ALL AREAS COVERED IN THE STUDENT HANDBOOK ARE SUBJECT TO CHANGE. POLICIES IN PLACE AT THE TIME OF ENTRY INTO THE PROGRAM MAY CHANGE THROUGHOUT THE FOUR YEARS OF MEDICAL SCHOOL. MAJOR POLICY REVISIONS ARE GENERALLY MADE AT THE BEGINNING OF THE ACADEMIC YEAR. ON OCCASION PERIODIC UPDATES ARE NECESSARY.

Northwestern University Feinberg School of Medicine
Augusta Webster, MD, Office of Medical Education
303 E. Chicago Avenue, Ward 1-003
Chicago, IL 60611
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The Curriculum: A Commitment to Learning

Northwestern University has a long tradition of curricular innovation. Nathan Smith Davis, MD, one of the founders of the school (and of the American Medical Association) was an early proponent of reform in medical education. At its inception in 1859, the school became the first to offer a "graded" curriculum—that is, a distinct and progressively advanced series of lectures for each of the two years of instruction. The prevailing model at the time required students to attend the same series of lectures in the second year as in the first, whereupon they received a diploma. A few years later, Northwestern added a required third year of hospital-based study, creating a three-year, graded course of instruction—a general model that, with the later addition of a fourth year, has remained the norm in North America.

A second notable period of curricular innovation occurred in the 1960s, with the creation of two new programs that have become common features at many schools. The Honors Program in Medical Education, founded in 1961, was one of the first two combined baccalaureate-medical degree programs in the country. In 1963 Northwestern became one of the first three medical schools to receive a grant from the National Institutes of Health establishing a combined MD/PhD program. Leadership in both these new initiatives was provided by John A.D. Cooper, MD, then associate dean of the medical school and later president of the Association of American Medical Colleges.

The school continues to be active in educational innovation. A major curriculum change was the inauguration of a new first- and second-year curriculum in 1993. This curriculum is designed to promote active, collaborative learning and provides at least two half-days per week for independent study. These courses comprehensively address the entire spectrum of the biomedical and psychosocial foundations of medicine. This approach emphasizes the development of broadly educated, responsible physicians equipped with the skills necessary for continuous professional growth and adaptation to societal changes throughout their careers. The basic medical science courses are interdisciplinary and utilize a variety of learning strategies. A comprehensive introduction to the social roles and responsibilities of physicians, an innovative
curriculum in interpersonal and clinical skills, an emphasis on the process of clinical decision-making, and consistent attention to health promotion/disease prevention are prominent features of the curriculum.

In the 2001–02 academic year improvements and innovations in the third and fourth years were implemented after an 18-month study and planning process. Other improvements were implemented in 2002–03 and in 2004–05. The curricular changes include extension of the formal emphasis on professional growth and development issues into the third and fourth years, renewed attention to the provision of appropriate educational opportunities in intensive care and emergency medicine settings, and new opportunities to learn effective habits for continuing self-education. In addition, students are provided opportunities to teach other medical students, thus addressing the need to be prepared for their future roles as educators of students, colleagues, and patients.

Currently, Feinberg is in the process of completing a curriculum renewal of the entire undergraduate program, which was implemented during the 2012-2013 academic year. Under the new curricular framework, Feinberg’s core competencies guide the education program. The new curriculum enables students to spend more time in the clinical setting, have more flexibility in designing a course of study, and have the opportunity to explore scholarly areas of interest in greater depth.

The Medical Center, Faculty, Residents and Fellows

Academic medical centers are complex institutions with a tripartite mission of patient care, education, and research. The faculty members are committed to their educational responsibilities and make themselves readily available as teachers and mentors.
During the first two years, each course is organized by the central administration of the school, and each involves faculty members from a number of departments. Faculty members from the School of Medicine's five basic science departments and clinical faculty members are actively involved in the first two years' curriculum as lecturers, tutors in small-group settings, and in clinical skills instruction.

The clinical faculty is composed of more than 1,630 full-time salaried medical school faculty members (with approximately 300 full time research faculty) and approximately 1,000 "contributed service" faculty members. All faculty members contribute to teaching regardless of employment.

Clinical education for medical students is mainly conducted through four major affiliated hospitals and their respective outpatient practices. These hospitals are:

- Northwestern Memorial Hospital (NMH)
- Ann and Robert H. Lurie Children's Hospital of Chicago (LCH)
- Rehabilitation Institute of Chicago (RIC)
- Jesse Brown VA Hospital

Nearly all medical staff members at these hospitals have faculty appointments at the Feinberg School of Medicine. Department chairs and section or division chiefs at the School of Medicine hold the same appointments in their corresponding hospital units. For example, the chair of the Department of Pediatrics serves as physician-in-chief of LCH. The chair of the Department of Physical Medicine and Rehabilitation serves as the medical director of RIC.

Many of the full-time faculty members in clinical departments are active investigators in basic science laboratories as well as practicing physicians. A number of interdisciplinary centers (such as the Robert H. Lurie Comprehensive Cancer Center of Northwestern University) bring together faculty members in the biomedical and social sciences with students from both the Evanston and Chicago campuses.
The McGaw Medical Center, a consortium representing the major hospital affiliates, coordinates and oversees all residency and fellowship training at Northwestern. All residents and fellows participating in the education of undergraduate medical students receive training as teachers and evaluators and are under the direction of Feinberg academic faculty.

All Northwestern faculty members, residents and fellows have attested that they have read and will abide by the Feinberg Safe and Healthy Learning Environment Policy regarding appropriate conduct between learners and teachers. The full policy is available in this handbook.

**The Feinberg Competencies**

The goal of the medical curriculum is to prepare broadly educated, responsible physicians capable of pursuing postgraduate medical education in any clinical discipline and/or pursuing a career in medically related research. This requires each student to attain competence in each of eight areas:

- Medical Knowledge and Scholarship
- Effective Communication and Interpersonal Skills
- Professional Behavior and Moral Reasoning
- Patient-Centered Medical Care
- System Awareness and Team Based Care
- Continuous Learning and Quality Improvement
- Community Engagement and Service
- Personal Awareness and Self-Care

[View the FSM Competencies Web site](#)

The objectives of each learning activity in the curriculum are linked to the 8 Feinberg competencies and 52 subcompetencies.
Policies & Procedures: Behavioral Standards

Both Northwestern University and the Feinberg School of Medicine set standards of behavior and maintain independent procedures for their fair and equitable enforcement. Although these standards are similar, the unique responsibility of medical students for the care of patients in school-affiliated institutions necessitates the inclusion of additional provisions in the School of Medicine standards; the enforcement also differs in certain respects.

Actions by a medical student or students generally fall under the purview of the Feinberg School of Medicine; an incident involving multiple students from different schools may be more appropriately addressed by the University. Consideration of a matter by other areas of the University or law enforcement authority does not preclude the School of Medicine Student Promotions Committee from conducting its own hearing and taking whatever action it determines to be warranted. In cases where it is not clear which procedure should apply, the Dean of the Feinberg School of Medicine and the University Vice President for Student Affairs decide, in their discretion, whether investigation of an incident of alleged misbehavior belongs to the Feinberg School of Medicine or Northwestern University.

Access to Student Records

Congress enacted FERPA in 1974 to specify what information in a student’s educational record can be disclosed to whom and by what means. The educational record includes all paper or electronic information directly related to a student and maintained by the Feinberg School of Medicine or Northwestern University. This includes, but is not limited to, information in the Office of the Registrar and offices of individual course directors and faculty members, including clerkship performance evaluations submitted by residents and faculty members to assist the clerkship director in compiling an evaluation and grade. FERPA excludes private notes made by
a faculty member about a student that have not been shared with anyone else. A student may examine his or her educational file by requesting access from the Registrar. The University’s FERPA policy is available from the Registrar or on the University’s Website.

Policy on Additional University Courses

Registered medical students may enroll in one course each quarter offered by other Northwestern schools. Generally there is no additional tuition. Additional fees may be charged for evening courses taught by outside individuals, laboratory courses, and foreign language courses.

The School of Continuing Studies offers evening courses on the Evanston and Chicago campuses. A catalog of course offerings is available at the School of Continuing Studies. The Medical School Registrar receives a list each quarter from Kellogg of classes still open after their school registration period has ended. The Registrar will forward this list and enrollment forms to current medical students via the listserv on a quarterly basis. Turnaround time is very quick, so students should be prepared to return registration materials quickly. Medical students are allowed to dual register for up to two Kellogg classes during their medical student career.

To register for a class offered by another Northwestern University school, you must follow a process based on your home school and the school offering the class. To read more about Cross-School Registrations on the Chicago Campus please visit this webpage: http://www.registrar.northwestern.edu/registration/Cross-School_Registration.html
Assessment Policy

Feinberg Assessment System

1. **Mission:** The Feinberg School of Medicine will provide an assessment system that presents information qualitatively and quantitatively in each of the competency domains to foster continual learning and improvement.

2. **Goals:**
   a. To provide a longitudinal perspective of competency achievement.
   b. To develop students’ skills for self-reflection and learning

3. **Assessments:** Feinberg assessments are competency based and aligned with learning objectives within each module and clerkship. Methods of assessment may include multiple choice exams, oral exams, OSCEs, practical exams and multi-source performance evaluations.

   An official transcript will be kept for each student and maintained by the registrar. This will include block and course grades as described below. The Medical Student Performance Evaluation (MSPE) is a document prepared for each senior medical student entering the residency match. This document is completed according to national standards and includes block and course grades, clerkship grades, clerkship narratives and a summary of other achievements.

The Portfolio

1. **Description and Aims:** An electronic portfolio is maintained centrally for each Feinberg student throughout their enrollment. This portfolio is accessible at all times to the student and college mentor. The portfolio is an electronic repository of assessments linked to the eight Feinberg competencies. The aim of the portfolio is to:
• Provide an accessible record of student assessment through which the student and faculty can monitor competency achievement.

• Record achievement in competencies that traditionally are difficult to measure (Professional Behavior and Moral Reasoning, Continuous Learning and Quality Improvement, Effective Communication and Interpersonal Skills, Systems Awareness and Team Based Care, and Patient Centered Medical Care).

• Allow students to reflect on learning experiences, create learning plans with mentored guidance, and improve self-assessment and self-directed learning capacity.

2. Formative portfolio review: Each student will meet with their college mentor yearly during the M1/M2/M3 years for a formative portfolio review. Prior to the meeting, each student receives guidance on how to complete a reflective summary of achievement in each competency and is expected to create two personalized learning plans. At each formative portfolio review, the student and mentor will review all assessment data collected in the portfolio and the student’s reflective summary and learning plans. The mentor will help develop the student’s reflective capacity and help identify resources for self-directed learning. The goal of this process is to use the mentor’s regular engagement with each student to allow for early identification of deficiencies that might benefit from additional educational support.

3. Summative portfolio review: A formal summative review of each student’s portfolio occurs prior to beginning clerkships (mid-M2 year) and at the end of the M3 required clerkships. A portfolio review committee made up of trained faculty reviews each student’s portfolio including the student’s summative reflection and learning plans. The committee uses a mixture of qualitative and quantitative data to assess each student’s readiness to begin clerkships and to move on to M4 clerkships (phase 3). The committee then provides a detailed report of each student’s competency achievement to the student and mentor.

The summative portfolio review report includes a determination of longitudinal achievement in the following competencies: Professional Behavior and Moral Reasoning, Continuous Learning and Quality Improvement, Effective Communication and Interpersonal Skills, Systems
Awareness and Team Based Care, and Patient Centered Medical Care. Deficiencies found in the portfolio review are considered in the same way as failing an individual module examination or clerkship, and therefore can be addressed by remediation. If a student is unsuccessful in the remediation of the deficiency, the student will be referred to the Student Promotions Committee.

4. Portfolio and Student Transcripts: Results of portfolio reviews do not appear on the official transcript.

5. Portfolio and Medical Student Performance Evaluations (MSPE):
   - Results of the M2 portfolio review are not included in the MSPE.
   - A summary of the M3 portfolio review will appear in the MSPE. Distinction in a competency domain will be included in the summary paragraph of the MSPE; i.e., Student XXX was noted to have achieved the competency of Professional Behavior and Moral Reasoning with “distinction” by the faculty portfolio review committee.

Phase 1 (1a and 1b) Grading Policy

1. Assessment Scoring: Summative assessments evaluate student learning at the end of an instructional unit by comparing it against a standard or benchmark. Students are expected to achieve passing scores on all summative assessments including written examinations, oral examinations and performance assessments (OSCEs and practical exams). Faculty will determine the passing scores for these assessments, which will vary by module and type. Students who do not pass must remediate summative assessments. A failing score on a remediated assessment is grounds for failing the block and for an appearance before the Student Promotions Committee (SPC). Failure of three summative assessments over Phase 1 will require an appearance before the SPC. If permitted to continue at Feinberg, the student must successfully remediate the material.

2. Block Grading: Grades, which will be recorded on the official transcript, will be determined at the conclusion of each academic block (each block is comprised of 2-4 organ-based modules). A composite score will be calculated from the various assessments administered within each module, according to the relative contribution of each Element/Thread as indicated
in the block assessment blueprint. The block faculty and faculty from the assessment committee will conduct a standard setting exercise to set the pass/fail cut point for the block.

3. Grades Earned: Possible grades for Phase 1 are pass, fail, and “pass after remediation.” Students whose composite block scores are greater than the pass/fail cut point will earn a grade of pass for the block. Students whose composite block scores are marginally above the pass/fail cut point, as determined by the standard setting exercise, will be awarded a pass on the transcript; however, they will be notified of their suboptimal performance in writing with the designation of “pass with notification.” He/she will be expected to create and implement a learning improvement plan with guidance from his/her college mentor. A copy of this plan will be incorporated into the student’s Portfolio. Students whose composite block scores fall below the pass/fail cut point must remediate assessments and academic work as directed by the faculty. Once remediation is successfully completed, a grade of “pass after remediation” will be recorded on the transcript.

Academic reasons for appearing before the Student Promotions Committee in Phase 1 include:

- Two block grades of “pass after remediation”
- Patterns of low achievement, such as failure of three summative assessments
- Two designations of “pass with notification”

Possible actions by the Student Promotions Committee may include, but are not limited to:

- Continuation of studies following successful remediation of the assessment(s)
- Repetition of the academic year
- Suspension
- Dismissal

Students who are allowed to continue studies still must successfully remediate all material. If successful, the student will earn a grade of “pass after remediation.” If the student is unable to remediate the assessment, he/she will reappear before the SPC.
4. Examination Process: All students are expected to attend examinations at the scheduled time. In the event of an acute illness, death of a family member, or other crisis, students should call the Associate Dean for Student Programs & Career Development ((312) 503-0345) or the Assessment Coordinator ((312) 503-4567) prior to the start of the examination.

Grading Policy for Clerkships & Electives (Phases 2 and 3)

1. Grades earned: This grading policy applies to the following required clerkships: Medicine, Surgery, Obstetrics-Gynecology, Pediatrics, Neurology, Primary Care (or an Education Centered Medical Home), Psychiatry; and the following required advanced clerkships: Sub-internship (Medicine, Pediatrics, Surgery or Ob-Gyn), Emergency Medicine, Intensive Care (or Pediatrics ICU), and Physical Medicine & Rehabilitation. These clerkships are graded using honors, high-pass, pass, and fail. Specific criteria for these grades have been established by each clerkship.

   Grades in the clerkships are based on written and/or oral exams; faculty assessments of a student’s clinical knowledge, skills and attitudes; and, in select clerkships, an objective structured clinical examination (OSCE), and/or a multi-source evaluation. Grading for each clerkship will be reviewed during orientation and is posted online.

2. Transcripts for Phases 2 and 3: Possible grades that appear on transcripts for required clerkships are honors, high pass, pass and fail.

   During clerkships, if a student’s clinical performance is deemed inadequate by faculty assessment, regardless of examination scores, the final clerkship grade is fail. If clinical performance is adequate and only the NBME subject examination is failed, the student will retake the examination. If it is passed on a second attempt, the clerkship grade is pass. If a student requires remediation (such as extra time to complete the requirements of the clerkship), a "pass after remediation" will appear on the transcript. If a student is unable to remediate the deficiency, he/she will receive the grade of fail for the clerkship. If a student receives a grade of fail, he/she may be required to repeat the clerkship in its entirety. If he/she successfully passes the clerkship on the second attempt, a “pass repeated course,” will appear on the transcript.

   Four-week electives are graded using honors, pass, and fail.
Two-week electives, which have no prerequisites, will not be graded, but are recorded as credit or no-credit. No more than two of these can receive credit towards graduation.

Research elective credit can be granted, but will not be graded, for research lasting at least two weeks and up to twelve weeks, if the research is approved in advance and deemed meritorious by the Student Research Committee.

3. Reasons to appear before the Student Promotions Committee in Phases 2 and 3:
   • Failure of the same clerkship (or elective) twice
   • Failure of two clerkships or electives

4. Actions of the Student Promotions Committee in Phase 2 and 3 include but are not limited to:
   • Continuation of studies following successful remediation of the clerkship deficiency
   • Suspension
   • Dismissal

Process for Appealing a Final Grade Assigned on a Block, Clerkship, or Summative Portfolio

Phase 1 students should contact the Phase 1 director to contest a block grade. Phases 2 and 3 students should contact the appropriate clerkship director to contest a clerkship grade. A student with concerns about their summative portfolio comments should speak with the Summative Portfolio Committee Chair.

In the event that a student feels dissatisfied with the proposed resolution, all students have the right to pursue unresolved grading disputes with the Student Promotions Committee.

**Cell Phone Policy**

Students in lecture or lab areas should put their cell phones on vibrate. Students should not use their cell phone in patient care areas.
Code of Conduct

The 1999–2000 Medical Student Senate developed the following Code (revised in 2011) to make clear students’ commitment to these principles. The Code of Conduct now serves as a guide for continuing discussion and reflection among students and faculty members regarding the nature of professional integrity and responsibility.

Student Professional Code of Conduct

As members of Northwestern University’s Feinberg School of Medicine community we are entrusted with the care of human life. With this great privilege, we have an obligation to uphold the ideals and values of the medical profession. This Code of Conduct articulates the principles by which we will abide. By adopting these principles into our personal and professional lives, we will positively influence our present community at the School of Medicine and our future as professionals. We expect the teachers and learners of the medical school community to have the responsibility to foster a learning environment that promotes these principles and ensures that we can live by this code.

Honor and Integrity

- I will neither give nor receive impermissible assistance on academic examinations and assignments.
- I will abide by the Feinberg School of Medicine’s policies and procedures, including those regarding plagiarism, use and distribution of controlled substances, and downloading copyrighted material, as outlined in the Student Handbook.

Professional Responsibility

- I will commit myself to life-long learning, and pledge to contribute to the advancement of medicine.
- I will be a patient advocate and speak up on behalf of my patients.
- I will keep all identifying information that I receive about patients in confidence from anyone outside of the medical team.
• I will not engage in inappropriate relationships with patients or members of my medical team.

• I will not give a false impression of my medical knowledge and skill, and will not falsify medical records.

• I will ask for academic and personal support from my peers and superiors when necessary, and offer similar help as needed.

**Respect**

• I will treat all people equitably without regard to age, race, gender, religion, ethnicity, disability, socioeconomic status, sexual orientation, disease status, or political ideology.

• I will collaborate with members of the medical school community to promote an environment that supports teamwork.

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**Computer User Policy**

The use of technology within Northwestern University is governed by the policies of Northwestern University Information Technology. The complete listing of these policies can be found at [http://www.it.northwestern.edu/policies/index.html](http://www.it.northwestern.edu/policies/index.html). The rights and responsibilities for the use of network and computing resources at Northwestern University are summarized at [http://www.it.northwestern.edu/policies/responsibilities.html](http://www.it.northwestern.edu/policies/responsibilities.html). In part that document states: “Northwestern University Information Technology (NUIT) is the University organization that provides access to the network for Northwestern students, as well as for many Northwestern faculty and staff. The Northwestern computer network consists of a campus-wide backbone network, local area networks, and many shared computers as well as personal desktop computers. NUlIT works to insure that network rights and responsibilities are not violated.
Rights

Members of the Northwestern community can expect certain rights as they use the network and its services.

• **Intellectual Freedom:** The University is a free and open forum for the expression of ideas, including viewpoints that are strange, unorthodox, or unpopular. The University network is the same. Network administrators place no official sanctions upon the expression of personal opinion on the network. However, such opinions may not be represented as the views of Northwestern University.

• **Safety from Threats:** While unwanted or unsolicited contact cannot be controlled on the network, network users who receive threatening communications should bring them to the attention of University Police. Electronic threats are taken as seriously as voiced or written threats, consistent with University policy.

• **Privacy:** Data files and messages traversing the University network are not private communications. The University reserves its right, as owner of the network and the computers in question, to examine, log, capture, archive, and otherwise preserve or inspect any messages transmitted over NUNet and any data files stored on University-owned computers. All members of the community must recognize that electronic communications are by no means secure, and that during the course of ordinary management of computing and networking services, network administrators may inadvertently view user files or messages. In addition, if a user is suspected of violations of the responsibilities as stated in this document, that user’s privacy is superseded by the University’s requirement to maintain the network's integrity, protect the rights of all network users, and promote respect for applicable laws and applicable license provisions. Should the security of a computer be threatened, user files and messages may be examined under the direction of the vice president & chief information officer, the associate vice president for cyber infrastructure, or a director of an IT division.

Responsibilities

There are also responsibilities that must be met as part of the privilege of network access.
Network users are expected to live up to these responsibilities. If you knowingly violate a network responsibility, your network access will be suspended. Depending on the seriousness of the violation, you could be referred to the Student Promotions Committee. Violations that also violate federal or state laws can also result in referral to the appropriate legal authority.

- You are responsible for the use of your network ID (NetID) and all computer accounts that are assigned to you. You may not give anyone else access to your NetID or computer accounts. You must not use a NetID or a Northwestern University computer account that was not assigned to you. You may not try in any way to obtain a password for another user's NetID or computer account. The NetID and its associated password are the property of Northwestern University Information Technology. Applications and services that require their use must be approved by the Office of the Vice President for Information Technology or by a director within NUIT.

- You may not misrepresent yourself or your data on the network.

- You are responsible for the security of your passwords. This includes changing passwords on a regular basis and making sure no one else knows them.

- You must not use NU's network resources to gain or attempt to gain unauthorized access to remote computers.

- You must not deliberately perform an act that will seriously impair the operation of computers, terminals, peripherals, or networks. This includes, but is not limited to, tampering with components of a local area network (LAN) or the high-speed backbone network, otherwise blocking communication lines, or interfering with the operational readiness of a computer.

- You must not run or install on any of NU's computer systems, or give to another, a program that could result in the eventual damage to a file or computer system and/or the reproduction of itself. This is directed towards, but not limited to, the classes of programs known as computer viruses, Trojan horses, and worms.

- You must not attempt to circumvent data protection schemes or exploit security loopholes or interfere with standard technical measures that identify and protect the rights of copyright owners.
• You must abide by the terms of all software licensing agreements and copyright laws. You must not make copies of or make available on the network copyrighted material, including without limitation, software programs, music files, video files, still and digital images, radio and television broadcasts, and written text works, unless permitted by a license, by the consent of the copyright owner, by a fair use limitation under copyright law, or by permitted copying under the Digital Millennium Copyright Act (DMCA) when made by a library or archive for preservation purposes or when incidental to computer maintenance and repair. Please see the more complete discussion of software copyright protections available on NUInfo, and the discussion of copyright law available on the NU Office of General Counsel Web site.

• You must not deliberately perform acts that are wasteful of computing resources or that unfairly monopolize resources to the exclusion of other users. Any person operating a network-intensive application or a defective computer that overloads University networks will be notified and steps will be taken to protect the overall University network. This may include disconnecting the offending computer system from the University network until the problem is resolved. If the condition is an imminent hazard to the University network or disrupts the activities of others or violates applicable law, then the offending computer system or the subnet to which it is attached may be disconnected without prior notice.

• You may not place on any University-owned computer system information or software that infringes on the rights of another person or gives unauthorized access to another computer account or system.

• You must not attempt to monitor another user's data communications, nor may you read, copy, change, or delete another user's files or software, without permission of the owner.

• Computing and networking resources are provided to support the mission of the University. These resources may not be used for commercial purposes.

• Any network traffic exiting the University is subject to the acceptable use policies of the network through which it flows, as well as to the policies listed here.
• All University computing and networking facilities are provided for use by faculty, staff, and students for relevant academic, research, or administrative pursuits. Like all other University facilities, private use must be approved in advance in keeping with policies expressed in the Northwestern University Employee Handbook and the Northwestern University Student Handbook.

• Information servers - responsibility for content. The content of any information made available to others via the University's network is the sole responsibility of the person who created that information. It is that person's responsibility to become educated and aware of all applicable Federal laws, State laws and University policies (http://www.it.northwestern.edu/policies/index.html). See also discussion of copyright law on the NU Office of General Counsel Web site. That person will be liable for any violations of Federal laws, State laws, or University policies.

• Continued violations of system and network policies will be referred to the appropriate office for discipline. Sanctions may include fines, restitution of funds, termination of computer or network access, probation, suspension, separation, or exclusion from the University.

The NUIT Security Officer should be notified about violations of copyright laws and these NUIT policies, as well as about potential loopholes in the security of any computer systems and networks at Northwestern. Contact the NUIT Security Officer at security@northwestern.edu.

Disability Insurance Policy

All Feinberg School of Medicine students are required to participate in the student disability insurance group program. This program has been negotiated by the consortium of Chicago-area medical school deans and has been in place since 1995. The current policy is managed by RX Financial Resources Insurance Brokers, and underwritten by the Unum Provident Corporation.
The implementation of the student group plan was prompted by concerns of the Association of American Medical Colleges (AAMC) about the lack of financial protection for students who may become disabled during their medical training. Therefore, LCME accreditation standards now require disability insurance be made available to medical students.

A matriculated student who for reason of any physical or mental disability is unable to continue in school can receive a benefit of $1,500 per month (for a first- or second-year student) or $2,000 per month (for a student who has progressed beyond the second year) until age 65. No exclusions for pre-existing conditions exist.

Each student is provided an individual policy that explains in detail all benefits two months after matriculating into the medical school. They are also notified of how their premium amount is configured, and how to obtain answers to questions about their policy and/or filing a claim. At the request of a graduating or terminating student, the insurance may be continued on an individual basis into residency or other activity. The premium billing schedule is determined by class year and enrollment status for details, please review the premium billing schedule below:

<table>
<thead>
<tr>
<th>Class Year</th>
<th>Billing Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Incoming M1</td>
<td>Fall Quarter</td>
</tr>
<tr>
<td>New Transfer Student (any class year)</td>
<td>(to cover M1 10-month premium or annual premium for current year not paid prior to personal leave or entry to Feinberg)</td>
</tr>
<tr>
<td>Student returning from personal leave of absence that was not billed for proceeding school year prior to leave</td>
<td>AND</td>
</tr>
<tr>
<td>Winter Quarter</td>
<td>(to cover upcoming year premium)</td>
</tr>
<tr>
<td>M2 &amp; M3 students</td>
<td>Winter Quarter (to cover upcoming M3 or M4 school year)</td>
</tr>
<tr>
<td>MSTP, Other Graduate or Research Program Study students</td>
<td>Winter Quarter</td>
</tr>
<tr>
<td></td>
<td>(student will remain in regular billing cycle unless attending an institution outside of Northwestern and student requests to discontinue coverage during that period.)</td>
</tr>
</tbody>
</table>
Questions regarding the student group disability insurance plan should be directed to, Linda Daniels, Coordinator for Student Support Services at: l-daniels2@northwestern.edu or (312) 503-0434.

Student Disability Insurance

Please see: http://www.feinberg.northwestern.edu/education/current-students/campus-services/health/student-disability-insurance.html.

Feinberg IT E-mail Guidelines

M1 Students

At Feinberg, additional precautions are required in the use of electronic communication because of the nature of clinical care and biomedical research. Because Feinberg students are likely to collect, use, manage and be exposed to Protected Health Information (PHI), the School of Medicine provides you with an additional e-mail account.

Students’ primary NU e-mail address ends with the following domain: @northwestern.edu. The use of this account is mandated for communication with faculty, residents, and the professional staff of the academic medical center. All official information and announcements will be delivered to this account. It is expected that Feinberg students will read and respond to emails sent from the school and keep this email address active.

Messages sent to students’ primary NU e-mail addresses will deliver mail to their Microsoft Exchange mailbox, which can be viewed at https://collaborate.northwestern.edu.

A variety of resources are available to assist in setting up computers and mobile devices. Please see: http://www.it.northwestern.edu/collaborate/index.html.

Feinberg students’ second e-mail account, @fsm.northwestern.edu, is still available when logging into the FSM Google domain at: http://login.fsm.northwestern.edu. The second
account is provided to enable students to take advantage of the educational resources that will be available, including Google Calendar, Google Drive, Google Sites, and Google Groups.

We highly recommend that Feinberg students set up an automatic forward of all @fsm.northwestern.edu mail to the primary Exchange account, @northwestern.edu. This can be done by logging in to the @fsm account, going to Settings, and selecting “Forwarding and POP/IMAP,” then clicking “Add a forwarding address” and following the instructions. In this way, both addresses can be used but consolidated into primary mailbox. Feinberg students are required to continue to use the Exchange account as the primary e-mail location. The @northwestern.edu email is not to be forwarded to any Google account or third party email system.

M2, M3, and M4 students

M2, M3, and M4 student e-mail accounts are currently powered by Google Apps for Education. The login site for these accounts in the Feinberg Google Apps domain is: http://login.fsm.northwestern.edu. Access to your account is authenticated by using your NetID and password.

The Feinberg Google Apps account should not be used to collect, store, transmit, or manage Protected Health Information (PHI). Any violation of HIPAA or disclosure of PHI will be referred to the Student Promotions Committee.

Examination Procedures

Students are expected and honor-bound to take examinations honestly and eschew any opportunity to obtain an unfair advantage during an examination.

- Proctors should be present during every examination. Proctors may be graduate
students or staff and faculty members. In addition, students are expected to police themselves regarding inappropriate behavior.

- All personal effects, including books, newspapers, magazines, jackets, hats, book bags, audio devices, PDAs, cell phones, and other electronic devices are to be removed from desk tops during examinations. If calculators are required, they will be provided.

- Personal breaks are allowed but discouraged. If a break is necessary, the student must hand his/her exam materials to a proctor before leaving the room. Only one male and one female are allowed to leave the room at a time. The length of time during which the student is out of the room should not exceed 10 minutes. Examination time will not be extended for a student who has taken a break.

- No examination questions will be changed, corrected, or interpreted during the exam. Students are not allowed to ask faculty members questions once the examination has begun. If the student feels a question is wrong or ambiguous, a note can be made on the back of the cover sheet of the examination packet. However, obvious typographical errors discovered by the course director that compromise the value of an examination question may be rectified by a general announcement.

- The examination beginning and ending times should be announced at the beginning of the course and on the front page of the examination packet. They will be strictly adhered to. Answer sheets not turned in by the appointed end of the examination will result in the assessment of a penalty to the grade. Should a student arrive late for an exam, the ending time will not change (that is, the student will not receive additional time).

- In the event that a fire alarm sounds during an examination, all students must place both answer and question sheets face down at the work area and exit the building immediately. Upon return to the examination the course director will announce the revised ending time.

- In the rare emergency situation where illness or other unexpected occurrence prevents a student from sitting for an examination at the scheduled time, the
Associate Dean for Student Programs and Career Development and the course
director must be notified immediately and before the examination. Together they
will consider the situation and decide an appropriate course of action regarding
postponement of the exam.

- In the nonemergency need to reschedule an examination, the student must
  petition the Associate Dean for Student Programs and Career Development in
  writing at least two weeks in advance of the exam, stating the need for the
  requested rescheduling and a proposed alternate time for the exam. The
  associate dean and course or clerkship director will respond in writing within
  three business days, taking into consideration the reason for the proposed
  rescheduling, any history of prior requests, and the feasibility of rescheduling.
- Unexcused missed examinations will result in failure of the exam.

Requirements for Graduation

Feinberg students are expected to complete the medical school curriculum within 6 years of
matriculation. Approved joint degree programs that enhance a student’s medical education are
encouraged, and will not count towards the 6-year limit. Appeals for exceptions to the 6-year rule
must be made to the Student Promotions Committee.

The MD degree will be conferred by Northwestern University’s Feinberg School of Medicine to
persons who have met the following requirements as determined by faculty:

- Satisfactorily completed all competency and coursework requirements
- Achieved passing scores on the National Board of Medical Examiners USMLE Step 1
  and Step 2 (CK and CS)
- Paid all fees in full
- Returned all materials/school property
- Attended the mandatory Exit Interview for medical school borrowers

The Feinberg School Commencement is held each year in mid- to late May. Students who
anticipate graduation must file a petition for graduation in December of the previous calendar year. That petition will be acted upon by the Feinberg Student Promotions Committee, and the list of eligible students sent to the Executive Committee of the Faculty for final school approval, then to the Board of Trustees of Northwestern University for conferral of the degree.

Under special circumstances, the Feinberg School will grant the MD degree in December, effective upon the last day of fall quarter registration. These circumstances include:

- Students in the Medical Scientist Training Program whose combined periods of enrollment in the medical and graduate school segments of the program can thus be optimized;
- Any other student who, through interruption of the usual curricular course for extramural study or because of academic, personal, or medical leave requires six months or less enrollment beyond their originally anticipated graduation date to complete degree requirements.

The Associate Dean for Student Programs and Career Development will work on a case-by-case basis with students eligible for graduation in December. The petition for degree and approval by the Student Promotions Committee and Executive Committee of the Faculty must be completed in time for approval by the NU Board of Trustees at its fall meeting. A student whose degree is granted in December will be eligible to participate in Feinberg School Commencement ceremonies the following May.

**HIPAA**

The first federal privacy standards to protect patients’ medical records and other health information provided to insurance plans, doctors, hospitals, and other health care providers took effect in April 2003. The Standards for Privacy of Individually Identifiable Health Information (“Privacy Rule”), developed by the Department of Health and Human Services as part of the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”), set national standards for
the protection of certain health information and provided patients with access to and more control over their personal health information. The Privacy Rule requires health plans, pharmacies, doctors, hospitals, and other health providers to establish policies and procedures to protect the confidentiality of protected health information about their patients. Materials regarding the HIPAA responsibilities and requirements are distributed to students during their first year of medical school at a mandatory HIPAA training session.

**HIV/HBV Policy**

The Centers for Disease Control and Prevention has developed guidelines on measures to be taken by the health care community to avoid the transmission of human immunodeficiency virus (HIV) or hepatitis B virus (HBV) from infected health care workers to patients. Although the guidelines suggest that infected health care workers not engage in “exposure-prone invasive procedures,” those procedures have not been specified. Rather, many health care institutions, including hospitals and clinics associated with the medical school, have adopted policies to specify that health care workers who perform surgical or obstetrical procedures that involve entry into tissues, cavities, or organs—or dental procedures involving manipulation, cutting, or removal of oral or perioral tissues, including teeth structure—know their HIV (and HBV) status and, if positive, seek counsel from an expert review panel before performing these procedures. Technique, skill, experience and infection control compliance are among the factors to be considered when evaluating the worker. Although these measures were developed primarily to protect patients from the transmission of the HBV virus, the greater transmissibility of HIV suggests their application to HIV-infected health care workers as well.

**Section I:** Admission. HIV or HBV serostatus will not be a consideration in the determination of acceptance for the Honors Program, MD program, or transfer admission to the School of Medicine, provided that the adoption of state or federal legislation or the establishment of
policies by the McGaw Medical Center institutions does not restrict the clinical activities of an infected student to the extent that completion of medical degree requirements is not possible.

Potential visiting students must submit evidence when applying to the School of Medicine that 1) they have completed the three-stage HBV immunization series, 2) they are determined to be immune or chronic carriers of HBV, and 3) they have undergone training in the universal precautions for avoiding exposure to blood and other body fluids.

**Section II: Testing.** Neither applicants, entrants, re-entrants, current students, nor visiting students will be required to undergo HIV testing.

**Section III: Infected Students and Continuation in School.** A medical student found to be infected with HIV or HBV may continue in the MD program as long as he or she is able to carry out the physical and intellectual activities expected of all students.

Unless directly notified by the student, those involved in his or her education will have no knowledge of his or her serostatus. However, the HIV+ or HBV+ student is urged to notify his/her physician and thereby obtain appropriate medical and emotional support. He/she also is urged to notify the director of the Chicago Campus Student Health Service who will, among other actions:

- Ascertain whether the student is receiving medical and emotional support to that student’s satisfaction, and, if not, suggest alternative sources by which such care could be obtained;
- Ensure that the student is aware of any particular precautions to be taken in patient care activities, career specialty selection, and lifestyle to avoid the transmission of the infection to any other person;
- Ensure that the student is aware of possible signs of disease progression that would suggest interference with his/her physical or emotional ability to fulfill patient care or other educational requirements of the MD program;
• Discuss with the student whether he/she may already have participated in patient care activity in which an injury to that student by a sharp instrument would have led to contamination of the patient with the student’s blood;

• If the circumstances in the immediately preceding point indeed have occurred, notify the student of the legal obligation by the State of Illinois and moral obligation of the school to notify the patient involved; ensure that this information, including the identity of the student, is made known to the hospital or clinic in which the incident occurred; and offer the assistance of the School of Medicine in making these notifications.

Section IV: Immunization. All Northwestern University medical students must undergo HBV immunization as a condition of entrance to the School of Medicine, except those who present evidence of current HBV+ status. HBV- students who have never undergone HBV immunization must complete the three-stage immunization series and undergo follow-up determination of antibody titer.

These students also will be encouraged to obtain a “booster” vaccination if titer is below 10 IU/L. Potential visiting students from other institutions who cannot show evidence of HBV immunization when applying will be denied acceptance.

Section V: Infected Patients. Before engaging in any clinical care activities, medical school and visiting students first must have received training in the universal precautions for the handling of sharp instruments and body fluids to minimize the risk of infection from their clinical interaction with HIV+ and HBV+ patients. In addition, all medical school students will be provided instruction on psychological aspects of interacting with HIV+ and HBV+ patients as a component of their preclinical education. All students are expected to participate in the care of all patients to whom they are assigned, regardless of the infectious status of the patient.

A student who is apprehensive about providing care to any patient should discuss this apprehension in advance with the clerkship director and/or Associate Dean for Student Programs and Career Development. A student who suspects that he or she is being subjected to patient care or laboratory conditions in which not all universal precautions are being enforced
should immediately consult the Infection Control Officer of that institution and/or the Associate Dean for Student Programs and Career Development.

Section VI: Possible Contamination. A student subjected to possible contamination from the tissue or body fluids of any patient, regardless of suspected HIV or HBV status, through needlestick, cut, or other injury that breaks the skin or splashes fluids onto open sores or mucosal surfaces (mouth, eyes), should follow the instructions outlined in the Needlestick Section of this handbook. Any testing or treatment will be performed only at the student’s request, and any test result will be confidential to the student.

Section VII: Treatment Cost. The cost of testing and treatment requested by a Northwestern student who has been exposed to possible HIV or HBV contamination during assigned medical educational activities will be borne by the University. Although these services also will be offered to visiting students, the costs will be the responsibility of the student or his or her home school.

Section VIII: Compatibility with Related University Policy. The Northwestern University “Policies and Procedures—AIDS” was adopted in 1986. Essential items of that policy that relate to medical students and the medical school authority responsible for fulfilling requirements therein are as follows:

- Northwestern University shall follow the guidelines recommended by the Centers for Disease Control and Prevention and the American College Health Association;
- Students with AIDS-related complex (ARC)/AIDS may continue their studies at the University so long as they are able to meet the requirements of their academic programs;
- Students who test HIV+ are expected to arrange periodic follow-up examinations.
- Known cases of ARC or AIDS shall be reviewed by a University AIDS Advisory Committee. (The activities of the Medical Student HIV/HBV Review Panel will be equivalent to those of the University AIDS Advisory Committee);
- The University shall conduct educational programs on AIDS awareness (School of Medicine oversight responsibility: Curriculum Committee);
Medical students are required to learn "universal precautions" as taught by the School of Medicine;

Universal precautions must be carried out in all research and educational laboratories of the University (School of Medicine oversight responsibility: School of Medicine Safety Committee);

**Section IX:** Conclusion. The School of Medicine recognizes that it is possible for an otherwise healthy HIV+ physician to practice medicine and for an HBV+ physician to practice many specialties, unimpeded by disease-specific restrictions. Therefore, the school will assist students infected with these diseases to complete their medical degree requirements, subject to considerations that it feels, in its best judgment, are appropriate to the circumstances of each individual case.

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**Leave of Absence/Independent Study Policy**

Leave of absence (LOA) and independent study may be granted for several general reasons, including, but not limited to, the following:

- Academic performance
- Personal issues (health or family difficulties)
- Financial hardship
- Pursuit of other academic activities (such as earning an advanced degree, conducting non-degree related research, or studying abroad).

Any student considering a leave of absence/independent study should meet with the Associate Dean for Student Programs and Career Development. The Associate Dean for Student Programs' role is to explain the policy, offer support and help the student with any questions or concerns regarding the leave. The student will be provided with the Leave of Absence/
Independent Study request form and will be directed to write a short explanation as to why a leave is being requested.

If a leave is being requested due to health reasons, a written request to drop for reason of illness must be made to the Associate Dean for Student Programs and Career Development and be accompanied by documentation from the treating physician stating that continuation by the student under the prevailing circumstances is not practical. In addition, the physician should project when the student might be able to resume his/her studies. It may be necessary, depending on circumstances, that a fitness for duty examination be performed on the student by appropriate professionals before reentry to Feinberg is granted.

In an emergency situation, Feinberg Administration has the right to put a student on a leave.

A written request to a leave for reasons of personal or family crisis must explain the nature of the crisis, such as death, disability, or serious illness of a family member; collapse of financial support; or impending legal issue. The request must also explain how the student expects to cope with his or her particular situation before returning and the anticipated return date.

A student may make a written request that the remainder of a clerkship be dropped. Such a request must be made prior to the completion of the first half of the clerkship and include a plan for identifying and correcting the deficiency or distraction and an estimate of when the student will be ready to continue their clinical education. Whether a student must repeat the entire clerkship or complete the remainder of the clerkship will be left to the discretion of the clerkship director.

Leave of absences and independent studies are granted on an academic year basis. They are generally limited to one year but may, under some circumstances, be renewed upon re-application and provision of justification. Students requesting additional leave time must speak directly to the Associate Dean of Student Programs.

Before returning to academics, students on leave must meet with an SPC subcommittee. The subcommittee will be interested in hearing how the student spent their time away from
academics, and how they have addressed their personal or academic issues. Pending the recommendation of the subcommittee, the SPC will determine if a return to academics is in the best interest of the student at that time. Return to academics is subject to the availability of space in the appropriate medical school class.

A formal response regarding a student's return will be sent to the student on behalf of the committee.

**Listserv Services Policy**

The Feinberg School of Medicine operates an electronic mailing list service ("listserv") for each class of students, each college, and the entire student body. Listservs were established to transmit official announcements regarding classes, professional events, student organization activities, and other related information. Students and faculty members may post brief, relevant messages. The distribution of large files or graphics will not be accepted by the listserv and should be shared via Feinberg Google Apps for Education such as Google Docs or Google Sites. Announcements of student-centered social events, items for sale, and other similar messages can be made through the student oriented groups in the Feinberg Google Apps.

While at the time of matriculation new students are automatically assigned to the listserv for their class, a leave of absence or other interruption in academic progress may necessitate subscription to the listserv of a new class. This may be accomplished by sending an e-mail message to listserv@listserv.it.northwestern.edu. The message should have a blank subject line and the body of the message should state “subscribe med**-announce firstname lastname.” (** indicates the last two numbers of the new expected year of graduation).
NBME Exam Policy

USMLE NBME Step 1 Examination Policy

1. Passing the USMLE Step 1 is a requirement for promotion into the clinical curriculum. M2 students will take the Step 1 examination during the month of April (prior to the start of Introduction to Phase 2).

2. Students who fail their first attempt at Step 1 may complete the M3 clerkship block they are currently on. Under no circumstance will a student be allowed to begin a second clerkship before the Step 1 examination has been retaken.

3. Students who fail the Step 1 examination on their first attempt must submit a specific study plan and timeline to the Educational Support Committee (ESC) for consideration and permission to retake the Step 1 examination. The ESC will provide feedback on a student’s study plan. Once the study plan has been approved, permission will be granted for the retake.

4. A student who has failed USMLE Step 1 on the first attempt, must retake the examination no later than October 31 of that same year. If a student does not meet this deadline, they must appear before the Student Promotions Committee (SPC).

5. If a student does not pass the Step 1 examination on the second attempt, they will be placed on a leave of absence. The student must appear before the SPC and request permission to retake the examination. The student will need to make a presentation to the committee including a modified study plan and timeline. The SPC has the prerogative to accept or deny the request for retake.

6. If granted permission to take the exam a third time, the student must sit for the exam no later than May 15 of the following year. Failure to do so will result in an automatic recommendation for dismissal.

7. Any student failing the Step 1 examination a third time will appear before the SPC for review and likely dismissal based on academic grounds.
USMLE NBME Step 2 Examination Policy

- All students are required to take and record a passing score on the USMLE Step 2 – CK (clinical knowledge) examination.
- All students are required to take and record a passing score on the USMLE Step 2 – CS (clinical skills) examination.

Needle Stick Policy

If stuck with a contaminated needle, or otherwise subjected to contamination by bodily fluids from a patient, there is a small but very real risk of acquiring a serious infection from the host. It is to your benefit to report all incidents because, if necessary, you will need to prove that you were infected during your training in order to claim the disability insurance offered through the medical school. **If such an incident does occur, you are automatically excused from whatever you are doing.** Remember that your health comes first.

**Medical attention** will include **cleansing and treating any wound, obtaining both your blood and the host blood for testing, and the provision of counsel on follow-up treatment and testing.** At the time of any potential contamination, you should excuse yourself from the activity under way and immediately call or go to the site specified below:

- **NMH:** Notify the unit manager or charge nurse immediately and call NMH Corporate Health (312) 926-8282 (If this is after hours or on a weekend, the office will be closed, but an answering service will take your call and will page the nurse on call.)
- **RIC:** Corporate Health (312) 926-8282 (If this is after hours or on a weekend, the office will be closed, but an answering service will take your call and will page the nurse on call.)
- **Lurie Children’s:** Lurie Children’s Portal: The Point Policies and Procedures/Occupational Health
Blood/Body Fluid Exposure Management

- **VAW**: The student should report immediately to VA Employee Health (7 North Damen) during regular work hours (Mon-Fri 8 AM - 4PM) and to the Emergency Department at all other times.

- **MacNeal**: Report the incident to your chief resident or Dr. Zawacki. Proceed to Employee Health ext. 3427 (before 4 PM) or to the Emergency Department ext. 6000 (after 4 PM).

If at a physician's office or other site, you would still contact Corporate Health at NMH.

- **Stroger Hospital**: All Cook County Health & Hospitals System (CCHHS) Feinberg Medical students exposed to blood and/or body fluids in the course of their job duties shall have appropriate post exposure evaluation and follow up by the staff of CCHHS Employee Health Service (EHS). If a medical student sustains exposure to blood and/or body fluids in the course of their job duties, they should follow the following procedures:

  1. **First Aid**
     - Wash needle sticks and cuts with soap and water;
     - Flush splashes to the nose, mouth, or skin with water;
     - Irrigate eyes with clean water, saline, or sterile irritants.

  2. **Notification of Exposure**
     - Inform supervisor of exposure immediately;
     - Request assistance from other staff members as needed;
     - Obtain Source Patient name and medical record number, if known, to report to EHS for purpose of exposure management.

  3. **Report to CCHHS Employee Health Services (CCHHS EHS)** or, if CCHHS EHS is not open, to the Emergency Department. CCHHS EHS is located at:
     - Stroger Hospital Administration Building
     - 3rd Floor, West Wing, Suite 3001900
     - West Polk Street, Chicago, Illinois 60612
All students injured during hours that CCHHS EHS is closed shall have initial evaluation and intervention in the Emergency Department. These personnel shall be instructed to report to CCHHS EHS on the next occasion that CCHHS EHS is in session. Students may be referred from CCHHS EHS/ED to their personal physician for further follow up. Contractors, rotators and volunteers will receive initial evaluation and treatment through CCHHS EHS and will be referred for follow-up to their personal or institutional health care provider.

You should not receive any bills for treatment, but if you do, send them to:

Director, Office of Risk Management
Northwestern University
2020 Ridge Avenue #240
Evanston, IL 60208-4335
Phone: 847-491-5610
Fax: 847-467-7475
E-mail: risk@northwestern.edu

While the exact reporting procedure varies from hospital to hospital, the first step is to contact the appropriate person immediately. This individual deals with such incidents on a routine basis. He or she can order testing of the patient and you, provide counseling regarding the need and desirability of further testing or treatment, and answer any questions you may have.

For your own information and for patients who ask, it is important to differentiate between confidential and anonymous testing. Confidential testing is done at a medical institution, and the results become part of the medical record, which is available to insurance companies and may affect future insurability. Anonymous testing is done by "neutral" organizations like Family Planning and state/county health agencies, and only the patient will know the result. Consider this issue before being tested.
In order to minimize your risk of exposure, follow the universal precautions. Wear gloves, eye protection, and facemask during procedures. Treat all patients and bodily fluids as if they are infected. Wash your hands frequently. Don’t recap needles, and dispose of all sharp objects immediately after use. If you follow them consistently, they will become second nature.

**Observed Misconduct**

Any incident of cheating, falsifying records, or other breach of academic integrity, either confirmed or suspected, should be reported promptly by the observer to the course director or to one of the academic deans. The observer must identify himself/herself to one of these individuals for even a cursory investigation to proceed and/or for any discussion to be held with the alleged offender. At the observer’s request, his/her identity will be kept confidential; in such a case, however, no further action can proceed beyond a private discussion. Only if the identity of the observer and the nature of any evidence can be made known to the alleged offender can others be brought into the investigation and the matter referred to the Student Promotions Committee for a hearing and possible disciplinary action.

**Parking Policy**

Street parking near the Chicago campus is limited and parking rules are strictly enforced. Off-street parking is offered by some apartment buildings for a monthly fee. A limited number of monthly parking spaces may be available in public lots around the Chicago campus at an average monthly cost of $200–300.

Access to the subsidized weekday parking program on the Chicago campus of Northwestern University is restricted to those students of the University who commute to the Chicago campus.
from residences outside the boundary of North Avenue, Halsted Street, and Congress Parkway, or to those medical students with extenuating medical or personal situations deemed worthy of special approval by the Medical Student Parking Committee.

Students with temporary or permanent medical or other extenuating circumstances may request a waiver of the residence location provision by describing that situation in the "Extenuating Circumstances" text area on the parking application form. The Medical Student Parking Committee will render a decision on this appeal.

The Commuter Permit gives full-time students unlimited parking access to their assigned garage; however, storage of vehicles for more than 24 hours is not permitted. Parking spaces for those that qualify are allotted based on availability.

Evening/weekend parking is available on a quarterly basis for Feinberg medical students regardless of location of residence. The vehicle must be removed from campus parking between 8:00 AM and 4:00 PM, Monday thru Friday. Arrangements for evening/weekend parking are made at the parking office in Abbott Hall.

The Evening/Weekend Parking Permit allows students access to a garage from 4 PM to 8 AM (weekdays) and 24-hour access on the weekends and University holidays. Students who live within the designated Chicago campus boundaries are eligible to purchase the Evening/Weekend Permit without departmental/school approval. Permits can be purchased annually, quarterly, or for the academic year.

Campus parking permits are not available to non-Northwestern visiting students.

Parking Prices

Parking prices are subject to change. For current pricing, please visit the Augusta Webster, MD Office of Medical Education (AWOME) student parking page.

Parking Lots
Northwestern's Chicago campus has several parking garages:

- A-LOT: Abbott Hall Surface Lot, 710 N. Lake Shore Dr.
- C-LOT: Huron-Superior Self Park, 222 E. Huron
- D-LOT: Erie-Ontario Self Park, 321 E. Erie
- E-LOT: 275 E. Chestnut Self Park (employee only)
- 441 E. Ontario Self Park (employee only)

**Applying for Medical Student Parking**

To request a campus parking permit, please complete and submit the parking application form on the AWOME website.

Applications for fall parking may begin to be submitted to AWOME in mid-August (returning students) or in mid-September (first-year students). Carpools are highly encouraged. All students interested in parking must bring a valid driver's license, insurance card, and registration card for each vehicle they wish to register.

Applicants will be notified by e-mail of tentative approval or rejection, along with what next to do to obtain the permit from the Parking Office. All parking financial obligations will be handled at the Chicago Parking Office. Please be prepared to provide automobile make and model, proof of driver's license, and insurance. You will receive your parking sticker and parking garage location from the parking office.

**Parking Office**

University Services Office
Abbott Hall (710 North Lake Shore Drive) Room 100
Phone: 312/ 503-1103
Hours 9 AM - 5 PM (weekdays)

For further parking information, please visit:
Peer to Peer File Sharing Policy

The use of file-sharing networks and software to download and share copyrighted works such as software, music, movies, television programs, video games and books can violate copyright laws. Both the person who makes an illegal copy of a copyrighted work available and the person who receives or downloads an illegal copy have violated the law. Many file-sharing programs have default settings that share copyrighted files, such as music and movies, through the Internet. Before enabling any of these programs students must read the fine print, make sure to understand the program itself, and only use such programs lawfully. Copyright owners are entitled to notify Internet service providers, such as Northwestern University, that IP addresses linked to their network are sharing copyrighted materials without authorization. The law requires the University to respond to such complaints by eliminating access to the infringing materials. Northwestern will disconnect IP addresses for those violating this law from the NU server. In addition, Feinberg medical students violating this law will need to appear before the Student Promotions Committee.

NU BAYU

http://www.it.northwestern.edu/security/nubayu/

Attendance Policy

Phase 1 Attendance Policy

The Feinberg curriculum is predicated upon the active participation and engagement of students and faculty members who have a shared interest in cultivating a respectful and productive learning climate. Professionalism dictates punctuality, preparedness and respectful participation
in learning as well as patient care environments. Attendance is required at learning sessions which are based upon interaction and/or involve patients and guest speakers. Attendance will be intermittently assessed. These sessions will be identified on students’ module schedules and will include:

- Clinical Placements (IP/ECMH)
- Small group sessions (all) & college-sized sessions
- Clinical Correlations
- Introductory Plenaries
- CEC sessions
- TBL sessions or Flipped Lectures
- SAM sessions
- Lab sessions (anatomy and computer-based)
- Sessions which are discussion-based or precede discussion groups
- Sessions which include a patient or guest speaker

Video-recordings will be made of lectures and plenaries. Video-recordings are meant to augment, not replace, participation in lectures. Learning is inherently social. Everyone benefits by participating in a community of learners who share a common purpose to elevate the level of discourse. Lecture attendance affords the opportunity to engage in active learning (posing questions of and interacting with faculty members; answering ARS questions; interacting with peers).

In the event of an acute illness, students are to contact one of the coordinators prior to the session(s) being missed. If the absence is an emergent issue, contact the coordinator as soon as it is feasible to do so. Unreported absences or absence notifications after the learning activity will not be excused, unless there were urgent circumstances. In some instances the coordinator may be able to make alternative arrangements.

<table>
<thead>
<tr>
<th>SM Phase 1a (TBL’s and Lab sessions); MDM Phase 1a</th>
<th>Lisa Rawlani: <a href="mailto:wittig@northwestern.edu">wittig@northwestern.edu</a></th>
</tr>
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<tbody>
<tr>
<td>SM Phase 1b (TBL’s and Lab)</td>
<td>Cherin Jaradat: <a href="mailto:cherin.jaradat@northwestern.edu">cherin.jaradat@northwestern.edu</a></td>
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</tbody>
</table>
If an absence is anticipated due to an important life event of family and friends (weddings, illness, death of a loved one, etc.) or due to a personal issue, please contact one of the Deans (Drs. Sanguino, Green, or Thomas) to set up a meeting to discuss requested time off prior to the session(s).

All unexcused absences will result in a professionalism form and require a meeting with Dr. Marianne Green. Students who intentionally misrepresent their attendance (e.g., asking someone else to use their clicker during a clinical correlation or to sign in for them) will receive a professionalism form and be referred to the Student Promotions Committee for appropriate action.

You are training for a profession that has high expectations, where accountability to your patients, colleagues, and peers is critical. Lapses in professionalism impact all three groups and will have serious consequences which may negatively impact your career. Please respect and abide by these expectations.

**Religious Observation Policy**

Students who choose not to attend classes or take exams on certain days because of their religious beliefs will be given an equivalent opportunity to make up the work requirements or exams they miss, without penalties. If the requested accommodations in effect result in students not participating in required educational experiences, the Associate Dean of Student Programs
and Career Development and the course/clerkship director will assess the situation and determine if granting such will substantially alter the depth and integrity of the educational requirements for the medical students.

First and Second Year students who anticipate absences from scheduled educational activities due to religious observances, are required to provide written notification to the Associate Dean of Student Programs and Career Development of the anticipated days they will be absent. This request must be made no later than the first two weeks of the academic year.

Rising Third and Fourth Year students should provide written notification to the Associate Dean of Student Programs and Career Development and their affected clerkship directors at least four weeks in advance of the anticipated absence.

**TB Testing Policy**

*All currently enrolled students are required to complete Tuberculosis screening annually.*

**Procedure for Incoming Students**

Incoming students are required to complete and submit a QuantiFERON® TB Gold blood test result along with other health requirements. The test result cannot be more than 90 days prior to matriculating at Feinberg.

If the QuantiFERON® TB Gold blood test result is positive, the student will need to follow up with a Tuberculosis CXR, and a TB Consultation at Student Health Services.

**Procedure for M2 students, students beginning Clerkship Rotation or Returning from a Leave of Absence**

M2 students and students participating in clerkships for the first time or returning from a leave of absence are required to complete and submit the NM Tuberculosis Questionnaire, a 2-Step PPD skin test, or an annual QuantiFERON® TB Gold blood test.
• The 2-Step PPD Skin Test requires two skin test placements and two results. The second skin placement must be placed within 28-days of the first test. The results of the 2-Step PPD Skin Test cannot be more than 30 days prior to clinical activity or first clerkship start date.

• The QuantiFERON® TB Gold blood test is to be completed by students with a history of PPD positive skin test, previous BCG vaccination or students who wish to bypass completing the 2-Step PPD Skin Test.

Procedure for Continuing M3 & M4 Students

Students who have completed required clinical rotations the previous year are only required to complete and submit the NM Tuberculosis Questionnaire, 1-Step PPD test or an annual QuantiFERON® TB Gold blood test.

• The 1-step PPD Skin Test requires one skin test placement and result that must be completed within one year of the student’s last PPD Skin test result.

• The QuantiFERON® TB Gold blood test is to be completed by students with a history of PPD positive skin test, previous BCG vaccination or students who wish to bypass completing the PPD Skin Test.

Procedure for Positive Tuberculosis Result

If a student receives a positive PPD skin test result, he/she must follow up with the QuantiFERON® TB Gold blood test.

If the QuantiFERON® TB Gold blood test result is positive, the student will need to follow up with a Tuberculosis CXR, and a TB Consultation at Student Health Services.

The Tuberculosis CXR result cannot be older than 6 months prior to matriculation at Feinberg and is valid for up to five years as long as student remains asymptomatic of tuberculosis.

Exposure Surveillance
All students involved in a TB exposure will require a baseline test as soon as possible after the exposure and then a repeat test 10 weeks later. Converters will need a TB CXR and evaluation in Infectious Disease or Corporate Health clinic for discussion of treatment.

**Foreign Travel TB High Risk Countries**

All students who have traveled to countries with high risk for TB exposure must have TB testing 8 to 10 weeks after return to the United States and prior to participating in clinical activities. Symptomatic students should be given a surgical or procedure mask and sent to Student Health for CXR with further management dependent on TB CXR findings and clinical evaluation.

**Respiratory Surveillance and Mask Fit Testing**

All students assigned to clerkship rotations must complete respiratory surveillance and mask fit testing at the NM Corporate Health Department each year prior to start of required clerkship rotations.

**Clerkship Log Policy**

The purpose of the clerkship logs that you fill out on your clinical rotations is to ensure that each of you have had the opportunity to address the objectives of the clerkship. The precise language of the accreditation standard is “The system must ensure that all medical students have the required experiences. For example, if a medical student does not encounter patients with a particular clinical condition (e.g., because it is seasonal), the medical student should be able to remedy the gap by a simulated experience (e.g., a standardized patient experience, an online or paper case)…” In order for the clerkship faculty to be able to do this, it is imperative that you fill out the clerkship logs chronicling your experiences, confirming that you have had the appropriate educational opportunities to meet the objectives. Therefore it is necessary for you to complete your clerkship log by the Wednesday of the last week in the clerkship. Any student who has not completed the clerkship log for the required clerkships will not be allowed to take
the subject examination and receive an incomplete for the clerkship. Rescheduling the written examination will require the purchase of a separate examination and will be at the student's expense. In some cases, the clerkship director may require you to schedule extra time to complete the clerkship. Individual clerkships may choose to lower your final grade.

**Clerkship Transportation Policy**

Please see the [Clerkship/Preceptor Reimbursement Page for current information.](#)

**Safe and Healthy Learning Environment**

The Northwestern University Feinberg School of Medicine is committed to the principle that educational relationships should be one of mutual respect between teacher and learner. Because the school trains individuals who are entrusted with the lives and well-being of others, we have unique responsibilities to assure that students learn as members of a community of scholars in an environment that is conducive to learning.

Feinberg wants to encourage students to bring attention to any breach or perceived breach of the Safe and Healthy Learning Environment, and wishes to be open about the process the university has in place should such a claim be made. The process flow document illustrated in [Appendix A](#) offers a snapshot of our reporting, escalation, and resolution procedures related to a perceived mistreatment claim. The school also offers an [ombudsperson](#) for student support.

**INTRODUCTION**

 Maintaining such an environment requires that the faculty, administration, residents, fellows, healthcare professionals, staff, and students treat each other with the respect due colleagues.
All teachers should realize that students depend on them for evaluations and references, which can advance or impede their career development. Teachers must take care to judiciously exercise this power and to maintain fairness of treatment, avoiding exploitation or the perception of mistreatment and exploitation. The quality and worth of a Feinberg School of Medicine education rest not only in the excellence of the content and the skills that are taught, but also in the example provided to students of humane physicians and scientists who respect their professional colleagues at all career levels, their patients, and one another.

RESPONSIBILITIES OF TEACHERS AND LEARNERS

The teacher-learner relationship confers rights and responsibilities upon both parties. 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.

1. Responsibilities of Teachers
   • Treat learners fairly, respectfully, and without bias related to their race, color, religion, national origin, sex, sexual orientation, gender identity or expression, parental or marital status, age, disability, citizenship, or veteran status.
   • Distinguish between the Socratic method, where insightful questions are a stimulus to learning and discovery, and overly aggressive questioning, where detailed queries are repeatedly presented with the endpoint of belittlement or humiliation of the learner.
   • Give learners timely, constructive, and accurate feedback and opportunities for remediation.
   • Provide written evaluations on time.
   • Be prepared and on time for all activities.
   • Provide learners with current material and information and appropriate educational activities.

2. Responsibilities of Learners
• Be courteous and respectful of others, regardless of their race, color, religion, national origin, sex, sexual orientation, gender identity or expression, parental or marital status, age, disability, citizenship, or veteran status.

• A medical student should act in accordance with this Feinberg School of Medicine Student Handbook and the Northwestern University Student Handbook.

• Be prepared and on time for all activities.

• Be aware of the medical condition and current therapy of patients.

• Put patients' welfare ahead of educational needs.

• Know limitations and ask for help when needed.

• Maintain patient confidentiality.

• View feedback as an opportunity to improve knowledge and performance skills.

**DESCRIPTION OF INAPPROPRIATE BEHAVIOR**

Inappropriate behaviors are those that are not respectful or professional in a teacher-learner relationship. Examples of inappropriate behaviors which compromise the integrity of the educational process include, but are not limited to:

• Unwanted physical contact (such as touching, hitting, slapping, kicking, pushing) or the threat of the same;

• Sexual harassment (see the [Northwestern University Policy on Sexual Misconduct, Stalking, and Dating and Domestic Violence](#));

• Discrimination based on race, color, religion, national origin, sex, sexual orientation, gender identity or expression, parental or marital status, age, disability, citizenship, or veteran status (see the [Northwestern University Policy on Discrimination and Harassment](#));

• Requiring learners to perform personal chores (e.g., running errands or babysitting);

• Verbal harassment, including humiliation or belittlement in public or privately (see the [Northwestern University Policy on Civility](#));

• Use of grading and other forms of assessment in a punitive or self-serving manner;
• Romantic or sexual relationships between a teacher and student (see the Northwestern University Policy on Consensual Romantic or Sexual Relationships Between Faculty, Staff, and Students).

The list above identifies a few specific situations. Other behaviors may qualify as student mistreatment and, if the student is unsure, s/he should consult with the appropriate faculty or university officials as detailed below.

RETTALIATION
The university and the medical school prohibit the taking of any retaliatory action for reporting or inquiring about alleged improper or wrongful activity. For further details, see the Northwestern University Policy on Non-retaliation.

WHAT TO DO IF YOU BELIEVE INAPPROPRIATE BEHAVIOR OR MISTREATMENT HAS OCCURRED
While we believe that professional behavior is generally practiced and respected by the members of our diverse community of scholars throughout Feinberg, we recognize there may be occasions when real or perceived incidents of unprofessional behavior directed toward learners occur. In these circumstances, Feinberg is committed to establishing the facts through a fair process, which respects, to the extent possible, the privacy of the involved parties.

A complaint should be reported in a timely fashion, typically within 30 days of the end of an academic quarter or the clinical rotation in which the alleged incident occurred (although claims of discrimination can be reported at any time). Depending upon the nature of the complaint, different avenues of reporting are available. Our approach and process for addressing complaints are outlined below, illustrated in Appendix A, and described in more detail below.

To provide medical students with an impartial initial point of contact, a faculty ombudsperson is available for students to contact (FSMombuds@northwestern.edu). Alternative contacts are the student’s college mentor or another faculty member with whom the student feels comfortable
discussing the incident. These individuals can either help address the concern directly or help with referral to an appropriate office or individual who is best suited to address the problem.

If after discussion of the incident, the student and faculty point of contact agree that particular events could constitute student mistreatment, the incident can be addressed as described below. If the incident involves sexual harassment, the student will be referred to the University Sexual Harassment Prevention Office for further discussion and investigation. If the incident involves other types of discrimination or discriminatory harassment, the student will be referred to the University Office of Equal Employment Opportunity and Access for further discussion and investigation.

If the incident does not fall into either of these categories, a first choice, where appropriate, is to seek informal resolution. This may be achieved through direct communication between the student and/or faculty point of contact and the respondent (individual being reported by the student) or, potentially, other avenues of communication. If an informal approach is either not appropriate or unsuccessful, then the student should make a formal complaint with the Vice Dean for Education.

If the incident does not involve sexual harassment or other types of discrimination or discriminatory harassment, and the student and faculty point of contact disagree that the incident was mistreatment, the student may pursue the matter directly with the Vice Dean for Education. The Vice Dean will pursue the incident as described above. As a first step, the Vice Dean, where appropriate, will seek an informal resolution. If that approach is unsuccessful or not appropriate, the Vice Dean will ask the student to submit a formal complaint.

Students may always directly contact an office empowered to address specific policies. In cases of possible sexual harassment, the University Sexual Harassment Prevention Office should be contacted at www.northwestern.edu/sexual-harassment, sexual-harassment@northwestern.edu, or (847) 491-3745. For concerns related to discrimination and
harassment, the Office of Equal Opportunity and Access may be contacted at
www.northwestern.edu/hr/equopp-access, eeo@northwestern.edu, or (847) 491-7458.

An alternative approach for reporting concerns of any nature is to use EthicsPoint. EthicsPoint
is intended to provide students and University employees with a simple way to report activities
that may involve misconduct or violations of University policy, including academic or research
misconduct, conflicts of interest, criminal activity, health or safety issues, fraud, financial
improprieties, or acts of discrimination, harassment, sexual harassment, or retaliation, as well as
workplace violence or threats. Reports may be filed online at www.northwestern.edu/ethics or
by calling (866) 294-3545. EthicsPoint provides reporters with options to protect their identity.
Any suspected problems or complaints reported via EthicsPoint will be reviewed in accordance
with current University procedures, including those described in the Faculty Handbook, Staff

CONFLICTS AND DOCUMENTATION
1. If the Vice Dean for Education is part of the complaint, or in any other way has a conflict of
interest or the appearance of a conflict of interest, s/he is obligated to remove him or herself
from the case during the investigation, and the Dean of the School of Medicine shall appoint
someone else to assume responsibility for the complaint.

2. The School of Medicine may act under these procedures, irrespective of possible civil or
criminal claims arising out of the same or other events. The Vice Dean for Education, with
the concurrence of the Dean of the School of Medicine, after consulting with the Office of
the General Counsel, shall determine whether the University shall, in fact, proceed against
a respondent who also faces related charges in a civil or criminal complaint. If the University
defers proceedings, it may subsequently proceed, irrespective of the time provisions set
forth in these procedures.

3. The Vice Dean for Education shall have the authority to take any actions on behalf of the
School of Medicine that s/he deems necessary to protect the complainant and/or the
respondent, or to address other needs or deliberations related to the situation, pending the
investigation and resolution of the complaint.
PROCESS FOR COMPLAINTS HANDLED BY THE VICE DEAN FOR EDUCATION

As described in section V above, students with concerns related to mistreatment can use the faculty ombudsperson that is designated specifically for this purpose, college mentors, or a trusted faculty member as an initial point of contact. Together with this individual, the student can decide whether to seek an informal resolution to the problem and/or whether to move forward with a formal complaint.

If the complaint alleges discrimination or sexual harassment, the complaint must be referred to the University Office of Equal Employment Opportunity and Access or the Sexual Harassment Prevention Office, respectively. Complaints brought to the Sexual Harassment Prevention Office or the University Office of Equal Employment Opportunity and Access will be handled using the processes and procedures of these offices, per University protocol and policy. Otherwise, if the student decides to proceed with a formal complaint of mistreatment, it will be addressed according to the process described below.

The process for addressing formal complaints of mistreatment is as follows:

1. Inquiry into a violation of the standards of conduct committed by any individual, whether or not affiliated with the University, should be initiated by written complaint and filed with the Vice Dean for Education as soon as possible, typically within 30 days of the end of an academic quarter or the clinical rotation in which the alleged incident occurred. A delay in filing may be grounds for rejection of a complaint.

2. The complaint must be detailed and specific, and accompanied by appropriate documentation, if available.

3. After receipt of a properly documented complaint, which has been made in good faith, the Vice Dean shall inform the respondent of the nature of the charges. The Vice Dean will also remind the respondent about the non-retaliation policy of the University described above.

4. To initiate an investigation, the Vice Dean shall appoint an investigation committee of not less than three individuals, all of whom shall be faculty members of the School of Medicine but not members of the same department as, or collaborators with, the complainant or respondent. The investigation shall be initiated within two weeks of forming the committee,
and the complainant and respondent will be notified that the investigation has been initiated. The Vice Dean shall also make every effort to protect the identities of both complainant and respondent, with respect to the larger community.

5. The investigation committee shall undertake a thorough examination of the charges. Whenever possible, interviews shall be conducted with the complainant and respondent. Interviews may also be conducted with others having information regarding the allegations, if the committee deems it necessary. Summaries of these interviews shall be prepared, provided to the interviewed party for comment or revision, and included as part of the file. When appearing before the committee, the respondent and the complainant may each be accompanied by a non-attorney adviser. The student's adviser shall be a School of Medicine faculty member and the respondent's adviser must be a Northwestern University employee. The committee shall not conduct formal hearings. Except in unusual cases, the respondent and the complainant shall not appear before the committee at the same time.

6. Following the completion of its investigation, the committee shall submit a report of its findings to the Vice Dean for Education (who will share it with the Dean), with copies to the complainant and respondent. This report shall describe the policies and procedures under which the investigation was conducted, how and from whom information was obtained, the findings, and the basis of the findings, and texts or summaries of the interviews conducted by the committee. This report shall ordinarily be submitted to the Vice Dean for Education within 60 days of the appointment of the formal investigation committee. The complainant and respondent shall be permitted to make a written reply to the Vice Dean within 15 calendar days of receipt of the report. Such replies shall be incorporated as appendices to the report of the investigation committee. The entire investigation process shall typically be completed within 90 calendar days of its initiation, unless circumstances warrant a delay. In such cases, the reasons for a delay shall be documented.

RESOLUTION FOR COMPLAINTS HANDLED BY THE VICE DEAN FOR EDUCATION

1. If the investigation committee finds the charges to be unfounded, the matter shall be dropped and the concerned parties shall be informed.
2. If the investigation committee finds the charges against a respondent to be substantiated, the Dean will notify the following offices:

- For a non-faculty employee of the Feinberg School of Medicine or one of its affiliated clinical entities (including but not limited to nursing, housestaff, and fellows), the Dean shall inform the Office of Human Resources of the appropriate institution (e.g., Northwestern University, Northwestern Memorial Hospital, Northwestern Medical Faculty Foundation, etc.) or, for a resident or fellow of the McGaw Medical Center of Northwestern University, the Associate Dean for Graduate Medical Education.

- If charges against a faculty member are substantiated, the Dean will proceed to take whatever actions are appropriate to the seriousness of the offense, in consultation with the Provost and in accordance with University procedures, and which consider the previous record of the respondent. For major offenses by any faculty members, the Dean of the School of Medicine shall determine with the Provost whether there is substantial reason to believe that just cause exists for imposition of a major sanction, e.g., termination of appointment or suspension. Such action will be executed in accordance with the policies and procedures in the Faculty Handbook. For less serious offenses, the Dean of the School of Medicine may impose minor sanctions, as described in the Faculty Handbook. These may include, but are not limited to, removal from a particular project, a letter of reprimand, special monitoring of future work, or probation.

3. The respondent shall have access to all established University grievance and appeal procedures, as described in the Faculty Handbook.

Policy on Sexual Harassment

Please visit the University Sexual Harassment Prevention Office to read the most current policy.
Social Media Policy

Students accepted to Feinberg and current Feinberg medical students should be cautious in using social networking such as Facebook, Twitter, blogging etc. The profession of medicine is founded on the highest standards of conduct because of the great level of trust patients place in medical professionals. After you are admitted to Feinberg, enrollment remains contingent on your demonstration of this high standard of conduct, through sound judgment, personal perception, integrity and accountability. Posting items that represent unprofessional behavior, release patient health information, violate HIPAA standards or Northwestern University policies on social networking sites will result in disciplinary action by the medical school.

Tips on Social Networking

• **Always represent yourself professionally:**
As a Feinberg medical student, you are entrusted with a wealth of confidential patient information. Sharing patient information verbally or electronically is illegal and unethical. As a medical professional in training, it is your responsibility to uphold a professional, discreet demeanor in all of your correspondences and posts.

• **Protect your online profile and identity**
It is important to scrutinize all materials you post on personal pages. It is equally important to speak to family and friends and request that no embarrassing or unprofessional materials be posted and “tagged” to you. Be selective about who you accept as a friend on a social network.

• **Assume that everything posted is permanent**
Be mindful of what you post. Even if you remove embarrassing or inappropriate materials from a site, or delete your account all together, those materials will remain in cyberspace forever. Anyone on the internet can easily print photos or save text, images and videos to a computer. Once material is posted, it is out of your control forever.

• **Privacy Settings**
Take the time to establish privacy settings on all social networking sites you use. These settings will help to protect your identity and personal information.

- **Search Yourself**
  On a regular basis, search yourself online to audit what is posted about you.

### Inclement Weather Policy

The Feinberg medical campus will not close because of inclement weather. Students will need to make their own decisions regarding hazardous traveling conditions; however, student responsibilities are not obviated by weather conditions. If a student believes traveling in such weather is hazardous, the student is expected to make up missed class work.

### Duty Hours Policy

**Background**

- During the clinical years, Feinberg medical students should assume an increasing level of professional responsibility, learning to care for patients with dedication, integrity, and compassion. One of the challenges of becoming a physician is learning to fulfill one's clinical responsibilities without sacrificing one's own physical and mental health. The clinical years should provide an environment in which students can attend both to their education and to their personal well-being as they develop into physicians.

**Policy**

- Medical students must not be required to work more than resident physicians, whose duty hours are regulated by the ACGME.
• Duty hours are defined as any clinical work or required educational experiences (e.g. conference, lectures, exams); they do not include time at home to study or travel time to and from clinical sites.

• Medical students must not work more than 80 hours per week.

• Medical students must not work more than 24 consecutive hours caring for patients. After 24 hours, they may continue to work for up to 6 hours for continuity of care or classroom experiences, but may not assume care for new patients during this time.

• Medical students must not be scheduled for call the night before an exam.

• Medical students are dismissed from ward duties by midnight before IC2. Students on call the same day/night of IC2 are to report immediately after IC2 has concluded to their medical teams. Students not on call are dismissed after IC2.

• At minimum, medical students must receive an average of one day off per week over a four week rotation.

• With the exception of Thanksgiving, University holidays (e.g. Independence Day, Labor Day, Memorial Day, Martin Luther King Day) shall be treated like weekend days, on which students may be on call. For all rotations except sub-internships, the Thanksgiving Holiday shall be observed beginning at 6pm on the Wednesday before Thanksgiving and ending on Sunday evening; these count as days off. During sub-internship rotations, medical students may be required to work during the Thanksgiving holiday.

**Monitoring**

• Within the limitations above, the clerkship directors are responsible for setting medical student schedules on each individual rotation. All scheduling shall be done with the students' best educational interests in mind.

• Any concerns about duty hours should be discussed with the clerkship director. Students should report any violations of this duty-hours policy to Dr. John X. Thomas; student grades shall not be affected by such reporting.

**Professionalism**
• At times, it might seem like a good idea to attend that extra meeting the morning before IC2 or to show up early in order to carry that extra patient. However, respecting the medical student hour policy also shows respect towards your fellow colleagues and classmates.

• Intentionally disregarding the medical student hour policy has a tendency to backfire—attendings and residents can tell if you’re trying to look better than the other students on your team. It can also negatively impact the working relationship you have with your fellow teammates.

• On the other hand, if you’re carrying more patients than you can handle, or are finding that you have to come in far earlier than other students to write notes, you might want to think about talking with your team. You can ask how to become more efficient with your time, or simply let them know that you feel overwhelmed. Your team will generally appreciate your honesty.

Medical Student Dress Code

Appropriate deportment and dress are expected of students as they engage with patients and clinical colleagues. Students may need to curtail some aspects of their individual expression to reflect appropriate respect and establish a rapport with patients, families and health care members.

• Dress in routine, morning lecture or in small group activity with no patient or standardized patient interaction in the first two years is informal.

• In the small group environment with patients present, students are required to wear a clean, short white coat with a name tag identifying themselves as medical students. Clinical Attire Guidelines (below) should also be followed.
Clinical Attire Guidelines (required to be followed for all settings where real or standardized patients are present, including but not limited to Clerkship's, IP/ECMH sites, CEC skills session, small group patient interviews):

- Hair must be well groomed. Men’s beards are acceptable when neatly trimmed.
- No hats (with the exception of religious or cultural head coverings).
- No facial piercings or dangling earrings. A minimum of jewelry should be worn.
- Button-down shirts should not be open below the second button. No T-shirts or sweatshirts.
- No jeans, cargo pants, cut-offs or shorts.
- Shoes must be closed toes. Clogs are acceptable, sandals are not. Shoes must be clean.
- Clean sneakers are acceptable only when wearing scrubs.
- Do not wear cologne or perfume in any clinical setting.
- Women should wear blouses or sweaters. No bare midriff.
- Skirts must be a conservative length (no miniskirts). No jeans, cargo pants or leggings without skirts.
- Bright or dark nail polish should be avoided. Minimize makeup.
- Cuts and abrasions should be covered with tegaderm or similar water impervious material.
- Protective glasses and masks should be worn even when Faculty and house officers do not.

Scrub Suit Guidelines

- Scrub suits are permitted only in select direct patient care areas.
- When outside patient care areas, students must wear their white coats as well.
- Scrub suits are to be changed daily and immediately when soiled.
- T-shirts should not extend below the scrub top.
• NEVER wear the same scrub suit back into the Operating Room after circulating in the hospital.

• Scrub suits should not be worn outside the patient care area and never outside the hospital buildings.

• Scrubs should be changed in appropriate changing location.

• Double glove in the Operating Room with gloves that are one-half size larger on the inside and the real size on the outside.

• Jewelry must come off before scrubbing. Earrings are unacceptable in the Operating Room.

Other Professional Behaviors in Clinical Areas

• Do not chew gum.

• No eating or drinking in front of patients or in patient care areas.

• Speak softly in the hospital.

• Never discuss patient care issues in public areas, such as cafeterias, stairwells and elevators.

• Be cautious expressing opinions that reflect negatively on other students, faculty, staff or institutions.

• Do not carry patient charts, medical records or sign-outs with a patient’s name exposed.

Do not text or email on rounds or in front of patients.

Policy on Suitability for Medicine

Students must demonstrate good judgment, a sense of responsibility and morality, sensitivity and compassion for individual patient needs, and the ability to synthesize and apply knowledge to become safe and effective physicians. When there is question about a student’s suitability for the practice of medicine, the Student Promotions Committee (SPC), may be asked to review the
student's academic and professional performance. The student shall have the right to appear before the committee in order to defend his or her suitability. The SPC will forward its determination as to the student's suitability to the Dean for final action. Actions can include, but are not limited to: probation, suspension or dismissal from medical school.

**Alpha Omega Alpha (AOA)**

AOA is a national medical honor society organized in 1902. The Northwestern chapter was founded in 1903. It is composed of undergraduate, graduate, and honorary members selected on the basis of scholastic achievement and significant contributions in medicine. AOA by charter allows each chapter to consider for nomination up to 25 percent of the medical school class. We define that group by academic performance, identifying those within the top 25 percent of their class during Phase 1 and in the required Phase 2 (third-year) clerkships completed up until July 31 of the final year. Clerkship directors are asked to submit students who fell in the top 25% of the cohort for their year; students receive points (weighted by the length of the clerkship) based on these rankings. Credit is given to students whose USMLE Step 1 score is in the top 25 percent of the class. Once all of the possible points for each student have been determined, then the top 25 percent is identified. This is the group of students that the AOA Selection Committee considers for membership. The nomination and selection process occurs in time for the information to be included in the student's Medical School Performance Evaluation for residency applications.

The Selection Committee is composed of faculty who are AOA members and have considerable experience in our educational programs. Students are asked to submit their curriculum vitae to complete the application. Nominees are evaluated in five categories:

- Awards received in medical school
- Research performed in medical school
- Publications accomplished during medical school
• Community service performed while in medical school
• Leadership while in medical school

The total points for these extracurricular activities is weighted less heavily (1/3 of the total points), while the remainder (2/3) of the points are assigned for Phases 1 and 2 and USMLE.

Each student's application package is evaluated by at least two reviewers. If there is a discrepancy between the two, then a third evaluator is called upon. Following discussion by the Committee, candidates are ranked numerically based on the above criteria. The top 16 percent is selected and notified.

**Student Promotions Committee Student Standards**

The Student Promotions Committee (SPC) may be asked by the Senior Associate Dean for Medical Education to consider allegations of extracurricular behavioral or other specific misconduct for appropriate action. SPC actions may include reprimand, suspension, or dismissal of a student whose actions are found to be inconsistent with the qualities of a good physician. In addition to the expectations set forth in the Code of Conduct and Policy on Suitability for Medicine, these vital qualities include, but are not limited to:

• sound judgment
• personal insight or perception
• motivation
• personal integrity and accountability
• responsibility to patients
• ability to recognize personal limitations
• ability to function under pressure
The Student Promotions Committee (SPC) is charged with the responsibility of reviewing student performance and enforcing academic and behavioral standards. The SPC meets monthly to review any academic, behavioral grievances, or LOA issues that have arisen since the last meeting.

The SPC has the following specific responsibilities:

- To review and recommend to the Vice Dean of Education policies on academic and non-academic student performance standards.
- To recommend to the Vice Dean of Education the promotion and graduation of those students who have met the requirements defined by the medical faculty and documented in this official Medical Student Handbook.
- To review student records and make determinations when:
  - Course or clerkship failures occur
  - Student performance is of marginal caliber
  - Recurring academic difficulties occur
  - Unprofessional behaviors or qualities are demonstrated
  - Alleged violations of the Behavioral and Academic Integrity Standards of the Feinberg School occur (see Code of Conduct, Observed Misconduct, and Policy on Suitability for Medicine for more information)
  - Alleged violations of Northwestern University’s Student Code of Conduct occur (see NU Handbook for more information)
  - Students have academic grievance issues
  - Requests for a leave of absence and for readmission after a LOA are made

Membership

The SPC is composed of faculty members and medical students. The Senior Associate Dean for Medical Education, Associate Dean for Student Programs and Career Development, Associate Dean for Medical Education and Competency Achievement, Associate Dean for Minority and Cultural Affairs, and the Associate Dean for Admissions are ex officio members of the committee without voting privileges. All committee members sign confidentiality agreements that comply
with the Family Educational Rights and Privacy Act ("FERPA") regulations. Faculty members are appointed to the SPC by the Senior Associate Dean for Medical Education. Student members are appointed from nominees advanced by the Medical Student Senate. Second year students are appointed for a three-year term. The students selected must show evidence of a strong academic record and high personal behavior standards.

The SPC reports to the Senior Associate Dean for Medical Education. The Associate Dean for Student Programs and Career Development acts as an advocate for the student. Student appeals are managed by the Vice Dean for Education and are ultimately decided by the Dean of the medical school.

**Appealing SPC Decisions**

**Appeal Procedure**

A student has the right to appeal to the School of Medicine Dean any decision of the SPC that would delay his or her academic progress by one quarter or more on the following bases: (a) errors of procedure that reasonably could have affected the outcome of the SPC decision, or (b) an SPC decision or sanction that is manifestly unreasonable and unsupported by the great weight of information. The protocol for appeal of a SPC decision rendered for violation of behavioral or School of Medicine standards is the same as that for inadequate academic performance.

A request for appeal must be made to the Vice Dean for Education, setting forth all the reasons for requesting an appeal, within two weeks of the date of the committee’s decision and must indicate the basis for the appeal. The Vice Dean for Education may disallow the appeal if these conditions are not met.

The Vice Dean for Education will arrange for an *ad hoc* Student Appeals Committee to review the student’s written appeal, meet with the student, and recommend action to the Dean. The
Student Appeals Committee will review earlier actions and recommendations of the SPC to ensure that deliberations were conducted fairly and equitably, conclusions reached were justified, and any remediation requirements or other actions imposed were appropriate.

The Student Appeals Committee
Each Student Appeals Committee is composed of three faculty members appointed by the vice dean for education. Members are not simultaneously members of the SPC. The full membership of the Student Appeals Committee must be present for official business to be conducted, and recommendations are made by majority vote. The Student Appeals Committee may hear other people of its choosing who may provide information related to the issue at hand and may investigate written reports, committee minutes, examination papers, or related documents.

The student has the right to appear before the Student Appeals Committee to present his or her case and may be accompanied by a support person who is a member of the Northwestern community (e.g., close friend or faculty adviser), but not a practicing attorney. This person may be present for support at the hearing but cannot directly address the appeals committee.

Following its review, the Student Appeals Committee will recommend either that the Dean sustain the original decision of the SPC or modify the SPC’s decision.

The Dean may accept, reject, or modify the recommendation of the Student Appeals Committee. In considering the recommendation of the Student Appeals Committee, the Dean also may wish to examine related documents and meet with the student and/or others. The Dean then will notify the student of the appeal decision directly.

Behavioral Standards

University Standards
All Northwestern students are temporary residents of the state of Illinois and, as such, are subject to the laws of the state and to the ordinances of the cities of Evanston, Chicago, or all
other cities they are in. In addition, every student is required to comply with all rules and regulations enacted and published by the University or under the delegated authority of the University. For further information, refer to the *Northwestern University Student Handbook*, a copy of which is provided to each student by the School of Medicine’s Office of Student Programs and Professional Development.

A medical student or student organization found to have violated any one of the University’s rules or regulations shall be subject to appropriate disciplinary action as provided by the Student Promotions Committee.

**Feinberg Standards**

The Student Promotions Committee (SPC) may be asked by Senior Associate Dean for Medical Education to consider allegations of extracurricular behavioral or other specific misconduct for appropriate action. SPC actions may include reprimand, suspension, or dismissal of a student whose actions are found to be inconsistent with the qualities of a good physician. These vital qualities include:

- sound judgment
- personal insight or perception
- motivation
- personal integrity and accountability
- responsibility to patients
- ability to recognize personal limitations
- ability to function under pressure

**Committee Actions**

The SPC recommends appropriate action based on approved guidelines. Committee actions cannot be expunged from a student’s record. Committee actions may include remediation, probation, reprimand, dismissal, medical or psychological evaluation if fitness for duty must be
evaluated for significant health and safety reasons, or revised curricular assignments. A quorum, defined as one-half of the voting membership of the Committee, plus one, must be present for the Committee to conduct official business. Decisions of the committee are made by a majority vote of the members present at an official meeting. The Chair casts a vote in the case of a tie. Student members may participate in all proceedings of the Committee.

Immediate Suspension
If, in the opinion of the Dean, the alleged violation continues to jeopardize patient safety or disrupt the orderly academic processes of the University, School of Medicine, affiliated hospitals, or site assignments, he or she may suspend the student's enrollment immediately. The imposition of such suspension shall be communicated in writing by registered letter or in person. Delivery of such a letter or personal notification must be followed within 24 hours by notification in writing of charges as specified under hearing procedures. A student so suspended may request an expedited hearing before the Student Promotions Committee. A hearing will be scheduled within three business days of the request, or as soon thereafter as possible, to consider the matter and take appropriate action.

Dismissal
Repeated failure and marginal academic work indicate serious difficulty. Continued failing or marginal performances in multiple or repeated courses or clerkships in one or more years will lead the committee to consider dismissal. A dismissal decision will be based upon the number and nature of failed or marginally passed courses and clerkships and the existence of extenuating circumstances.

Sanctions
Upon finding a student responsible for violating one or more of the foregoing behavioral or School of Medicine standards, the SPC may stipulate a period of disciplinary probation or suspension; if health and safety are a significant concern or if the student otherwise agrees, a course of professional counseling with periodic reports to the SPC; restitution; termination of participation in school committees or activities; dismissal; or any combination of the above.
While on disciplinary probation, a student may continue registration in credit-bearing programs of the school. Further problems during probation typically lead to a much stronger action by the SPC. Suspended students may neither register for nor attend classes; they also may not participate in programs or activities of the school.

*Please note:* The school in good conscience cannot conceal from residency program directors or others to whom the student requests that evaluations or recommendations be sent, any infraction of the behavioral standards that the SPC has found a student to have committed or any remedial action taken by the SPC.

**Hearing Procedures**

The SPC meets monthly to review any academic, behavioral, grievance or leave of absence (LOA) issues that have arisen since the last meeting. They may review written documentation of student performance or request verbal reporting from concerned faculty. Students may be interviewed at the discretion of the SPC and may have the right to appear for a hearing. In such cases, the student may be accompanied by a personally selected support person if desired. That support person may be selected from the faculty, the student body, or other groups within or outside the University, but may not be a practicing attorney. In the case of a student grievance, faculty members may be interviewed. The SPC recommends appropriate action based on approved guidelines. SPC actions cannot be expunged from a student’s record. SPC actions may include remediation, probation, reprimand, dismissal, medical or psychological evaluations if fitness for duty must be evaluated for significant health and safety reasons, or revised curricular assignments.

There are two standing subcommittees within the SPC:

- **The Academic Integrity Subcommittee** reviews incidents of academic dishonesty and other unprofessional behavior by an FSM student. This subcommittee also
addresses issues of unprofessional behavior that may occur during an HPME student's undergraduate phase.

- **The Leave of Absence Subcommittee** reviews the readmission to the Feinberg School of a student following a leave of absence.

In addition to the two standing subcommittees, the Committee Chair may appoint *ad hoc* subcommittees as necessary. *Ad Hoc* Advisory subcommittees are convened to review marginal student performance as necessary. All subcommittees provide reports of their proceedings and recommendations of action to the full SPC.

**Hearing Procedure**

A student suspected of breaching the foregoing behavior or the FSM standards, independent of periodic assessment in the school’s courses and clerkships, will need to appear before the full SPC. A written request will be provided to the student identifying the specific grounds pertaining to the appearance. The time and place of the related hearing will be identified in this letter. The notification letter is delivered to the student in person, by e-mail, or by registered mail. This hearing generally occurs within two weeks of this written notification, except in extraordinary circumstances.

The purpose of a disciplinary hearing is to determine whether a student has acted in a manner inconsistent with the aforementioned standards and, if so, to determine what action is to be taken. These hearings are closed, attended only by the SPC members, SPC staff person, and the student(s) in question. The testimony of one or more witnesses may be requested by either the SPC or student; a witness is present only for testimony and any subsequent questioning by the SPC; the SPC determines in its sole discretion whether to call a particular witness. A student also may request the presence of a close friend, family member, or faculty adviser but not a practicing attorney. This person may be present for support at the hearing but cannot directly address the SPC.

During the hearing, the student is given the opportunity to present their position, explanation, and evidence. Upon completion, the SPC members are given the opportunity to question the
student regarding the situation, the student's educational experience and any other issues that may factor into an educated decision.

Following the SPC meeting, the student will be contacted by the SPC chair and made aware of the committee's decision. This will usually be conveyed by phone. A written decision letter will be sent to the student via e-mail and/or registered mail within the following week.

**Physicianship Forms**

Students who demonstrate unprofessional behavior may receive a physicianship form from a course or clerkship director and in some instances a dean. These forms will be sent to the Associate Dean for Medical Education and Competency Achievement. Students who receive a form will need to meet with the Associate Dean for Medical Education and Competency Achievement. If a student receives three forms for unprofessional behavior while a medical student, he or she will need to appear before the Student Promotions Committee. In circumstances when extremely inappropriate behavior is exhibited, a student may be required to come before the Student Promotions Committee on the grounds of a single physicianship form.

**Violations and Offenses**

**University Offenses**

Students may be subject to disciplinary proceedings for any of the following:

- Physical abuse of any person or any action that threatens or endangers the health or safety of any person, including oneself;
- Theft of or damage to property on University premises or facilities or at University functions;
• Unauthorized entry to or use of University facilities;
• Obstruction or disruption of teaching, research, administration, hearing procedures, or other authorized activities on University premises;
• Forgery, alteration, or misuse of University documents, records, or identification or knowingly furnishing false information to the University;
• Failure or refusal to appear upon request or cooperate in the investigation or hearing of cases of alleged offenses (provided that no students shall be required to furnish information that would be self-incriminating); or
• Violation of rules and regulations set forth or otherwise enacted and published by the University or other delegated authority of the University, including the Northwestern University Student Handbook.

Feinberg Offenses
In addition to violation of the University Standards, grounds for referral to the Student Promotions Committee include, but are not limited to, the following:

• Harassment, harm, abuse, or theft to, of, or from any person or property on University grounds, at University-sponsored events, or on property owned by any hospital, affiliated institution, or individual to which or whom the student may be assigned
• Giving, receiving, or utilizing unauthorized aid on examinations or assignments
• Plagiarism, misrepresenting the source of academic work, or falsifying attendance records
• Knowingly and intentionally falsifying or manufacturing scientific, educational, or clinical data and representing them as the result of scholarly research or patient examination
• Entering or using University or hospital facilities without authorization or disrupting teaching, research, administrative, or student functions of the University
• Misusing institutional documents or instruments of identification in an attempt to defraud
• Identifying oneself as someone other than a medical student
• Misusing the computing and network resources of the University or its affiliated hospitals
• Any alleged violations of law
• Participating in academic or clinical endeavors of the University or its affiliated institutions while under the influence of alcohol or a controlled substance
• Placing a patient in needless jeopardy
• Disclosing privileged information about a patient
• Having behavior, language, attire, or hygiene that provokes a lack of respect and confidence on the behalf of patients, faculty members, and colleagues
• Refusing to provide care for a patient