

Mistreatment Examples

Behavior	Examples of Mistreatment	Areas of Caution for Faculty	Acceptable Behavior (though could be perceived as mistreatment by student)
<p>Initial behavior: Subjection to offensive remarks/names related to sexual orientation</p> <p>Possible follow-up behavior: Denial of opportunities for training or rewards based on sexual orientation</p> <p>Includes:</p> <ul style="list-style-type: none"> Asking students about their sexual orientation Commenting on a student's sexual orientation to them Commenting on a student's sexual orientation to their peers, patients, nurses, residents or attending physicians Using derogatory terms/slang to refer to a <i>student's</i> sexual orientation or perceived sexual orientation Subjecting students to derogatory terms/slang with regard to a <i>patient's</i> sexual orientation or perceived sexual orientation 	<ul style="list-style-type: none"> Explaining to a female patient that it's okay if this particular male student performs a sensitive exam on her because he's homosexual Explaining to a male patient that it's okay if this particular female student performs a sensitive exam on him because she's homosexual A physician knows a student to be LGBTQ from participating in other campus groups or activities and because they are of the same sexual orientation, demonstrates favoritism by allowing this student to participate in more procedures and see patients with them in their private office A physician knows a student to be LGBTQ from participating in other campus groups or activities and does not ask them to see patients or does not have them participate in care to the same extent 	<ul style="list-style-type: none"> Presuming that all members of the team are of the same sexual orientation and therefore making comments about the gender of a significant other 	
<p>Initial behavior: Subjection to offensive sexist remarks or names</p> <p>Possible follow-up behavior: Subjection to unwanted sexual advances</p> <p>Includes:</p> <ul style="list-style-type: none"> Subjecting the student to unwanted sexual advances Using derogatory sexual terms/slang in the presence of a student Subjecting the student to an offensive sexist remark/name 	<ul style="list-style-type: none"> A resident or attending telling his/her student that he/she would like to take the student out to a restaurant or night club Telling a student that the outfit makes the student look sexy 	<ul style="list-style-type: none"> Asking a student to meet 1:1 off hours to a <i>coffee shop off the medical campus</i> to discuss performance/feedback A resident asking out a student when the student is no longer on the clerkship and grades have already been assigned 	<ul style="list-style-type: none"> Asking a student to meet 1:1 just after office hours, but <i>within the medical center and in a public setting</i>, to discuss performance/feedback An outpatient preceptor offering to give a student a ride home from the office because the office is located 15 miles from the city and they both reside in the city

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<p>Initial behavior: Subjection to racially or ethnically offensive remarks</p> <p>Possible follow-up behavior: Lower evaluation or grades solely because of race or ethnicity rather than performance</p> <p>Includes:</p> <ul style="list-style-type: none"> • Using derogatory terms or slang to refer to a student's race or ethnicity. • Assuming that a student is less qualified on the basis of their race or ethnicity. • Giving preferential treatment to a student on the basis of shared ethnicity or race. • Making generalizations about students based only on their ethnicity or race. • Persistently ignoring questions from a student who is a member of a racial or ethnic minority. 	<ul style="list-style-type: none"> • A resident chastising a student for entering the incorrect rate of IVF, "You Asians are supposed to be good at math." • After hearing a poor patient presentation, faculty member says to a student, "You only got into school here because you are an (URM) underrepresented minority." 	<ul style="list-style-type: none"> • Describing a student as "the tall Asian man" when asking the floor team if they have seen the student whose name he has forgotten. (Be cautious using racial or ethnic terms as descriptors when attempting to identify a student) • Asking the Hispanic student on the team, "Can you translate for us?" when confronted with a Hispanic appearing patient who did not speak English. 	

* Examples apply to residents and fellows in addition to students.

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Harassment / Humiliation	<ul style="list-style-type: none"> • Making a student dance during a procedure • Feedback given to a student in a public setting in a demeaning manner i.e. “that was a stupid answer” • Talking about a student in a negative way to those who are not on service • Student’s inquiries and contributions alike are being ignored during interactions with the team • Attending refuses to check student note writing skills or orders persistently • Student denied chance to participate in one or more activities of the team i.e. denies access to the OR, or not being given chance to evaluate patients 		<ul style="list-style-type: none"> • A student presents on morning rounds but does not know the urine output. Attending physician explains to the student why they should have this information. Student feels belittled or embarrassed in front of the team. (Public feedback is not mistreatment) • Calling students out for being late or not following up on assigned tasks; such as pre-rounding. • An attending raising their voice to get student to stop something procedurally because physician thought the patient was at risk
Harassment / Neglect	<ul style="list-style-type: none"> • Student’s inquiries and contributions alike are being ignored during interactions with the team • Attending refuses to check student note writing skills or orders persistently • Student denied chance to participate in one or more activities of the team i.e. denies access to the OR, office or not being given chance to evaluate patients 		<ul style="list-style-type: none"> • The residents are in the middle of several emergencies on L&D and don’t update the medical students following the patients about what is going on. The medical students are left sitting in the board room without direction and feel ignored. • Students not being invited to social engagements that residents are invited to by the attending • Student alleged mistreatment but was really more miffed that the attending didn’t ask him about his weekend activities after he asked about hers. He felt unequal in the power balance

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Behavior	Examples of Mistreatment	Areas of Caution for Faculty	Acceptable Behavior (though may be perceived as mistreatment by student)
Requests to perform personal services	<ul style="list-style-type: none"> • Attending is meeting students for teaching rounds and asks students to pick up coffee or food for attending. • Asking student to pick up birthday card for administrative assistant from hospital gift shop. • Attending did not have child care on weekend and brought child in for morning rounds. Attending asks student to watch child at the nurses' station while attending sees patients with resident. • Attending needs to pick up cake for weekend event and is stuck in the OR. Attending asks student to pick up cake before bakery closes. • Attending request that student retrieve journal articles for a presentation that the attending is preparing. The articles are not related to a current patient on the service or a project in which the student is involved 	<ul style="list-style-type: none"> • The resident/ attending buys dinner/pays for food or snack but is unable to leave the labor floor to get it – asks the student to get the food (paying for the student to eat as well). If getting the food results in the student missing an opportunity to participate in a delivery with a patient that the student has been following, this could be problematic. • Attending asks a student to page another physician in order for the attending to speak to the other physician. • Attending's coat was soiled during a clinic procedure. Attending asks student to go get a clean white coat for attending. • The student knows the patient and prepares him for a thoracentesis. The student is prepared to do the procedure herself and has assembled all of the materials. The resident and attending perform the procedure without the student. 	<ul style="list-style-type: none"> • Medical student is asked to return a page while the attending is on the phone to another colleague. • Attending is changing a patient's dressing and does not have adequate supplies. Attending asks student to retrieve additional supplies from the supply room.