate and reasonable accommodations are warranted and can be provided to the individual.

9. A Clinically Interpretive Summary Must be Provided

A complete and clearly stated diagnostic summary based on a comprehensive evaluative process is a necessary component of the report. Assessment instruments and the data they provide do not diagnose; rather, they provide important elements that must be integrated with background information, observations of the client during the testing situation, and the current context. It is essential, therefore, that professional judgment be used in the development of a clinical summary. The clinical summary must include:

- a. Indication that the evaluator ruled out alternative explanations for academic problems such as poor education, poor motivation and/or study skills, emotional problems, environmental issues, attentional problems, and cultural/language differences;
- b. Indication of how patterns in cognitive ability, achievement, and information processing are used to determine the presence of a learning disability;
- c. Indication of the substantial limitation to learning presented by the learning disability and the degree to which it effects the individual in the learning context for which accommodations being requested; and,
- d. Indication of why specific accommodation(s) are needed and how the effects of the specific disability are mediated by the recommended accommodation(s).

10. Accommodation Letters

Once a student's eligibility has been determined, OSS prepares letters to the Associate Dean for Student Affairs, which verifies the existence of the student's disability and documents the need for accommodations and academic adjustments. The Associate Dean for Student Affairs will be responsible for notifying course and clerkship directors of the accommodations request.

K. Interpreting Services

OSS provides sign language and oral interpreting services by freelance interpreters for classes and special events by written request.

L. Learning Disability Screening

OSS conducts screening interviews of students referred to assess the possibility of a learning disability. When appropriate, students are referred to community resources for formal diagnostic evaluation, which would be at the student's expense. Screenings generally take a minimum of one hour. To give each student uninterrupted and full attention, advance appointments are requested.

M. Note-Taking Assistance

OSS requests faculty assistance in locating a note taker from the class in which the student is enrolled.

N. Reading Services

OSS provides assistive technology and text in Braille for students who are blind or have print disabilities such as dyslexia. Students are asked to obtain any available textbooks from Recording for the Blind and Dyslexic, prior to requesting books in Braille or on tape. All request must be made in writing or in person.

O. Test Accommodations

Accommodations may include extended time, and/or use of adaptive equipment. Standard practice is time and a half for exams. Students with more severe or multiple disabilities may be granted additional time as determined by OSS.

P. Self-Disclosure and Request for Services Forms

All services must be requested in writing. Please contact OSS for a Request for Service Form or you may download the form at the following link:

<https://studentaffairs.howard.edu/departments/student-services/forms>

Office for Student Services Address:

1851 9th Street NW 2nd floor

Washington, DC 20059

If there are any questions, you may call the Office of the Dean for Student Services at (202) 238-2420 or fax the office at (202) 588-9755.

TTD Services: 202-238-2425

NOTE: Please refer to the Howard University Website for updated documents, policies and procedures related to Students with Disabilities.

**OFFICE OF THE PROVOST AND CHIEF ACADEMIC OFFICER
AMERICAN WITH DISABILITIES ACT (ADA)**

**1990 Americans with Disabilities Act (ADA)
(Section 504 of the Rehabilitation Act of 1973)**

Policy and Procedures

A. Purpose

The purpose of this document is to remind all faculty members (full and part-time) of their obligation to comply with the University's ADA policy and procedures in carrying-out their instructional duties and in their response to students' ADA documented needs.

The Office of the Dean of Student Services

The Office of the Dean of Special Student Services (OSS) is the official office with the authorization to certify eligibility for and to establish and delineate appropriate ADA accommodations for students seeking ADA accommodations in a course.

Faculty members should refrain from establishing or granting any ADA accommodations in response to student requests that have not been certified in writing by the Dean of Special Student Services.

All inquiries concerning ADA accommodations and related University policies and procedures must be directed to: Dean for Student Services; 1851 9th Street, NW, 2nd floor, Washington, DC. The Office hours of operation are 9:00 a.m. to 5:00 p.m. The main number for the Office is 202 238 2420.

B. Accommodating Students with Eligible ADA

1. Accommodation Requirements: Students who have been certified for specific accommodations by the OSS must present an official ADA notification of accommodations letter from the OSS to their instructor of record. No other form of notification is acceptable. An ADA notification of accommodation letter is required for each course in which a student is seeking an approved ADA accommodation. **The ADA notification of accommodation letters must be course-specific and are valid only for one semester.**
2. OSS approved ADA accommodations are not retroactive. They are applicable from the date the ADA eligible student presents his or her ADA accommodations notification letter to the instructor of record. In addition, *ADA Self-Identification Forms* may be obtained by students from the Office of the Dean and the EEO Designee for each school and college. Students must complete the Form and submit it to the OSS. *Note: No other individual in a school or college is authorized to receive the Form.*
3. Once the ADA notification of accommodations letter is presented by the Associate Dean for Student Affairs to the instructor of record, the instructor is required to adhere to the stipulated and mandated ADA accommodations(s). Instructors must provide the indicated accommodations. Instructors, who encounter difficulty in responding to students' ADA requirements, should immediately contact the OSS and the Dean of their respective school or college.
4. Instructors may not discuss with students' questions that they may have about the existence, nature or severity, or appropriateness of ADA related accommodations. Such concerns must be addressed to the instructor's Dean or Dean's designee or to Dean for Student Services for resolution.
5. Faculty members may not discuss or negotiate approved ADA accommodations with ADA eligible students and must maintain the confidentiality of students' rights to receive ADA

accommodations. Faculty members should not discuss students' rights to ADA accommodations in the context of a course or any other environment.

6. When properly notified, faculty members who fail to adhere to the University's ADA compliance policies and procedures, including failing to provide ADA eligible students with officially approved ADA accommodations, will be subject to sanction and other appropriate action by the University.

C. Commitment

Howard University is committed to providing an educational environment that is accessible to all students. In accordance with this commitment, students in need of accommodations due to a disability should contact the Office of the Dean for Student Services for verification and determination of reasonable accommodations as soon as possible after admission to the University, or at the beginning of each academic semester. The Dean for Student Services may be reached at (202) 238-2420

Revised June 19, 2017

For updated information students are advised to check the web site:

<http://www.howard.edu/specialstudentservices/>

SECTION X

STUDENT MISTREATMENT POLICY AND THE EDUCATIONAL ENVIRONMENT

The following statement of teacher, learner and institutional responsibilities forms the foundation of an environment which is most conducive to learning. Ultimately, all student-teacher relationships must be held to the highest professional standards; relationships shall be free of abuse, discrimination, mistreatment or harassment; this includes all Howard University College of Medicine affiliated sites. **Students subjected to abuse, discrimination, mistreatment or harassment have rights to seek timely and effective remediation with the full support of the COM and/ or Howard University.** This policy does not supersede Howard University Policies on Discrimination, Sexual Harassment and the Student Code of Conduct, but is meant to address instances not covered in those policies. The teacher-learner relationship requires that both parties recognize rights and responsibilities. Behaving in a way that embodies the ideal teacher-learner relationship fosters mutual respect, minimizes the likelihood of learner mistreatment, and optimizes the educational experience.

A. Responsibilities of Teachers

1. Fair and Impartial Treatment

Teachers must treat learners fairly, respectfully, and without bias, irrespective of age, race, gender, sexual orientation, socioeconomic status or educational background, disability, religion, or national origin.

2. Professionalism

Teachers must model an appropriate level of professionalism by:

- being prepared, on time and appropriately dressed and groomed for all activities
- treating patients in an ethical, compassionate and culturally sensitive manner and adhering to standards of patient and student confidentiality, acknowledging the primacy of patient welfare above other responsibilities
- providing learners timely, constructive, and accurate feedback, and opportunity for remediation.
- welcoming and encouraging student participation by treating other teacher-colleagues and staff in a reasonable and respectful manner e) encouraging interest and inquiry by asking and responding to insightful questions, where the end point is an increase in knowledge of the learner

3. Scholarship and Pedagogy

Teachers must provide learners with course objectives and appropriate educational activities using innovative and effective teaching methods which encourage life-long learning habits.

4. Rules Governing

A teacher is expected to act in accordance with the HU Faculty Handbook and COM Bylaws.

B. Responsibilities of Learners

1. Fair and impartial treatment

Learners must treat teachers fairly, respectfully, and without bias, irrespective of age, race, gender, sexual orientation, socioeconomic status or educational background, disability, religion or national origin.

2. **Professionalism and general conduct**

Learners must maintain an appropriate level of professionalism according to the policies of HUCM, by:

- a) being prepared, on time and appropriately dressed and groomed for all activities
- b) responding maturely and appropriately to timely, constructive, and accurate feedback, and incorporating feedback during time allotted for remediation
- c) treating staff and other student-colleagues in a reasonable and respectful manner
- d) treating patients in an ethical, compassionate and culturally sensitive manner, adhering to standards of patient confidentiality and acknowledging that patient welfare is of primary importance
- e) responding promptly when contacted by faculty, staff, and administrators

3. **Education**

Learners should be devoted, active, life-long learners, dedicated to the undergraduate medical program and all subsequent training/learning.

4. **Rules Governing**

All medical students are expected to review and act in accordance with the Howard University policies and procedures, including the HU Student Code of Conduct, found at: <http://www.howard.edu/policy/academic/student-conduct.htm> and the Howard University College of Medicine Policies and Procedures Manual, i.e. this manual that is distributed to students in hard copy format during orientation.

C. **Institutional Responsibilities**

It is the expectation that Howard University and the College of Medicine will support and encourage, through its faculty and staff, and to the extent of institutional resources, student mental, physical and emotional health and well-being, including but not limited to the provision of:

- an educational experience of quality
- academic, personal, career and financial counseling
- health and disability insurance for mental and physical health promotion, maintenance and care, and illness prevention
- sufficient areas/opportunities for recreation and relaxation
- safe and secure facilities

D. **Mutual Responsibilities**

The following acts or behaviors would constitute student mistreatment:

1. **Verbal abuse**

Verbal abuse may include shouting, hostility, belittlement, intimidation, humiliation or profanity directed at the student.

2. **Physical Abuse**

Physical abuse or threats of physical abuse may include hitting, slapping, kicking or intentionally or negligently placing a student at risk of physical harm, or threatening to do so.

3. **Discrimination**

Discrimination is defined by University policy. Discrimination may include those behaviors, actions, interactions, and policies that adversely affect one's work because of disparate treatment, disparate impact, or the creation of a hostile, intimidating or offensive work or learning environment. Common forms of discrimination include those based on gender, age, religion, ethnicity, race, disability, and sexual orientation. Complaints involving discrimination on the basis of race, color, national origin, religion, physical or mental disability, medical condition, ancestry, marital status or age must be filed with the Equal Opportunity (EO) Designee, pursuant to the

Policy And Procedure On Equal Opportunity In Employment And Education Programs And Activities College of Medicine EO Designees are the Senior Associate Dean for Academic Affairs and the Associate Dean for Student Affairs and Admissions.

4. **Sexual Harassment**

Sexual Harassment is defined by University policy, and includes, but is not limited to:

- a) unsolicited, unwelcome flirtations, advances, and/or propositions of a sexual nature
- b) insults, jokes, or anecdotes that belittle or demean an individual or a group's sexuality or gender
- c) unwelcome sexually oriented gestures, verbal expressions, or comments of a sexual nature about an individual's body, clothing, or sexual experience
- d) inappropriate displays of sexually suggestive objects or pictures
- e) unnecessary and inappropriate touching, such as patting, pinching, hugging, or brushing against an individual's body
- f) sexual assault (includes all incidents of "criminal sexual conduct" as defined by the District of Columbia Code or the applicable law where the sexual assault takes place) and/ or
- g) suggestions that submission to or rejection of sexual advances will affect decisions regarding such matters as an individual's employment, work assignments, or status, salary, academic standing, grades, receipt of financial aid, or letters of recommendation.

5. **University prohibition on consensual relationships**

Sexual relationships, including dating, between students and faculty, staff or any other type of University employee are strictly prohibited under this policy regardless of whether such relationship may violate the law. Therefore, violations of this prohibition by a faculty member, staff member, or any other type of University employee and a student may lead to disciplinary action against one or both parties.

6. **Additional forms of mistreatment**

Other forms of mistreatment covered by this policy may include such things as requiring a student to perform personal services such as shopping or babysitting or requiring a student to perform menial tasks, which may not cause a student to feel humiliated, but clearly fall outside of any reasonable student-teacher relationship.

E. **Procedures for Filing Complaints**

In keeping with the requirement for a Safe, secure environment which is free of abuse, the following procedures should be followed with respect to alleged student mistreatment.

Students have the right to remain anonymous and may choose to report complaints through the Howard University Ombudsperson at Office of the Student Ombudsperson, 2400 Sixth Street, NW Suite 402, Washington, DC 20059. They can be reached by phone at 202-806-2500.

Any student who feels that he or she may have been subjected to abuse, discrimination, harassment, or mistreatment of any kind by residents, faculty, staff, or other student(s) has the right to seek remedy through any one of multiple options. This process shall be free of retaliation. The involved student has both informal and formal options available. The student has the option but is not required to seek remedy at the most informal level which will adequately and appropriately address the student's concerns.

All College of Medicine faculty and staff are expected to report violations. If an incident occurs at an affiliated clinical institution the violation must also be reported to the respective department at that site. Violations should also be reported to the College of Medicine Associate Dean for Student Affairs and Admissions. Students who wish to discuss such violations may report to the University Counseling

Center where the counselors will keep the complaint confidential.

1. Informal Procedures (Non-Written)

Informal Complaint, direct resolution – students may meet with the individual involved in the complaint and come to a mutually agreed upon resolution of the problem. The student is permitted, but not required, to bring to the meeting with him or her, any one of the Assistant or Associate Deans* of the College of Medicine to assist in resolution at this level. Unless required by law or University policy, there will not be a written record made concerning a matter that is resolved directly between the complainant and the alleged offender.

2. Formal Procedures

These include the following options: Formal complaint, facilitated resolution - Students may meet with the Associate Dean of Student Affairs and Admissions (ADSAA), within 45 calendar days or as close to the alleged incident as feasible, to discuss a complaint and to develop a plan for resolution of the problem. The associate dean may assist in any intervention deemed necessary for resolution of the problem. If disciplinary action is anticipated, he/she will contact the appropriate supervisor of the alleged offender who will develop a plan of action. The supervisor of the alleged offender will maintain a written record.

3. Formal complaint, investigator resolution

If the complainant desires a formal complaint/investigation of an allegation against faculty or staff, the complainant must file a formal, written complaint with the Associate Dean for Student Affairs and Admission within 45 calendar days or as close to the alleged incident as feasible. If the complaint involves any one of the Assistant or Associate Deans, or there is a conflict for the ADSAA, the complaint must be directed to the Dean of the College of Medicine. If there is a conflict for the Dean of the College of Medicine, the complaint must be directed to the Provost and Chief Academic Officer of the University.

The Associate Dean, Dean, or the Provost (“the investigator”) will have approximately 45 (forty-five) calendar days to complete his or her investigation, which must include a written record of interviews and correspondence pertaining to that investigation. The case should then be presented to the Office of the General Counsel, which will provide an opinion as to the resolution of the case. The final decision regarding the resolution of the case will rest with the Dean of the COM, or the Provost, as appropriate. The timeline from completion of investigation, to communication of a final decision to the student will not exceed 45 calendar days. Resolution may include, but is not limited to:

- a. Requirement of education/ remediation against the alleged abuser
- b. More severe disciplinary sanctions against the alleged abuser
- c. Disciplinary action against the student if the complaint is found to be spurious or maliciously intended

4. Reporting Sexual Harassment or Gender-Based Discrimination

Complaints involving sexual harassment or gender-based discrimination must be filed with the Title IX Designee pursuant to the Howard University Procedures for Resolving Sexual Harassment and Gender-Based Complaints in Educational Programs or Activities. **Title IX designees for the College of Medicine are the Associate Deans for Student Affairs and Academic Affairs.** The Title IX Coordinator for the College of Medicine is Candi N. Smiley, Esq., and she may be reached at (202) 806-2550.

SECTION XI

PROFESSIONALISM

A. Introduction

Medical educators and patients alike expect physicians to be just, altruistic, conscientious, compassionate, honest, and scrupulous about financial conflicts of interest. The Accreditation Council for Graduate Medical Education (ACGME) includes professionalism as one of the six general competencies that residents are expected to achieve during their training. The Association of American Medical Colleges (AAMC) and the National Board of Medical Examiners (NBME) have also weighed in on this. The American Board of Internal Medicine has been in the forefront in addressing the matter of professionalism in physicians for decades. The following is an excerpt from the American Board of Internal Medicine (ABIM) “Project Professionalism”:

Professionalism in medicine requires the physician to serve the interests of the patient above his or her self-interest. Professionalism aspires to altruism, accountability, excellence, duty, service, honor, integrity and respect for others. The elements of professionalism required of candidates seeking certification and recertification from the ABIM encompass:

- A commitment to the highest standards of excellence in the practice of medicine and in the generation and dissemination of knowledge.
- A commitment to sustain the interests and welfare of patients.
- A commitment to be responsive to the health needs of society.

<http://www.abim.org>

<http://www.aamc.org>

<http://www.nbme.org>

B. Requirements for Professional Behavior

The attributes of professional behavior expected of students, faculty and staff in the College of Medicine are shown below. These are adapted from the ABIM “Project Professionalism” and from the Task Force on Professionalism in Undergraduate Medicine at the University of Toronto. Students at Howard University College of Medicine will be evaluated according to these domains. Each domain shown below is not restricted to the descriptions listed below it, as these are only examples.

1. Altruism

- Places patients’ needs before self
- Demonstrates sensitivity to patients’ needs
- Demonstrates respect for patients’ privacy
- Demonstrates respect for patients’ confidentiality
- Shows respect for patients’ modesty
- Spends enough time to comfort patient
- Spends enough time to educate patients’ about their disease

2. Duty – reliability and responsibility*

- Adheres to institutional policies and procedures
- Attends instructional sessions including, but not limited to:
 - i) Lectures
 - ii) Small group sessions
 - iii) Clinical rounds

- iv) Conferences
 - v) Laboratory sessions
 - Arrives on time for scheduled activities, examinations and appointments
 - Completes assigned tasks on time including evaluation of courses, clerkships, program, and faculty
 - Participates fully in group assignments and discussions
 - Fulfills call duties as expected
 - Informs supervisors of mistakes in patient care
 - Asks for help when needed
3. **Excellence** – Self-improvement and adaptability
- Attends lectures, rounds, conferences and seminars as expected
 - Researches literature on own patients and other topics
 - Accepts constructive feedback without being too defensive
 - Modify behavior based on feedback and formative evaluation
 - Demonstrates commitment to continuous learning and professional development
4. **Respect for Others** - Relationships with students, faculty, residents and staff:
- Work in harmony with all members of the health care team
 - Demonstrates respectful behavior to all members of the health care team
 - Demonstrates respectful behavior to patients and their families
 - Demonstrates respect for patient’s autonomy
 - Communicates professionally in a non-judgmental and non-defensive manner
 - Demonstrate respect through visual and social media
5. **Honor and Integrity** – Upholding Professional Codes of Conduct:
- Behaves honestly
 - Never misrepresents or falsifies information and/or actions (e.g. cheating)
 - Demonstrates respect for people from all cultures, race and religions
 - Establish and maintain strictly professional relationships with patients
 - Acknowledges limits in knowledge and skills
 - Dress in a professional manner
 - Maintains professional demeanor even when stressed; not verbally hostile, abusive, dismissive or inappropriately angry
 - Acknowledges own mistakes
 - Adheres to ethical standards of the profession

***Duty**, one of the domains of professionalism, also includes:

Class and clerkship attendance

Students are required to attend all lectures, to be present on time, and to remain for the entire lecture. Students are required to attend rounds, all laboratory sessions, and all small group sessions; and to be present on time, to remain for the entire session, and to actively participate in each session. Attendance and participation in the small group sessions and on rounds will be taken in consideration in determining the summative evaluation of the student in computation of grades and in support of promotions, graduation, and residency applications.

Evaluations

Students will be evaluated on the basis of their knowledge, problem solving skills, technical skills, interpersonal skills, communication skills, and professionalism among other domains. Narrative

comments will be recorded by the attending physician, resident, and faculty facilitator of the small group sessions and these comments could be used in preparing letters of recommendations and decisions regarding promotions. Students are expected to complete evaluations of courses, clerkships, faculty, and residents in a timely manner. Grades could be withheld for students who do not complete the evaluations.

Note: It shall be considered inattention to duty for students who do not attend required classes. It shall be considered unprofessional behavior of students who do not complete the evaluations in a timely manner whenever such evaluations are not anonymous. Letters documenting failure to complete evaluations may be placed in students' files and may be removed providing there are no recurrences.

C. "Early Warning" Incident Reports

The intent of the "early warning" report is to give the student formative feedback of concerns about professional behavior before that behavior becomes part of a grade or a sanction by the administration. In certain cases, but not limited to, such as academic dishonesty (i.e. cheating, unprofessional behavior), an early warning is not warranted, and appropriate actions will be taken.

Process for use of an Early Warning Incident Report:

1. An "early warning/incident report" may be filed by the relevant faculty, unit leader/coordinator, course/clerkship director, department chair, Assistant/Associate Dean or others who observe or supervise the student.
2. Faculty or others concerned are encouraged to discuss their concern directly with the involved student before going forward. The decision of whether or not to file an early incident report at that point will be at the discretion of the relevant evaluator or observer.
3. It is normally expected that before filing a report, a face-to-face meeting between the student and the person filing the report will be held. In the sole discretion of the person filing the report, other involved persons may be asked to attend. If a face-to-face meeting is not feasible, an explanation of the reason and way in which the student was contacted must be included. At times, this process of discussion and fact-finding may result in the decision not to file a report.
4. The report will consist of a narrative statement describing the incident. Optionally, the student may also file a commentary which could include a different side of the incident(s), report of extenuating circumstances and/or discussion of remediation.
5. In most cases, the report should be filed usually within 14 days of the unprofessional behavior and shall be filed with the unit leader, clerkship director, chair of department or with the Associate Dean for Student Affairs and Admission.
6. A filed report will be discussed by the person filing the report and the Associate Dean for Student Affairs and Admissions or designee to determine what action should be taken, if any.

Approved by the Faculty June 18, 2007

Updated August 18, 2016

Reviewed June 18, 2018

Revised June 10, 2019

Revised April 15, 2020

CODE OF HONOR, PROFESSIONALISM, AND ETHICS

A. Preamble

Since its founding in 1868, the Howard University College of Medicine (COM) has been committed to producing a community of knowledgeable, compassionate and culturally competent health care professionals of high ethical standards. This community remains dedicated to improving the health and health care of those they are charged to serve. In an effort to create an atmosphere that fosters the development of professional skills and high ethical principles, the Howard University College of Medicine's Code of Honor, Professionalism and Ethics was developed and implemented.

The Code of Honor, Professionalism and Ethics, hereafter referred to as the Code, demands that community members tell the truth, live honestly, advance on individual merit, and demonstrate respect for others in the academic, clinical and research communities. The central purpose of the Code is to sustain and protect an environment of mutual respect and trust in which students have the freedom necessary to develop their intellectual and personal potential. To support the community of trust, students and faculty must accept individual responsibility and apply themselves to developing a collegial atmosphere. The intent of the Code is not merely to prevent students from engaging in dishonest behaviors, or to punish those who violate its principles. Rather, participation in such a Code assures The College of Medicine community that the integrity of its members is unquestioned, and accepted as fact by those in the academic, clinical and research communities. Participation in the Code confers upon faculty, staff and most importantly, students, the responsibility to respect and protect the values of the Howard University College of Medicine (COM).

Students are expected to maintain the highest standards of honesty and, if engaged in research, to conduct those activities in an unbiased manner, to reports the results truthfully, and to credit ideas developed and worked on by others. If engaged in patient care, students are expected to be considerate and truthful, to report all historical and physical findings, test results, and other pertinent information, to respect the dignity of others, treating them with civility and understanding, and to regard privacy and confidentiality as core obligations. Students are also expected to conduct themselves professionally, and to take responsibility for what they say and do. They are also expected to recognize their limitations and to seek help when appropriate.

It is expected that a statement about academic integrity be included in each course syllabus. Faculty and administrators are also expected to contact the Honor Council regarding suspected infractions of the Code.

Those in the healing professions are expected to adhere to highest standards of medical ethics and professionalism. Therefore, the Code of Honor, Professionalism and Ethics of the COM will supersede all existing University student academic and/or honor codes.

The foundation of the Code rests upon the willingness of each individual to live up to the standards established by the student body and faculty. Violation of the Code affronts us individually and collectively and the COM regards such violations as serious offenses. The Code presumes the absolute honesty of each individual. As a result, community members live with the freedom of knowing that:

a) Their integrity, intentions, work and word are unquestioned b) Their personal property and academic work are respected and free from theft, interference or tampering by COM community members c) Classroom, clinical and research environments for learning and evaluation are honorable d) The learning environment is safe and equitable regardless of the student's gender, race, religion or sexual

orientation.

Guided by these principles, this Code outlines the COM's expectations for students, the procedures for resolving alleged violations of those expectations, and the rights and responsibilities of students and faculty throughout the process.

B. Statement of the Code of Honor, Professionalism and Ethics

- a. Any action indicating lack of integrity, or dishonesty in academic matters is considered a violation of academic ethics. Such offenses include, **but are not limited to**, engaging in or attempting to engage in cheating, plagiarism, sabotage, fabrication or complicity. Furthermore, a lack of professionalism is considered a violation of the Code.
 - i. Cheating includes knowingly acquiring, receiving, or passing on information about the content of an examination prior to its authorized release or during its administration; provision, utilization or theft of unauthorized aids; or impermissible collaboration (such as copying from another student's examination, or allowing another student to copy from one's examination)
 - ii. Plagiarism is defined as the act of incorporating into one's own work or the work or expression of another without appropriately and adequately indicating the source. This includes intentional or unintentional plagiarism, wherein a student does not appropriately credit sources consulted in the writing of a paper or preparing a presentation
 - iii. Sabotage is defined as intentional and malicious actions that impair another student's academic performance
 - iv. Fabrication is defined as the creation or manipulation of information to support an academic or scholarly pursuit. This includes falsifying, manipulating, creating, enhancing, or otherwise changing actual results in academic, clinical, or research matters; taking an examination or writing a paper on behalf of another; listing sources in a bibliography that were not used in the academic exercise or scholarly pursuit, and falsifying patient information for use in the patient record or elsewhere
 - v. Lack of professionalism includes but is not limited to inattention to duty and participation in patient care while under the influence of any substance that impairs his or her ability to function. It also includes ignoring the patient's dignity, privacy, cultural values and confidentiality
 - vi. Complicity involves intentionally helping another to commit an act of academic dishonesty.
- b. **All students in the College of Medicine must complete all HIPAA training** prior to any activity that may involve access to patient PHI, including but not limited to research, shadowing healthcare providers, and rotation on clinical clerkships. Students are prohibited from removing PHI from Howard University Hospital, any affiliated hospital, clinic, physician's office or any health care facility in any form, including written, electronic, or photographed. Students are also prohibited from placing any PHI on social media.
- c. **HUCM policy re: Protected Health Information (PHI)**
Protected health information refers to individually identifiable health information related to the past, present or anticipated future physical or mental health or condition of an individual. This may include but not limited to names, addresses, birth dates, admission dates, phone numbers, email addresses, social security numbers, medical record numbers, health plan account numbers, photographic images and any other unique identifying number.

d. **Other acts included under this Code are:**

- i. Violations of confidentiality: knowingly obtaining, viewing or releasing confidential information inappropriately, including but not limited to gaining access to patient or student records, documents or information without justification
- ii. Misrepresentation of information to or through COM or University officials (via, for example, forgery, or lying in an investigation, or not revealing a conflict of interest and subsequently participating in an Honor Council Hearing)

e. Students in violation of this policy will be subject to disciplinary action.

C. **Application of the Code of Honor, Professionalism and Ethics**

- a. Adoption of the Code necessitates the creation of a Council on Honor, Professionalism and Ethics, hereinafter referred to as the Council, a group of faculty and students empowered to receive, investigate and hear disputes and make recommendations to the appropriate disciplinary entity or COM committees. The composition and operation of the Council is described herein
- b. Acts observed that appear to be in violation of the Code will be reported to the Council
- c. Failure on the part of a student to report such violations, or acts that appear to be violations, will itself be considered a violation of the Code
- d. Lack of knowledge of the aforementioned precepts will not stand as adequate defense for violation of the Code
- e. The following pledge, where present, **MUST** be signed at the end of all examinations, quizzes, and other important projects on which the pledge is required by an instructor:

“On my honor, I have neither given nor received any aid on this examination, quiz, or paper, nor am I aware of anyone who did.”

Note: Absence of this pledge does not exempt the student or the assignment from the obligations set forth under this Code.

- Each student, at the start of each academic year, must sign a pledge upon matriculation stating that he/she has read, understands, and is aware of his/her responsibilities under the Code
- The Council will have primary jurisdiction over the supervision of the Code as it applies to medical students. This shall include all clinical, research, and academic affairs
- Honor, Professionalism and Ethics Council composition - the Council will consist of student and faculty members

D. **Honor Council Membership**

- a. Student Members - the Council will consist of four student members, one from each of the four classes, and four alternates, one from each class. For the first Council, and any Councils subsequently in need of student members, students in Years Two through Four (one member and one alternate each from Years Two through Four) will be selected by the Dean (or his/her designee, hereinafter called the Dean) via a defined application process through the Office of the Dean. A student member from Year One will be elected by the members of the first-year class not later than three weeks following the first examination of the year, or at the conclusion of the first month of classes, whichever is later. Student members are approved to serve as Council members, *not* as representatives of their class to the Council. Alternates are only called to serve in the event that their corresponding student member *cannot* serve because of a conflict of interest, cannot serve for the full academic year, for a substantial portion of the year, or for the remainder of the year (e.g. if a student loses good academic standing, or is investigated on a violation of the Code or other student

conduct policy). Once an alternate has been seated, that alternate will be a member of the Council for the remainder of the academic year, *unless* the need for that alternate was created by a sitting Council member's recusal because of a unique instance of conflict of interest (e.g. a student member who is a good friend of the accused, or a student or faculty member who is somehow involved in the Code breach).

In April of each academic year following implementation, student members may submit an application to the dean to serve on the Council for the next academic year. Applications will also be open to any student in good academic standing. No student previously found to be in violation of ANY Honor Code is permitted to serve.

- b. Faculty Members - eight faculty members will be appointed by the Dean; six of these shall be Council members and two will serve as alternates in the event that one or more of the six cannot serve. Not more than five of the eight faculty members and alternates shall be from either a clinical or basic science department. Each will serve a term of two years, with the opportunity for two terms of reappointment. Faculty members will be limited to three consecutive terms (six years). An assistant or associate dean in the COM will function as administrative support to the Council indefinitely in order to facilitate communication among Council members and students/ faculty involved in an investigation. Vacancies which exceed the number of alternates will be filled by appointments by the Dean
- c. Honor Council Leadership - The Chair will be one of the six faculty members of the Council. The Council will elect its Chair at an organizational meeting to be held during September of each academic year. The 4th year student Council member will serve as the Vice-Chair. The 3rd year student Council member will serve as the Secretary to the Council and begin his or her term of office in July.

E. Procedures for Reporting and Investigating Violations

- 1. If an individual (student, faculty or staff) believes that a violation of the Code has occurred, that individual must report the violation as soon as possible to the Chair of the Council. Failure to report the violation will itself constitute a violation of the Code, with possible charges made according to applicable policies. The names and contact information for Council members will be made available to all students, faculty and staff at the beginning of the academic year
- 2. Once an allegation has been made, the individual making that allegation must draft, sign, date and submit to the Council Chair and Secretary a brief written statement for Council documentation
- 3. Upon notification of a possible violation of the Code, the Council Secretary will inform the Council's Vice Chair that he or she and the Chair are required to complete an investigation. The Chair and Vice Chair will be responsible for gathering information about the case unless the accused student(s) are members of the senior class, in which case, the investigation will be completed by the Chair and Secretary. Every effort *must* be made to name a student co-investigator (Vice Chair, Secretary or other) who is *not* a member of the class within which a student or students have been accused of a Code breach. If students across all classes are to be investigated, the Chair shall name a faculty co-investigator in lieu of the Vice Chair, Secretary or other student co-investigator. The Chair shall exercise the right to name a faculty co-investigator in situations where more than two co-investigators are needed
- 4. The Chair shall inform the Dean of the following: that an investigation is being conducted, the name of the student(s). This notification will take place as soon as possible, but will not exceed 5 business days from the time that a complaint is received by the Council Chair

5. After information concerning the case has been gathered, the Council will convene to determine whether sufficient evidence exists to warrant a formal hearing. Student members within the class(es) of the accused are excused from this session. If students across all classes stand accused, the Dean will select two conflict-free students (members or alternates) to deliberate this decision with faculty members. Students and faculty with a conflict of interest are expected to recuse themselves from any investigation or deliberation where there is a conflict. Among members of the Council seated, the decision to continue with a formal hearing or cease the investigation will rest upon the vote of a simple majority of the convened members. Any meeting of the Council, whether a hearing, or a meeting to determine whether a hearing is warranted, the mandatory minimum number of convened members are detailed below.
6. If a hearing is deemed warranted, the accused student will be notified by the Secretary of the Council in writing of the date, time, and place of the Hearing; the nature of the violation with which the student is charged; the evidence of the investigation, including the name of the individual making the initial allegation, and of the opportunity to select an advisor. The accused has the option of selecting for an advisor from within the College of Medicine, but not a member of the Council, to assist in an advisory capacity prior to the hearing and to be present at the hearing. This individual will not be permitted to testify or to make statements of any nature during the Hearing. The student and advisor are empowered to review and gather evidence prior to the hearing.
7. The hearing will take place within twenty-one working days (excluding weekends) after the accusation is reported to the Council. (In rare instances, a different time period may be determined by the Council based upon the specific circumstances of the case.)
8. The accused will be permitted to continue matriculation until a final decision (including any opportunity for appeals) is made. All applicable tuition and fees must be paid by any student exercising this option. Under certain circumstances, especially, but not limited to, unprofessional behavior, the student may not be allowed to continue attending classes, courses, clerkships or electives until a final decision is rendered.
9. *Honor Council Quorum*: For each hearing, at least six members of the Council *must* be present: two student members and four faculty members, this includes the Council Chair, who will conduct the hearing, but who may only vote in case of the need to break a tie. If any member decides she/he cannot serve for any reason, including conflict of interest, then the alternate member will sit on the Council. The investigators (usually Chair and Vice Chair) will present pertinent information but will not be allowed to vote on the matter they have investigated.
10. It will be the responsibility of the Secretary to inform Council members and the accused of the alleged violation (date, person(s) involved, and nature of the accusation) and the time, place and date of the Hearing.

The standard legal rules of evidence or civil or criminal courtroom procedures and protocols **do not apply** to any hearings or proceedings regarding the Honor Code.

F. Order of Honor Council Proceedings

1. Call to order
2. Reading of Parts I and II of the Code of Honor, Professionalism and Ethics (Preamble and Statement of the Code of Honor, Professionalism and Ethics)
3. Statement of the alleged Code violation
4. Presentation of evidence: The investigators and then the accused will present evidence as appropriate and relevant to the case, including calling witnesses. Witnesses are *not* permitted

to be present at the Hearing unless they are giving testimony or answering questions. The Chair and members of the Council, and the accused, may ask questions of witnesses, but the Chair shall have the right to determine whether such questions are appropriate. The advisor may be present but is not permitted to question witnesses

5. Discussion and deliberation by the Council are held in a private executive session.

G. Rules Governing Proceedings

- a. All hearings will be conducted in closed-door session and will remain confidential
- b. Participants in the hearing will be limited to the following: Faculty and student Council members without involvement (or relationship to the matter which is the subject of the violation) or other conflict of interest; accused student(s), witnesses (during testimony and questioning only) and the advisor for the accused student(s)
- c. The Secretary or his/her appointee will take notes during the hearing and make them available to the Council. Notes (which may be made from a transcribed tape or taken directly by hand during the Hearing) will be held as a written record until the Council decides that a Hearing is *not* required or until accused student(s) are adjudged innocent of charges, whichever comes first. In these cases, this record will be destroyed and disposed of in a secure manner. If accused student(s) are deemed guilty, the record remains in a separate disciplinary file within the Office of the Dean, along with written documentation of the Dean's final decision regarding sanctions
- d. Each member has one vote during the proceedings. While it is expected that each student member will be present, there will only be one vote per voting member. Each faculty member will have one vote. The Chair will not have a vote unless there is a tie vote. The Vice Chair and / or Secretary will only have a vote in the event that he or she did not serve as co-investigator. All Council members present, and the accused, may ask questions of investigators and witnesses, to the extent that the Chair deems the questions appropriate

H. Decision and Penalties

- a. The Council will adjudge the accused to be innocent or guilty of charges made, and/ or of other charges which may have come to light as a result of the investigation and hearing
- b. The Council will *recommend* to the Dean of the College of Medicine disciplinary action or sanctions that it deems appropriate, including but not limited to:
 - i. A written warning with a temporary or permanent copy to the student(s) record
 - ii. Suspension for a defined period of time, with conditional or unconditional re-enrollment at the completion of the suspension
 - iii. Dismissal with the option to apply for readmission via the COM Readmissions process. Readmission is not guaranteed.
 - iv. Expulsion, which is permanent dismissal from the COM, and which precludes eligibility for readmission and results in a permanent barring from the COM and University owned property or sponsored events
 - v. Remediation as defined by the Council
 - vi. Restitution as defined by the Council
 - vii. Any logical combination of any of the above
- c. All decisions of the Council are made by a simple majority vote. The Council Chair *must* break any tie votes

- d. While the decision of guilt or innocence rests solely within the purview of the Council, the final decision as to sanction rests with the Dean of the College of Medicine. The decision of the Dean will be effective immediately unless there is an appeal. The appeal, including the basis for the appeal, must be submitted by the student in writing according to the COM Policy on Appeals (which is found in this manual, Howard University College of Medicine Policies and Procedures).

I. Amendments to the Honor Code

Amendments to the Honor Code may be proposed by the Honor Council at any point in the academic year; proposed amendments must be approved by the Executive Committee or the Faculty Senate of the COM before becoming effective. If an amendment is approved while a case is under active review, the new amendment will not apply to that case. Any new amendment, once approved, will become part of the policy for the ensuing academic year, and become effective at that time

References: Honor Codes of the Carver and Emory Schools of Medicine, with thanks to the COM Student Council for input.

Approved by the Board of Trustees – April 2010;

*Amendment proposed by the Honor Council and
voted by the College of Medicine Faculty Senate
on 10/09/2017; changes have been reflected in
the policy*

Updated by the Office of Academic Affairs – April 2020

RESOLUTION OF STUDENTS ON PROFESSIONAL STANDARDS

That academic dishonesty (i.e. cheating) can be understood by all concerned to be expressly unlawful; that no student shall have on their desk or in their possession books, notes, papers or electronic devices with memory capabilities during any examination room; that an adequate number of proctors supervise each examination; that a proctor shall relocate a student to another seat if to avoid even a suspicion of unauthorized practices; that the proctor will take the examination paper from a student or ask the student to move from the computer terminal who is seen cheating or possessing unauthorized books, papers or electronic devices with memory capabilities; that students be notified that all answer sheets are subject to a computerized analysis which can reveal cheating patterns; that the profession of the physician is an honorable one and that physicians and students must eschew dishonorable practices and that expulsion from the College of Medicine be the penalty for a student adjudged of cheating in an examination.

A copy of this resolution, pledging to observe these standards, shall be signed by each student upon entering the College of Medicine.

I hereby acknowledge and agree to abide by the above. I also acknowledge receipt of a copy of the Howard University College of Medicine Policies and Procedures Manual.

Print name:

Signed: **Date:**

Revised June 11, 2019

SECTION XII

STUDENT DRESS CODE

The guidelines which follow are of general nature. They set minimum standards only. In most instances, an individual's dress will far exceed these minimum standards. In many departments, more specific guidelines for dress will be set which relate directly to the specific situation in those areas.

A. General

All College of Medicine students are expected to dress in appropriate attire and to practice the highest standards of personal hygiene and cleanliness. All hair is to be neatly groomed and clean. Nails are to be neatly trimmed and clean. All clothing should be clean and free of holes.

B. Preclinical Guidelines

Unacceptable attire for students include short skirts and short shorts, clothes with holes, cutoff or frayed clothing such as jeans and shirts, tee shirts with inappropriate inscriptions, halter tops, midriffs, excessively low-cut necklines, sweat bands, and flip flops. Bermuda length shorts and skirts are acceptable. Students should be fully clothed at all times. Shoes are required in all areas. The entire foot should be covered in the laboratory and other specified areas in conformance with safety regulations. The wearing of athletic attire is discouraged.

C. Clinical Guidelines

In general, there should be conformance to the Howard University Hospital dress code which follows:

The Howard University Hospital dress code is designed to establish regulations governing attire conducive to good public relations and the welfare of patients and hospital personnel. It also reinforces dress standards that meet safety, infection control, and sanitary requirements of health care institutions.

The following list includes some of the articles or styles of dress that are unacceptable attire for work in the hospital:

- jeans
- halter tops
- tank tops
- tee shirts
- mesh or see-through garments
- short pants
- excessively low-cut necklines
- vests, short tops, or other clothing revealing, abdomen and lower back
- sundresses (alone)
- curlers in the hair
- open footwear including flip flops

Note: The Hospital will not assume responsibility for any injury sustained as a result of not wearing the proper type of safety shoes. In the interest of employee, trainee, and volunteer safety, and in accordance with the recommendations of the Hospital Safety Committee, this Hospital policy shall be strictly adhered to.

In addition:

- Attending staff and medical officers are to wear clean, pressed, three-quarter length white laboratory coats
- Postgraduate physicians are to wear clean, pressed, three-quarter length white laboratory coats
- Medical students are to wear clean, pressed, short white jackets
- Scrubs without white coats are not permitted outside of the Operation Room, Nursery, and/or Delivery Suites
- Proper identification badges and name tags are to be worn at all times
- All students should wear clean and properly fitted clothing
- All employees who work in areas where there is a possibility of heavy or sharp objects falling on their lower extremities are required to wear safety shoes that meet Standard of the American National Standard Institute (ANSI)
- The wearing of canvas top type shoes, sandals, and mesh shoes during the performance of duties is discouraged
- Bare feet are not allowed. Bare legs are discouraged
- The Hospital will not assume responsibility for any injury sustained as a result of not wearing the proper type of shoes.

D. Enforcement of Guidelines

It is the responsibility of every faculty member to monitor adherence to the above guidelines. If problems cannot be resolved at this level, then referrals should be made to the Associate Dean for Student Affairs and Admission.

Effective April 1, 1989

Updated August 2016

Reviewed and Edited June 2018

Reviewed June 11, 2019

Reviewed and updated April 15, 2020

SECTION XIII

ATTENDANCE AND CONDUCT DURING EDUCATIONAL SESSIONS

- **All orientation sessions at the beginning of each academic year are mandatory. Start dates are posted in the Schedules Booklet. Scheduled meetings with the Deans throughout the academic year are mandatory.**
- Students are expected to attend and to be punctual for all structured educational sessions
- **During the COVID-19 pandemic, classes that are delivered using an online tool i.e. Zoom, Microsoft Teams, etc., the students are expected to attend with video on and in professional/acceptable dress. All clinical skills/simulation/patient related sessions, the students should wear a white coat. See the Rules and Regulations for online lectures, testing and professionalism related to Zoom and other online tools.**
- Mandatory attendance is required for all active learning sessions, clinical rounds, clerkship didactic/problem solving sessions and conferences. Engaged (Active) learning sessions include but are not limited to:
 - Small group sessions
 - Team-based learning
 - Laboratory sessions
 - Clinical skills sessions
 - Simulation sessions
 - Demonstrations
 - Classroom discussions
 - Problem-solving sessions
- All mobile devices must be completely turned off during all educational sessions unless explicitly required by the teacher or if the educational session requires the use of such devices.
- Checking emails, answering telephone calls, texting, and any other form of electronic communications are prohibited during any educational session
- **Completion of evaluations of courses, clerkships, faculty, and residents are considered part of the course and clerkship**
- All educational sessions during the third and fourth years are mandatory. Students must be available within ten minutes when on duty for unscheduled rounds or unscheduled educational sessions.
- **Third year students (M3) are required to report for duty (rounds and patient care) on holidays (except Labor Day, Thanksgiving Day, Martin Luther King, Jr. Birthday and Independence Day). This applies to all sites where the student may be rotating.**
- **Fourth year students (M4) are required to report for duty (rounds and patient care) on holidays and during periods of unscheduled closure or delayed opening of the university. This applies to all sites where the student may be rotating.**

Updated June 2020

SECTION XIV

CLOSURE OF THE UNIVERSITY

A. Scheduled Closure

1. First and second year students

- All first- and second-year students may be excused from classes when the university is officially closed or when classes are suspended.
- When classes are suspended for University or College of Medicine events, students are expected to attend the events

2. Third year students

- Students shall not be scheduled for rotations during the College of Medicine Christmas/Winter break
- Students are required to be on rotation on all weekend days, College of Medicine Spring Break, and all university holidays except as noted above, unless the weekend day or holiday is their day off
- When classes are suspended for University or College of Medicine events, students are expected to attend the events

3. Fourth year Students – required rotations and electives

- Students may not be scheduled for rotations during the College of Medicine Christmas/Winter break
- Students are required to be on duty during weekends, university holidays, Thanksgiving break (including Thanksgiving Day), and College of Medicine spring break unless it is their scheduled day off
- When classes are suspended for university or College of Medicine events, students are expected to attend the events

B. Unscheduled Closure

1. First and second year students

- In case of delayed opening or unscheduled closure of the university, the faculty will make the decision to continue with class remotely by Zoom. If classes do not proceed remotely, materials that should have been covered during the delayed or closed period could be included on the examination that follows the delayed or closed period, providing the students are given written objectives prior to the delayed opening or closure of the university.
- If classes are not continued remotely, the unit leader shall make reasonable attempts to have the missed session(s) made up at a later date if possible. The unit leader may utilize previously recorded didactic material to present the missed information.

2. Third year students

- During periods of delayed opening or unscheduled closures of the university for inclement weather, students will be excused from the clerkships during the delayed or closed period but are expected to report for duty when conditions are safe and possible to do so.

In cases when there is an unscheduled early closure of the university the day before a scheduled federal holiday, the 3rd year medical student is to stay on duty until dismissed from clerkship duties

- Make-up lectures and other learning sessions shall be rescheduled whenever possible or proceed online
 - Students shall not be required to make up the missed period unless the missed period includes make-up time for an earlier rotation but will be responsible for the material that would have been covered during any lectures, small group session, or other learning activities.
3. **Fourth year clerkships (AI on medicine and surgery)**
- During periods of delayed opening or unscheduled closures of the university students on the required clerkships during the senior year are **NOT** excused from the clerkships unless access and safety prohibits travel.
 - Make-up lectures, PBL or other learning sessions shall be rescheduled whenever possible if not delivered online
4. **Electives**
- During periods of delayed opening or unscheduled closures of the university students on the electives may be excused from the rotations at the discretion of the director for the elective. However, students are encouraged to report for duty.
 - Make-up lectures, PBL or other learning sessions shall be rescheduled whenever possible unless they proceed virtually

Revised July 1, 2020

SECTION XV

EVALUATION AND GRADING

A. **Formative and Summative Evaluations**

The faculty shall provide formative evaluations for all students and the final grades for students in the first two years of the curriculum must be submitted to the office of the Senior Associate Dean for Academic Affairs within two (2) regular working days following final review of the examination questions. The final grades for all students in the second two years of the curriculum must be submitted to the Office of the Senior Associate Dean for Academic Affairs within 4 weeks following the end of each rotation.

Records of formative evaluations should be maintained in the respective departments for at least five years following the end of the educational experience

B. **Narrative**

The faculty is required to provide a narrative description of each medical student performance including non-cognitive achievement in each required course and clerkship whenever teacher-student interaction permits this form of assessment.

C. **Evaluations by Students**

Completion of evaluations by students of courses, clinical rotations, faculty, and residents in the College of Medicine and affiliated sites are considered part of the grade for each course and clerkship.

The final grade of a course or clerkship for any student who fails to complete these evaluations will be withheld until the student completes the evaluations.

D. **Grading**

The College of Medicine's grading scale is one that sets a predetermined numerical performance value that is equal to a letter grade. All students can, in theory, earn the grade of Honors (H). Numerical scores and equivalent letter grades are as follows:

Honors – A final score of 85 or greater

***High Pass** – This designation is only available during the 3rd year Core Clerkships

Satisfactory – A final score of 70-84

Unsatisfactory – A final score of less than 70

**High Pass – This grade is awarded when a student receives Honors on the clinical portion (including all components of the grade except the NBME shelf exam) of the clerkship grade but did not receive Honors on the NBME Subject Examination and the final grade average must be 85 or above. The grade designation is only available for the following 3rd year Clerkships: Internal Medicine, Family Medicine, Psychiatry, Pediatrics, Surgery and Obstetrics/Gynecology. This new grade designation was added because of the clerkship rule that you cannot obtain an Honors grade on the Jr. Clerkships if you do not Honor all components of the clerkship including the NBME Subject Examination.*

E. **First and Second Years**

The minimum passing score for each examination (faculty generated or NBME customized) shall be 70 raw score; and a raw score of 85 shall be considered Honors. The faculty shall determine the weight of each examination, each quiz, and any other assignments for computation of the final grade which will be posted prior to or on the first day of class.

F. **Third and Fourth Years**

The minimum passing score on all subject examinations is 70. The faculty in each department determines the weight of all other examinations, quizzes, assignments and clinical performance in computing the final grade. The clinical component of the final grade shall be based on the student's level of achievement of the general competencies defined by the clinical departments. **A student who fails the clinical component fails the clinical rotation.**

G. **Unexcused absence/lateness from Active learning sessions for All Students**

Attendance at all sessions for TBL, SGL, Labs, Clinical Skills Center, Simulation Center, and patient contact is mandatory.

- Students who are late by 10 or more minutes without excuse from the Associate Dean for Student Affairs and Admissions should remain for the learning session and will be permitted to take a quiz, if one will be administered for that session (but will receive a zero (0) for the quiz). These students will be considered absent for the session.
- Students who are absent or late by 10 or more minutes without excuse from the Associate Dean for Student Affairs and Admissions will have final grades reduced for the unit as shown below:

Four (4) points will be deducted from the final grade if >10% of sessions are missed without official excuse from the Associate Dean for Student Affairs. The student with >10% unexcused absences will not be eligible to receive Honors in that course.

H. **Professionalism**

The grade at the end of the first semester of each academic year shall be formative and noted as Pass/Fail. A student who receives a failing grade during or at the end of the first semester of the school year shall be:

- placed on self-reflection, or
- mandated to a program on professionalism recommended, or
- referred to the Honor Council

The grade at the end of the second semester of each school year shall be summative and shall be entered on the students' record as Pass or Fail.

A first, second, or third year student who receives a does not meet expectations for professionalism may be conditionally promoted to the next year or may not be promoted to the next year until the student satisfactorily completes a program of remediation. A fourth-year student who receives a failing grade for professionalism may not be permitted to graduate until she/he satisfactorily completes a program of remediation. The Committee on Promotions and Graduation shall determine the course of action for any student who receives a failing grade. When the breach of professional behavior is serious as determine by the Honor Council, the student may be dismissed or expelled from the College of Medicine.

Students who exhibit unprofessional behavior may have their final numerical grade for any course or clerkship reduced. This reduction could include a change in the letter grade from H/HP to S, or from H/HP to U, or from S to U.

*Approved by the Curriculum Committee November 2017;
Reviewed and edited June 2020*

I. Non-Involvement of Providers for Student Evaluations

Non-involvement of providers of student health services in student assessment/location of student health records.

Any physician/resident or other healthcare provider who renders medical care to any student enrolled in the Howard University College of Medicine will not participate in the academic/clinical evaluation, or in promotion and graduation decision of that student. Student health records will be maintained in the Office of Student Health in accordance with HIPAA policies. By completing the evaluation (formative or summative), the evaluator attests that she/he did not participate in the medical care of the student.

J. Official Grades

Grades for examinations and final grades are official only when issued through the Office of Academic Affairs.

K. Right to Appeal

All students have the right to appeal any grade, evaluation, or any adverse decision. The appeal process is described throughout in this manual

Updated June 2019

SECTION XVI

EXAMINATIONS AND QUIZZES

A. EXAMINATIONS AND QUIZZES, IN-PERSON

- For exams given online with remote proctoring please refer to the policies and procedures distributed in a separate document relating to online exams and quizzes. (COVID-19)
- Proctors will be present in the examination room approximately 15 minutes before the scheduled examination time.
- Students should be seated at least five (5) minutes before the scheduled starting time. Proctors will make sure students are properly seated according to seat assignments.
- The doors will close promptly at the time the examination is scheduled to begin. Students arriving late will not be admitted to the examination room while examination materials are being distributed and/or instructions are being given to students who were present on time. Those students who arrive late will not be given additional time to complete the examination. **Any student who arrives more than twenty (20) minutes late will not be admitted to the examination.**
- **No books, notes, electronic devices or other paraphernalia will be allowed at examination seats.** Materials brought to the examination room must be placed in the front or back of the room. Electronic devices of any type with memory or communication capabilities are not permitted on any student's person, even if the devices are turned off, during any examination or quiz. Students are therefore advised not to carry these devices to the examination room. If they do carry them to the room, the devices must be completely turned off and turned in to a proctor or left at the front or the rear of the examination room until after the examination has been completed. The College of Medicine assumes no responsibility for loss of such devices if they are carried to the examination room and left with a proctor, at the front of the room, or the rear of the room during the examination.
- Food and beverages (except when medically necessary), radios, electronic devices with memory and or recording capabilities, or earphones are not allowed in the examination room. Students who have medical needs must contact the Associate Dean for Student Affairs and Admissions prior to the start of the examination or each academic year. Water is permitted.
- During the course of examinations, students will remain in their assigned seats. Questions and needs of individual students will be attended to by proctors who will go to the students seating area when the student raises his/her hand.
- Students who finish the examination before the last 10 minutes may leave the examination room one at a time. These students will raise their hands and remain seated until released by a proctor. These students will not be permitted to reenter the examination room.
- No student will be permitted to leave the examination room during the last 10 minutes of the examination. **Students who finish any examination during the last 10 minutes must remain seated and refrain from talking.**
- Students may leave the examination room one at a time to take care of personal needs. These

students will raise their hands and remain seated until permission is granted by a proctor. A proctor will log in the time the student left the examination room and the time the student returns to the room. This list will be submitted to the Senior Associate Dean for Academic Affairs immediately following the end of the examination. Students will not be given extra time to make up the missed time lost during the absence.

- Upon completion of the examination, students must remain seated until dismissed by the chief proctor. Students are not permitted to leave their seats and carry the examination material to the proctor or other areas of the room or outside of the examination room.
- It is the responsibility of the student to monitor the time and their progress during the exam.
- Quizzes are sometimes administered following educational sessions. Students are advised to turn off all communication devices during the educational sessions. All such devices must be turned in or placed in front or the rear of the classroom before the start of the quiz. No student is permitted to leave the classroom until after all students have completed the quiz and turned in their answer sheets.
- All students must sit for each examination as scheduled except for excused absences. Students who are excused from any examination or quiz must make up the missed examination or quiz detailed elsewhere in this manual.
- Any student who fails to follow the College of Medicine policy on missing examinations will be awarded zero (0) for the examination.
- “Make-up” examinations will be administered according to the policy on excused absences and make-up examinations.
- In case of delayed opening or unscheduled closure of the university, materials that should have been covered during the delayed or closed period could be included on the examination that follows the delayed or closed period, providing the students are given written objectives prior to the delayed opening or closure of the university.
- Students who are in violation of any of the above will be subject to disciplinary action that may include but not limited to:
 - Failing grade for the quiz or examination
 - Failing grade for the unit or clerkship
 - Ineligible for reexamination
 - Ineligible for the Summer Directed Study Program
 - Ineligible to repeat the clerkship
 - Dismissal from the College of Medicine

Use of these procedures is intended to assure:

- a. Consistency among all units and departments in conducting examinations
- b. Maximum available time for students to take examinations; and
- c. The best possible environment in which students will take examinations.

B. Clinical Skills Examinations for Courses and Clerkships

- Students may be permitted to leave the orientation to take care of personal needs. If they return after the examination has started, they will not be permitted to enter the examination suite

- Students are not permitted to enter examination session if the examination has started
- Talking is prohibited during the administration of any examination
- Students are not permitted to discuss the cases with anyone (before, during, or any time after the examination) other than members of the faculty who will review the students' performance on the clinical skills examination
- Electronic devices or any devices with memory capability are not permitted in the examination suite. Students who violate this policy will not be permitted to continue the examination and will be referred to the Senior Associate Dean for Academic Affairs
- It is the responsibility of the Course Director and Clerkship Director to:
 - Report results of clinical skills examinations to the student
 - Request that the Center release videos to the students for review
 - Discuss students' performance with the students
- The Director of the Clinical Skills Center will post the results of clinical skills examinations for the course and clerkship directors
- Students must follow the standard procedure in case of absences

C. **Third Year Clinical Skills Examination**

All students must take and pass the clinical skills examination which is administered during the third year. Students must take the examination according to the schedule that is set by the College of Medicine. This is a consortium (regional medical schools) examination. Students who do not pass the examination will be placed in an enhancement program for clinical skills and will be required to retake and pass the examination prior to graduation.

D. **Unscheduled Closure and Delayed Opening of the University**

1. **First and Second Years**

Early Closure

If an examination is already in progress and an announcement is made that the university will close early then the examination may be fully administered according to the judgment of the chief proctor. If not, the examination will be rescheduled.

Delayed Opening of the University

When there is a delayed opening of the university and an examination is scheduled during the delayed period, students and faculty shall expect that the examination will be administered the same day whenever possible, but no later than two hours following the opening of the university. If the exam is not given on the scheduled exam day after the delayed opening, then the examination should be administered within 3 school days following the opening of the university. The unit leader/coordinator shall coordinate with the Senior Associate Dean for Academic Affairs the date, time and location for administration of the examination. The unit leader/coordinator or designee shall:

- a) Post signs announcing the date, time, and location for the administration of the examination. One of the postings shall be outside the room where the examination was originally scheduled to be administered.
- b) Whenever possible, make an oral announcement to the class.

- c) Arrange for an email to be sent to the faculty proctors and students

Closure of the University on one or more days

When there is an unscheduled closure of the university for one or more days and an examination is scheduled during the closed period, students and faculty shall expect that the examination will be administered the first day of the reopening of the university, but no later than two hours following the reopening whenever possible. The examination should be administered within 3 school days following the reopening of the university. The unit leader/coordinator shall coordinate with the Senior Associate Dean for Academic Affairs the date, time and location for administration of the examination. The unit leader or designee shall:

- Whenever possible post signs announcing the date, time, and location for the administration of the examination. One of the postings shall be outside the room where the examination was originally scheduled to be administered.
- Whenever possible make an oral announcement to the class. These examinations may be scheduled during times other than regular scheduled class time, but not on weekends and holidays.
- Arrange for an email to be sent to the faculty proctors and students

2. Third and Fourth Years

Early Closure of the University

If an examination is already in progress and an announcement is made that the university will close early then the examination may be fully administered according to the judgment of the chief proctor.

Delayed Opening of the University

If there is a delayed opening of the university for one or more days and an examination is scheduled during the delayed period, students and faculty shall expect that the examination will be administered the same day but no earlier than two hours following the opening of the university. Students on clinical rotations shall contact the department, the clerkship director for the respective clerkship or the Office of the Senior Associate Dean for Academic Affairs for the rescheduled date, time, and location for administration of the examination. The examination should be administered within 3 days following the delay. The clerkship director or designee shall post signs announcing the date, time, and location for the administration of the examination. One of the postings shall be outside the room where the examination was originally scheduled to be administered.

Closure of the University for One or More Days

If there is an unscheduled closure of the university for one or more days and an examination is scheduled during the closed period, students on clinical rotations shall contact the department or the clerkship director for the respective clerkship for the rescheduled date, time, and location for administration of the examination. The examination shall be administered no earlier than 24 hours but no later than three days following the reopening of the university. The clerkship director shall coordinate with the Senior Associate Dean for Academic Affairs the date, time and location for administration of the examination. The clerkship director or designee shall post signs announcing the date, time, and location for the administration of the examination. One of the postings shall be outside the office of the clerkship coordinator (secretary).

NOTE: The faculty may choose to deliver the exam remotely if possible. This decision will be left up to the course coordinator or clerkship director

E. Reexaminations

1. Years 1 and 2

a. Purpose

The purpose of the reexamination is to give students who fail one or two units a second opportunity to demonstrate their satisfactory understanding of the information taught in the unit(s). It is not intended to provide time for remediation in knowledge or to increase a passing score to a higher level.

b. Definition of terms for this policy

- i. **Satisfactory grade** refers to a passing grade (H or S) at the end of the unit; or passing grade following reexamination, if eligible for reexamination
- ii. **Conditional unsatisfactory grade** refers to the unsatisfactory grade before reexamination, if eligible for reexamination.
- iii. **Unsatisfactory grade or transcript unsatisfactory grade** refers to any one of the following:
 - Failing grade on reexamination
 - Failing grade when a student is ineligible to sit for reexamination
 - Conditional unsatisfactory grade when the student is eligible but fails to sit for the reexamination

c. Eligibility

Subject to the conditions set forth in this policy, any student who receives one (1) or two (2) conditional unsatisfactory grade(s) in one semester may be offered reexamination(s) for the unit(s) providing the student:

- i. Sat for all the examinations and quizzes in the unit(s)
- ii. Satisfactorily completed all other requirements in the unit(s)
- iii. Attend all laboratory and all enhanced (active) learning sessions (see Section XIII, page 46) as scheduled
- iv. **Obtain a minimum score of 65% on laboratory examination(s) (what constitutes laboratory examinations will be determined by the respective course coordinator) – this requirement is for M1 students only**

d. Eligibility Limits

A student is eligible to sit for no more than two (2) reexaminations each semester (exclusive of Introduction to Clinical Medicine). *Only the Senior Associate Dean for Academic Affairs shall determine the eligibility of students for reexaminations, and each student must obtain written permission from the said Associate Dean to sit for any reexamination.*

e. Advisement for Selecting Reexaminations

A student who fails three (3) or four (4) units during the semester must meet with the Senior Associate Dean for Academic Affairs to determine which failing grades will be designated as conditional unsatisfactory. If eligible to sit for reexaminations, the student shall make the final selection for the conditional unsatisfactory grades. The remaining grade(s) shall be deemed transcript unsatisfactory. The student must inform the Senior Associate Dean for Academic Affairs in writing of his/her decision. **It is the responsibility of the students to initiate the discussion.**

f. Three or More Unsatisfactory Grades

A student who accumulates three or more transcript unsatisfactory grades is not eligible for reexaminations or for the Summer Directed Study Program (SDSP) and will be dismissed.

g. **Responsibility**

It is the responsibility of the student to obtain the written permission to sit for reexamination(s) from the Senior Associate Dean for Academic Affairs. Any student who sits for any reexamination without such written permission shall be awarded an unsatisfactory grade for the unit, even if the student obtains a passing score on the reexamination.

h. **Schedule for reexaminations**

The reexaminations shall be offered only once each semester. The reexaminations shall be administered according to the following schedule:

1. First week of January for units offered and completed during the fall semester for freshman and sophomore medical students
2. Approximately 10 days after the last examination at the end of the spring semester for freshman medical students for units offered and completed during the spring semester
3. Approximately 7 days after the last examination at the end of the spring semester for sophomore medical students for units offered and completed during the spring semester
4. Students who have 2 reexaminations, the dates and time for the reexaminations as shown in the Schedules Booklet may be adjusted by mutual agreement between the students who are eligible for the reexamination and the Senior Associate Dean for Academic Affairs. The final decision ultimately resides with the Senior Associate Dean for Academic Affairs.

i. **Grades for reexaminations**

There shall be no “make-up” reexamination. A student who is eligible to sit for a reexamination must pass the reexamination to receive a satisfactory grade for the unit/course. A student must obtain a 70 or greater to pass the reexamination. Upon passing the reexamination, the maximum score that can be awarded for the unit shall be the minimum passing score (70 – S). A student who fails the reexamination fails the unit.

j. **Introduction to Clinical Medicine 2 and reexamination**

The final grades for Introduction to Clinical Medicine 2 are usually not available in time for reexaminations. Therefore, Introduction to Clinical Medicine 2 shall not be included in the maximum of two (2) conditional unsatisfactory grades. Remediation of clinical content of this course shall be determined by the course coordinator and the Sr. Associate Dean for Academic Affairs. Remediation must be completed no later than the same date of completion for the SDSP for sophomore medical students.

2. **Years 3 and 4**

A third or fourth student may be offered one reexamination in each clinical course in which he/she obtains an unsatisfactory examination grade. Any student who fails the written examination at the end of the clinical course must sit for the examination (reexamination) at the next offering of the examination in that clinical course unless he/she obtains a written excuse from the Associate Dean for Student Affairs and Admissions. A student who fails to sit for the reexamination in a timely manner as noted herein will be awarded zero (0) for the examination. The maximum examination grade that can be assigned for a reexamination shall be the minimum passing score (70 – S). **A student who fails the reexamination fails the clinical course/clerkship.**

Updated June 2020

SECTION XVII

UNITED STATES MEDICAL LICENSING EXAMINATIONS (USMLE)

A. USMLE Step 1

- *All students must pass Step 1 of the USMLE prior to starting the junior year.*
- **No student may begin the junior year after September.**
- Students will not be permitted to enter any rotation that is in progress while waiting for the results of the USMLE Step 1.
- Students will be considered as not making satisfactory academic progress (SAP) if the student is required to attend the Summer Directed Study Program (SDSP) or if a passing score for USMLE Step 1 is not received on or before the second Wednesday in July – even if the student is in the SDSP.
- Federal financial aid will be disbursed only after a passing score for USMLE Step 1 is received by the College of Medicine. The date for distribution of the financial aid will be determined by the university.

1. Students not in SDSP

a. First Attempt

Students who have successfully completed the sophomore medical curriculum and are not in the SDSP or required to take reexamination *must* sit for the USMLE Step 1 exam for the first time such that scores are available no later than the second Wednesday in July. It is expected that all students will take Step 1 exam near the date published in the Schedules Booklet. Extensions will not be granted except in cases of emergency or as determined by the Sr. Associate Dean for Academic Affairs. Students granted an extension to sit for the examination must have a passing score no later than one week prior to the start of clerkships in September depending on the length of the extension. Students who are not granted an extension to sit for the examination will not be able to start the school year until the following July. Also, students who do not have a passing Step 1 grade by one week prior to the start of clerkships in September will not be able to start the school year until the following July. Financial aid eligibility, health insurance, and disability income benefits will be affected.

b. Second Attempt

A student who was unsuccessful on the first attempt at USMLE Step 1 must meet with the Senior Associate Dean for Academic Affairs to design a remediation plan for the second attempt. This may include enrolling in a review course prior to the second attempt. In order to begin third-year clerkships in September, a passing score would be required no later than one week prior to the start of that clerkship.

2. Students in SDSP

a. First Attempt

Students in SDSP must meet with the Senior Associate Dean for Academic Affairs within two weeks of the start of SDSP to plan scheduling for USMLE Step 1. Students who are in the SDSP and pass all courses will be permitted to begin the third year in July if passing scores for USMLE Step 1 are received no later two weeks prior to the start of school in July.

A student who was in the SDSP *must* sit for the examination no later than the second Tuesday in August so he/she can begin a clerkship in September providing a passing score for the examination is received no later than one week prior to the start of the September clerkship.

Students who are unable to meet this deadline must meet with the Senior Associate Dean for Academic Affairs and the Associate Dean for Student Affairs. Students granted an extension to sit for the examination will not be able to start junior year until the following July. Financial aid eligibility and health insurance and disability income benefits will be affected.

b. **Second Attempt**

A student who was unsuccessful on the first attempt at USMLE Step 1 must meet with the Senior Associate Dean for Academic Affairs in order to design a remediation plan for the second attempt. This may include enrolling in a review course prior to the second attempt. This student will not be able to start clerkships until July of the next academic year.

3. **All Students**

a. **Repeat Exams**

Students who fail the USMLE Step 1 may be required to enroll and complete a well-recognized review course before sitting for the examination again. Participation in the review course must be approved in writing by the Senior Associate Dean for Academic Affairs. The student must write a letter or send an email to the Senior Associate Dean for Academic Affairs identifying the specific review course in which he or she plans to enroll. The letter must include the name and contact information for the course director and must be accompanied by a copy of the course description. Students will be notified in writing if the course is approved. The Senior Associate Dean for Academic Affairs may waive the requirement for the student to provide a copy of the course description if such course has been previously (within the past two years) approved, but written approval to take the course is required. Students must obtain approval from the Senior Associate Dean for Academic Affairs prior to enrolling in any review program(s).

Students may appeal to the Dean requesting that the College subsidize the cost of the required review course selected. The letter should provide the name of the course, the tuition cost, the amount of subsidy requested, and a contact name and number for the course. Any subsidy approved will be submitted directly to the program.

International students (F-1 VISA) who are required to take the review course are advised to consult with the Office of International Students at Howard University.

Students who do not pass the USMLE Step 1 on the third attempt will be dismissed from the College of Medicine.

b. **Absolute Deadline for Receipt of Passing Score and Taking the Examination**

Students who fail to have a passing score for USMLE Step 1 reported to the College of Medicine by the second Wednesday in July of the year following the one in which they successfully completed the sophomore year **will be** dismissed.

4. **Additional Guidelines for Students for USMLE Step 1**

- a. Students may elect to request a leave of absence (LOA) or withdraw from the College of Medicine for the fall and or the spring semester. If the decision is made to withdraw, a withdrawal form must be completed in the Office of Academic Affairs. The student withdrawal procedures contained in the “HUCM Policies and Procedures” manual must be

followed. Students who withdraw or who have approved LOA will not be eligible for financial aid, health services, library privileges, or any other privilege and benefit reserved for registered students. Students who withdraw from the University and wish to reenroll must apply for readmission. The procedure for application for reenrollment is detailed in Section XXIII (23) of this manual.

- b. Students who withdraw from the university after completing the second year must apply for readmission, and if readmitted must register as a student in the College of Medicine for a one credit hour of self-study in preparation for the USMLE in order to be certified by the College of Medicine as a registered student to be eligible to sit for the USMLE. The registration and sitting for the examination must be in the same semester.
- c. Students requesting LOA for academic programs such as MBA, PhD and others must first successfully pass USMLE Step 1 in order to be approved for said LOA.

B. USMLE Step 2 Clinical Knowledge (CK) and Clinical Skills (CS)

Students must pass the USMLE Step 2 CK and CS in order to graduate. For the 2020-2021 academic year, USMLE Step 2 CS examination will not be required for a May 2021, June 2021 and December 2020 graduation date due to the suspension of the exam for 12 to 18 months from May 2020. This decision was made by the National Board of Medical Examiners due to the COVID-19 pandemic. This requirement will be reinstated when the CS exam is available again.

Passing score/grade for USMLE Step 2 CK and CS must be received by the College of Medicine no later 9:00 a.m. on the day the Rank Order List (ROL) closes. If passing scores are not received by this deadline the student ***will be*** withdrawn from the National Residency Matching Program (NRMP). This applies to all students, regardless of when they completed the third year or started the fourth year. The date that the ROL closes can be found on the NRMP website, and the reporting schedule for the USMLE Step 2 CS can be found on the USMLE website. Results of the USMLE Step 2 CK are generally available within 4-5 weeks after sitting for the examination.

1. First Attempt

Students are required to take the USMLE Step 2 CK and CS for the first time within six weeks following completion of all third-year curriculum requirements. Students who complete the junior year after September may therefore have to sit for the USMLE Step 2 CK and CS shortly after completing the third year or they may not participate in the NRMP, because the results may not be reported in time to meet the deadline mentioned above.

2. Second Attempt

Students who fail the USMLE CK and or CS on the first attempt must meet with the Senior Associate Dean for Academic Affairs and plan to retake the examination(s) for the second time within eight (8) weeks after the results for the first sitting are available. Students will not be permitted to participate in the NRMP that academic year unless passing scores/grades for the USMLE Step 2 CK and CS are received in the Howard University College of Medicine no later 9:00 a.m. on the day the Rank Order List (ROL) closes.

3. Third Attempt

Students who do not pass the USMLE Step 2 CK and or CS on the second attempt will not be permitted to participate in the NRMP for that academic year. They **must** satisfactorily complete a program or programs of review(s) before sitting for the examination(s) for the third and final time. The student must write a letter to the Senior Associate Dean for Academic Affairs identifying the review course in which he or she plans to enroll. The letter must include the name and telephone

number of the course director and be accompanied by a copy of the course description. Students will be notified in writing if the course is approved. The Senior Associate Dean for Academic Affairs may waive the requirement for the student to provide a copy of the course description if such course has been previously (within the past 2 years) approved.

International students who are required to take the review course are advised to consult with the Office of International Students at Howard University. Students must obtain written approval from the Senior Associate Dean for Academic Affairs prior to enrolling in the review program(s). Passing grades for USMLE Step 2 CK and CS must be received in the College of Medicine no later than one year after successfully completing the fourth-year curriculum. These students will be permitted to participate in the NRMP only if passing scores/grades for the USMLE Step 2 CK and CS are received at the College of Medicine no later 9:00 a.m. on the day the Rank Order List (ROL) closes in the year following the one in which they completed the fourth-year curriculum.

Students may appeal to the Dean requesting that the College subsidize the cost of the review course selected. The letter should provide the name of the course, the tuition cost, the amount of subsidy requested, and a contact name and number for the course. Any subsidy approved will be submitted directly to the program.

International students (F-1 VISA) who are required to take the review course are advised to consult with the Office of International Students at Howard University.

Students who do not pass the USMLE Step 2 CK or Step 2 CS on the third attempt will be dismissed from the College of Medicine.

4. Absolute Deadline for Receipt of Passing Score

Students who do not have passing score/grade reported to the College of Medicine for USMLE Step 2 CK and or USMLE Step 2 CS within one year of the year following the one in which they successfully completed the fourth-year curriculum may be dismissed.

C. Failure of USMLE Step 1 or Step 2 Three Times

A student who fails USMLE Step 1 or USMLE Step 2 CK or USMLE Step 2 CS three times will be dismissed from the College of Medicine and is not eligible for readmission to the College of Medicine

Revised June 2020

SECTION XVIII

SATISFACTORY ACADEMIC PROGRESS

Students who pass all courses, clerkships, electives, and the USMLE on the normal schedule shall be considered to be making Satisfactory Academic Progress. A student will be considered not to be making Satisfactory Academic Progress (SAP) if she/he:

1. Is required to attend the Summer Directed Study Program (SDSP) at the end of the first year or at the end of the second year
2. Fails to have a passing score for USMLE Step 1 reported to the College of Medicine on or before the second Wednesday in July of the year in which the student completed the second year
3. Fails to satisfactorily complete all third-year clerkships and courses within twelve (12) months after starting the third year
4. Fails two or more clerkships and or electives during the third or fourth year
5. Fails to have passing score/grade for USMLE Step 2 CK and CS reported to the College of Medicine on or before fourteen (14) days prior to graduation

The College of Medicine's Office of Academic Affairs will immediately notify the Office of Financial Aid (Main Office and College of Medicine Office) of all first- and second-year students who are required to attend the SDSP or who have three or more unsatisfactory grades or third and fourth students with two or more failed clerkship grades. NOTE: This notification shall be made even if the student is appealing one or more grades.

The Office of Financial Aid will immediately update the student's SAP status in Banner and reverse any aid awarded or disbursed for the current or subsequent semester if necessary. For example, a student enrolled in the Spring semester for whom a dismissal notification based on the Fall semester grades is received in January by the Office of Financial Aid will have their Spring semester aid reversed. Students who choose to appeal to the Dean will also have to complete and submit a Satisfactory Academic Progress (SAP) Appeal to the Office of Financial Aid (main office). Students whose appeals to the Dean AND the Office of Financial Aid are approved will have their aid restored.

Students whose appeals to the Dean are denied will be administratively withdrawn by the Office of the Academic Affairs via a memorandum to the Office of the Provost and the Office of the Registrar, with a copy submitted to the Office of Financial Aid (Main Office and College of Medicine Office). No student who is academically dismissed should complete their own Total Withdrawal form at any time.

Students who have not made SAP must meet with the Senior Associate Dean for Academic Affairs and jointly complete a SAP Academic form. The form will become part of the student's record. The student may also file a SAP appeal if she/he will be applying for financial aid. The student is advised to meet with the Financial Aid Manager to discuss the SAP appeal process.

Students who are at risk for not making SAP, e.g. failure or low passing grades on examinations, are strongly encouraged to attend MEDSTARS sessions offered through the Office of Medical Education.

Note: Grade point average (GPA) is not issued for students in the College of Medicine. See Section 15 for explanation of the grading policies in the COM.

Updated January 2014; Reviewed June 2019; Updated June 2020

SECTION XIX

ACADEMIC ENHANCEMENT PROGRAMS

A. Student Academic Support Program (SASP)

The Office of Medical Education (OME), in a series of workshops, presents problem solving, critical thinking, and assessment of learning styles strategies for concept mapping to medical students during freshman orientation week and during the early part of the first semester of the first year. While academic support is available to all students, students who are identified as requiring academic reinforcement are referred to the OME for academic counseling.

B. Medical Student Taught Academic Review (MedSTAR)

The MedSTAR program has tutors who are selected on the basis of their academic performance, scholastic standing, and personal traits to provide assistance to students who require support in handling course content. This program is designed primarily for students in the first two years of study.

The clerkship directors in conjunction with the staff in the OME will devise individual academic enhancement plans for students who encounter academic challenges during the last two academic years in medical school. Referral can be made by any administrator, any faculty member, or by the student himself/herself.

Summer Directed Study Program (SDSP)

The SDSP is designed to enhance preparation for further medical study and increase retention of students enrolled in the College of Medicine. A student may be eligible to attend the SDSP if she/he has no more than two (2) transcript unsatisfactory grades during the freshman year or during the sophomore year. *Attendance at all sessions in the SDSP is required and will be recorded for those students to whom the opportunity to enroll in the program is granted by the Committee on Student Promotions and Graduation. A student who fails to attend scheduled classes will be dismissed from the College of Medicine. Unexcused absences will not be permitted (see guidelines for excused absence).* Only one examination will be offered for each unit in the SDSP. If quizzes are to be used to compute the final grade, they may only account for 10% of the overall grade. The inclusion of quizzes in the final SDSP grade must be determined prior to the start SDSP. There will be no exceptions. If quizzes are used as practice for a SDSP course, these quizzes will not be included in the final grade. The maximum unit grade that will be assigned after obtaining a satisfactory grade in the SDSP is 70 - Satisfactory.

Students who are not repeating an academic year and who earned one or two final (transcript) unsatisfactory grade(s) will continue in the academic year. This student will be offered the opportunity to attend the Summer Directed Study Program (SDSP), and at the conclusion of the SDSP they will be provided an examination in the one or two previously failed unit(s) for obtaining satisfactory grade(s). If a student fails to obtain satisfactory grade(s) in the unit(s) taken in the SDSP, he/she **will be** dismissed from the College of Medicine. Students who are repeating an academic year, including students who restarted the curriculum after an approved leave of absence regardless of the reason, are not eligible for the SDSP.

C. Reexaminations

These are described in Section 16 of this manual.

D. Repeat clerkship or Elective

A third- or fourth-year student who is not repeating an academic year may be eligible to repeat a clerkship or elective. A satisfactory grade must be obtained by successfully repeating all components of the clerkship or elective and passing the written examination and quizzes, even if he/she previously passed the examination. The maximum grade assigned in this case for the clerkship or elective is 70-Satisfactory. **A student shall not repeat a clerkship or elective or part of a clerkship or elective during the same period that he/she is rotating on another clerkship or elective.** A student who fails a reexamination or fails the clinical component of a clerkship or elective will be awarded an unsatisfactory grade for the clerkship or elective.

E. Repeat an Academic Year

- **First and second year**

A student who is dismissed for academic reasons from the College of Medicine may be offered the opportunity to repeat the first or second year. The student must apply for readmission according to the procedure outlined in Section XXVIII (28) of this manual. If readmitted, attendance at all instructional sessions is required. The student will be required to attend additional academic reinforcement programs. **A student, who fails to attend all instructional sessions, unless officially excused, will be dismissed from the College of Medicine.**

- **Third and fourth year**

A student who fails two or more clerkships or electives during the same academic year for academic reasons, or who fails a clerkship or elective that she/he is repeating may be offered the opportunity to repeat the entire academic year. The student may also be offered the opportunity to restart the academic year before completing that academic year in which she/he incurred the deficiencies.

F. Change in Rotation Schedule (Clinical Years)

A student who fails one or more clerkship and/or elective end-of-rotation examination(s) may request the Senior Associate Dean for Academic Affairs adjust his/her rotation schedule. The Senior Associate Dean for Academic Affairs may also recommend a change in the student's rotation schedule. Such adjustments may include a leave of absence from the College of Medicine.

G. Personal Challenges

The university operates a program of counseling to support students who have personal challenges that may affect their well-being or academic performance. The counseling is strictly confidential, and the counselors have no role in teaching or evaluating medical students.

H. Academic Difficulty

Students in academic difficulty must meet with the Senior Associate Dean for Academic Affairs.

Updated April 2020

SECTION XX

REPEATING STUDENTS

- A. A repeating student is one who:
- Has completed an academic year is dismissed from the College of Medicine and is readmitted and required to repeat an academic year, OR
 - Has completed at least one course or clerkship and who withdraws with one or more transcript or conditional unsatisfactory grade(s) before completion of the semester or completion of the entire academic year and is readmitted to the College of Medicine to repeat that academic year, OR
 - Is required to restart an academic year with or without withdrawal or dismissal from the College of Medicine or without completing the entire academic year. This category of students includes any student who leaves the curriculum on a leave of absence for any reason.
- B. If a student is allowed to repeat or restart any academic year, he/she must satisfactorily complete all components of all units/clerkships/courses/electives in that academic year, including those already passed and those that he/she may not have previously taken.
- C. **A repeating student who fails any unit/course/clerkship/elective during the repeat year will be dismissed from the College of Medicine.** This includes those units or courses or clerkships that he/she may have taken and failed OR not have taken previously OR may have taken previously and passed. A repeating student who fails any unit, course, clerkship or elective is not eligible for the Summer Directed Study Program.
- D. A student who repeats or restarts an academic year will earn the grades that he/she receives during the repeat/restart year. The grades that the student earned during the prior year shall remain on the transcript. Students who exhibit unprofessional behavior or ethical misconduct may be denied passing grades and or promotion.
- E. A student may be permitted to repeat or restart the same academic year only once.
- F. **A student who is dismissed because she/he fails one or more course or clerkship during a repeat or restart year is not eligible for readmission to the College of Medicine.**

*Approved by the Faculty in the
College of Medicine June 28, 2006
Revised July 2014, August 2016, June 2018
Reviewed June 2020*

SECTION XXI

ABSENCES

A. Excused Absences from Examinations, Classes, and Rotations (Does not guarantee excuse will be granted)

- Students may be excused from examinations, classes or rotations for reasons of illness or injury. Absences due to serious illness, serious injury, or death in the immediate family may also be excused.
- Students may be excused from classes or rotations for Health Maintenance visits. These visits should not be scheduled during times of exams, quizzes or clinical skills/simulation lab sessions. Requests for excuses for health maintenance visits from the Associate Dean for Student Affairs must be requested no later than 72 hours prior to the scheduled visit.
- Department chairs, clerkship directors and unit leaders/coordinators will accept only excuses from the Dean's Office, usually through the Office of Associate Dean for Student Affairs and Admissions
- Illnesses or injuries that may result in missed examinations must be reported to the Office of Associate Dean for Student Affairs and Admissions, departments or unit leaders/course directors concerned immediately. The absence must be reported by the student before the start of the scheduled examination unless the accident or injury prevents the student from filing the report.
- Illnesses or injury resulting in a missed examination, classes or rotations must be certified by a physician or licensed health care provider. **(Notes from relatives, including physician relatives, are not acceptable.) DO NOT INCLUDE PRIVATE HEALTH INFORMATION. The note should simply indicate the date student was evaluated and any recommendations for time missed and return date.**
- Illnesses without documentation will not be excused.
- For all request for excuses, include the course/clerkship/elective from which you are requesting excused time
- Problems other than those stated above, which result in a missed session, may be reported to the Associate Dean for Student Affairs and Admissions for consideration. Such absences will not be excused however, except in cases of extreme hardship. All such cases will be handled on an individual basis.
- **Special circumstances:** to facilitate processing absence request, please submit supporting documentation to the Associate Dean for Student Affairs and Admission as soon as you are aware of the need for an excuse. Students granted an excused absence will be responsible for any material missed and/or responsible to make up clinical time on clerkships/electives
 - *Specialty Conferences:* students presenting (poster or podium) at a conference will typically be considered for one (1) travel day and the day of the presentation
 - *Conference Scholarship/Grant:* Students who are recipients of a scholarship/grant to attend a specialty conference will be considered for an excused absence; days of attendance may be limited

- *Residency Interviews*: Notify the Associate Dean as soon as interview date (s) is/are confirmed. When submitting request for absence, please attach a copy of the interview confirmation. In addition, the student must notify the clerkship director ASAP of the requested absence during a rotation/elective
- *USMLE CS Exam*: Students will be allowed one (1) travel day prior to the exam and the day of the exam as excused absences. When submitting request for absence, please include the confirmation document with your CS date.
- *Bereavement*: Absences will be handled on a case-by-case basis. If extended absences are required, a leave of absence maybe appropriate.
- **Personal absences in the pre-clinical curriculum (M1 and M2)**: Recognizing that students in the pre-clinical curriculum may have instances of planned (weddings, graduations and other special events) or unplanned (tardiness, external factors such as traffic, etc.) absences, the College of Medicine allows 2 personal absence days per semester.
 - For planned absences, documentation must be provided to the Associate Dean of Student Affairs and Admissions no later than two weeks from the requested absence date.
 - Planned absences may not be granted that impact key components of the curriculum or place an undue hardship on the administration of the course. For example, a request for a planned absence that requires rescheduling of simulation or clinical skills sessions.
 - For unplanned absences, the Associate Dean for Student Affairs and Admissions must be notified regarding the use of such days and has final decision-making authority regarding granting the absence.
 - Unused personal absence days do not roll over from one semester to the next.
 - Personal absence days cannot be used to extend vacations, reading periods for exams or orientation sessions.
 - Any absence beyond the two days per semester will be considered **unexcused** and be subject to any penalties outlined in the policy or course manuals.
 - **This policy does not apply to students in the clinical curriculum.**

B. Procedures Governing Excused Absences and Make-up Examinations

1. Basic Science Courses (M1 and M2)

It is expected that all students will take all scheduled examinations on time. If a student finds that he/she must be absent from an examination or quiz, that student must inform the Associate Dean for Student Affairs and Admissions that he/she will need an excuse from the examination **prior** to the start of the examination.

All telephone requests must be followed by written requests, along with documentation, for excuses from examination(s). These written requests must detail the reason(s) that the examination was missed, and should state the department/unit, date(s), and time(s) of the missed examination(s). In the case of illness or injury, the student's written request must be accompanied, or followed, by a note from a physician who supports the request for an excuse during the date(s) and time(s) of the missed examination(s). The student's written request must be received in the Office of the Dean upon the student's return to school, or the document may be sent by mail prior to the return to school. The physician's note must be received by the Office of the Dean on or before the time the student returns to school. This is required in all cases but is especially critical when a student has been ill enough to require medical clearance for return to school.

All make-up examinations shall be given within 72 hours (freshman) and 96 hours (sophomore) of the scheduled examination(s), but only if a written recommendation from the Dean or his/her designee to administer such an examination is received by the unit leader/coordinator. A recommendation from the Dean or his/her designee not to administer such an examination will be honored. Any request for waiver of this 72 or 96-hour rule will be considered on a case-by-case basis upon recommendation from the Dean or his/her designee. **Any student who receives an excuse from the Dean or his/her designee is responsible for consulting directly with the department/unit leader in question concerning the date, time and location of the makeup examination.** The Dean's Office neither bears responsibility for arranging or scheduling makeup examinations, nor for notifying an excused student as to the date, time or location of the makeup examination.

If a student sits for a make-up examination after the 72 or 96 hours of the missed examination, due to negligence on the part of the student, the examination may be graded (at the discretion of the faculty, the Senior Associate Dean for Academic Affairs and the Associate Dean for Student Affairs and Admissions) on a pass/fail basis with the only passing grade set at 70-S. Other currently existing rules and regulations on examinations will continue to be applicable. If an excuse is not granted, the score for the missed examination will be zero.

An exception to the time limitations above will be considered only when the student

- a. is involved in a serious accident or
- b. has an acute illness that would prevent him/her from contacting the Office of the Dean, or
- c. has a sudden death in the immediate family

2. Clinical Science Courses

Missed time on clerkships will be subject to makeup. Repeat and makeup examinations for clinical clerkships are administered at designated times during the academic year. Such make up examinations must be taken the very next time the examination is administered (e.g., a missed or failed November examination in Internal Medicine must be taken in March). Requests for an excuse due to illness or injury must be submitted in accordance with the procedures for basic science examinations. Any other request for an excused absence may be considered, but excuses will be granted only in cases of extreme hardship. These written requests must be received in the Office of the Dean (through the Associate Dean for Student Affairs and Admissions) no later than 5 p.m. on the date of the missed examination.

A student who fails one or more clerkship and/or elective end-of-rotation examination(s) may request the Senior Associate Dean for Academic Affairs to adjust his/her rotation schedule. The Senior Associate Dean for Academic Affairs may also recommend a change in the student's rotation schedule. If an excuse is not granted, the score for the missed examination will be zero.

C. Unapproved absence from the College of Medicine

A student who is absent without written excuse from the Associate Dean for Student Affairs and Admissions from classes or clinical rotations/electives for a period of two weeks or more may be considered to have withdrawn from the College of Medicine and is eligible to apply for readmission.

Revised June 2020

SECTION XXII

WORK LOAD AND CLINICAL/EDUCATIONAL WORK HOURS

A. Work Load for Years One and Two Students

Medical student workloads during the pre-clerkship phase of the curriculum shall be such that students' learning is not compromised while maintaining an appropriate level of engagement with faculty, patients and the clinical or simulated clinical environment.

Contact or Classroom Time

The scheduled classroom time (lectures, TBL, SGL, and other required contact time with faculty) for first- and second-year students shall be limited to approximately 24 hours per week when averaged over the unit. This does not include the scheduled time for Medicine and Society Units 1 and 2 which requires contact with students on Tuesday afternoons; and Introduction to Clinical Medicine and Introduction to Clinical Medicine 2 which requires contact with students (faculty, standardized patients, and real patients) for approximately 4 hours each week.

Assigned Activities Outside of Scheduled Classroom Time

It is estimated that each hour of lecture, TBL, or SGL require approximately two hours of students' preparation time; and each hour of laboratory time requires one hour of students' preparation time. Students will independently study the answers to the learning objectives that are provided at the start of each course. These outside classroom times may include assigned reading, cases for classroom discussion, preparation for flipped classrooms or online modules.

Monitoring

The class time schedule for each course shall be approved by the Curriculum Committee prior to the start of the academic year or at least prior to start of each semester. In addition, the curriculum subcommittee for years one and two and the curriculum committee shall monitor compliance through formal evaluations by students and by reports of students on the curriculum committee.

Effectiveness

The effectiveness shall be based on surveys of students and faculty satisfaction, student performance on internal examinations, student performance on NBME customized examinations, student performance on the USMLE Step 1, and students' well-being e.g. sufficient time for rest and relaxation.

B. Clinical Work and Educational Work Hours for Years Three and Four Students

During the course of some required clerkships and some electives medical students are required to be on duty (on call) after the normal duty hours. Student duty hours shall be as follows:

- Start and end of tour of duty each day shall be set by each clinical department
- Duty hours shall not exceed those for residents and shall not exceed **80 hours per week** averaged over a four-week period, inclusive of all in-house call activities
- Students must be provided with **one day in seven** free from all structured educational and clinical responsibilities, inclusive of call, averaged over a four-week period
- Adequate time for rest and personal activities shall be provided. This should consist of at least **8-hour time-off** period between daily duty (i.e. hours between end of one day's duties and returning for the next day's duties)
- In-house call must occur no more frequently than every third night
- Students shall not be on duty for more than 24 hours continuously, with an additional four

hours for transition of care. In addition, there must be at least **14 hours free** after 24-hour duty

- Students' schedules shall be arranged such that they can attend all required educational sessions.
- It is the responsibility of each clerkship director or course coordinator to monitor the clinical and educational work hours of the students and periodically submit a report to the Senior Associate Dean for Academic Affairs.

*Approved by the faculty of the
College of Medicine April 11, 2005*

Updated July 2015

Updated July 2016

Updated July 2018

SECTION XXIII

PROMOTIONS, HONORS AND OATHS, AND GRADUATION

A. Promotion and Graduation

1. Students must satisfactorily complete all requirements of the College of Medicine for each academic year in order to be promoted to the next class or to be recommended for graduation. The requirements for promotions and graduation include satisfactory completion of all course work including electives, clerkships, passing the USMLE Steps 1 and 2 (CK and CS), and demonstration of professionalism.
2. It is the College's purpose to promote and to recommend for graduation all students admitted to the College of Medicine. However, the faculty through its Executive Committee and/or Committee on Student Promotions and Graduation, will exercise its responsibility to deny student status, promotion, or graduation to a student who:
 - a. Fails to meet academic standards
 - b. Is ill and whose illness prevents effective study or practice
 - c. Grossly neglects his/her academic or clinical duties
 - d. Violates standards of honesty
 - e. Clearly demonstrates a disregard for professional standards of conduct

B. Freshman and Sophomore Years

1. The Committee on Student Promotions and Graduation will act upon students' performance at the end of the fall semester, at the end of each academic year, and at the end of the Summer Directed Study Program (SDSP). The following are required for promotion:
 - a. Satisfactory completion of the freshman year curriculum is required for promotion to the sophomore year
 - b. Satisfactory completion of the sophomore year curriculum and passing the USMLE Step 1 are required for promotion to the junior year
 - c. Students, who exhibit unprofessional behaviors may be promoted to the sophomore or junior year but will be placed in a remediation program; may be denied promotion; or may be dismissed from the College of Medicine.
2. One or Two Unsatisfactory Grade(s): Students who have one or two unsatisfactory grades may be placed in an academic reinforcement program in a Summer Directed Study Program (SDSP) and may be promoted to the next class providing they successfully complete the program and meet all other requirements for promotion.
3. Three or More Unsatisfactory Grades: **A student who has final (transcript) unsatisfactory grades in three or more units during either the freshman or sophomore year is not eligible for the SDSP (described earlier in this manual) or for promotion and will be dismissed from the College of Medicine.**
4. A student who repeats or restarts a year will earn the grades that he/she receives during the repeat year. The grades that the student earned during the prior year shall remain on the transcript. **A repeating student who fails any unit or course during the repeat year will be dismissed from the College of Medicine.** This includes those units or courses that he/she may not have taken previously OR may have taken previously and passed. A repeating student who fails any unit, course, clerkship or elective is not eligible for the SDSP.

C. Junior year

1. Student Promotion to Junior Year

The Committee on Student Promotions and Graduation will act upon students' performance at the end of the fall semester, at the end of each academic year, and at other times as necessary. The following are required for promotion to the fourth year:

- a. Students must earn grades of satisfactory or better in all clerkships/electives/courses
- b. Students must complete all third-year clerkships and sat for all third-year examinations
- c. Students must satisfactorily complete the course: Interdisciplinary Health Care Ethics/Jurisprudence
- d. Students who exhibit unprofessional behaviors may be promoted to the senior year but placed in a remediation program, may be denied promotion, or may be dismissed from the College of Medicine

2. Two or More Unsatisfactory Grades

Any student who fails two clerkships/courses/electives in the same academic year or who fails a clerkship/course/elective that he/she is repeating will either be dismissed from the College of Medicine or be required to restart or repeat the academic year. This includes the course on Interdisciplinary Health Care Ethics/Jurisprudence. The student must take all components of all clerkships including those that the student may have passed and the course on Interdisciplinary Health Care Ethics/Jurisprudence. A student who is required to repeat or restart the academic year is also required to retake the end-of-third year examination (clinical skills examination) at Howard University, even if she/he passed the USMLE Step 2 Clinical Skills examination. A student who repeats or restarts a year will earn the grades that he/she receives during the repeat or restart year. The grades that the student earned during the prior year shall remain on the transcript. **A repeating student who fails any unit/course/clerkship/elective during the repeat year will be dismissed from the College of Medicine.** This includes those clerkships that he/she may not have taken previously OR may have taken previously and passed.

D. Senior Year/Graduation

1. Student Promotion to Senior Year/Graduation

The Committee on Student Promotions and Graduation will act upon each student's performance at the end of the fall semester, at the end of each academic year, and at other times as necessary.

2. Required Rotations and Electives

Students must take all rotations and at the sites for which they are approved. Students who change their rotations (specialty, subspecialty, dates, or site) will not receive credit for that rotation, will not have liability coverage for that rotation, and will be required to take the original rotation.

3. Two or More Unsatisfactory Grades

Any student who fails two clerkships/courses/electives in the same academic year or who fails a clerkship/course/elective that he/she is repeating will either be dismissed from the College of Medicine or required to repeat or restart the academic year. The student must take all components of all clerkships/electives including those that the student may have passed. A student who repeats or restart a year will earn the grades that he/she receives during the repeat or restart year. The grades that the student earned during the prior year shall remain on the transcript. **A repeating student who fails any unit/course/clerkship/elective during the repeat year will be dismissed from the College of Medicine.** This includes those clerkships that he/she may not have taken previously OR may have taken previously and passed. No student will be recommended for graduation who has not satisfactorily completed all requirements, including

electives for the senior year and passing USMLE Step 2 CK and CS.

E. **Appeal of Clinical Grades**

Students who have a failing clinical grade overturned via an appeals process will receive the lowest passing grade (70). This includes junior, senior and elective rotations.

F. **Honors and Oath**

Students who are on schedule to satisfactorily complete all academic and financial requirements for graduation in **May or June**, of the same calendar year are permitted to participate in the Honors and Oath program in May. However, students may be denied permission to participate in the program for cause. **December Graduates are not eligible to participate in the Honors and Oath Day ceremony until the year following their December graduation date.**

G. **Commencement**

Only those students who satisfied all requirements academic and financial for **May graduation** are permitted to participate in the Commencement program per University guidelines.

H. **Graduation**

In order to be eligible for recommendation to the faculty (who will recommend to the President of the University) for graduation, the student must satisfy all of the following:

1. Satisfactorily complete all four years of the year curriculum
2. Pass USMLE Step 1 (a prerequisite for promotion to the third year)
3. Pass the consortium clinical skills examination
4. Pass USMLE Step 2 Clinical Knowledge (HUCM must receive passing score at least 14 days prior to the graduation date)
5. Pass USMLE Step 2 Clinical Skills (HUCM must receive passing grade at least 14 days prior to the graduation date)
6. Demonstration of acceptable professional behavior detailed elsewhere in this manual

Revised July 2014
Revised July 2016
Revised July 2018
Reviewed June 2020

SECTION XXIV

TIME LIMIT TO COMPLETE THE REQUIREMENTS FOR THE M.D. DEGREE

Students are expected to complete all requirements for the degree Doctor of Medicine within four years from initial matriculation. In recognition of the fact that some students may have specific challenges or reasons to complete the requirements in more than four years after date of initial matriculation, additional time will be permitted. The number of years, including approved leave of absences, from initial matriculation in the College of Medicine to graduation with the degree Doctor of Medicine shall be:

- A. Seven years for students who are not in a combined or dual degree program. The maximum number of years to complete either the first two years of the curriculum or the second two years of the curriculum shall be no more than four academic years. Approved leave of absences are included in the seven years.
- B. Seven years for students who are in the BS/MD program. The maximum number of years to complete either the first two years of the curriculum or the second two years of the curriculum shall be no more than four academic years. Approved leave of absences are included in the seven years. The seven years do not include the initial 2-3 years in the BS program in the College of Arts and Sciences. Approved leave of absences are included in the seven years
- C. Eight years for students who are in the dual MBA/MD program. The maximum number of years to complete either the first two years of the curriculum or the second two years of the curriculum shall be no more than four academic years. Approved leave of absences are included in the eight years
- D. Ten years for students who are in the MD/PhD program. The maximum number of years to complete either the first two years of the curriculum or the second two years of the curriculum shall be no more than four academic years. Approved leave of absences are included in the ten years

Reviewed July 2019

SECTION XXV

APPEALS

A. Preamble

The standards and procedures for the evaluation, advancement, and graduation of students, and for disciplinary action, are publicized for faculty members and students in the booklet "HUCM Policies and Procedures Manual". This publication is available on-line at www.med.howard.edu.

The Committee on Student Promotions and Graduation will act upon Student Performance and Promotions at the end of the fall semester, at the end of the academic year and at the end of SDSP in accordance with the "Policy on Student Promotions."

The College of Medicine will provide a fair and formal process for the faculty and administration to follow when taking any action that adversely affects the status of a student. The process will include timely notice, disclosure of the basis on which the action is taken, and an opportunity for the student to respond. The process will be consistent with the University-wide Student Grievance Procedures adopted by the Board of Trustees. In academic matters, students may appeal the decision in accord with the procedures that are provided herein. In disciplinary cases, appeal procedures are outlined in the "University System of Judiciaries and Code of Conduct".

A student's record will be available for review by the student, and the student will be given the opportunity to challenge the accuracy of that record. Students who wish to review their records must make an appointment in the Student Records Section of the Office of Academic Affairs. Student records are confidential and are made available to members of the faculty and administration on a need to know basis only, unless released by the student, or as otherwise dictated by laws governing confidentiality or by University-wide policy.

B. General Procedures for filing appeals

All appeals must be in the form of a letter that is signed by the student who is appealing and must indicate the nature of and reason(s) for the appeal. Appeals by verbal communication, emails or any form other than by a letter that is dated and signed by the student will not be accepted and will not be acted on. Appeals that are received after the deadline for filing the appeal will not be accepted and will not be acted on.

C. Appeal of Promotions Committee Decisions

Students registered in the College of Medicine may appeal any decision made by the Committee on Student Promotions and Graduation, such as dismissal or requirement to repeat an academic year. The student who is appealing must submit the appeal in the form of a letter that is dated and signed by the student. The letter must be received by the Office of the Dean of the College of Medicine within seven (7) days of the date of the letter informing the student of the Committee's decision. A copy of the letter of appeal must also be sent to the Senior Associate Dean for Academic Affairs.

The letter of appeal must outline the basis for the appeal. Supporting documents should also be submitted. The Dean's Office will consign the student's appeal to the College of Medicine's Student Grievance Committee. The formal process as outlined in the University-wide "Student Grievance Procedures" will be followed. Attorneys are not permitted in the room during the hearing or deliberation. The Committee's decision will be sent to the Dean of the College of Medicine in the form of a recommendation. This recommendation should be submitted within approximately two weeks of

the date of receipt of the student's appeal. The Dean will inform the student in writing of the decision, which may be based upon the Committee's recommendation or upon a modification of it. The Dean's decision should be postmarked not more than approximately 30 days after the date of receipt of the student's appeal. Alternatively, the student who is appealing may retrieve the written decision of the Dean directly from the Office of the Dean. While the appeal is pending, the student may continue to attend classes or clerkships and may take scheduled examinations, if applicable. During the appeal process, the student shall register and pay the full tuition and all applicable fees for the semester during which the appeal is being adjudicated. If the student's appeal is denied, any refund of tuition and fees shall be according to the University's schedule for such refunds.

The decision of the Dean is final.

D. Appeal of a Grade or Other Evaluation

Students must be given the results of each examination, clerkship evaluation, written assignment, or other course requirement. Students must also be given a final grade for each course. The formula or criteria for determining the grade on each examination, clerkship evaluation, written assignment, or other course requirement must also be given to students, as must the basis for determining the final grade in each course. Ideally, the criteria for determining grades should be given to the students on or before the first day of each unit, course or clerkship.

Students registered in the College of Medicine may appeal the accuracy of a grade, or other evaluation, or the fairness of an examination, evaluation, or grading process or procedure. All letters of appeal must be dated and signed by the student who is filing the appeal and they must indicate the basis of the appeal.

1. The first line of appeal is with the course coordinator, unit leader, unit coordinator or clerkship director who will consider the appeal in consultation with the course faculty. The letter of appeal must be in writing, dated and signed by the student who is appealing. The letter of appeal must be received by the course coordinator, unit leader, unit coordinator or clerkship director within seven (7) days after the grades or other evaluations for the course, unit or clerkship are available for students and must indicate the nature and reason(s) for the appeal.
2. The second line of appeal is with the Senior Associate Dean for Academic Affairs. The student may appeal in writing to the Senior Associate Dean for Academic Affairs if:
 - a. The course coordinator, unit leader, unit coordinator or clerkship director fails to act on a student's appeal within five days of receipt of the appeal, excluding Saturdays, Sundays and days when the College of Medicine is officially closed such as for a legal holiday or inclement weather (normal working days)
 - b. The student disagrees with the decision made by the course coordinator, unit leader, unit coordinator or clerkship director.

This appeal must be received in writing by the Senior Associate Dean for Academic Affairs within seven (7) days after the appeal was filed with the unit leader/coordinator, course coordinator or clerkship director. The letter of appeal must be in writing, dated and signed by the student who is appealing, and it must indicate the basis of the appeal. The Senior Associate Dean must attempt to resolve the matter in consultation with the Department Chair (whenever applicable), and/or the clerkship director, course coordinator, unit leader, or unit coordinator.

3. The final line of appeal is with the Dean of the College of Medicine. If the Senior Associate Dean for Academic Affairs fails to act on a student's appeal within five normal working days from the date of receipt of the appeal from the student, or if the student disagrees with the decision of the Senior Associate Dean for Academic Affairs, the student may appeal in writing to the Dean of the College of Medicine. The letter of appeal must be in writing, dated and signed by the student who is appealing and must indicate the nature of and reason(s) for the appeal. The student may request a hearing with the Dean to discuss the appeal. A copy of the student's appeal to the Dean must be provided to the Senior Associate Dean for Academic Affairs. If the Dean is not able to resolve the student's grievance through mediation with the parties involved, then the appeal will be referred to the College of Medicine's Student Grievance Committee. The formal process as outlined in the University-wide "Student Grievance Procedures" will be followed. The Committee's decision is sent to the Dean of the College of Medicine in the form of a recommendation. The Dean will inform the student in writing of the decision, which may be based upon the Committee's recommendation or upon a modification of it. The Dean's decision shall be forwarded to the student approximately two (2) weeks following his/her receipt of the appeal from the student. The Senior Associate Dean for Academic Affairs will also be informed in writing of the decision and will be responsible for its implementation.

The decision of the Dean is final.

E. Appeal of Administrative Decisions Made by Associate and Assistant Deans

Decisions made by Sr. Associate, Associate and Assistant Deans regarding but not limited to academic and student affairs matters may be appealed in writing to the Dean. The letter of appeal must be in writing, dated and signed by the student who is appealing and must indicate the nature of and reason(s) for the appeal. The student may request a meeting with the Dean to discuss the appeal. Such appeals must be received by the Dean within seven (7) days after the student receives the decision from the Assistant or Associate Dean. A copy of the appeal letter must be submitted by the student to the Associate or Assistant Dean who made the decision. The Dean will expedite by sending to the College of Medicine's Student Grievance Committee. The formal process as outlined in the University-wide "Academic Grievance Procedures" will be followed. The Committee's decision is sent to the Dean of the College of Medicine in the form of a recommendation. The Dean will inform the student and the Associate or Assistant Dean in writing of the decision, which may be based upon the Committee's recommendation or upon a modification of it.

The decision of the Dean is final.

F. Appeal of the Decision of the Honor Council

Decisions made by the Honor Council on violations of the Honor Code may be appealed in writing to the Dean. Such appeals must be received by the Dean within seven (7) days after the student receives the decision from the Honor Council. The Dean will expedite by sending to the College of Medicine's Student Grievance Committee. The formal process as outlined in the University-wide "Academic Grievance Procedures" will be followed. A copy of the appeal letter must be submitted by the student to the Chair of the Honor Council and to the Senior Associate Dean for Academic Affairs. The Committee's decision is sent to the Dean of the College of Medicine in the form of a recommendation. The Dean will inform the student and the Chair of the Honor Council in writing of the decision, which may be based upon the Committee's recommendation or upon a modification of it.

The decision of the Dean is final.

G. Challenge to questions and or answers to questions on examinations

Students may challenge questions and or answers to questions on any examination constructed and administered by the faculty in the College of Medicine by directly submitting such challenges to the unit leader/coordinator, clerkship/course director. The challenge must be submitted by the student in the form of a letter that is dated and signed by the student and must indicate the reason(s) for the challenge(s). No question or answer to any question can be challenged after seven (7) calendar days have elapsed from the date of release of the grade for the examination whichever occurs earlier. The grades for all students who sat for an examination may be revised (increased or decreased) following the challenge(s) to question(s) and answer(s), even if the grades have been released.

H. ExamSoft Score Release/Challenge Procedure

1. The Raw scores from Exams/Quizzes taken on ExamSoft will be released to students by the close of business the day after the exam is administered. Of note, there may be certain instances where this may be delayed. The course coordinator will make that decision.
2. Students will use the "review" feature of ExamSoft to record challenges or comments about exam questions during the exam. Students are given 15 extra minutes (built into the time allotted for the exam) for each exam session for this purpose. All written comments and challenges will be reviewed and resolved, by the faculty, during the post-exam faculty review.
3. Post-exam faculty review sessions will be scheduled within the first 48 hours after the exam whenever possible. Review sessions will include all examining faculty and course coordinator(s). Decisions regarding low performing questions and student comments will be resolved by faculty during the post-exam faculty review session. Any clarifications of student challenges will be discussed with the designated Class VP.
4. If there are no challenges, final scores along with full student profiles for each exam will be released within 48 hours of exam review or after last student has taken the exam.
5. The course coordinator(s) will make the final decision on question challenges and release the final scores. No additional appeals are allowed.

Approved by Curriculum Committee, May 2018

I. Procedure to Appeal an Educational Site or Curricular Assignment

A student who desires to change an assigned educational site will first make that request of the clerkship director. The clerkship director will consider the student's request taking into account space and feasibility of the change. Every effort will be made to accommodate although this will not be always possible. The student may appeal the decision of the clerkship director to the Senior Associate Dean for Academic Affairs through the normal appeal process.

A student who desires to change a curriculum assignment will make that request of the Senior Associate Dean for Academic Affairs who will consider the student's request in light of space and feasibility. While every attempt will be made to accommodate the student, this will not be always possible.

Approved by the Faculty Senate on November 19, 1996

*Updated July 2018
Reviewed June 2019 June 2020*

SECTION XXVI

UNIVERSITY POLICY ON ACADEMIC GRIEVANCE PROCEDURES

A. The Informal Procedure Process

1. A student who believes that he/she has been aggrieved must first attempt to seek an informal resolution with the other party involved in the dispute, e.g. grade dispute with instructor.
2. If the student is unable to resolve the dispute with the primary party of the dispute, then the student is advised to seek the intervention of his/her department chairperson or unit leader/clerkship director.
3. All disputes which are not resolved at the departmental level are then brought to the Dean's Office, where upon the Dean or his designee will seek to reach an informal resolution through mediation between the parties.
4. If the mediation at the Dean's level fails, then the student's grievance is consigned to the committee designated by the school/college to address student grievances herein referred to as the Student Grievance Committee.

B. The Formal Process

1. Student grievances which are consigned to the Student Grievance Committee must be specified in writing and submitted to the Office of the Dean of the College of Medicine.
2. A student's written statement, along with supportive evidence, constitutes a case document which will be submitted to each member of the committee.
3. The second party to dispute is also requested to provide the Office of the Dean with his or her account of the matter in dispute, which becomes part of the case document that is forwarded to the committee.
4. The Student Grievance Committee is then required to set a date for convening a meeting to hear the case(s) as expeditiously as possible.
5. After the date has been set, each party to the dispute is sent a certified letter, or in order to expedite the process the parties may retrieve the letter of notification directly from the Office of the Dean. The letter informs the parties of the charges, date of the meeting, as well as a statement requesting the presence of the parties involved.
6. During the hearing, the student presents his/her case; after the accused party is allowed to present the other side, each side is permitted to have witnesses to testify on their behalf.
7. Following the hearing, members of the committee will deliberate on their assessment of the case.
8. The committee's decision is sent to the Dean of the School/College in the form of a recommendation.
9. The Dean then informs the student in writing of the decision, which may be based upon the committee's recommendation or upon a modification of it. **The decision of the Dean is final.**

*Approved by the Board of
Trustees on April 23, 1994
Updated July 2009*

SECTION XXVII

LEAVE OF ABSENCE AND WITHDRAWAL

A. Procedures to Request Leave of Absence

1. Any student who wishes to request a leave of absence from the College of Medicine must first seek advisement from the Senior Associate Dean for Academic Affairs and the Associate Dean for Student Affairs and Admissions.
2. If after the above discussions the student still wishes to request a leave of absence, he/she must write a letter (dated and signed by the student) to the Senior Associate Dean for Academic Affairs indicating same.
3. The Senior Associate Dean for Academic Affairs will make a decision on the request for a leave of absence after conferring with the Associate Dean for Student Affairs and Admissions.
 - Students who have unsatisfactory examination grade(s), or transcript unsatisfactory grade(s), or conditional unsatisfactory grade(s) should not expect to be granted a leave of absence.
 - Requests for leaves of absence will not be approved for more than one year.
 - Any student whose leave of absence is approved at the end of an academic year in which the student met all requirements for satisfactory performance will return to begin the year to which he/she was promoted.
 - Any first or second-year student who is granted a leave of absence before the end of an academic year will be expected to return to satisfactorily repeat all courses of that academic year, including courses previously passed. Junior and senior students who are granted more than one year leave of absence may be required to repeat the entire year.
 - Any second-year student who request a leave of absence after completing all course requirements must take and pass USMLE Step I prior to being granted a Leave of absence.
 - The student may appeal the decision of the Senior Associate Dean for Academic Affairs to the Dean.
4. All students before departing the College of Medicine on leave of absence must follow the procedures specified below:
 1. Complete the total withdrawal process, which is electronic and can be accessed via the BisonWeb homepage
 2. Report to the Office of Financial Aid, Room 524, College of Medicine, (202) 806-6388, for counseling and an exit interview
 3. Follow the University Total Withdrawal Procedure (See below)

Note: For students who leave the College of Medicine without completing the above procedures, the Office of Academic Affairs will initiate a total withdrawal process and the student may be required to apply for readmission to the College of Medicine.

B. Procedures to Request Withdrawal

1. Any student who wishes to withdraw from the College of Medicine must first seek advisement from the Senior Associate Dean for Academic Affairs and the Associate Dean for Student Affairs

and Admissions. If after the above discussions the student still wishes to withdraw, he/she must write a letter to the Senior Associate Dean for Academic Affairs indicating same.

2. The last day for total withdrawal will be printed in the Academic Calendar of the College of Medicine.
3. Any student who is not performing satisfactorily in any course at the time of withdrawal will be withdrawing not in good academic standing. Students will be notified of their standing at the time of withdrawal or within a reasonable time.
4. All students wishing to withdraw must follow the procedures specified below:
 1. Complete the total withdrawal process, which is electronic and can be accessed via the BisonWeb homepage
 - b. Report to the Office of Financial Aid, Room 524, College of Medicine, (202) 806-6388, for counseling and an exit interview
 - c. Follow the University Total Withdrawal Procedure (see below)

Note: For students who leave the College of Medicine without completing the above procedures, the Office of Academic Affairs will initiate the total withdrawal process.

Any student who wishes to re-enroll in the College of Medicine after withdrawal must follow the procedures for applying for readmission. For information on readmission, students should consult with the Associate Dean for Student Affairs and Admissions or the document, Readmission Application Procedures. Any student re-admitted after withdrawal will be required to repeat the academic year in which he or she was last enrolled.

C. University Policy on Total Withdrawal

Students who find it necessary to withdraw from all of their classes for the current semester or for a subsequent semester for which they have already registered must complete a Total Withdrawal Request Form. This form must be submitted by the end of the 12th week of classes for the semester in which they wish to withdraw. The withdrawal form and instructions are available from the Dean or advisory center of each school or college. Students who are physically unable to complete the withdrawal in person and students who are administratively withdrawn should contact their dean or advisor for assistance.

1. **Students considering a total withdrawal should note the following:**
 - The effective date of the withdrawal will be the date on which EM/Records receives the completed withdrawal request form.
 - By registering for courses, students accept financial responsibility for payment for those courses and for any other charges incurred while they are enrolled.
 - Financial aid may be adjusted or canceled as a result of withdrawal and may require repayment of loan funds. Adjustments to financial aid awards will be calculated according to University and Federal refund guidelines based on the official withdrawal date.
 - Once the withdrawal has been completed, students will receive a grade of “W” for each course.
 - Students who reside in University housing are required to **check out of their residence hall within 24 hours** of completing the total withdrawal process.
 - Completing a total withdrawal from the University requires that **students surrender all University property**, including, but not limited to library books, room keys, computer cards, and identification access cards.

- Students who complete a total withdrawal from the University must reapply for admission to the University by published application deadlines.
2. Students should report first to the Office of the Dean or advisory center of their school or college to obtain a “Total Withdrawal Request Form,” and to discuss the reasons for and the implications of the withdrawal (1). Students who decide to continue with the withdrawal process should have the withdrawal form signed by their dean or the dean's designee and should then proceed as follows to the offices that correspond with their student status:
- Veterans, students with disabilities, and students who have judicial stipulations should report to the Office of Special Student Services, Suite 725, Howard Center (2).
 - International students must report to the Office of International Student Services, Rm. 119, Blackburn Center (3).
 - Students who reside in University housing must report to the Office of Residence Life, Tubman Quadrangle (4).
 - Students who received any type of financial aid (including scholarships, grants, and loans) must report to the Office of Financial Aid, Scholarships, and Student Employment, Rm. 205 Administration Building to discuss the effect of withdrawal on their award(s) and potential financial aid overpayment. (5).
 - All students must report to the Office of Student Financial Services, Rm. 218, Administration Building to discuss the status of and adjustments to their account. (6).
 - All students must report to EM/Records, Rm. 104 Administration Building to submit the completed *Total Withdrawal Request* form and surrender their *Capstone Card* (7).

D. Additional University Policies on Total Withdrawal

A student may withdraw from the University at any time prior to the twelfth week of classes. To implement an official total withdrawal from the University, a student must file a completed Total Withdrawal Request Form with the Office of Enrollment Management/Records. A student who leaves the University without filing a completed Total Withdrawal Request Form may not be eligible to receive tuition refunds and may receive failing grades in the courses for which he/she is registered. A student who withdraws officially from the University may be eligible to receive a total or partial tuition refund in accordance with the University's Schedule of Financial Adjustments and/or Refunds. Students may be required to repay federal funds received in a given semester as a result of total withdrawal from the University.

Students registering for courses during General Registration for the upcoming semester, who decide prior to the first day of classes of the next semester that they will not attend the university, must complete a Total Withdrawal Request Form.

E. Unapproved Absence from Classes or Clinical Rotations

A student who is absent (without approval from the Associate Dean for Student Affairs and Admission) from classes or clinical rotation must provide to the Senior Associate Dean for Academic Affairs a satisfactory explanation for the absence or she/he will be subject to disciplinary action which could include unsatisfactory grade for the course or clinical rotation or dismissal from the College of Medicine. **A student who is absent from the College of medicine for four weeks or more (without approval from the Associate Dean for Student Affairs and Admission) shall be considered to have withdrawn from the College of Medicine.**

Revised July 2014, Reviewed June 20

SECTION XXVIII

READMISSION

A. Eligibility for Readmission

All students who withdraw or are dismissed from the College of Medicine are eligible to apply for readmission **except** for those students who were dismissed because of:

- Unprofessional behavior
- Failure on USMLE Step 1, Step 2 CK or Step 2 CS three times
- Failure of a course or clerkship or elective during a repeat or restart academic year
- Students who have been denied readmission on two prior occasions
- Students who have received a leave of absence and allowed to restart a year once
- Students who have been dismissed 3 years or more from the College of Medicine

B. Procedures for Readmission

1. Any student desiring readmission should discuss his/her plans with the Associate Dean for Student Affairs and Admissions.
2. All students who are absent from or not registered at the university for one entire semester (summer school not included) must apply in advance for readmission.
3. Any student who decides to seek readmission must write a letter to the Associate Dean for Student Affairs and Admissions by May 1 of the year in which the student wishes to re-enroll. The letter should:
 - a) Request readmission
 - b) Indicate the reasons for the student's academic and/or other difficulty
 - c) Outline, in detail all activities since leaving medical school, emphasizing those in preparation for returning to the medical curriculum
 - d) Discuss the resolution of any personal problems that may have affected medical school performance
 - e) Describe how medical school would be approached, if readmitted in terms of such matters as study habits, learning techniques, and examination preparation
4. If course work is completed during the time away from medical school transcripts of grades will be required.
5. Letters of recommendation in support of readmission will be accepted, but not required.
6. The letter requesting readmission, as well as any supporting documents submitted, will be presented to a Subcommittee of the Admissions Committee, hereinafter referred to as the Readmissions and Advanced Standing Subcommittee.
7. The Readmissions and Advanced Standing Subcommittee may request that the student come in for an interview
8. The Readmissions and Advanced Standing Subcommittee will present its recommendation regarding the student's request for readmission to the Admissions Committee of the College of Medicine.
9. The student will be notified in writing of the decision of the Admissions Committee.
10. A student who was denied readmission may appeal the decision of the Admissions Committee to the Dean of the College of Medicine.

C. Stipulations of Readmission

- Students who are dismissed because of academic reason(s) are **not** eligible for readmission for at least one semester after the dismissal.
- Students who cannot meet the time limits to complete the requirements for the M. D. Degree are **not** eligible for readmission
- Any student readmitted who left the College of Medicine not in good standing must repeat and pass all courses of the curriculum of the year to which the student was readmitted; and will be required to fulfill all terms of the Promotions Policy that refer to repeating students.
- A student who is offered the opportunity for readmission cannot defer the readmission to another semester or academic year.

Revised July 2014
Updated 2016
Updated 2018
Revised June 11, 2019

SECTION XXIX

SMOKING POLICY

Effective July 1, 1989, the College of Medicine and the Howard University Hospital prohibited smoking within all buildings under their jurisdiction. The College and the Hospital find smoking inherently at odds with the mission to provide health care and promote health. Further, implementation of this policy will enhance the health and safety of patients, faculty, staff, students and visitors, and will reduce fire risks. Moreover, this policy is necessary to comply with District of Columbia law. Smoking is permitted in outside areas adjacent to our facilities, except near front entrances.

UNIVERSITY POLICY ON SMOKING

Smoking and the use of tobacco are prohibited in all indoor locations, including classrooms, offices, residence and dining halls, balconies, stairwells, common areas, and other private residential spaces that are on University property or maintained by the University for members of the University community.

Smoking and the use of tobacco are prohibited in and on University-owned outdoor spaces, including walkways, the Yard, and sports and recreational areas. Also, smoking is prohibited in University-owned, leased or rented vehicles, regardless of location. Smoking and tobacco products, such as cigarettes, electronic smoking devices, cigars, pipes, hookahs, and chewing tobacco, are prohibited from use or sale and distribution on University property.

More information regarding the University's Smoke-Free and Tobacco-Free Policy is located on the University's policy website at: <http://www.howard.edu/secretary/policy/directory.htm>

Updated 2016

SECTION XXX

HEALTH SERVICES

A. Student Health Center

The Student Health Center provides all full-time and part-time students with access to a comprehensive health care program. One or more physicians are assigned at the student Health Center to evaluate and manage only medical students. The Health Center is located at 2139 Georgia Avenue (at the intersection of Georgia Avenue and W Street, NW), (202) 806-7540.

All students entering a school or college of the University for the first time, returning after an absence of a semester or more due to illness, or returning to the University after an absence of more than two years are requested to submit a completed Entrance Medical Record form to the University Student Health Center.

The insurance covers the patient for medical expenses resulting from accidents or sickness causing loss commencing during the period of coverage 24 hours a day, 12 months a year, and is subject to the conditions of the policy. This program supplements, but does not replace, the facilities of the University Health Center.

Students must first report to the Student Health Center before utilizing other health care facilities in order for insurance benefits to be available, except in cases of extreme emergency.

While a student is officially enrolled, current registration and identification cards are required for eligibility of service. The plan offers medical care during the school year in services pertaining to general health, sickness, accidents, preventive medicine and health education. It does not assure medical care relating to preexisting conditions, and does not cover routine physical examinations, refraction and eyeglasses, or orthopedic equipment.

B. Immunizations

All students entering the University must comply with the District of Columbia Law which requires measles, mumps, rubella, diphtheria and tetanus immunizations before they can register or attend classes. Proof of immunization should be sent to the Director, Student Health Center, Howard University, 2139 Georgia Avenue, NW, Washington, DC 20059.

C. Appointments

Appointments can be made for all clinics by calling (202) 806-7540. Students who do not report to appointments on time may be rescheduled for another date or seen on a walk-in basis.

D. Students with Disabilities

Students with disabilities documented by the appropriate medical professional receive consideration for reasonable accommodations as required once the University has been officially notified. Upon initial enrollment, disabled students should provide to the Office of the Dean for Special Student Services documentation of their disability for appropriate intake and determination of necessary accommodations. For the first semester and each subsequent semester after validation, these students must report to the Office of the Dean for Special Student Services for counseling and to submit the required request for reasonable accommodations from faculty members and other persons and from campus units as necessary. The Office of the Dean for Special Student Services is located at 1851 9th Street, NW, 2nd floor, Washington, DC. The main number for the Office is 202 238 2420.

E. Student Health Insurance and Disability Income Plans

During orientation at the beginning of each academic year, the student health insurance and disability income plans are discussed with each class. In addition, staff from the Occupational Health area of Howard University Hospital discuss safety precautions with students.

- F. COVID-19:** Student will be required to test for COVID-19 prior to face-to-face instruction. Students are expected to practice social distancing, wash hands, use hand sanitizer, and wear a mask at all time until determined not to be required. Students may have to have temperature checks daily along with a symptom survey. The particulars of this requirement can and may change.

UnitedHealthcare patient portal:

<http://www.myuhc.com/>

Student patient portal:

<http://www.uhcsr.com/howard>

SECTION XXXI

HEALTH CLEARANCE AND MANAGEMENT PLAN/POLICY (INCLUDING STUDENT EXPOSURE TO INFECTIOUS AND ENVIRONMENTAL HAZARDS)

These policies and procedures are supplemented by those of Howard University Hospital infection control. The Policies and Procedures manual of the College of Medicine as well as the relevant hospital policies and procedures relating to infection control shall be distributed and discussed with students during orientation for each academic year. When students rotate away from Howard, they are expected to follow the policies and procedures of those other sites.

Note: Health screening, disease prevention, and other health practices are often updated. Students must therefore confirm the requirements with the Student Health Center.

A. Health Screening/Disease Prevention/Other Screenings

Health screening is accomplished prior to matriculation and annually thereafter. More frequent screening or monitoring shall be done as necessary. The following are required of all medical students:

- Initial physical examination and at least every two (2) years thereafter done at the Student Health Center
- Screening for tuberculosis prior to starting medical school and annually thereafter
- Serology Testing is a part of the required Health Sciences Physical examinations
- Proof of immunity to measles, mumps and rubella as evidenced by immune titers (*Simply having had the series of vaccinations is not sufficient*)
- Tetanus (Td) within the past 10 years. In addition, Health Sciences Students with patient contact should receive a single dose of Tdap prior to their rotation. The Tdap dose interval may be as short as two years from the last Td
- Immunity to Hepatitis B must be evidenced by immune titers. (*Simply having had the 3 required vaccinations is not sufficient to guarantee immunity*)
- Immunity to varicella (chicken pox)
- Additional requirements when rotating through certain clerkships (such as nasopharyngeal cultures for the pediatric clerkship, etc.)
- Annual influenza vaccine (proof of vaccine, declination or medical exemption)
- Annual FIT (Mask) testing (students with patient contact)
- Drug screen required for rotations and electives
- Other requirements will be added as needed

B. Non-Occupational Illness

The Howard University Student Health Center will monitor the health status of all students with potentially infectious conditions. Any student having an active infectious disease must be treated by a qualified health care provider prior to beginning or continuing a clinical assignment.

- Colds and Coughs: A student with cold symptoms, without constitutional symptoms, may begin or continue his/her clinical assignment unless coughing repeatedly or with a temperature of 100 degrees F or more. Exception: students with viral infections or cold symptoms who work with children, immunosuppressed patients, and renal transplant patients will be sent home.
- Diarrhea: Students with diarrhea suspected to be viral or bacterial in origin will not be allowed to work in the nutrition and food service department or nursing services until the condition is controlled. Rectal swab or stool specimen analysis and follow-up are advised.
- Herpes: Students with open herpetic lesions will be relieved from direct patient contact until

the lesions are dried and healed.

- **Communicable Disease:** Students with a communicable disease (or who have a family member with a communicable disease) should follow the guidelines found in "Guidelines for Students With or Exposed to Communicable Diseases" from the Center for Disease Control and Prevention. The Infection Control Unit at Howard University Hospital shall provide the most current guidelines.

C. Occupational Injury

For the purpose of this policy occupational injury refers to any type of exposure, injury, or illness to infectious and environmental hazards that a student sustains when she/he is on any required, assigned, or approved educational activity at Howard University Hospital or at any other approved site. The educational activities include required rotations or experiences, approved electives, approved research, and approved service-learning activities while the student is officially enrolled in the College of Medicine.

1. Goals of Occupational Exposure Plan

- a. To prevent work-related injury and illness of Howard University medical students
- b. To prevent spread of communicable diseases to patients seen by Howard University medical students
- c. To formalize procedures for reporting and managing work-related injuries and illness of Howard University medical students

2. Methods

- a. Education - All students will be provided a copy of The Howard University Hospital Infection Control Inservice Handbook. The handbook will be distributed during orientation that occurs before the beginning of each academic year. In addition, students will receive specific instructions in standard precautions and isolation requirements during orientation that occurs before the start of the academic year. These instructions will be repeated to groups of students or on an individual basis.
- b. Health Screening and Maintenance Following Exposure - The Howard University Student Health Center will monitor the health status of all students who are injured or exposed to infections or environmental hazardous materials. This will be accomplished through primary prevention screening and post-exposure or post-injury diagnostic testing and management.

3. Evaluation of Occupational Exposure, Illness and Injury

Costs for evaluating and managing occupational exposure, illnesses, and injuries are covered by the Student Health Insurance Plan, the hospital, and the College of Medicine. Students who are exposed or become ill or injured as the result of an educational requirement or assignment will be evaluated at the Howard University Student Health Center during the Center's normal operating hours whenever possible. The Student Health Center staff member will triage the student and write the following information on a referral form to the Emergency Department:

- a. Whether the student has had his/her series of Hepatitis B and tetanus vaccines, and any other laboratory information
- b. The type of injury, when and how the injury occurred, and any pertinent information regarding the patient

D. Medical Treatment for Students

1. Students should report to the Howard University Hospital Emergency Room to be treated initially.
2. When the Student Health Center is closed, or in cases of emergency, the student shall first contact the designated administrator at the work site whenever possible. Any necessary emergency

medical and nursing care shall be made available to the student through the Emergency Department of the hospital, clinic or other medical facility to which the student is assigned. The student shall take copies of discharge instructions and any other information describing the treatment that was rendered at the Emergency Department to the Student Health Center.

3. A Howard student who sustains an occupational injury while rotating at a site away from Howard University Hospital should follow the procedures specific to that site and inform the Associate Dean for Student Affairs and Admissions at Howard of the incident. The Associate Dean will provide further instructions to the student.
4. Students who sustain any occupational injury that requires long-term care and follow-up will be managed in the Student Health Center or referred to a health care provider who is qualified to provide the care and follow-up.
5. Students have disability coverage through the American Medical Association Insurance Agency, Inc. Among the benefits for disability of the student, the policy provides monthly payments to the student, waiver of premium, accommodation fee should the student become employed, loan repayment, assisted living, and survivor payment. The policy defines the requirements for benefits and the limit of payments.

E. Effects of Infectious and Environmental Disease or Disability on Medical Student Activities

1. A student who contracts an infectious disease and/or environmental disease, including blood-borne infections, must contact the College of Medicine's Senior Associate Dean for Academic Affairs or the Associate Dean for Student Affairs and Admissions after receiving appropriate medical care.

Infectious diseases and environmental diseases include, but are not limited to:

Varicella, Measles, Rubella, Mumps, Shingles (Herpes Zoster), Hepatitis, Diphtheria, Oral Herpes with draining lesion, Strep Throat (Group A streptococcal disease), Meningococcal infections, Draining Infected Skin Lesions, HIV/AIDS, Pertussis, Scabies, Influenza (positive screening)

The Office of the Dean, College of Medicine, in conjunction with the Howard University Office of Special Student Services, the Student Health Center, and, if appropriate, the Howard University Hospital Division of Infectious Diseases, will determine if the student can continue to participate in educational activities and what accommodations are reasonable. Accommodations may include a modified schedule or restricted activity in courses or clerkships. In making this determination, consideration will be given to risks to patients, the student, classmates, and hospital and college personnel.

If the student disagrees with the decision of the Dean for Special Student Services, she/he can appeal that decision through the College of Medicine's appeal process. Students who are unable to complete the semester during which an injury occurred will receive credit for tuition and fees according to the refund policy of the university. A student who cannot continue in school because of chronic infectious and environmental disease or disability will be placed on a leave of absence. The student will be permitted to resume her/his education after she/he is cleared by the Student Health Center.

Visiting students are subject to this policy in the same manner as Howard medical students.

2. Students who are unable to complete the semester during which an injury or illness (occupational or non-occupational) occurred will receive credit for courses and clerkships that were successfully completed. A student whose learning activities are disrupted because of chronic

infectious and environmental disease or disability will be placed on a leave of absence. A student who suffers a permanent disability as a result of an occupational injury will be reviewed by the College of Medicine on a case by case basis by the Dean for Special Student Services and appropriate recommendations will be made to the Senior Associate Dean for Academic Affairs. If it is determined that a student incurred a disability as a result of an educational assignment or experience, and if it is further determined that the student cannot continue with her/his education as a result of the disability, the student will receive disability compensation according to the student disability insurance plan. A student not allowed to continue in school due to disability has the right to appeal the decision through the standard appeal process of the College of Medicine.

F. Financial Responsibility of Students

Students who suffer any occupational injury will not bear any expense related to those injuries. A student who receives an invoice for services related to any occupational injury must immediately forward the invoice to the Associate Dean for Student Affairs and Admissions. The costs for evaluating and managing the injury (short and long-term) will be paid in full by:

- The Student Health Insurance Plan
- Student Long-term Disability Insurance
- Howard University Hospital
- Howard University College of Medicine

A student who is unable to complete any course or clerkship because of an occupational injury shall be refunded the tuition and fees according to the university refund policy.

G. Visiting Students

Visiting students are required to have their own health insurance plans. If a visiting student sustains an occupational injury, she/he will be evaluated and managed in the same manner as Howard students while she/he is at Howard. The student must inform the Associate Dean for Student Affairs and Admissions of the injury. The Associate Dean for Student Affairs and Admissions will inform the student's home school. It is expected that the student's home school will arrange for short and long-term follow-up and for all charges related to the injury. Visiting students will be informed of this policy before the start of the Howard rotation

H. Health Clearance

1. All students must be cleared by the Student Health Center before the start of the school year
2. Students must have documentation of health screening and treatment of active disease prior to the time they present for clinical experiences to Howard University Hospital, and all other hospitals, clinics or physician offices to which they are assigned. These sites reserve the right to refuse access to their facilities to any student who fails to comply with the occupational exposure plan
3. Students will be allowed to begin clinical assignment only after they have been cleared by the Student Health Center and have been appropriately fitted for protective particulate masks
4. Any student having an active infectious disease must be treated by a health care provider prior to beginning or continuing a clinical assignment. A provider's "return to duty" certificate is required by the University Student Health Center as well as by the student's immediate supervisor before starting or resuming clinical activity. The student must report to the Student Health Center for evaluation and clearance to return to his/her assignment.

Updated December 9, 2010

Approved by the Executive Committee, HUCM

Revised June 11, 2019

SECTION XXXII

SOCIAL MEDIA POLICY

Faculty, residents, students, and staff are required to conduct themselves in a professional manner, which includes treating patients in an ethical, compassionate and culturally sensitive manner, adhering to standards of patient confidentiality and acknowledging that patient welfare is of primary importance.

Social media has become integrated into the fabric of our daily communications. As set forth in the University's Social Media Policy, the University recognizes the importance of social media and **expects responsible and respectful online activity** by faculty, residents, students, and staff. The University community is reminded that the requirements regarding patient confidentiality extend to social media. Social media is defined as online public communication forums used to share, collect, engage, and exchange personal and public information and includes, but is not limited to, YouTube, Facebook, Instagram, Twitter, LinkedIn, Pinterest, personal blogs and vlogs, etc.

University policy prohibits posting confidential or proprietary information or conversations on social media. ***All members of the University community are prohibited from posting any content that contains personal health information, including patient images, on any personal social media.*** Everyone must refrain from discussing patients on social media pages. Posting of images and information about clinical activities could violate federal (including, but not limited to, the Health Information Portability and Accountability Act, known as "HIPAA") and state laws. Posting of pictures of patients, patient's body parts, patient images, etc., even if the patient or the patient's family has agreed is prohibited. This prohibition extends to research subjects. This includes cell phone pictures of wounds or body parts as well as images such as X-rays, CT scans, etc. Personal devices should not be used to take pictures in the health care or research setting.

Appropriate actions will be taken against anyone who violates this policy.

This policy supplements the University Social Media Policy

For questions about the use of social media in the clinical or research setting, please contact the Health Sciences Privacy Officer at (202) 865-5266.

SECTION XXXIII

POLICY ON RELIGIOUS HOLIDAYS

This policy is implemented in recognition of the diverse body of faculty, students, and staff in the university and in the College of Medicine and with respect for their religious beliefs. Any student who, because of his or her religious beliefs, cannot attend classes or any structured educational session, sit for any examination or quiz, or submit any report on a specific day that coincides with his/her duly recognized religious holiday shall be offered the opportunity to sit for the examination or quiz or to submit the report on another day. Students who missed classes shall be responsible for the material covered during the class on the scheduled day. It is the responsibility of the student to request (in writing – letter or email) an excuse to be absent from classes, sit for any examination or quiz, or submit any report on a specific day that coincides with his/her duly recognized religious holiday from the Associate Dean for Student Affairs and Admissions. A copy of the letter should also be forwarded to the unit leader, clerkship director, and attending physician. The letter must be submitted at least four weeks prior to the religious holiday. All excuses must be approved by the Associate Dean for Student Affairs and Admission.

Update June 2015
Reviewed June 2020

SECTION XXXIV

POLICY ON TRANSFER STUDENTS

A. **Howard Students transferring out of the College of Medicine**

Students from Howard University College of Medicine who want to transfer to another medical school must submit a request in writing to the Senior Associate Dean for Academic Affairs. The letter must indicate the reason for transfer and the date the transfer will be effective. The Senior Associate Dean for Academic Affairs will meet with Associate Dean for Student Affairs and Admission and the student to discuss the request. A student who transfer out of Howard University College of Medicine and subsequently wants to return to Howard University College of Medicine must apply for readmission by following the procedures described in this manual

B. **Students transferring to Howard University College of Medicine**

Howard University College of Medicine will consider students for transfer to Howard who meet the following requirements:

- a. Be enrolled in an LCME accredited school at the time of the transfer
- b. Be in good standing at the medical school that he/she is attending at the time of the transfer
- c. Provide a letter indicating the student's status from the Dean of the school where he/she is enrolled
- d. Provide a transcript of courses and clerkships that he/she completed or enrolled
- e. Cannot be transferred to Howard University College of Medicine in the fourth year
- f. Must pay tuition and fees according to the rates in effect at the time of the transfer

SECTION XXXV

POLICY ON STUDENT EDUCATION RECORDS

- Students education records shall remain secure in the Office of the Senior Associate Dean for Academic Affairs
- Student education records may be taken out of the Office of the Senior Associate Dean for Academic Affairs only by permission of the Dean of the College of Medicine or his designee. The person taking the record out of the office must complete an application (shown below) to temporarily remove the record.
- Students are not permitted to take their education records out of the Office of Academic Affairs
- Students have the right to:
 - a. inspect and review their education records
 - b. seek amendments to their education records
 - c. file a complaint with the Department of Education concerning alleged failure of the College of Medicine to comply with requirements of FERPA
- Details of the procedure and additional information on access to and review of their records are shown in the H-Book.
- Students education records are confidential and may be accessed only by those with the need to do so. Examples are: for promotions, graduation, and awards; filing of documents; and preparation of the Medical Student Performance Evaluation (MSPE)
- The application to temporarily remove student education record is included below:

Name of student:

Name of person taking the record:

Reason for temporarily removing records:

.....
.....
.....
.....

Approved by:

Date taken: Time taken:

Date returned: Time returned:

SECTION XXXVI

LOUIS STOKES HEALTH SCIENCES LIBRARY

Group Study and Problem Based Learning Room Rules:

- No Eating in the rooms
- Do not take food out of your bag and place it on the table.
- You may leave your lunch bag at the security desk. The security guard will return it to you when you leave.
- If you need to eat, you may eat in the student lounge on the first floor of the library next to the security desk
- The rooms are not soundproof; therefore, keep the noise level down
- Pick up after yourself. Keep the room clean for the next users.
- The Library only has one daytime housekeeper. The overnight housekeeping staff does not have keys to the Group Study and Problem Based Learning Rooms to clean
- Turn off the lights, lock and shut the door securely when you leave
- Do not prop doors open

Return the room key before you leave the building.

In addition, all users of the Louis Stokes Health Sciences Library will adhere to the HOWARD UNIVERSITY CODE OF ETHICS AND CONDUCT
<http://www.howard.edu/policy/codeofethics.pdf>

Please pay particular regard to Section IV. REQUIRED CONDUCT All members of the University Community shall conform to the following standards and avoid any conduct that is an actual or apparent violation of the standards.

University resources shall not be used for other than their intended purpose.

Failure to comply with room and conduct rules can result in the user being subject to a three week ban and/or appropriate legal sanctions by the university.

SECTION XXXVII

UPDATED POLICIES AND PROCEDURES

Updated and revised policies and procedures of the College of Medicine shall be forwarded to all concerned as they occur. Such updates may occur before the start of a new academic year or at any time during an academic year.

When in doubt, students should consult with the Senior Associate Dean for Academic Affairs for interpretation or clarification of existing, updated, or new policies and procedures.

SECTION XXXVIII

STUDENTS' CONTACT INFORMATION

Each student is responsible to immediately notify, in writing, the Director of Students Records in the Office of the Senior Associate Dean for Academic Affairs changes in any of the following:

- Name
- Mailing address
- Home telephone number
- Mobile (cell phone) telephone number
- E mail address (Howard University assigned e mail address will be used)
- Contact information in case of emergency

Each student is also responsible to notify unit leaders and clerkship directors of changes in any of the above, and to provide contact information to the Director of Students Records or the Senior Associate Dean for Academic Affairs of contact information when on extra-mural or international electives or rotations.

Electronic submissions of changes in contact information are preferred. Forward to the Senior Associate Dean for Academic Affairs.

All students must use the Howard University assigned Email addresses. The College of Medicine assumes no responsibility for students who fails to check his/her Howard University assigned email for messages. Students who require assistance in accessing their Howard email accounts must contact the Howard University Help Desk by calling (202) 806-2020.

The College of Medicine shall not be responsible for any communication that a student does not receive because of failure of the student to inform the College of Medicine of any changes in name or contact information.

SECTION XXXIX

ADMINISTRATIVE CONTACT INFORMATION

| Administrator | Telephone Number | Pertaining to: |
|--|--|---|
| Hugh Mighty, M.D., MBA, Dean College of Medicine | 202 806 7842 | Dean and VP Clinical Affairs |
| Debra H. Ford, M.D., Senior Associate Dean for Academic Affairs | 202 806 9494 dhford@howard.edu | Curriculum, Academic Affairs, Student schedules and grades |
| David A. Rose M.D., Associate Dean for Student Affairs and Admissions | 202 806 6394 darose@howard.edu | Student affairs and admission including excuses from classes, clerkships and examinations; Readmissions; SAC; ERAS |
| Celia Maxwell, M.D., Associate Dean for Research | 202 806 7818 cmaxwell@howard.edu | Research |
| Vacant | 202 865 0062 | Faculty Development |
| Peter L. Sealy, M.D., Associate Dean for Graduate Medical Education | 202 865 1989 psealy@howard.edu | Graduate Medical Education |
| Michael Crawford, MBA Associate Dean for Strategy, Outreach and Innovation | 202 806 7679 michael.crawford@howard.edu | Strategy, Outreach and Innovation |
| Kelda Lea | 202 806 6282 krlea@Howard.edu | MEDSTARS, SDSP Academic Support |
| Alicia Anderson, PhD | 202 806 5177 as_anderson@Howard.edu | PARP Academic reinforcement Academic Support |
| Rozanna Aitcheson, EdD | 202 806 4338 raitcheson@howard.edu | Financial aid and Financial counseling |
| LaDonna Davis | 202 806 9492 benita.griffis@howard.edu | Student records, grades; registration; Sr. Schedules |
| Angela Cummings | 202 806 9494 angela.cummings@howard.edu | Academic Affairs; VSLO/VSAS |
| Alyene English | 202 806 6282 A_I_english@howard.edu | Office of Medical Education, Small group management |
| Leiza O'Neil | 202 806 6690 loneil@howard.edu | Student Affairs; MSPE; ERAS; SAC |
| Tamara Owens, PhD | 202 865 0062 tlowens@howard.edu | Clinical Skills and Simulation |
| Brian Goodwin | 301-818-4198 brian.goodwin@howard.edu | IT/ AV/ Informatics |
| Celia Williams-Fowlkes | 202 806 9478 Celia.williamsfowl@howard.edu | Admissions |
| Monique Frazier | 202 806 6228 monique.frazier@howard.edu | Data Analysis Center |
| Darlene Wall | 202 806 9491 dmwall@howard.edu | Verification of training; letters of academic standing |
| Stafford Battle | 202 806 9703 sbattle@howard.edu | Curricula support; Curricula management |
| Clive Callender, M.D. | 202 865 1659 ccallender@howard.edu | Honor Council |
| IT Help Desk | 202 806 2020 | Email, account access |

The main number to the College of Medicine is (202) 806-5677

The Mudd Building Security Desk number is (202) 806-6969

The Howard University Department of Public Safety Emergency number is (202) 806-7777

Please note: Students are not permitted in the Curriculum Office or in the Data Analysis Center

