Wake Forest University
School of Medicine

Student Handbook 2023-2024

Academic Nursing Programs

Doctor of Medicine Program

Graduate School of Arts and Sciences – Biomedical Sciences

Physician Assistant Program

6/1/2023

Who We Are

Wake Forest University School of Medicine is a top-ranked medical school founded by Wake Forest University and fully integrated into the **Atrium Health Wake Forest Baptist** system. Our students, residents and fellows have access to the finest learning environments along with the full breadth of clinical facilities in our system that draw a wide range of patients and case types from across a multi-state region. Students, residents and fellows will spend the majority of their time at our Winston-Salem locations in the **Innovation Quarter** and at Atrium Health Wake Forest Baptist Medical Center.

Each year, approximately 2,000 medical, physician assistant and Academic Nursing students, medical residents and fellows, and graduate students in basic sciences and allied health care professions attend Wake Forest University School of Medicine and learn from more than 1,200 members of the faculty. Through state-of-the-art technologies and an experiential curriculum that simulates real clinical events in inpatient and outpatient settings, students are learning the skills needed for the next generation of health care leaders.

With campuses at Atrium Health Wake Forest Baptist in Winston Salem and Charlotte along with our Wake Forest Innovation Quarter students, researchers and faculty at Wake Forest University School of Medicine all strive to become lifelong learners and everywhere they go is an opportunity for education.

Wake Forest Innovation Quarter

Wake Forest University School of Medicine serves as a catalyst for economic development in downtown Winston-Salem through the decades-long development of real estate for use and lease as office and laboratory space and commercial communities in its mixed-use innovation district, Wake Forest Innovation Quarter.

Several major School of Medicine research and educational facilities are located within the Wake Forest Innovation Quarter, including the Bowman Gray Center for Medical Education, Wake Forest Biotech Place and the Richard Dean building, which houses the Wake Forest Institute for Regenerative Medicine.

Wake Forest University School of Medicine Charlotte

Based at Carolinas Medical Center, Wake Forest University School of Medicine Charlotte provides a longitudinal integrated curriculum for third- and fourth-year medical students. This course of study applies best clinical practices, current technologies and relationships with patients.

Atrium Health Wake Forest Baptist

The Atrium Health Wake Forest Baptist campus is an 885-bed, tertiary care center close to downtown Winston-Salem, NC. Included within its walls are our NCI-designated cancer center; our nationally recognized center for aging and Alzheimer's; a children's hospital, centers for stroke and burn; offices of our senior leadership, faculty and house officers; and many other vital and specialized medical services.

Awards and Accolades

Our PA Program is ranked #7 in the country.

Our Nurse Anesthesia Program is ranked #10 in the country.

The School of Medicine is ranked #47 in research nationwide.

Atrium Health Wake Forest Baptist
Mission, Vision, and Culture Commitments

Mission

To improve health**, elevate** hope **and advance** healing **–** for all**.**

Vision

❖ To be the **national leader for health, learning & community**.

Culture Commitments

❖ We create a space where all **BELONG**

❖ We **WORK AS ONE** to make great things happen

❖ We earn **TRUST** in all we do

❖ We **INNOVATE** to better the now and create the future

❖ We drive for **EXCELLENCE** – always

Our Patient and Family Promise

We will:

❖ Keep you safe.
❖ Care for you.
❖ Involve you and your family.
❖ Respect you and your time.

Introduction

The information in this student handbook applies to the academic year 2023-2024. **Wake Forest University School of Medicine reserves the right to change policies and procedures at any time and without prior notice.** Additionally, errors and omissions in published documents (written or electronic) may be corrected at any time.

PLEASE NOTE:

- The policies included in this Handbook may not be the most current versions available. For the most recent version of policies, students should access PolicyTech the institutional policy site.

- Wake Forest School of Medicine maintains policies that apply to all SOM students, including policies on health requirements and immunizations, disability accommodations, refunds of tuition, financial aid, education records, appeal of dismissal, substance abuse, and sexual misconduct. Students are strongly urged to familiarize themselves with these policies on the institutional policy site.

- Circumstances may arise during a term that cause significant disruptions to School of Medicine and/or Graduate School operations and result in the closing of campus or a change in course modalities. These circumstances include, without limitation, extreme weather, fire, natural disaster, war, labor disturbances, loss of utilities, riots or civil commotions, epidemic, pandemic, public health crisis, power of government, or any other circumstance like or unlike any circumstance mentioned above, which is beyond the reasonable control or authority of the School of Medicine and/or the Graduate School.

- The student handbook contains only a subset of policies for students. Additional information is posted on the Atrium Health Wake Forest Baptist PolicyTech Site, as well as program specific websites, handbooks, or bulletins. Students who are uncertain about how to access program specific information should contact their program director.

Each student is provided with an email account. Atrium Health Wake Forest Baptist Email accounts are used for official communication. All students are expected to check and respond to email in a timely manner.

Each student is provided with an identification badge. Badges must be worn at all times while on campus. Further details may be found in the Employee Identification Policy (Wake Market).

Effective October 9, 2020, and as part of an integration with Atrium Health, an agreement was entered into by and among Wake Forest University (WFU), Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Wake Forest University Baptist Medical Center (WFUBMC) and Atrium Health, inc. (AHI), in conjunction with a separate "Enterprise Agreement" between WFUBMC and AHI, under which agreement WFUMC is contractually authorized to:

- Govern, through its board, all Medical Center operations and assets (subject to reserved powers or approval of NCBH, AHI and WFU/WFUHS on select issues).

- Operate NCBH and WFUHS (including the School of Medicine and its faculty), and their respective subsidiaries and affiliates.

Policies which apply to Atrium Health Wake Forest Baptist (AHWFBH) clinics, affiliates, and other locations and/or specifically to the Medical Center (WFBMC) are designated as AHWFBH policies and all faculty, staff and students are required to abide by the policies as noted in each policy.

Policies which apply to the education and learning environment and are specific to students enrolled in and/or taking courses as part of the Wake Forest University School of Medicine (WFUSM) or Graduate School of Arts and Sciences – Biomedical Sciences are designated as WFUSM/WFU policies and students are required to abide by these policies.

As required by The Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act, information provided in the Annual Crime and Fire Report may be found at the Wake Forest University School of Medicine Campus Safety and Security website: https://school.wakehealth.edu/campus-and-community-life/campus-safety-and-security. This report will be mailed to anyone requesting a copy. Anyone may obtain a copy at Wake Forest Baptist Health Security Administration office located in Meads Hall, Ground Floor, Suite C.
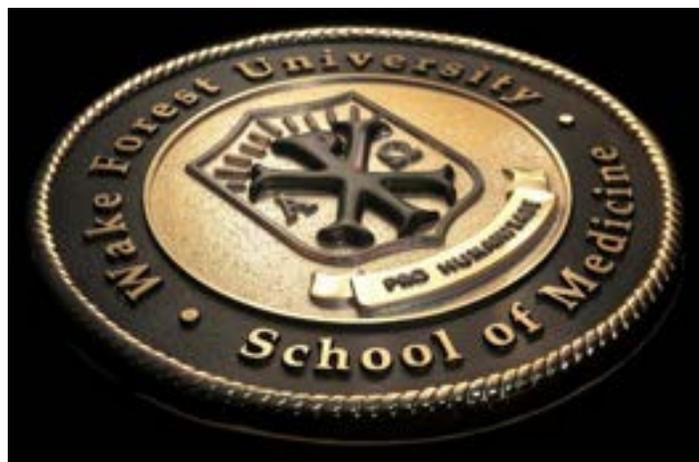
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Compliance Resources for all School of Medicine Students

The Office of Education Institutional Effectiveness and Compliance

The Office of Education Institutional Effectiveness and Compliance (OEIEC) oversees accreditation compliance, assists programs in developing outcomes, and assesses overall effectiveness of the school by regularly and systematically ensuring alignment of processes and expected outcomes with the mission statement and the strategic goals of Wake Forest University School of Medicine.

The Office of Education Institutional Effectiveness is home to The Wake Forest University School of Medicine's compliance department. Our compliance team helps to draft and update policy and tackles Learning Environment and Professional concerns through our Learning Environment Liaison.

Learning Environment Liaison

The Learning Environment Liaison serves as a central resource for reporting mistreatment or unprofessional behavior in the learning environment for all WFUSOM learners (MD, Graduate, PA, and Academic Nursing), as well as for visiting students, non- WFUSM clinical students, and non-affiliated student interns.

Students may report a mistreatment or professionalism concern to the Office of Educational Excellence (formerly Student Affairs) through the following avenues:

- Via online reporting form in Service Now (accessible on your desktop or by using the following link: https://atrium.service-now.com/aclab)
- Via email at edcompliance@wakehealth.edu Via phone at Sarah Riney, 336-713-3352
- In person at Bowman Gray Center for Medical Education, 1st floor

Accreditation

Wake Forest University is accredited by the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) to award baccalaureate, masters, and doctorate degrees. Degree-granting institutions also may offer credentials such as certificates and diplomas at approved degree levels. Questions about the accreditation of Wake Forest University may be directed in writing to the Southern Association of Colleges and Schools Commission on Colleges at 1866 Southern Lane, Decatur, GA 30033-4097, by calling (404) 679-4500, or by using information available on SACSCOC's website (www.sacscoc.org [sacscoc.org]).

The Doctor of Medicine program is accredited by the Liaison Committee on Medical Education (LCME). Graduates of the program are awarded the Doctor of Medicine degree. Information regarding filing a complaint with LCME may be found at: https://lcme.org/contact/complaints/

The Physician Assistant Program is a graduate level program that awards a Master of Medical Science (MMS) degree after 24 months of study. The Wake Forest PA Program is approved by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) for 64 students at our Winston-Salem campus and up to 32 students at our expanded campus at Appalachian State University in Boone, NC. Accreditation for the Boone cohort was granted in September 2013, and the first students enrolled in June 2014. The Boone campus has also been approved by SACSCOC. Information regarding filing a complaint with ARC-PA may be found at: http://www.arc-pa.org/wp-content/uploads/2020/06/Concerns-about-Program-Compliance-with- Policies-or-Standards.pdf

The Nurse Anesthesia Program is a graduate level program that awards a Master of Science (MS) degree. This program is currently on a 10-year accreditation by the Council on Accreditation of Nurse Anesthesia Education Programs (222 South Prospect Avenue, Park Ridge, Illinois 60068; 847-655-1160) with "no progress required" in 2015. This is the maximum accreditation period possible, which is granted to few programs. This program has also been granted full accreditation by the International Federation of Nurse Anesthetists. The WFU Nurse Anesthesia program was the first program in the country, and only the second in the world to receive this level of international accreditation. Information regarding filing a complaint with COACRNA may be found at: https://www.coacrna.org/contact-us/concerns/

The Doctor of Nursing Practice is a graduate level post-master's program that awards a Doctor in Nursing Practice (DNP). The post- masters DNP program will be offered mostly online. Because most students will be currently working RNs, the post-master's DNP will be offered as a part-time, 2-year program with online courses and four intensive in person sessions.

The Genetic Counseling Program is a graduate-level program that awards a Master of Science degree. This program is offered in the Graduate School of Biomedical Sciences. The Genetic Counseling program was accredited by the Accreditation Council for Genetic Counseling (7918 Jones Branch Drive, Suite 300, McLean, VA 22102, phone: (703) 506-7667) on December 7, 2020, as an Accredited New Program. This accreditation will be reviewed in 2024 at which time the application for Accredited Program will be determined. Information regarding the Genetic Counseling accreditation can be found: https://www.gceducation.org/

The Licensure Division of the University of North Carolina System Office serves as the official state entity to receive complaints concerning post-secondary institutions that are authorized to operate in North Carolina. Information regarding filing a complaint may be found at: https://www.northcarolina.edu/post-secondary-education-complaints/

Student Compliance Requirements:

All students are required to complete attestations as well as institutional trainings annually as assigned by the Wake Forest University compliance office and the Atrium Health Enterprise.

Below is a list of documents that are acknowledged at orientation and annually thereafter by all students. In addition to these documents, students may be asked to acknowledge program specific policies and/or procedures.

Document	Federal Regulation	Institutional Policy
Confidentiality Agreement	The Health Insurance Portability and Accountability Act of 1996 (HIPAA)	Confidentiality of Information (Student Handbook) Information Security Policy (SE Region)
Consent to be Photographed, Videotaped and/or Interviewed		
Disability Services	34 CFR Part 668 Rehabilitation Act of 1973 Section 504 American with Disabilities Act of 1990 (Title II)	Student Disability Accommodations Requests Policy and Procedures (WFUSM) Student Disability Grievance Procedures (WFUSM)
Technology Agreement		Solicitation and Distribution Policy (Wake Market) Information Security Policy (SE Region)
The Family Educational Rights and Privacy Act (FERPA)	34 CFR Part 99	Student Education Records Policy (WFUSM)
Payment Responsibility		Student Payment Policy
Learning Environment, Professionalism and Student Mistreatment		Learning Environment, Professionalism and Student Mistreatment
WFBMC Student Sexual Misconduct Policy	34 CFR Part 106	Sexual Harassment and Sexual Misconduct Policy
Drug-Free Schools	34 CFR Part 86	Student Substance Abuse Policy (WFUSM)
Federal Financial Aid Drug Policy	34 CFR 668.40	Student Substance Abuse Policy (WFUSM)
Annual Disclosure to Enrolled Students	PL 110-315	Student Right to Know
Employee Health Services Financial Responsibilities Agreement		Student Health Insurance Requirements and Responsibilities Policy (WFUSM)
Health Insurance Requirement and Responsibility		Student Health Insurance Requirements and Responsibilities Policy (WFUSM)

Compliance Policies For All School of Medicine Students

*Academic Nursing, Doctor of Medicine, Graduate School of Arts
and Sciences-Biomedical Sciences, and Physician Assistant*

The Wake Forest University School of Medicine, inclusive of the Academic Nursing, Physician Assistant (PA), and Undergraduate Medical Educational (MD) programs, and the Wake Forest University Graduate School of Arts and Sciences - Biomedical Sciences Programs (hereinafter jointly referred to as "School") are committed to diversity, inclusion, and the spirit of Pro Humanitate. In adherence with applicable laws and as provided by School policies, the School prohibits discrimination in its educational programs, admissions, and activities on the basis of race, color, religion, national origin, sex, age, sexual orientation, gender identity and expression, genetic information, disability, and veteran status.

Inquiries regarding nondiscrimination policies should be directed to:

Aishah Casseus
Title IX Coordinator
Section 504/ADA Coordinator
titleixcoordinator@wfu.edu
Reynolda Hall 307
Winston-Salem, NC 27106
336-758-7258

Sarah Riney
Learning Environment Liaison
sriney@wakehealth.edu
336-713-3352

For information regarding the nondiscrimination policies in employment practices for Atrium Health Wake Forest Baptist, see the ***Equal Employment Opportunity Policy***. Information about employment practices may also be obtained by contacting:

Employee Relations:
Peoplelink.wakehealth.edu
336-716-6464

Inquiries concerning the application of anti-discrimination laws may be referred to the individuals listed above or to the Office for Civil Rights, United States Department of Education. For further information on notice of nondiscrimination, visit https://www2.ed.gov/about/offices/list/ocr/index.html for the address and phone number of the U.S. Department of Education office that services your area, or call 1-800-421-3481.

Diversity and Inclusion

Wake Forest Baptist has adopted the AAMC definitions of diversity and inclusion which are:

Diversity

Diversity as a core value embodies inclusiveness, mutual respect, and multiple perspectives and serves as a catalyst for change resulting in health equity. In this context, we are mindful of all aspects of human differences such as socioeconomic status, race, ethnicity, language, nationality, sex, gender identity, sexual orientation, religion, geography, disability, and age.

Inclusion

Inclusion is a core element for successfully achieving diversity. Inclusion is achieved by nurturing the climate and culture of the institution through professional development, education, policy, and practice. The objective is creating a climate that fosters belonging, respect, and value for all and encourages engagement and connection throughout the institution and community.

Our Beliefs

The following statements are specific to Wake Forest University School of Medicine and Atrium Health Wake Forest Baptist:

- We believe that diversity and inclusion are integral to achieving excellence and quality health outcomes for all.
- We believe that achieving the mission of the Medical Center requires the creation and maintenance of a work and educational environment that embodies diversity and inclusion.
- We believe in the unlimited value of a diverse workforce at all levels of our Medical Center.
- We embrace the definition of the Association of American Medical Colleges (AAMC) for diversity, including the recognition that diversity is not limited to race and ethnicity, but must also take account of socioeconomic status, sexual orientation, religious commitment, physical ability, and all of the experiences that enrich our lives.
- We believe that in order to eliminate the pervasive health disparities that exist in our region and country, we must recruit, retain, and train a diverse cadre of faculty, staff, and trainees.
- We believe that our educational programs should enable health care professionals to provide culturally competent care and address health disparities.
- We believe our Medical Center should actively engage with our local and regional communities to advance health equity.

Code of Conduct

Student Supplement

The information on this page is separate from the AHWFB Code of Conduct. It contains information that focuses on the student environment at Wake Forest University School of Medicine and is intended to supplement the information contained in the Code of Conduct and can be found on the web here.

From the Code of Conduct

We maintain a professional environment that supports the development of our trainees and students.

- We support and nurture the development and wellness of our trainees and students.
- We comply with all applicable laws and regulations of our accredited education programs.
- We use the Student Handbook as a guide and resource.
- We are fair and impartial in grading, evaluations, promotions and grievances, and follow our policies and procedures for addressing concerns.
- We comply with all statutes and regulations that protect the privacy of education records.

Additional Student-Focused Guiding Principles

Respect

- We educate students from a wide range of backgrounds and respect differences in each individual's heritage and goals.
- We are committed to administer all educational activities without discrimination because of race, religion, national origin, age, sex, sexual orientation, veteran status, handicapped status or disability as required by law.
- We respect the individual choices that students make for career paths.
- We create an atmosphere which encourages learning, characterized by cooperation and respectful relations with the patient population served.
- We deal with professional, staff and peer members of the learning team and health care team in a considerate manner and with a spirit of cooperation.
- We act with an egalitarian spirit toward all persons encountered in a professional capacity, regardless of race, religion, gender, sexual preference, age, disability or socioeconomic status.

Conflicts of Interest

- We do not permit romantic relationships between faculty/staff and students in which the faculty or staff member has authority or influence over the academic progress of the student.

Confidentiality

- We comply with the Family Educational Rights and Privacy Act (FERPA).
- We avoid discussing the evaluation of a student with individuals not appropriately involved in their education other than as a reference for career opportunities for that student.

Ethical Behavior

- We refrain from knowingly making false statements for the purposes of acquiring financial aid.
- We appropriately attribute research work completed by student(s).
- We comply with the Honor Code as it pertains to each education program and adhere to academic integrity.

Last Updated 8/4/2022

Title IX and Non-Title IX Sexual Misconduct Policy and Grievance Procedures

Please visit PolicyTech ***to view this policy in its entirety.***
Information can also be found at:
https://school.wakehealth.edu/education-and-training/student-affairs/title-ix

Our Belief

Atrium Health Wake Forest Baptist Medical Center (hereinafter AHWFBMC or the University) is committed to providing programs, activities, and a safe academic and working environment that is free from sex discrimination (including discrimination on the basis of sex, sexual orientation, gender identity, and gender expression) and sexual misconduct (including sexual harassment, sexual assault, domestic violence, dating violence, and stalking).

When students or employees experience acts of sexual misconduct (i.e., sexual assault, stalking, dating violence, domestic violence), their sense of safety and trust is violated and this can significantly interfere with their success at the University. Our community expects that all interpersonal relationships and interactions – especially those of an intimate nature – are based upon values of mutual respect, dignity, responsibility, open communication, and clear consent.

Sexual misconduct is a violation of the institution's values and policies and presents a barrier to fulfilling the University's missions. Sexual misconduct will now be tolerated at the University and is expressly prohibited.

Responding to incidents of sexual misconduct can be challenging, whether you are the person harmed or someone trying to help. All of us play a vital role in making our campus a respectful and safe place to learn, work, and live. The University provides assistance and intervention to survivors of sexual misconduct to support their continued progress at the University. The University offers a coordinated response that include police and Title IX investigations, student conduct process, victim and respondent assistance, and counseling.

The Title IX Office; Counseling & Well-Being Services; School of Medicine, Office of Student Affairs; and the Department of Physician Assistant Studies are the primary units that coordinate support services, victim assistance, and referrals for student victims and/or student respondents of sexual misconduct. We recognize that not all victims will want to pursue complaints and therefore the campus provides confidential places for students to receive support.

The University takes all complaints and accusations of sexual misconduct seriously. We welcome your involvement in our mission to foster a campus environment that strives to prevent sexual misconduct and promotes the reporting of sexual misconduct, compassionate responses to survivors of sexual violence, and equitable treatment of complainants and respondents.

The University imposes strict sanctions against those found responsible for sexual misconduct and assists survivors in the pursuit of campus, civil and legal remedies. Retaliation is strictly prohibited in connection with any reports of possible sexual misconduct.

Sexual Offense Prevention and Response Resources
We are here to support you. We want you to know that whatever may have happened it is not your fault. The University has a number of offices that respond to students who have experienced sexual assault, dating/domestic violence and stalking and works closely with community advocacy services. The most important concern is that you get safe, get help and get medical attention.

Medical Attention
Getting medical attention is important for addressing the physical consequences of any type of assault, even if you do not wish to press charges or collect evidence.

If you can, seeking medical attention within 24 hours of a sexual assault is the ideal for medical and preventative treatment. Survivors of sexual or physical assault can have health issues that include bruising, cuts abrasions, internal injuries not readily apparent or broken bones. Sexual assault survivors can also have additional health concerns such as: tearing or bruising of the labia, vaginal or anal wall, or urethra; sexually transmitted infections such as chlamydia, gonorrhea, and herpes; pregnancy; and HIV.

To seek medical assistance, you can go to a hospital emergency room, clinic or your primary care physician.

IMPORTANT INFORMATION FOR INDIVIDUALS WHO MAY BE VICTIMS OF SEXUAL HARASSMENT, SEXUAL MISCONDUCT, SEXUAL ASSAULT, DATING VIOLENCE, DOMESTIC VIOLENCE, OR STALKING:

If you or someone you know may have been a victim of the behaviors listed above or any other type of violence, you are strongly encouraged to seek immediate assistance.

ASSISTANCE CAN BE OBTAINED 24 HOURS A DAY, 7 DAYS A WEEK, FROM:

The Winston-Salem Police Department
101 N. Main ST., Winston-Salem, NC 27101
Emergency: 911
Non- Emergency: 336-773-7700

Atrium Health Wake Forest Baptist Security Services
Medical Center BLVD., Winston-Salem, NC 27157
Emergency: 336-716-9111
Non- Emergency: 336-716-3305

During business hours (8:30 a.m. to 5:00 p.m., Monday through Friday), you are also strongly encouraged to contact one of the following individuals:

Aishah Casseus, Director Title IX
336-758-7258; casseua@wfu.edu
Reynolda Hall, Suite 307

Jessica Telligman, Assistant Director Title IX
336-758-4997; telligjr@wfu.edu
Reynolda Hall, Suite 307

Sarah Riney, Deputy Title IX Coordinator
336-713-3352; sriney@wakehealth.edu

Ali Rutz, Associate Vice President of Teammate Relations and HR Compliance
arutz@wakehealth.edu

Counseling & Well-Being Services
Bowman Gray Center for Medical Education ("BGCME") 1st Floor, Behind Medical Grounds
counselingservices@wakehealth.edu

Employee Assistance Program
336-716-5493

Wake Forest School of Medicine Faculty Ombuds Office
Jeff Weiner, PhD, Faculty Ombuds
FacultyOmbuds@wakehealth.edu

For the most recent version and to view this policy in its entirety, please access the Title IX and Non-Title IX Sexual Misconduct Policy and Grievance Procedures (WFUSM) on our institutional policy site.

Wake Forest University School of Medicine Policies

Click on the title of the policy you want, to be taken directly to that document

Conflict of Interest Related to Student Evaluation/Assessment Policy

Policy and Procedures for Student Disability Accommodations

Student Appeal of Dismissal Policy

Anti-Harassment Policy

Mistreatment Reporting Policy

Student Substance Abuse Policy

Student Health Insurance Requirements and Responsibilities

Medical Health Requirements and Student Immunization Policy

Exposure to Infectious and Environmental Hazards Policy

Effects of Infectious Disease or Disability on Student Learning Activities

Student Education Records Policy

Information Security Policy

Distance Education Policy

Leave of Absence Policy

Military Leave of Absence Policy

Conflict of Interest Related to Student Evaluation/Assessment Policy

PURPOSE
The purpose of this policy is to ensure that faculty members and other university representatives who provide academic assessment of students are free from conflicting relationships with the students.

SCOPE
All faculty engaged by Wake Forest University School of Medicine (WFUSOM), WFUSOM faculty and staff, Third Parties responsible for assessing Students, and Students are responsible for complying with this policy.

POLICY GUIDELINES

A. General Requirements/Applicability: Faculty/staff/Third Parties and Students should disclose any conflict of interest, as defined in section B, below.

1. Faculty/Staff/Third Parties who serve on a School of Medicine standing committee(s) or program-specific committee(s) which assesses and votes on Student acceptance, progress, or promotion (including graduation) should inform the Chair of the committee(s) on which the faculty/staff/Third Party serves when conflict of interest exists and recuse themselves from participating in the assessment of, or voting on, matters pertaining to the Student with whom the faculty/staff/Third Party has a conflict of interest.

2. Any faculty/staff/Third Party who assesses Students should disclose in writing the presence of a conflict of interest to the appropriate Program Manager.

3. Students should disclose any conflict of interest following the process specified in the Student Handbook for their specific program.

4. In the event of a conflict of interest, the appropriate Program Manager will develop a plan to remove the faculty/staff/Third Party from the assessment of the Student with whom the faculty/staff/Third Party has a conflict of interest. Each program is required to establish a process to manage the avoidance of conflicts of interest in Student assessment once a conflict of interest has been identified.

5. Once identified, a conflict of interest exists until the Student is no longer a Student, as defined above.

B. Conflicts of interest include:

1. The Student is an Immediate Family Member of the faculty/staff/Third Party who is assessing the Student.

2. The Student has a consensual relationship with the faculty/staff/Third Party (as defined in the Wake Forest Baptist Medical Center Nepotism and Consensual Relationships policy).

3. The Student has a Personal Financial Relationship with the faculty/staff/Third Party.

4. Healthcare relationships:

   a. For Undergraduate Medical Education (MD) Program Students: The Student has received medical or mental healthcare from the faculty/staff/Third Party.

   b. For all other programs' students (not enrolled in the MD program): The Student has a current therapeutic relationship to receive medical or mental healthcare from the faculty/staff/Third Party.

5. The Student, faculty/staff/Third Party perceives a conflict of interest exists that is not specified in items B (1-4) above. Additional information about the nature of the perceive conflict may be requested under this circumstance.

C. Sanctions for Breach of Policy

1. Students, faculty, staff, and Third Parties have an obligation to comply with this policy. Examples of conduct that violate this policy include (Note: these examples are not intended to be exhaustive):

   - Intentional deception or dishonesty in disclosures
   - Omission of relationship disclosures
   - Failure to comply with plans to avoid conflict of interest in student assessment

2. Reports of suspected violations may be made to any of the individuals listed below, or anonymously through the Compliance Hotline (1-877-880-7888). Suspected violations will be investigated and referred to the following for sanctioning as appropriate:

   Students: Program Director, as applicable
   Staff: Human Resources
   Faculty: Dean, School of Medicine/designee and/or President/Chief Medical Officer of Wake Forest Baptist Health

House Staff: Dean, School of Medicine/designee and/or Associate Dean for Graduate Medical Education/ Chief Medical Officer

3. Possible sanctions may include:

- Written advisory for placement in the employee or student record
- Ineligibility to participate in grant applications or on committees
- Dismissal from an educational or training program
- Termination of employment

Revised: 1/2023

For the most recent version and to view this policy in its entirety, please access the Conflict of Interest Related to Student Assessment Policy (WFUSM) on our institutional policy site.

Program Specific Process for Reporting Conflict of Interest:

MD Program:

As course coordinators/clerkship coordinators are preparing your schedules, we would like to ask you to submit any potential conflicts of interest you foresee during your courses, clerkships, and rotations.

Conflicts of interest important to consider include but are not limited to:

- You are an immediate family member of the individual.
- You are in a consensual relationship with the individual.
- You have a personal financial relationship with the individual.
- You have received medical or mental healthcare from the individual.
- Any other issue not included in the above-mentioned situations you may perceive as a conflict (additional information about the nature of the perceived conflict may be requested under this circumstance).

To report a Conflict of Interest, click on the link below. Please provide the full name (first and last) of any faculty or house officer in a department(s) or section(s) with whom you perceive as having a conflict of interest. This information will be forwarded to the Senior Associate Dean of Healthcare Education and his/her designee (such as course coordinators and directors) for consideration and, if necessary, management.

Year 1 and Year 2 students can report a conflict of interest HERE.

Year 3 and Year 4 students can report a conflict of interest HERE.

Academic Nursing:

A student who has personal, familial, or business relationships with a faculty member or supervisor must disclose such relationships to the department director, who will determine appropriate duty assignments, based upon the type of relationship which exists.

PA Program:

A conflict of interest is a situation in which personal considerations including financial have the potential to compromise or bias professional judgment and objectivity. Students are required to notify the PA Program of any potential conflicts of interest you foresee during your courses, rotations, or the curriculum during your participation in the PA program.

Conflicts of interest important to consider include but are not limited to:

- You are an immediate family member of the individual.
- You are in a consensual relationship with the individual.
- You have a personal financial relationship with the individual.
- You are receiving current medical care from the individual.
- Any other issue not included in the above-mentioned situations you may perceive as a conflict (additional information about the nature of the perceived conflict may be requested under this circumstance).

To report a conflict of interest please email the Director of Student Services with the full name of any faculty member, staff member, clinician, or clinical preceptor with whom you perceive a conflict of interest and the reason for the conflict. The Director of Student Services (DSS) or designee will respond as necessary. If you perceive a conflict of interest with the Director of Student Services, email the Chair of PA Studies.

Graduate Program:

Please contact the Graduate School of Arts and Sciences, Biomedical Sciences for information on how to report a conflict of interest.

Student Disability Accommodation Requests Policy and Procedures

PURPOSE
Wake Forest University School of Medicine (School of Medicine) is committed to ensuring that no qualified student with a properly documented disability is excluded from participation in, subjected to discrimination in connection with, or denied the benefits of any University program or activity due to the student's disability. To that end, the University provides reasonable accommodations to enable qualified students with properly documented disabilities equal access to University programs and activities. The Policy and Procedures for Student Disability Accommodation Requests (the "Policy") sets forth the policy and procedures applicable to student disability accommodation requests.

SCOPE
Any disability accommodation request made by any Wake Forest University undergraduate, graduate, or professional student (including students of the Wake Forest School of Medicine Academic Nursing, Physician Assistant (PA), and Undergraduate Medical Education (MD) programs, and the Graduate School of Arts and Sciences, Biomedical Sciences Program) regardless of the type of disability involved and regardless of the University program or activity in which the student is enrolled and/or participating.

POLICY
All student disability accommodation requests must be made to the Center for Learning, Access, and Student Success (CLASS). For information on how to initiate a request, visit our website. a) Students may also contact CLASS at 336-758-5929 or class@wfu.edu.

Revised: 10/23
For the most recent version and to view this policy in its entirety, please access the Student Disability Accommodations Requests Policy and Procedures (WFUSM) on our institutional policy site.
Please review our Student Disability Grievance Procedures (WFUSM).

Student Appeal of Dismissal Policy

PURPOSE The purpose of this policy is to describe the process the Wake Forest University School of Medicine will follow to address an appeal from a Student regarding a dismissal decision.

SCOPE This policy applies to All Wake Forest University School of Medicine Students, faculty and staff are responsible for complying with this policy with the following exception. Students, faculty and staff of the Wake Forest University Graduate School of Arts and Sciences, Biomedical Sciences, should refer to the "Graduate Student Academic Grievance Procedures" found in the Wake Forest University Graduate School of Arts and Sciences Student Handbook.

POLICY A Student who wishes to appeal a dismissal decision must make a formal request for appeal in writing (which may include electronic mail) to his/her program manager or designee within seven (7) business days of notification of the dismissal.

During the dismissal appeal process, the Student will not actively participate in his/her program and will follow the dismissal policy and/or exit procedures of the program.

The Student's written appeal must specify which of the following grounds for appeal applies and must set forth specific facts to explain why, with any supporting materials.
1. Procedural error as set forth in the policy;
2. Sanction was inappropriate based on the circumstances; and/or
3. Additional evidence is now available that was unavailable at the time the decision to dismiss was made.

A Student's appeal of the dismissal decision and the decision by the Appeals Committee to uphold or reverse the dismissal decision may be made only if at least one of the grounds for appeal (above) was established to the satisfaction of the Appeals Committee.

Revised 4/2022
For the most recent version and to view this policy in its entirety, please access the Student Appeal of Dismissal Policy (WFUSM) on our institutional policy site.

Anti-Harassment Policy

Wake Forest School of Medicine is committed to maintaining an educational and working environment free of discrimination. Discrimination or harassment of any employee or student based on sex, race, color, religion, national origin, sexual orientation, gender identity, age, or disability will not be tolerated. Individuals found to be in violation of this policy will be subject to disciplinary action which may include written warning, demotion, transfer, suspension, expulsion, or dismissal. Individuals who, in good faith, report harassment or present evidence in a harassment investigation are protected from retaliation. Acts of retaliation are a violation of this policy and are prohibited by law, even if a claim of discrimination later is proven to be unfounded.

Sexual/Gender Harassment

Sexual and gender harassment are forms of sex discrimination. They are illegal under applicable law and a violation of school policy.

Complaints regarding sexual/gender harassment allegedly committed by students of Wake Forest School of Medicine should be reported and will be addressed in accordance with the Wake Forest School of Medicine Student Sexual Misconduct Policy.

Complaints regarding sexual/gender harassment allegedly committed by faculty or staff members should be reported and will be addressed in accordance with the Wake Forest Baptist Medical Center Harassment Policy.

Other Harassment in the Work or Academic Environment

Harassment on the basis of race, color, religion, or national origin is a form of unlawful discrimination and is prohibited. When harassment based on race, color, religion, or national origin has the "purpose or effect of substantially interfering with an individual's work or academic performance or creating an intimidating, hostile, or offensive working or educational environment," it rises to the level of prohibited discrimination. In addition, these principles apply to harassment on the basis of age and disability under the Age Discrimination Act, the Age Discrimination in Employment Act, Section 504 of the Rehabilitation Act and the Americans with Disabilities Act, respectively. Finally, this policy also applies to harassment on the basis of sexual orientation and gender identity.

Examples of conduct that may rise to the level of discrimination include jokes that refer to race, color, religion, national origin, sexual orientation, gender identity or disability or that portray age in a negative light; the posting or distribution of cartoons, drawings, or any other material that adversely reflects on a person's race, religion, national origin, disability, sexual orientation, gender identity or age; the use of "slurs" or other offensive language; practical jokes, horseplay, or teasing that tends to demean or ridicule a person's race, religion, national origin, sexual orientation, gender identity or disability or that reflects negatively on a person's age.

Procedure

Anyone who believes that he or she has been harassed or has observed or been subject to a violation of this Policy should promptly report the matter in accordance with this Policy. Staff members should report harassment to their supervisor, or the Vice President for Human Resources, or the Director of Employee Relations. Faculty members should report harassment to their chairs, the Senior Associate Dean for Faculty Affairs, or the Dean of the school. Students should report harassment to the appropriate manager of their applicable program or the Dean of the school. Any member of management who receives a complaint or observes conduct that may constitute a violation of this Policy is obligated to notify the Vice President for Human Resources or the Director of Employee Relations or, if students are involved, their house mentor, the appropriate manager of their applicable program, or the Dean of the school. The investigation and resolution of complaints alleging harassment on the basis of an individual's disability will be coordinated by the institution's Section 504/ADA Coordinator.

Complaints of harassment will be treated seriously and will be promptly investigated with reasonable steps being taken to protect the confidentiality of all parties. Information regarding the complaint procedure and supervisory responsibilities may be obtained from the Office of the Director of Employee Relations, who is available to provide guidance and assistance in the proper handling of any allegation. In all cases involving students, the Director of Employee Relations will coordinate his/her office's response with the appropriate manager of the student's educational program.

In determining whether conduct constitutes a violation of this Policy, those entrusted with carrying out this policy will look at the record as a whole and at the totality of the circumstances, such as the nature of the offensive conduct and the context in which the alleged incidents occurred. The determination of the suitability of a particular action will be made from the facts, on a case-by-case basis. Following an objective evaluation of the gathered information, the parties will be notified of the outcome of the investigation. Employees and students utilizing this process will be protected from retaliation.

Wake Forest Baptist Health has a separate Harassment Policy. For further information on the Medical Center's policy please visit the Wake Forest Baptist Health PolicyTech site.

Revised 7/2019

For the most recent version and to view this policy in its entirety, please access the Anti-Harassment Policy (WFUSM) on our institutional policy site.

Mistreatment Reporting Policy

I. PURPOSE

The purpose of this policy is to ensure the Learning Environment is conducive to the ongoing development of professional behaviors in medical students, faculty, and staff. This policy also defines Mistreatment and describes the process for reporting and reviewing Mistreatment reports.

II. SCOPE

This policy applies to all Wake Forest University School of Medicine (School of Medicine) and Graduate School of Arts and Sciences – Biomedical Sciences students, including visiting medical students.

III. DEFINITIONS/ABBREVIATIONS

   A. Learning Environment: The academic programs and activities of the School of Medicine.

   B. Mistreatment: Behavior showing disrespect for the dignity of others that unreasonably interferes with the learning process. Mistreatment may be intentional or unintentional.

IV. POLICY

   A. The School of Medicine will periodically evaluate the Learning Environment in order to identify positive and negative influences on the maintenance of professional standards, develop and conduct appropriate strategies to enhance positive and mitigate negative influences, and identify and promptly correct violations of professional standards.

   B. The Learning Environment Liaison Team (LEL Team) in the Office of Education Institutional Effectiveness (OEIEC) is responsible for the intake and triage of all Mistreatment reports.

   C. Mistreatment

      1. The School of Medicine has mechanisms in place for prompt response to Mistreatment reports.

      2. The LEL Team is responsible for the intake and triage of all Mistreatment reports.

      3. Examples of Mistreatment include, but are not limited to:

         a) Being treated in a manner that a reasonable person would find belittling, humiliating, insulting, or disrespectful under the circumstances;

         b) Physical endangerment and/or physical harm, or threats of physical harm;

         c) Discrimination and/or harassment based on race, color, religion, sex (including pregnancy, sexual orientation, or gender identity), national origin, age, disability, or genetic information, as defined in the Anti-Harassment Policy (WFUSM) and Title IX and Non-Title IX Sexual Misconduct Policy and Grievance Procedures (WFUSM);

         d) Inviting students who are being currently supervised, evaluated, or graded to romantic or sexual relationships; sexual assault, or sexual or gender-based discrimination or harassment, as defined in the Title IX and Non-Title IX Sexual Misconduct Policy and Grievance Procedures (WFUSM) ;

         e) Being subjected (directly or indirectly) to obscenities, profanity, sexist, racist, or ethnically offensive remarks, actions, or names;

         f) Taunting, mocking, or humiliating a student through acts and words (e.g. mimicking something the student got wrong, giving highly pejorative feedback in the presence of others); or other forms of psychological Mistreatment;

         g) Deliberately and repeatedly excluding students from reasonable learning experiences and communications (faculty, residents or staff);

         h) Requiring students to perform personal services at any time (e.g. coffee runs, errands, pet-sitting, baby-sitting, etc.);

         i) Endangering the student's professional development (e.g. telling students to ignore institutional or school policy, inviting students to do something unethical or illegal);

         j) Grading in a punitive manner; grading based on factors other than performance on previously announced grading criteria; creating disadvantage in learning opportunities, teaching, feedback or grading based on personal characteristics of the student; and

         k) Retaliation against any student who reports perceived inappropriate treatment (e.g. telling others that a student is a "snitch" or to "watch out for that one", calling a residency program to "warn" them about a student).

D. Reporting a Learning Environment and/or Mistreatment Concern

    1. Any concern of possible Mistreatment in the Learning Environment may be reported. Information provided will be shared on a need-to-know basis in order to respond to and or take action on reports.

    2. The following methods are available for reporting concerns:

        a) Non-Anonymous Reporting Options

           (1) End of course/end of clerkship evaluations.

           (2) Direct report to the Learning Environment Liaison Team at edcompliance@wakehealth.edu.

           (3) Online reporting form: Service Now

           (4) Concerns regarding violations of the Title IX and Non-Title IX Sexual Misconduct Policy and Grievance Procedures (WFUSM) may be reported in accordance with the reporting options under that Policy.

        b) Anonymous Reporting Options

           (1) Compliance hotline: 1-844-587-0825 (toll-free) or via online report at atriumhealth.ethicspoint.com

E. Report Intake

    1. If the report is anonymous, it is immediately evaluated and processed according to the Report Review Process (Section F).

    2. For non-anonymous reports, the LEL Team will conduct outreach to the student or individual (including faculty and residents) who filed the report and the student who is the subject of the report, if identified and different from the reporter, to offer the student(s) the opportunity to share additional information regarding the concern.

        a) Any additional information shared by the student(s) will be added to the initial report for assessment.

        b) If a student declines to participate or does not respond within 30 calendar days, the report will be processed based upon the initial information provided.

F. Report Review Process

    1. All reports will be evaluated for potential Mistreatment.

    2. Mistreatment Reports

        a) Reports meeting the criteria set forth in Section C above will be evaluated and addressed as Mistreatment reports. Those reports not meeting the Mistreatment criteria will be evaluated and addressed as Learning Environment reports (see below).

        b) Reports of behavior that indicate an immediate risk of harm to others (e.g. violence or threats of physical violence, illegal drug use by caregivers in the clinical setting, deliberate violation of patient safety procedures) or illegal behaviors (e.g. stealing narcotics, falsifying patient records) will be referred for immediate action as necessary. Employees and students may be placed on administrative leave or be subject to interim measures, as necessary.

        c) Any report involving behavior which could fall within the scope of the Title IX and Non-Title IX Sexual Misconduct Policy and Grievance Procedures (WFUSM) will be sent to the Title IX Coordinator and reviewed under the Title IX and Non-Title IX Sexual Misconduct Policy and Grievance Procedures (WFUSM).

        d) Any report involving discrimination or harassment based on a protected status other than sex must be referred to Teammate Relations for review under the Anti-Harassment Policy (WFUSM).

        e) Reports against Students

           (1) Reports not covered under Sections F(1)(b-d) involving alleged Mistreatment by a student will be referred to the Honor Council of the student's program for review under the program's Honor Code/Code of Conduct.

        f) Reports against Employees

           (1) Reports not covered under Sections F(1)(b-d) involving alleged Mistreatment by employees will be referred to Teammate Relations for review and evaluation under other applicable policy.

           (2) Program Directors and Department Chairs will be notified if residents or fellows are alleged to have engaged in Mistreatment.

        g) During the Mistreatment report process, the LEL Team will provide periodic updates to the student who is the subject of the Mistreatment report until the report has concluded.

3. Learning Environment Feedback Reports

   a) All concerns not within the scope of the Mistreatment definition are classified and addressed as Learning Environment feedback reports.

   b) All Learning Environment feedback reports are referred as part of an aggregated, de-identified report to the Learning Environment Enrichment Group (LEEG), a multidisciplinary team that commits to promoting a learning environment that reinforces positive behaviors and ethical norms, is free from mistreatment, harassment, and discrimination, and where feedback regarding performance and behaviors may be shared without concern for retaliation. LEEG is composed of nine members of from various departments within the School of Medicine.

      (1) LEEG reviews the aggregate, de-identified data on Learning Environment feedback reports.

      (2) LEEG identifies trends in reporting, target areas for improvement, and develop strategies to address identified problem areas.

      (3) Student names and/or identifying information are not shared with LEEG.

G. Retaliation

   1. Retaliation against a student who, in good faith, complains about or participates in an investigation of student Mistreatment is prohibited. Any person filing a report or participating in the Mistreatment reporting process who feels they have been retaliated against or threatened with retaliation should report the allegation immediately to the LEL Team.

   2. Reports of potential retaliation will be addressed as set forth in the appropriate policy (Ex. If the retaliation arises out of a matter being addressed under the Title IX and Non-Title IX Sexual Misconduct Policy and Grievance Procedures (WFUSM) , retaliation will be covered under that same policy).

   3. Intentional false or malicious reports of inappropriate treatment made by students will not be tolerated and will be handled as a disciplinary matter under the Standards of Honor and Professional Conduct.

REFERENCES

Anti-Harassment Policy (WFUSM)

Title IX and Non-Title IX Sexual Misconduct Policy and Grievance Procedures (WFUSM)

LCME Standard 3.5

LCME Standard 3.6

Revised 10/2023

For the most recent version and to view this policy in its entirety, please access the Mistreatment Reporting Policy (WFUSM) on our institutional policy site.

Student Substance Abuse Policy

GENERAL POLICY STATEMENT:

The Wake Forest University School of Medicine (WFSM) and the Graduate School of Arts and Sciences, Biomedical Sciences, (hereinafter jointly referred to as "School") are committed to providing a safe, healthy learning community for all its members. The School recognizes that the unlawful possession, use, or distribution of illicit drugs and unlawful or excessive use of alcohol by students may interfere with the mission of Wake Forest Baptist Medical Center by negatively affecting the health and safety of its patients, visitors, students, faculty, staff, and research subjects. In accordance with the DrugFree Schools and Communities Act, and to comply with the Drug-Free Schools and Campuses Regulations (EDGAR Part 86.100, Subpart B), this policy addresses the annual written notification to students of the following: standards of conduct, possible legal sanctions and penalties, statements of the health risks associated with alcohol and other drug use (AOD), the School's AOD programs available to students, and the disciplinary sanctions for violations of the standards of conduct. The School participates in the biennial review with Wake Forest University in providing confidential information which does not violate Family Educational Rights & Privacy Act (FERPA).

DEFINITIONS: For purposes of this Policy, the following terms and definitions apply:

Illegal use of drugs/alcohol: The unlawful manufacture, distribution, disposition, possession, and/or use of a controlled substance or alcohol as regulated by federal, state, and local laws.

Misdemeanor and felony convictions for violating these laws can result in criminal penalties. Such penalties can range from fines and probation to denial or revocation of federal benefits (such as financial aid) to imprisonment and forfeiture of personal and real property.

An illegal drug is a controlled substance as defined by Title 21 US Code (USC) Controlled Substances Act, i.e., Subchapter I, Part A, Section 802, Subchapter I, Part B, Section 812, Part 1308 (Schedules I- V) and the North Carolina Controlled Substances Act: G.S. 90-86 through G.S. 90- 113.8

An overview of federal laws governing the manufacture, possession, use and distribution of alcohol and illegal drugs is available at: https://niaaa.nih.gov/alcohol- health/alcohol-policy; and Title 21 US Code (USC) Controlled Substances Act, i.e., Subchapter I, Part D; Subchapter I, Part A; and Subchapter I, Part C.

A summary of North Carolina alcohol and drug laws is available from the North Carolina General Statutes (G.S.) 18B-301, G.S. 18B-302, G.S. 18B-401; G.S. 20-138.1; and Article 5, North Carolina Controlled Substances Act: G.S. 90-86 through G.S. 90-113.8

Illegal drugs can include:

i. Prescription drugs unless validly prescribed by a student's health care provider,
ii. Substances never intended for human consumption (such as glue)

Under the influence: affected by alcohol and/or other drugs or has recently consumed alcohol and/or other drugs in any detectable manner.

Trafficking in Illegal Drugs: The term "trafficking" is used in its generic sense, not in its specific application to selling, manufacturing, delivering, transporting, or possessing controlled substances in specified amounts as referenced in Article 5, North Carolina Controlled Substances Act.

Abusive use of alcohol or drugs: alcohol or drugs, whether available legally (such as cough syrup or other over-the-counter medications) or drugs for which a student has a valid prescription, that are taken or used in a manner not prescribed or inconsistent with recommended use.

POLICY GUIDELINES:

A. **Annual Notification:** This policy will be distributed in writing to all students to meet the annual notification requirement. Contents of the annual notification will include: standards of conduct, possible legal sanctions and penalties, statements of the health risks associated with alcohol and other drug use (AOD), the School's AOD programs available to students, and the disciplinary sanctions for violations of the standards of conduct.

B. **Standards of Conduct:**
i. The School prohibits the illegal use or the abusive use of alcohol or other legal drugs by any student on School property or at events that utilize the School's name (i.e., Medical School Prom).
ii. In accordance with local, North Carolina and Federal laws, the School prohibits the unlawful possession, use, manufacture, sales, or distribution of illegal drugs or drug paraphernalia by any student. North Carolina law includes marijuana in the list of illegal drugs (North Carolina Controlled Substances Act, G.S. 90-94).
iii. The School prohibits its students from using prescription medications not prescribed for them. Students are expected to use only those prescription medications that are prescribed for them within the confines of a provider/patient relationship.
iv. The School prohibits its students from attending classes, participating in clinical rotations, or otherwise participating

in or attending School or WFBMC activities or functions while under the influence of alcohol, chemicals, or drugs, including legally obtained prescription drugs, which impair one's ability to perform normal activities.

v. Students must successfully pass the urine drug screening test administered during matriculation. As marijuana is not legal in the State of North Carolina, the urine drug screening will test for the presence of this substance.

vi. Students must comply with North Carolina state and federal law regarding alcohol. It is unlawful for any person less than 21 years of age to purchase or possess any alcoholic beverage. It is against the law for anyone to sell or give any alcoholic beverage to a person under 21 or to aid or abet such person in selling, purchasing or possessing any alcoholic beverage.

vii. Institutional funds will not be used for the purchase of alcohol for student-sponsored events.

viii. Student organizations can significantly improve personal safety and reduce liability by not providing alcohol to any person. If alcohol is to be present at a student-sponsored activity, the student organization will provide for the safety of the attendees and reduce its liability by ensuring that:

- Alcohol is not the focus of the event;
- Attractive alternative beverages are provided;
- Procedures are in place to prevent transfer, service, or sale to persons under the legal age of 21;
- Alcohol is not served from common or self-serve containers;
- Service complies with this Policy, as well as the rules of the facility;
- Designated non-drinking hosts are assigned to attend the event;
- Assistance is provided to any attendee who is intoxicated and needs alternative transportation home.
- Using a professional caterer or holding the event at a site provided by a vendor who is licensed to sell and serve alcohol consumed at the event are the only methods of serving alcoholic beverages.

ix. All students must notify their Program Manager(s) within five (5) days of any arrest, charge or conviction for a violation of federal and state drug or alcohol laws.

x. If a student is convicted for a violation of federal and state drug or alcohol laws after submitting the Free Application for Federal Student Aid (FAFSA), he/she must notify the Financial Aid Office within five (5) days of the conviction.

C) **Description of applicable legal sanctions** under local, State, or Federal law for the unlawful possession or distribution of illicit drugs and alcohol:

i. A full description of federal sanctions for drug felonies can be found at the Drug Enforcement Administration (DEA) webpage: https://www.dea.gov/druginfo/ftp3.shtml

ii. A full description of penalties for North Carolina drug violations can be found at the North Carolina Controlled Substances Act, General Statute (G.S.) 90-95: http://www.ncga.state.nc.us/EnactedLegislation/Statutes/HTML/ByArticle/Chap ter_90/Article_5.html

iii. The penalties for violations of alcoholic beverage regulations are found in Chapter 18B of the North Carolina General Statutes: http://www.ncleg.net/gascripts/Statutes/StatutesTOC.pl?Chapter=0018B

Such penalties include imprisonment and heavy fines.

iv. Federal financial aid considerations: In accordance with 34 CFR 668.40 https://www.law.cornell.edu/cfr/text/34/668.40, a student who has been convicted of any offense under any Federal or State law involving the possession or sale of a controlled substance shall not be eligible to receive any grant, loan, or work assistance under Title IV federal student aid programs beginning on the date of such conviction and ending after the interval specified in the following table:

(a) If convicted of the possession of a controlled substance:

	Ineligibility Period
First Offense	1 year
Second Offense	2 years
Third Offense	Indefinite

(b) If convicted of the sale of a controlled substance:

	Ineligibility Period
First Offense	2 Years
Second Offense	Indefinite

(c) In the event a student is convicted of both possessing and selling illegal drugs, and the periods of ineligibility are different, the student will be ineligible for the longer period.

(d) A student whose eligibility has been suspended may resume eligibility before the end of the ineligibility period

determined if:

- The conviction is reversed, set aside, or otherwise rendered invalid or
- The student satisfactorily completes an approved drug or alcohol rehabilitation program that includes passing two unannounced drug screening tests administered by an approved drug rehabilitation program. The drug rehabilitation program referenced in this section is one that is administered or recognized by a Federally or State-licensed hospital, health clinic, or medical doctor.

(e) If a student is convicted of possessing or selling drugs after submitting the Free Application for Federal Student Aid (FAFSA), the student must notify the Financial Aid Office within five (5) days of the conviction.

D) **Sanctions imposed by the School:** The School will impose disciplinary sanctions, up to and including dismissal and referral for prosecution, on a student for violations of the standards of conduct required by paragraph 3a) of this policy as follows:

i. Any student who violates federal/North Carolina/local laws may be subject both to criminal prosecution and to disciplinary proceedings by the School.

ii. The penalties imposed by the School for students found to have violated applicable law or School policy will vary depending upon the nature and seriousness of the offense and may include a range of disciplinary actions from reprimand, probation, restriction, suspension, and dismissal.

iii. For the illegal manufacture, sale or delivery, or possession with the intent to manufacture, sell or deliver, of any controlled substance identified in Article 5, North Carolina Controlled Substances Act, a student may be dismissed. All trafficking activities of any controlled substances have the presumptive sanction of expulsion.

iv. Illegal Possession of Drugs:

a. For a first offense involving the illegal possession of any controlled substance identified in Schedules 1-V, Article 5, North Carolina Controlled Substances Act, the minimum penalty is suspension.

b. For a first offense involving the illegal possession of any controlled substance identified in Schedule VI, Article 5, North Carolina Controlled Substances Act, the minimum penalty is a combination of educational, therapeutic, and punitive sanctions.

c. For second or other subsequent offenses involving the illegal possession of controlled substances, progressively more severe penalties will be imposed, up to and including dismissal.

v. The applicable program manager (or designee) may place a student on an interim suspension before completion of regular conduct proceedings, when the student's continued presence within the School community would constitute a clear and immediate danger to the health or welfare of other members of the University community. The staff of the department of WFSM Counseling and Wellness Services would only be involved in this process if a student was found to be a threat to self or others during the student's evaluation by WFSM Counseling and Wellness Services.

a. When it is clear that the student has engaged in or threatens to engage in behavior that poses a significant risk of harm to the safety or security of themselves, others, or to property, or directly or substantially impedes the activities of members of the institution's community, including employees, other students, patients, or visitors.

b. In accordance with the applicable program's dismissal policy and/or standards of conduct

c. If such a suspension is imposed, an appropriate hearing of the charges against the suspended person will be held as promptly as possible. Students in the Wake Forest School of Medicine may appeal the dismissal decision in accordance with the applicable program's appeal policy; students in the Graduate School of Arts and Sciences, Biomedical Programs, may appeal the dismissal in accordance with the procedures established by the program.

vi. If indicated, the School may offer the student the option of evaluation, counseling, and successful completion of an appropriate rehabilitation program as a condition of remaining in the program. Any student, if given the option to participate in a rehabilitation program, will comply with the treatment and rehabilitation requirements set forth below or withdraw from the School. Any such individual electing treatment and rehabilitation will:

a. Satisfactorily participate in a substance use disorder or rehabilitation program approved for such purpose by a federal, state, or local health, law enforcement or other appropriate agency at the individual's expense.

b. Provide evidence satisfactory to the School's program manager of continued outpatient therapy in an approved program appropriate to the treatment recommendation of the student's substance use disorder or rehabilitation program.

c. Remain substance free after completing a rehabilitation program for chemical dependency, and participate in random "for cause" drug testing during rehabilitation and for the duration of the student's enrollment in the School.

Failure to comply with these requirements will result in dismissal.

vii. Failure of any alcohol and/or drug test will result in disciplinary actions, up to and including dismissal. Remaining in the program will be conditional upon successful completion of the rehabilitation program as described in Section 3d) vi.

viii. **For Cause Drug Screening and/or breath alcohol testing**: Students will be required to undergo "for cause" drug screening and/or breath alcohol testing for the following reasons:

a. Reporting to School under the influence of alcohol or drugs, including legally obtained prescription drugs, which impair one's ability to perform normal work activities or in a condition giving the program manager, based on the agreement of two other faculty or staff members, reasonable cause to suspect the influence of alcohol or other drugs due to the following:
- Observable abnormal or unusual behavior
- Injury or accident for which medical attention is needed beyond simple first aid
- Acts for which a student is responsible that involve injury to a staff/faculty member, patient, visitor, or student requiring medical attention beyond simple first aid
- Gross negligence and carelessness
- Disregard for safety, life, or well-being of any WFBH staff/faculty member, patient, visitor, or student
- Upon suspicion of drug diversion

b. Failing a urine drug screening;

c. Violating School or WFBH policy; or

d. After successfully completing a rehabilitation program for chemical dependency for the duration of the student's enrollment in the School

ix. If the urine drug test is determined to be positive following a medical review for legal prescriptions or other documented medical reasons, the student may elect to have his/her specimen retested at his/her expense. The same sample will be sent to another diagnostic lab for testing. A student who elects to re-test the sample will contact WFBH Employee Health to request and arrange payment for this service.

x. For federal financial aid considerations: See section 3c) of this policy

E. **Description of the health risks associated with the use of illegal drugs and the abuse of alcohol –** For current information regarding the health risks associated with the use of illegal drugs and abuse of alcohol, see US DEA Drugs of Abuse

F. **Description of any drug or alcohol counseling, treatment, or rehabilitation or re-entry programs t**hat are available to students

i. Any student experiencing an emergency should call 911 immediately.

ii. **WFSM Campus**: Early recognition of substance use disorder is important for successful rehabilitation. The School endorses and encourages the activities of the WFSM Counseling and Wellness Services in early identification, treatment, and rehabilitation of students with a substance abuse problem. This is a therapy center rather than a 24/7 crisis center. The WFSM Counseling and Wellness Services center provides individual, group, and couples counseling, consultation, coaching, and wellness outreach in order to support and promote the emotional, intellectual, physical, social and spiritual wellness of students in the Wake Forest School of Medicine. To schedule an appointment, students can email: counselingservices@wakehealth.edu

iii. **WFU Reynolda Campus:** Students also have access to the Office of Wellbeing (BASICS@wfu.edu, 336-758-4371): The Office of Wellbeing coordinates campus-wide alcohol and other drug education and prevention programs as well as the Brief Alcohol Screening and Intervention for College Students (BASICS) program. BASICS provides individualized screening and intervention for students facing challenges with their alcohol and or drug use. The Office of Wellbeing can also refer students in need of additional assessment or services to the appropriate level of care.

iv. Students who do not wish to take advantage of the WFSM or WFU Reynolda Campus services may wish to seek referrals to rehabilitation and treatment programs from their own health care provider.

v. Approved alcohol and drug information/treatment referral services are also available at: https://niaaa.nih.gov/alcohol-health/support-treatment

vi. Students who have disabilities and need accommodations should contact the Wake Forest University Center for Learning Access and Student Success.

> Center for Learning, Access and Student Success (CLASS)
> 118 Reynolda Hall, Hearn Plaza entrance
> 336-758-5929
> class@wfu.edu   https://class.wfu.edu/

G. The School (in compliance with FERPA and any other applicable privacy laws and regulations) will participate in the biennial review of its drug prevention program to:

i. Determine its effectiveness and implement changes to the program if they are needed; and

ii. Ensure that the disciplinary sanctions described in paragraph 3 d) of this policy are consistently enforced

Revised: 8/2019

For the most recent version and to view this policy in its entirety, please access the Student Substance Abuse Policy (WFUSM) on our institutional policy site.

Student Health Insurance Requirements and Responsibilities

It is the policy of the Wake Forest University School of Medicine (WFUSM) to require all students to maintain medical insurance during their enrollment in the School of Medicine.

This policy applies to all Wake Forest University School of Medicine Students and students in the Wake Forest University Graduate School of Arts and Sciences – Biomedical Sciences programs.

POLICY GUIDELINES

A. Wake Forest University School of Medicine requires that all Students maintain medical insurance during enrollment in a degree seeking program of study.

1. WFUSM offers a Student plan to all Students.

2. Students are automatically enrolled in the Student plan one time each year. Students who do not want to participate in the Student plan and who provide proof of adequate alternative medical insurance coverage must waive out of the Student plan by the deadline specified by WFUSM. Students who fail to waive out of the Student plan will be responsible for all premium costs. No exceptions will be allowed for failing to submit a waiver.

3. Students may be eligible to opt into the plan due to certain qualifying life events, including:

   a. Loss of prior coverage
   b. No longer living in the plan's coverage area
   c. Entry into the U.S.
   d. Marriage to Student
   e. Birth/Adoption

4. Each six-month premium cost for enrollment in the Student plan is billed to the Student each Fall and Spring semester on the Student's account.

5. Optional dependent, dental and vision insurance is offered to all Students.

   a. Students who are interested in obtaining coverage under one or more of these plans must enroll through a separate enrollment process. Students are not automatically enrolled in optional plans.

Revised:10/2022

For the most recent version and to view this policy in its entirety, please access the Student Health Insurance Requirements and Responsibilities Policy (WFUSM) on our institutional policy site.

Medical Health Requirements and Immunizations Policy

PURPOSE

It is the policy of Atrium Health Wake Forest Baptist (AHWFB) to adhere to state and federal guidelines to protect all personnel, patients, and visitors from communicable disease infection and exposure. This policy outlines the applicable health matriculation requirements for Students as provided in the Communicable Diseases, Employee Health Services and Infectious Disease Prevention Policy (SE Region) policies and as required by North Carolina Immunization Administration Code 10A NCAC 41A.0401 Dosage and Age Requirements for Immunization, effective January 9, 2018.

SCOPE

All Students of the Wake Forest University School of Medicine and the Wake Forest University Graduate School of Arts and Sciences-Biomedical Sciences ("School of Medicine") educational programs are responsible for complying with this policy. Unclassified students and Distance Education program students will adhere to the AHWFB contingent workforce requirements for on-boarding and are not included in the scope and requirements of this policy with the following exception:

Upon registration for a semester with an on-campus course load of more than four (4) day-time credit hours, an Unclassified Student or Distance Education Program Student must provide documentation of immunizations required by North Carolina to Employee Health.

DEFINITIONS

School of Medicine: Jointly refers to all degree-granting programs of the Wake Forest School of Medicine, including the Academic Nursing Department, the Physician Assistant (PA) Program, the Undergraduate Medical Education (MD) Program, and the Wake Forest University Graduate School of Arts and Sciences-Biomedical Sciences.

Student: Degree-seeking Student who matriculates into an on-campus curricular program of the School.

Unclassified Student: A non-degree-seeking student.

Distance Education program: A formal educational process in which the majority of the instruction (interaction between

students and instructors and among students) in a course occurs when students and instructors are not in the same place. Instruction may be synchronous or asynchronous. A distance education course may use the internet; one-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices; audio conferencing; or video cassettes, DVD's, and CD-ROMs if used as part of the distance learning course or program.

Program Manager of applicable program as follows:

- Academic Nursing Department: Department Chair
- Graduate School of Arts & Sciences- Biomedical Sciences Programs: Dean, Graduate School of Arts & Sciences- Biomedical Sciences Programs
- Physician Assistant (PA) Program: Program Director
- Undergraduate Medical Education: Senior Associate Dean for MD Program (MD) Program: Academic Affairs

Medical Professional: For the purposes of this policy, a healthcare provider who holds one of the following medical degrees: Doctor of Medicine (MD); Doctor of Osteopathic Medicine (DO); Physician Assistant (PA); Nurse Practitioner (NP).

Matriculation: The first day students arrive on campus for orientation.

POLICY

Requirements:

All Students must submit documentation of the following by deadlines established by applicable program prior to matriculation:

MATRICULATION REQUIREMENTS *Effective beginning with Academic Year 2021-2022* In the absence of an approved exemption, failure to submit sufficient documentation will prevent matriculation.	
Requirement	**Submit documentation of the following:**
Respiratory (N95) Fit Testing form	For Students in clinical programs: Complete only the applicable sections of the form per instructions provided. Respiratory (N95) Fit testing will be performed during matriculation.

Tuberculosis (TB) Baseline TB Testing	One of the following is required:
	• QuantiFERON-TB Gold or T-SPOT.TB blood test (IGRA tests; lab report required) (*the most recent test will be dated no earlier than 1 year prior to matriculation date*) **OR**
	• 2 consecutive annual tests (*the most recent test will be dated no earlier than 1 year prior to matriculation date*) **OR**
	• 2-step TB skin test (Administered 1-3 weeks apart) (*the most recent test will be dated no earlier than 1 year prior to matriculation date*) **OR**
	• If history of positive results, submit the following:
	    ○ A chest x-ray stating no active TB (x-ray report required) **AND**
	    ○ Proof of past positive testing (plus any treatment, if implemented) **AND**
	    ○ A Symptom-Free TB questionnaire (*the most recent would be dated no earlier than 1 year prior to matriculation date*)

Measles, Mumps & Rubella (MMR)	One of the following is required: • 2 vaccinations of MMR at least 28 days apart. The first dose must be on or after the first birthday. **OR** The following combination: • 2 doses of Measles vaccine (at least 28 days apart). The first dose must be on or after the first birthday. **AND** • 2 doses of Mumps vaccine (at least 28 days apart) the first dose must be on or after the first birthday. **AND** • 1 dose of Rubella on or after the first birthday. **OR** • Positive antibody titer (lab report or physician verification of results required) *NOTE*: • If your series is in process, submit where you are in the series, and new alerts will be created for you to complete the series. • If your titer was negative or equivocal, submit your negative or equivocal titer.

Tetanus/ diphtheria toxoid (DT/DTaP/DTP /Td)	The following are required: • All students must submit documentation of 3 doses* of a tetanus/diphtheria toxoid containing and one must be a Tdap. Tdap vaccination within the past 10 years prior to the matriculation date. If Tdap is more than 10 years old, a Td (Tetanus/Diphtheria Toxoid) within the past 10 years is acceptable. *(Individuals entering college or university for the first time before July 1, 2008 need only provide proof of Tdap vaccination within the past 10 years prior to the matriculation date. If Tdap is more than 10 years old, a Td (Tetanus/Diphtheria Toxoid) within 10 years is acceptable.)
Hepatitis B	Both of the following are required: A completed full series of an approved Hepatitis B vaccine (3 doses of Energix-B or Recombivax-B or 2 doses of HepB-CpG/Heplisav-B) **AND** • A quantitative Hepatitis B Surface antibody titer of >/ 10 mIU/ml (lab report or physician verification of results required) *NOTE*: • If your series is in process, submit where you are in the series, and new alerts will be created for you to complete the series. • If your titer was < 10 mIU/ml, new alerts will be created for you to receive 1 additional booster dose with a repeat antibody titer 1-2 months later. If the repeat titer is < 10 mIU/ml you will be required to complete the remainder of the series and obtain a final titer 1-2 months after completion of the vaccine series. If this is the case, additional doses of the vaccine of the series will be allowed to be completed after matriculation
Varicella (Chicken Pox)	One of the following is required: • 2 vaccinations (on or after the first birthday and at least 28 days apart) **OR** • Positive antibody titer (lab report or physician verification of results required) *NOTE*: • If your series is in process, submit where you are in the series, and new alerts will be created for you to complete the series. • If your titer was negative or equivocal, submit your negative or equivocal titer Documentation of having had varicella (chicken pox) is NOT sufficient.
Influenza Immunization	For matriculation, influenza immunization is required ONLY for Students who matriculate during the influenza season. The influenza season is generally noted as October 1 – March 31, or as determined by the WFBH Influenza Immunization Task Force.

The following will be required during the Student's enrollment at the School upon renewal notifications. AHWFB Teammate Health will monitor continuing/renewal requirements to ensure compliance.

CONTINUING/RENEWAL REQUIREMENTS	
Respiratory (N95) Fit Testing	Required annually for Students in clinical settings.
Tetanus	Updated tetanus is required at 10-year intervals.
Tuberculosis (TB) Testing	One of the following is required annually for Students in clinical settings, with face-to-face patient contact and/or non-human primate contact, if Employee Health determines the prevalence of TB meets OSHA requirements for universal TB testing: • TB test **OR** • QuantiFERON Gold, IGRA, or T-Spot blood test **OR** • If history of **positive** results, submit a completed TB questionnaire *NOTE:* • A NEW positive result would require a clear chest x-ray stating no active TB
Influenza Immunization (Seasonal)	• Required annually, in accordance with the ***Infectious Diseases Prevention Policy*** • Influenza season is generally noted as October 1 – March 31, or as determined by the WFBMC Influenza Immunization Task Force

Other additional immunizations and health requirements are dependent upon a Student's travel for field studies, clinical rotation sites, lab assignment, type of animal species and/or the type of agents used during research.

Financial Responsibility

Students are responsible for all costs to **meet matriculation and continuing/renewal requirements unless otherwise noted below**, including those services received at AHWFB Teammate Health.

Students are responsible for:
1. Charges for for-cause drug screening and alcohol testing beyond the initial test and one retest.
2. Charges for services related to non-required electives.

The School is responsible for:
1. Charges for the following continuing/renewal requirements: annual Influenza immunization annual Respiratory (N95) Fit testing, annual TB testing.
2. Charges for an initial drug screening and alcohol testing and one for cause retest.
3. Any screenings required by the curriculum including requirements for field studies, lab assignment, type of animal species and/or the type of agents used during research.

Services obtained outside of AHWFB Teammate Health will be paid by the School up to the amount charged by Employee Health.

Exemptions
- In accordance with the *WFBH Communicable Diseases, Employee Health* and *Infectious Disease Prevention* policies, immunity to the communicable diseases listed on pages 3-7 of this policy is required for all Students. In certain circumstances, a medical or religious exemption for a required immunization may be granted. Requests for exemption must be approved by the AHWFB Teammate Health Medical Director or designee.

Violation of this policy will result in suspension of access to the medical center, associated buildings, research and training spaces, and network access as determined by the appropriate Program Manager.

In accordance with the *WFBH Communicable Diseases, Employee Health* and *Infectious Disease Prevention* policies, Students will not be cleared for coursework until all requirements have been addressed with Employee Health.

The annual College Immunization Report is submitted through the Office of the Registrar of Wake Forest University to the NC Department of Health and Human Services. This report includes a summary of compliance by the matriculants of the School, as prepared by WFBH Employee Health.

For the safety of our patients, Students and workforce, institutional and/or site restrictions may apply to Students who are not considered immune per policy. Students will not be approved for training until all requirements have been addressed with Employee Health.

CROSS REFERENCES

Communicable Diseases, Employee Health Services; Infectious Disease Prevention Policy (SE Region); Student Substance Abuse Policy (WFUSM); Tuberculosis Control Policy (Wake Market)

RESROUCES AND REFERENCE (See PolicyTech)
ATTACHMENTS: None   **REVISION DATES:** 9/2015; 5/2020; 8/2021; 2/2022

Revised 9/2023

For the most recent version and to view this policy in its entirety, please access the Medical Health Requirements and Immunizations Policy (WFUSM) on our institutional policy site.

Exposure to Infectious and Environmental Hazards Policy

The purpose of this policy is to address issues related to:
- The education of Wake Forest University School of Medicine students about methods of prevention.
- The procedures for care and treatment after exposure, including financial responsibility.
- The effects of infectious and environmental disease or disability on medical student learning activities.
- The timing of informing medical students about these policies.

This policy applies to all Wake Forest University School of Medicine Students and students in the Wake Forest University Graduate School of Arts and Sciences – Biomedical Sciences programs.

POLICY GUIDELINES

A. Education about methods of prevention
1. Students receive ongoing education, beginning at their initial orientation prior to any clinical activities, about how to protect themselves and others from exposure to infectious and environmental hazards.
   a. Following first-year orientation, students complete annual on-line training about Blood-borne Pathogen exposure prevention and infection control.
2. Visiting students are contacted via email prior to their rotation to inform them about policies and procedures related to exposure to infectious disease and environmental hazards. The email instructs students to complete an online exposures orientation training module which must be completed prior to arrival.
   a. Following completion of that training, the student provides a code to the rotation coordinator as proof of completion.

B. Procedures for care and treatment after exposure
1. All registered students, including visiting students, shall follow the Blood and Body Fluid Exposure Control Plan and the Infection Control Exposure Policy for Communicable Diseases (Non-Bloodborne). See "Related Policies," below.
2. Exposures at AHWFBMC and Other Winston-Salem Area Facilities
   a. Apply Standard Precautions to all direct and indirect contact with blood, body fluids, secretions, excretions, non-intact skin or mucous membranes.
   b. Call Employee Health at 716-4801, Option #1, 24 hours a day.
   c. If source patient is known HIV positive or you are directed by Employee Health, report to the Atrium Health Wake Forest Baptist Medical Center (AHWFBMC) Emergency Department after hours, weekends and holidays.
   d. Following exposure, students must complete an Occurrence Report located in the Employee Health online portal as appropriate.
   e. Follow-up testing is coordinated by Employee Health if needed.
3. Exposures in Facilities Outside of the Winston-Salem Area (travel time more than one hour to AHWFBMC)
   a. Immediately wash the affected area with soap and water or for eye involvement, flush with clean water.
   b. Follow that specific facility's procedure for exposure.
   c. Call Employee Health at 716-4801, Option #1 to report the exposure. If after hours, follow the voice mail instructions to be connected with someone to assist you.
   d. Following exposure, students must complete an Occurrence Report located in the Employee Health online portal.
   e. Students should follow the policy/protocol of the off-site location (if not an Atrium Health Wake Forest Baptist facility) and provide any lab results to Employee Health for documentation and follow up purposes.
   f. Follow-up testing is coordinated by Employee Health.
4. Post-exposure Evaluation and Management
   a. Notify Employee Health as soon as possible, regardless of the facility where the exposure occurred.
   b. Employee Health or the Emergency Department practitioner determines the type and extent of exposure and coordinates assessment and testing of the source patient for HIV, hepatitis B and hepatitis C, in accordance with applicable North Carolina Communicable Disease Rules.
   c. Baseline testing is obtained on the exposed individual for hepatitis B, hepatitis C, and HIV, if indicated.
   d. Testing of source patient is done with appropriate consent.
   e. Counseling is provided by Employee Health or Emergency Department practitioner - information about the risk of the exposure, risk/benefit of post-exposure prophylaxis (PEP) and follow-up plan.
   f. Follow-up testing is arranged by Employee Health.

C. Effects on Student Learning Activities
1. Students who have infectious and/or environmental exposure are assessed by Employee Health to determine their

ability to return to the workplace for patient care activities.

2. Students who are considered to be at personal risk, or who might be of infectious risk to patients, are restricted from returning to patient care.
    a. The curriculum leaders for each program (or designee) will work with the student and, depending on the phase of the curriculum, the other academic leaders as appropriate, to determine alternate educational activities to replace any missed experience, or to repeat/remediate activities to replace missed educational experiences.
    b. The curriculum leaders for each program (or designee) will also work with Employee Health to determine methods and timing of a student's return to patient care activities.

D. Financial Responsibility
    1. Employee Health will cover any treatment-related expenses for initial testing, evaluation, and treatment for registered students who have an infectious and/or environmental exposure resulting from patient care, at an AHWFB facility. Subsequent treatment after the initial testing, evaluation, and treatment will be managed under the Employee Health process for positive exposures.
    2. For exposures that occur in a facility outside of the Winston-Salem area, Employee Health will cover initial treatment-related expenses incurred at an external medical facility. Employee Health will facilitate coordination of subsequent treatment, if required. Subsequent treatment after the initial testing, evaluation, and treatment will be managed under the Employee Health process for positive exposures.
    3. An Occurrence Report must be completed following the exposure. Employee Health will cover expenses for initial testing, evaluation, and treatment (if it occurred while delivering patient care and process for exposures was followed).

Revised 11/28/2022

For the most recent version and to view this policy in its entirety, please access the Exposure to Infectious and Environmental Hazards Policy (WFUSM) on our institutional policy site.

Effects of Infectious Disease or Disability on Student Learning Activities Policy

This policy describes the approach the Wake Forest School of Medicine and the Wake Forest University Graduate School of Arts and Sciences-Biomedical Sciences will follow to address the effects of infectious and environmental disease or disability on Student learning activities.

This policy applies to all students.

POLICY GUIDELINES

A. The School abides by the Wake Forest Baptist Medical Center policies on *Human Immunodeficiency Virus Infection in Patients or Employees*, N o n - *Bloodborne Communicable Diseases Exposure Plan*, *Emerging Communicable Diseases Policy*, *Reporting Communicable Diseases*, and *Communicable Diseases, Employee Health Services*.

B. The School shall maintain the confidentiality of information regarding communicable and infectious diseases (e.g. COVID-19, HIV testing, HIV status, or AIDS-related conditions) of its Students in accordance with all applicable federal, state and local laws and regulations and in accordance with all policies and procedures of Wake Forest Baptist Medical Center.

C. For specific processes related to students infected with bloodborne pathogens, please refer to Effects of Infectious Disease or Disability on Student Learning Activities Procedures (WFUSM)

Revised: 11/2022.

For the most recent version and to view this policy in its entirety, please access the Effects of Infectious Disease or Disability on Student Learning Activities Policy (WFUSM) on our institutional policy site.

Student Education Records Policy

PURPOSE

The purpose of this policy is to detail the rights of students under the Family Educational Rights and Privacy Act (FERPA).

SCOPE

This policy applies to Education Records of Eligible Students of the Wake Forest University School of Medicine (School of Medicine).

DEFINITIONS/ABBREVIATIONS

A. **Eligible Student:** A student who is 18 years of age or older or who attends or has attended an education program of the School of Medicine.

B. **Education Record:** An Education Record is any record (in handwriting, print, tapes, film, computer, e-mail, text message, or other medium), which contains information that is personally identifiable to an Eligible Student, and is maintained by the School of Medicine or by a party or organization on behalf of the school.

C. **Legitimate Educational Interest:** A school official is determined to have legitimate educational interest if the information requested is necessary for that official to (a) perform appropriate tasks that are specified in his/her position description or by a contract agreement; (b) perform a task related to an Eligible Student's education; (c) perform a task related to the discipline of an Eligible Student; Although a person has been designated as a "school official", he or she does not have inherent right to any and all Education Record information. The school official must demonstrate to the records keeper a legitimate education interest (as opposed to personal or private interest), and such determination must be made on a case-by-case basis." (AACRAO FERPA Guide).

D. **School Official:** A person employed by or on behalf of the School of Medicine in an administrative, supervisory, academic, research, or support staff position (including law enforcement unit personnel and health staff); or a student serving on an official committee, such as a disciplinary or grievance committee. A School official also may include a contractor outside of the School of Medicine or Atrium Health Wake Forest Baptist (AHWFB) who performs an institutional service or function for which the School of Medicine would otherwise use its own employees and who is under the direct control of the School of Medicine with respect to the use and maintenance of personally identifiable information from Education Records.

Policy

A. Rights afforded to eligible students include:

1. The right to inspect and review the Eligible Student's Education Records within 45 days after the day the School of Medicine receives a request for access, as set forth under the Procedures.

2. The right to request an amendment to the Eligible Student's Education Record that the Eligible Student believes is inaccurate, misleading, or otherwise in violation of the Eligible Student's privacy rights under FERPA.

3. The right to provide written consent before the School of Medicine discloses personally identifiable information from the Eligible Student's Education Records, except to the extent that FERPA authorizes disclosure without consent.

4. The right to file a complaint with the U.S. Department of Education concerning alleged failures by the School of Medicine to comply with the requirements of FERPA. The name and address of the office that administers FERPA is: Family Policy Compliance Office
   U.S. Department of Education
   400 Maryland Avenue, SW
   Washington, DC 20202-8520

B. Directory Information

1. The following information concerning Eligible Students is considered by the School of Medicine to be directory information and may be disclosed without an Eligible Student's consent, unless the Eligible Student indicates in writing and submitted to the Registrar that any or all of the items are not to be released:
   a) Name;
   b) Address;
   c) Telephone number;
   d) Electronic mail address;
   e) Date and place of birth;
   f) Major field of study;
   g) Enrollment status;
   h) Dates of attendance;
   i) Degrees and/or awards received at the School;
   j) Participation in officially recognized activities;
   k) The most recent previous educational agency or institution attended by the student; and
   l) Other similar information, such as a photograph.

C. Records unavailable to students are:
   1. The financial statements and tax returns of the Eligible Student's parents.
   2. Confidential letters of recommendation which were placed in the student's educational record prior to January 1, 1975, if such letters or statements are not used for purposes other than those for which they are specifically intended.
   3. Confidential recommendations executed on or after January 1, 1975, for which the student may have chosen to waive their access rights

D. There are also certain exceptions to the definition of an education record. These exceptions include:
   1. Records of institutional, supervisory, and administrative personnel and educational personnel ancillary thereto which are in the sole possession of the maker thereof, and which are not accessible or revealed to any other person except a substitute.
   2. Law enforcement records which are unavailable to persons other than law enforcement officials of the same jurisdiction.
   3. Records of the institution which contain only information relating to a person after that person is no longer a student at the institution. For example, information gathered and maintained on the accomplishments of alumni.
   4. Employment records which are maintained in Human Resources for staff and former staff as required by AHWFB policies and government record-keeping regulations. This applies to both electronic and paper employment records.
   5. Treatment records which include medical records held by health plans and health care providers https://www.hhs.gov/hipaa/index.html

E. School Officials
   1. An Eligible Student's Education Record, or any component thereof, may be disclosed by the record custodian without the written consent of the Eligible Student when the disclosure is:
      a) To school officials who have a legitimate education interest in the records. The determination as to whether or not a legitimate educational interest exists will be made by the custodian of the records on a case by case basis. When the custodian has any questions regarding the request, the custodian should withhold disclosure unless the custodian obtains the written consent of the Eligible Student, or the concurrence of a supervisor or other appropriate office that the record may be released.
      b) To officials of another school, upon request, in which an Eligible Student seeks or intends to enroll. The Eligible Student shall receive notification of the disclosure unless the Eligible Student initiated the disclosure.
      c) To authorized representatives of the Comptroller General of the United States, the Secretary of the US Department of Education, authorized representatives of the Attorney General for law enforcement purposes (including investigation or enforcement of federal legal requirements of federally supported education programs), or state and local educational authorities, subject to the conditions set forth in 34 CFR 99.35.*
      d) To school officials of lending institutions, in connection with financial aid for which the Eligible Student has applied or which the Eligible Student has received, if the information is necessary for such purposes as to:
         E. Determine eligibility of aid;
         F. Determine the amount of aid
         G. Determine the conditions for the aid; or
         H. Enforce the terms and conditions of the aid.
      e) To State and local officials or authorities to whom such information is specifically allowed to be reported or disclosed pursuant to the statue statute adopted prior to November 19, 1974, if the allowed reporting or disclosure concerns the juvenile justice system and system's ability to effectively serve Records Maintained by the School the Eligible Student whose records are released; or information that is allowed to be reported pursuant to the state statute adopted after November 19, 1974, which concerns the juvenile justice system and the system's ability to effectively serve, prior to adjudication, the Eligible Student whose records are released, and the officials and authorities to whom such information is disclosed certify in writing to the School of Medicine that that information will not be disclosed to any other party except as provided under State law with the prior written consent of the Eligible Student.
      f) To organizations conducting studies for, or on behalf of educational agencies or institutions for the purpose of developing, validating or administering predictive tests, administering student aid programs and improving instructions, if such studies are conducted in such a manner as will not permit the personal identification of Eligible Students and their parents by persons other than representatives of such organizations and such information will be destroyed when no longer needed for the purpose for which it is conducted.
      g) To accrediting organizations in order to carry out their accrediting functions.
      h) To parents or legal guardians of a dependent Eligible Student, as defined by the Internal Revenue Code, and with the consent of the Eligible Student under School of Medicine policy. Although release of Education Records to the parent(s) of a dependent Eligible Student is permissible under FERPA, it is the policy of the School of Medicine to require a release from the dependent Eligible Student prior to disclosure to a parent. The parent or

legal guardian must provide a copy of their most recent federal income tax return establishing the Eligible Student's dependency. In cases of divorced parents, disclosure may be to either parent, unless the School of Medicine has been provided with evidence that there is a court order, statue statute or legally binding document relating to such matters as divorce, separation or custody that would prohibit such disclosure.

i) To appropriate persons if the knowledge of such information is necessary to protect the health or safety of the Eligible Student or others in connection with an emergency.

j) To comply with a judicial order or lawfully issued subpoena, provided the School of Medicine makes a reasonable effort to notify the Eligible Student of the order or subpoena in advance of compliance. Notification may be prohibited if the School of Medicine receives a federal grand jury subpoena or any other subpoena which states that the Eligible Student should not be notified. The Legal Department shall be consulted prior to release of the record.

k) To an alleged victim of any crime of violence, as that term is defined in 18 USC 16*, or a non-forcible sex offense, the final results of any disciplinary proceeding conducted by the School of Medicine against the alleged perpetrator of that crime or offense with respect to that crime or offense. The Legal Department shall be consulted prior to release of the record.

l) To a parent or legal guardian of an Eligible Student under the age of 21, information about a violation of any federal, state or local law, or any rule or policy of the School of Medicine governing the use or possession of alcohol or a controlled substance if the School of Medicine determines that the Eligible Student has committed a disciplinary violation with respect to such use.

m) To Veterans Administration Officials pursuant to 38 USC 3690(c)*

n) If the School of Medicine initiates legal action against a parent or Eligible Student, or if a parent or Eligible Student initiates legal action against the School of Medicine, the School of Medicine may disclose to the court, without a court order or subpoena, the Education Records of the Eligible Student that are relevant for the School to proceed with the legal action as plaintiff or defend itself in such legal action.

o) The School of Medicine may also disclose "directory information" without the written consent of the Eligible Student unless the Eligible Student has restricted the disclosure of such information in writing. The Student Record's Office shall be consulted prior to the release of directory information to determine whether an Eligible Student has placed a restriction upon the disclosure of such information.

*Please consult Wake Forest Legal Department for information about this code.
Questions regarding FERPA should be directed to the Registrar or the Legal Department.

PROCEDURE / GUIDELINE

A. The School of Medicine is committed to complying with the Family Educational Rights and Privacy Act (FERPA). These procedures govern access to Education Records and outline the procedures students may follow to obtain or restrict access to their record. These procedures also outline the procedures faculty and staff may follow to obtain access to a student record.

B. The Office of Student Records is responsible for overseeing compliance with these procedures. These procedures apply to the records of students who are both admitted and enrolled or who have previously attended the School of Medicine and the Graduate School of Arts and Science – Biomedical Sciences. The rights are effective upon matriculation. They do not apply to applications of persons who were not admitted.

C. Procedures when a student or former student requests access to or copies of their education record:

1. A student should submit a written request identifying the record(s) the student wishes to inspect to the registrar or other appropriate official of the program in which the student is enrolled. The registrar or program official will arrange for access and notify the student of the time and place where the records may be inspected. If the records are not maintained by the registrar or program official to whom the request was submitted, that individual will advise the student of the correct official to whom the request should be addressed.

2. The student/former student or their legal representative must submit the Student Request to Access the Education Record form to the Office of Student Records or other appropriate official of the program in which the student is enrolled that identifies the record(s) they wish to inspect.

Record Type	Location	Custodian
Financial Aid Records – All programs	Office of Financial Aid – Bowman Gray Center for Medical Education	Financial Aid Officer
Student records relating to the learning environment, professionalism, or mistreatment – All programs	Office of Education Institutional Effectiveness and Compliance – Bowman Gray Center for Medical Education	Learning Environment Liaison

Disability information disclosed by a Student seeking accommodations – All Programs	Center for Learning Access and Student Success Wake Forest University 118 Reynolda Hall	Director of the Center for Learning Access and Student Success
Student Immunization Records	575 N. Patterson Avenue, Suite 148 – Biotech Place	Student and Teammate Health
Undergraduate Medical Education (MD) Program		
Admissions Records	Office of Enrollment Services – 1st floor Bowman Gray Center for Medical Education	Enrollment Services Systems Administrator
Student records after matriculation, transcripts, final grades, directory information, disciplinary records	Office of Enrollment Services – Bowman Gray Center for Medical Education	Registrar
Student test scores; course grades; Year 3 Shelf Exams (NBME); USMLE; CAS; class rankings	Office of Academic Affairs Bowman Gray Center for Medical Education	Director of UGME Evaluations
Approved disability accommodations letter(s)	Office of Academic Affairs – Bowman Gray Center for Medical Education	Program Liaison for Disability Accommodations
Physician Assistant (PA) Program:		
Admissions Records	5th floor, 525@ Vine	Student Admissions Administrator
Student records after matriculation, transcripts, final grades, directory information, disciplinary records	5th floor, 525@ Vine	PA Studies Registrar
Student test scores, course grades, class rankings	5th floor, 525@ Vine	PA Studies Registrar
Approved disability accommodations letter(s)	5th floor, 525@ Vine	Program Liaison for Disability Accommodations
Graduate School – Biomedical Sciences Programs:		
Admissions Records	Office of Enrollment Services – Bowman Gray Center for Medical Education	Enrollment Services Coordinator – Graduate Admissions
Student records after matriculation, transcripts, final grades, directory information, disciplinary findings	Office of Enrollment Services – 1st floor Bowman Gray Center for Medical Education	Registrar
Student test scores, course grades	Office of applicable course director	Course Director
Approved disability accommodations letter(s)	1st floor, 525@Vine	Curriculum and Outcomes Manager
Academic Nursing Program		
Admission Records	2nd floor, 525@Vine	Administrative Manager
Student records after matriculation, transcripts, final grades, directory information, disciplinary records	Office of Enrollment Services – Bowman Gray Center for Medical Education	Registrar
Student test scores, course grades	2nd floor, 525@Vine	Program Director
Approved disability accommodations letter(s)	2nd floor, 525@Vine	Program Liaison for Disability Accommodations

3. The request will be date stamped by the Office of Student Records.
4. The Office of Student Records staff will review the requested record to redact any information that references other student names or information or that may contain privileged information.
5. The Student Records office or program official will, within 45 calendar days, notify the student of the time and place where the record may be reviewed.
6. The student must bring their student identification badge. Alumni may present government-issued photo identification.

7. The student must review the record in the presence of a Student Records Office staff member.
8. If the student is unable to view the record in person due to a valid reason (including health concerns, distance, work hours, etc.), then the record may be viewed virtually.

D. Procedures for letters of recommendation information release:
1. Students may request that faculty or staff write a letter of recommendation on their behalf. This request requires that the student complete a Letter of Recommendation Consent form. This form outlines the definition of directory and non-directory information release to a third party. Letters that contain directory information and comments regarding personal observation do not require the student's written consent.
2. Non-directory information such as disciplinary status, grade point average, test scores, grades, race, ethnicity or any information from a student's education record that is not considered "directory information" can be included in a letter of recommendation ONLY with a student's written consent.
3. The student completes the form and returns to the faculty or staff member who will write the letter of recommendation.
4. Student will elect to waive or not waive his/her right to review the letter of recommendation.
5. By signing the form the student is voluntarily authorizing the School of Medicine to disclose specified information as indicated on the request form to the individual(s) designated to provide the letter of recommendation.
6. The faculty or staff member submits the consent form to the Office of Student Records.
7. The release will be date stamped by the Office of Student Records.
8. The specified education record information listed on the consent form will be disclosed to the faculty or staff member for the sole purpose of writing the letter of recommendation for the student.
9. NOTE: The student may revoke this consent at any time by contacting the Office of Student Records in writing. The decision to revoke consent will not apply to any letters of recommendation completed and sent prior to the effective date of the revocation.
E. Procedures when a school official outside of the offices of Student Records, Academic Affairs and Student Affairs requests to view the record:
1. The school official must submit the **School Official Request to Review Education Records** form that identifies the record(s) they wish to inspect.
2. The request will be date stamped by the Office of Student Records.
3. Upon approval of the registrar or dean the requesting official will be granted access to the student record.
4. The school official must bring their employee identification badge.
5. The school official must review the record within the Office of Enrollment Services, Office of Education Institutional Effectiveness and Compliance (OEIEC), or the Office of Educational Excellence (OEE).
6. If the record contains information about more than one student, the school official may only review that portion relating to the specific student record being inspected.

CROSS REFERENCES: Not Applicable
RESOURCES AND REFERENCES: LCME Element 11.5, LCME Element 11.6
ATTACHMENTS: Not Applicable
REVISION DATES: 10/17/2016; 11/01/2017; 5/15/2018; 4/2021; 4/2023

Version 10/2023

For the most recent version and to view this policy in its entirety, please access the Student Education Records Policy (WFUSM) on our institutional policy site.

Information Security Policy

PURPOSE

The purpose of this policy is to protect the confidentiality, integrity, and availability of sensitive data and assets by implementing administrative, technical, and physical information security controls, processes, and best practices. This policy establishes an information security framework to appropriately secure access to Atrium Health information resources and services. Adherence to this policy will help to protect Atrium Health, our patients, and our workforce from information security threats, whether internal or external, deliberate or accidental. This policy complements and supports other institutional policies that protect information assets and resources. This policy is intended to prevent inappropriate use and dissemination of sensitive information, including but not limited to Protected Health Information (PHI), and to comply with the requirements of applicable state and federal laws and regulations.

SCOPE

This document applies to Advocate Health Inc. entities in the Southeast Region. This policy applies to all teammates at Atrium Health and its subsidiaries, and applies to all information resources owned or controlled by Atrium Health whether verbal, printed, or electronic, and whether individually controlled, shared, stand alone, or network-connected.

POLICY GUIDELINES

A. Enterprise Cybersecurity is responsible for the guidance, direction, and authority for information security activities for Atrium Health. It will develop an Information Security Program to implement any requirements outlined within this and other supplemental policies.

B. Enterprise Cybersecurity will oversee development and ongoing review of cybersecurity policies and standards, promote information security awareness, and monitor the information security program to validate its effectiveness.
    1. Standards and procedures relating to cybersecurity and technology will be periodically reviewed and updated. Updates may supersede previous standards but will remain consistent with the governing principles of this policy.
    2. Enterprise Cybersecurity will have authority to issue revisions and new standards as necessary to reflect changes in the technical environment or the regulatory environment.
    3. Enterprise Cybersecurity will develop and implement policies and standards in accordance to applicable local, state, and federal laws and regulations. This policy is intended to supplement those laws and regulations.
    4. Enterprise Cybersecurity will maintain a series of supplemental policies and standards.

C. Information collected and/or generated shall be maintained in such a manner that access to sensitive information is restricted to authorized individuals with a need-to-know.
    1. The use of sensitive information is for authorized business purposes only.
    2. The handling of sensitive information must be in accordance with Atrium Health's Acceptable Use Policy and other applicable institutional policies.
    3. The release of sensitive information is in compliance with applicable state and federal laws and regulations.

D. Personally-owned computers and electronic devices are not allowed to connect to the enterprise network(s) unless they are authorized by Enterprise Cybersecurity based on approved business needs or are within the limits of policies governing the use of personal electronic devices.

E. Physical and logical security must be maintained throughout the life cycle of sensitive information regardless of:
    1. The media on which sensitive information is stored (paper, computer/electronic, CD/DVD, USB drives, etc.)
    2. The information systems which process sensitive information (personal computers, voice mail systems, etc.)
    3. The methods by which sensitive information is moved (electronic mail, face-to-face conversation, memos, etc.).

F. All new information systems that will store or have access to sensitive information must meet minimum cybersecurity requirements, as determined by this policy and any supplemental policies, standards, or procedures as a condition of purchase.
    1. A periodic audit/review may be required for all computer-related platforms and systems containing sensitive information.

G. Teammates are required to complete cybersecurity training. Teammates must understand and comply with this policy as well as all supplemental cybersecurity policies and standards. The need for adherence to this policy should be continually reinforced by leadership.

H. Access to information systems audit and monitoring tools shall be protected to prevent any possible misuse or compromise.

I. The application, server, and/or system owner is responsible for the cybersecurity of their respective system(s) and must ensure compliance with all departmental policies.

J. Violation or abuse of this policy may be grounds for disciplinary action, up to and including employment or contract termination as well as possible civil and criminal penalties. Violations will be referred to Human Resources, Office of Student Affairs, Faculty Services, Office of Audit and Compliance, or Legal Department as appropriate.

K. Policy exceptions may be requested for all Enterprise Cybersecurity policies and standards where a business need arises. Requests must have a documented requester, risk assessment, policy in conflict, reason/justification, compensating controls (if possible), and approval from the requester's management. Exception approvals are granted by the CISO or appointed designee for a maximum period of one year.

Revised: 5/2023

For the most recent version and to view this policy in its entirety, please access the Information Security Policy (SE Region) on our institutional policy site.

Distance Education Policy

Consistent with the SACSCOC policy on Distance and Correspondence Education, Wake Forest University School of Medicine (WFUSOM) defines Distance Education as "a formal educational process in which the majority of the instruction (interaction between students and instructors and among students) in a course occurs when students and instructors are not in the same place. Instruction may be synchronous or asynchronous. A distance education course may use the internet; one-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices; audio conferencing; or other digital media if used as part of the distance learning course or program." (www.sacscoc.org)

Scope: This policy applies to all Distance Education courses offered by the Wake Forest School of Medicine and Wake Forest University Graduate School of Arts and Sciences-Biomedical Sciences.

Academic Engagement for Students Relating to Financial Aid

1. If a degree seeking student or graduate certificate student fails to login, submit an assignment, or meet another online course deadline, and as a result is more than one week behind in coursework and the student has not contacted the instructor, the WFUSOM Compliance Office will contact the student via their Atrium Health Wake Forest Baptist email, explaining that they have 7 calendar days to login and participate in the course or they will be subject to withdrawal procedures.

2. If the student subsequently fails to login or participate in the course following at the end of the 7 calendar days following the notice from the WFUSOM Compliance Office as explained above, the WFUSOM Compliance Office will notify the student that an administrative withdrawal for lack of activity has begun.

3. If the student plans to continue, the Program Director and the Course Instructor will determine a plan for the student to catch up, with any associated deductions for late work and implications for any missing assignments. The student would be considered active and there would be no financial implications.

4. If the student responds and decides to withdraw, withdrawal procedures will be initiated. The student will be advised the decision is time sensitive and must be made within two business days. If the student does not reply within this time period, the administrative withdrawal procedure will begin immediately.

5. Students should also be familiar with the following other policies related to tuition and financial aid: a. Return of Federal Financial Aid Funds Policy - WFSM b. Refund of Tuitions and Fees Policy - WFSM

Revised: 5/2023
For the most recent version and to view this policy in its entirety, please access the Distance Education Policy (WFUSM) on our institutional policy site.

Please visit the Distance Education Website at
https://school.wakehealth.edu/education-and-training/distance-education

<u>**Leave of Absence Policy**</u>

PURPOSE

Students enrolled in programs of the Wake Forest University School of Medicine (WFUSM) are eligible for a leave of absence that will permit the student to temporarily step away from the curriculum for specified reasons in accordance with the terms of this Policy.

SCOPE

This policy applies to all undergraduate medical education (MD), Academic Nursing, and Physician Assistant (PA) Studies program students at Wake Forest University School of Medicine.

DEFINITIONS

A. **Policy:** A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

B. **WFBH:** Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), High Point Surgery Center, LLC and Premier Surgery Center.

C. **Leave of Absence:** Students are eligible to take a leave of absence if stepping out of the curriculum for the minimum period of time listed below or longer.

Program	Break in the curriculum of:
Academic Nursing	4 weeks
MD	6 weeks
PA Studies	2 weeks

D. **Student:** Any degree-seeking person enrolled in one of the programs that falls within the scope of this Policy in the Wake Forest University School of Medicine.

POLICY GUIDELINES

A. This Policy does not apply to military leaves of absence. Students requesting a military leave of absence should adhere to the Military Leave of Absence Policy.

B. Leaves of Absence Types

1. **Academic Leave of Absence:** A student with academic deficiencies may, under certain circumstances, take an Academic LOA for a specified time, either to bring the student's schedule back into synchrony with the curriculum, or to require or allow specific support activities (e.g., counseling, remedial reading or other background courses, etc.)

   Program-Specific Requirements

   a. **MD Program**
      i. An Academic LOA is available for students retaking or delaying the USMLE Step 1 or Step 2 exams requiring the student to be absent from the curriculum longer than 6 weeks.
      ii. The leave may be used for the pursuit of remedial studies to pass the applicable USMLE Step exams.
      iii. Students in good academic/professionalism standing, as defined in the Student Professionalism and Academic Review Committee Policy, in the MD program who request to participate in an advanced degree program within or outside of WFUSM, or who desire to take time away from the curriculum to participate in a research project, may apply for an Academic LOA.
      iv. A student is not eligible for Academic LOA after submitting their rank list, barring a compelling need.
      v. A student's advanced degree program or research fellowship cannot interfere or occur concurrently with WFUSM's MD curriculum, other than what is permitted during an approved Leave of Absence.

   b. **PA Studies**
      i. In the case of a PA Program-issued deceleration (defined as a student leaving one cohort to join a later cohort), the decelerated student will be eligible for an Academic Leave of Absence during the period of time between when the student transitions between cohorts.

2. **Medical Leave of Absence**

   a. A student with documented health concerns limiting their ability to perform as a student within the program curriculum or to meet the program's Technical Standards may be granted a Medical LOA.

b. The student must submit to the School of Medicine Office of Educational Effectiveness and Compliance (OEIEC) documentation from a treating provider as a part of the application for a Medical Leave of Absence.

c. Student re-entry from a Medical LOA will require documentation from a licensed treating healthcare provider which indicates the student is fit to return to the Program curriculum and can meet the program's Technical Standards.

d. The program will review any provider-recommended restrictions/limitations for the student which would necessitate consideration for referral to Center for Learning, Access, and Student Success (CLASS) for accommodations.

3. **Administrative Leave of Absence**

a. An administrative LOA may be arranged for compelling reasons not covered by the other LOA categories, as determined by the student's Program Director or designee.

4. **Personal Leave of Absence**

a. A Personal LOA enables a student to take time off, in extenuating circumstances, to address issues of a personal nature, such as, but not limited to, the death, disability or serious illness of a family member, or a financial crisis.

b. The student's request for a Personal LOA must explain how the student expects to cope with or address the situation that has resulted in the request for a personal leave.

c. A Personal LOA is granted only to students in good standing (as defined by the student's Program Director or SPARC for MD students) and permits them to continue in the program when they return from leave.

C. **Notice**

1. Students requesting a leave of absence under this policy must submit the request and all supporting documents to the Wake Forest University School of Medicine Office of Education Institutional Effectiveness and Compliance (OEIEC) (oeie@wakehealth.edu) at least 35 calendar days prior to the date they are requesting the leave to begin. Exceptions may be made for unforeseen emergencies and time-sensitive issues.

   ▪ Program Director-initiated Leaves of Absence
   iii. In an emergent or urgent situation in which a student is unable to make a LOA request, the Program Director or designee may initiate LOA procedures with the OEIEC. This LOA can be designated as the appropriate type of leave under the circumstances on behalf of the student. If necessary, the Program Director is also authorized to implement an extension of a LOA.

D. **Duration**

1. The initial request for a LOA length of leave will not extend beyond one year. Program leadership may extend that length due to extenuating circumstances.

2. Return after a leave requires that the student has met all other requirements for progression to the level at which they are returning, whether or not such requirements change during the leave period.

   ▪ In the event of a change of policy, return to WFUSM requires meeting the requirement(s) of the new policy.
   ▪ In addition, return to the curriculum is subject to the availability of space in the appropriate program.
   ▪ Students may apply for a leave extension. This extension may not extend the period of leave beyond one (1) year. Program leadership may extend that length due to extenuating circumstances.

E. **During Leave**

1. While a student is on an approved Leave of Absence (LOA), the student will be placed on inactive status and will be neither assessed tuition nor eligible for financial aid from WFUSM. A student who is currently on a LOA is not permitted to attend educational sessions or activities or participate in SOM or program-sponsored extracurricular activities.

2. The student's identification badge, the school-issued laptop computer, and the student's institutional e-mail account may be retained at the discretion of the Program Director or their designee. Access to various institutional software systems/programs may be deactivated during the approved LOA.

3. Any disruption in the continuum of the curriculum may result in the need for repeating some of or the entire curriculum, depending upon the type of leave and the timing and duration of the absence.

   ▪ Students who have been placed on Warning or Probation will return to the same standing upon return from LOA.
   ▪ The curriculum will not be adversely modified to make up for lost time.

   Program Specific Requirements:

   MD Program: Students may be required to demonstrate to the satisfaction of the Vice Dean for Undergraduate Medical Education (or designee) their ability to advance to the next level of the curriculum if absent for longer than six (6) months for medical leave of absence.

4. **Financial Considerations**

a. All programs: Students on an approved LOA are not eligible for federal financial aid, including Federal Direct Loans. In some cases, student loans may not be deferred for the entirety of a leave. Students should contact the Office for Student Financial Aid with any questions regarding how their financial aid status may be impacted.

F. **Return from Leave**
   1. All MD students are required to alert the OEIEC (oeie@wakehealth.edu) at least 30 calendar days prior to their return of their intent to return.
   2. All Academic Nursing students are required to alert the OEIEC at least 14 calendar days prior of their intent to return.
   3. All PA students are required to alert the Compliance Office and the PA Program Registrar at least 5 calendar days prior to their intent to return.
   4. The Compliance Office will communicate the student's intent to return to the Registrar and the student's program.
   5. If a student on LOA fails to inform the school within the applicable time frame as specified above or fails to meet any stipulated conditions of return, they may be withdrawn from WFUSM and would need to apply for re-admission.
   6. Program Specific Considerations
      a. PA Studies: Prior to returning from a LOA, the student is obligated to notify the PA Program Registrar of an expected return date and must submit any documentation required by the PA Program and the School of Medicine.
      b. If applicable, documentation required for a return from a LOA must include verification that the student is fit to return to training and can comply with the current published version of the Program Technical Standards where applicable.

G. Procedures to request a Leave of Absence and a return from a Leave of Absence
   1. Students must refer below about the process involved in requesting a Leave of Absence and in requesting a return from a Leave of Absence.
   2. Students who would like to request a leave of absence must first contact one of the following:
      a. MD Student: Academic Advisor, any Associate or Assistant Dean, Career Advisor or the School of Medicine Compliance Office
      b. PA Student: Advisor, PA Program Registrar, Program Director or the School of Medicine Compliance Office
      c. Academic Nursing Student: Advisor, Program Director, Faculty member, or the School of Medicine Compliance Office
   3. Student will be given the Status Change Form that must be completed and return to the School of Medicine Compliance Office or for PA students to the PA Registrar.
   4. The School of Medicine Compliance Office will alert programs and submit tickets for approved leave of absences.
   5. The School of Medicine Compliance Office will alert programs and submit tickets for return from leave.

REFERENCES

Military Leave of Absence Policy (Wake Market)
Student Disability Accommodations Requests Policy and Procedures (WFUSM)

Revised: 4/2023

For the most recent version and to view this policy in its entirety, please access the Leave of Absence Policy (WFUSM) on our institutional policy site.

Military Leave of Absence

PURPOSE

Students who are members of the United States armed forces may be subject to military duties outside of their control, including being called to active duty, specialized training, or disaster relief efforts with little notice. This policy covers the process of applying for, managing, and returning from a student military leave of absence when called to such duties.

SCOPE

This policy applies to Wake Forest University School of Medicine (WFUSM) and Wake Forest University Graduate School of Arts and Sciences – Biomedical Sciences students who are service members and reservists in the United States Armed Forces, including the National Guard or Reserve.

DEFINITIONS

A. Policy: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

B. WFBH: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), High Point Surgery Center, LLC and Premier Surgery Center.

C. Military Service Leave: a School-approved withdrawal from all in-progress classes, which is necessitated by service, whether voluntary or involuntary, in the United States Armed Forces, including service by a member of the National Guard or Reserve, active duty, active duty for training, or full-time National Guard duty under Federal authority.

POLICY GUIDELINES

A. **Notice**
   1. Students must provide advance written or verbal notice of military service to their program director at least 35 days prior to the date they are requesting the leave to begin.
      a. The notice must include a copy of the military orders or other appropriate documentation.
      b. If military necessity renders it impossible to provide advance notice to the program director, the student may initiate a military service leave by providing notice at the first reasonable opportunity, in writing, personally signed, and with a copy of the military orders attached.
      c. Students who do not submit a timely notification of intent or provide an attestation may not be eligible for military leave of absence or re-enrollment.

B. **Duration**
   1. A student military leave of absence begins with the academic term in which the student reports to active duty and ends with the start of the academic term immediately following the student's release from active duty.
      a. If the release from active duty was less than 30 calendar days from the start of the next term, the student may request an extension of one academic term.
   2. A student military leave of absence may last up to five years.

C. **During Leave**
   1. The student may retain their identification badge, WFUSM-issued laptop computer (if applicable), and institutional email account within the discretion of the program director. Access to various institutional software systems/programs may be deactivated during the approved leave of absence.
   2. The student will have access to advising and assistance offices on campus.
   3. The Office of Education Institutional Effectiveness and Compliance (OEIEC) is the primary contact with the student while on leave.
   4. OEIEC will follow up with the student on a yearly basis to confirm the student is still in active-duty military service.

D. **Re-Enrollment/Return from Leave**
   1. Eligibility
      a. The student is eligible for re-enrollment under this provision if, during the military leave of absence, they performed voluntary or involuntary active-duty service in the United States armed forces, including active duty for training and National Guard or Reserve service under federal authority, and they received a discharge other than dishonorable or bad conduct.

b. The cumulative length of absence and all previous absences for military service (service time only) must not exceed five years.
c. The student may also request a later date of re-enrollment or, if unusual circumstances require it, WFUSM may re-enroll the student at a later date.
d. The student must be seeking re-enrollment to the program that they previously attended or were enrolled in at WFUSM.
   i. The student may re-enroll in the next class or classes in the same program, with the same enrollment status, number of credits, and academic standing as when the student last attended WFUSM.
   ii. Students may be required to attest they are able to meet any required program technical standards in order to resume the program. If the school determines that the student is not prepared to resume the program where he or she left off, the school will make reasonable efforts at no extra cost to the student to enable the student to resume and complete the program.
       ▪ Such reasonable efforts include, but are not limited to, providing a refresher course and allowing the student to retake a pretest, as long as they do not place an undue hardship on the school.
       ▪ If reasonable efforts are unsuccessful or the school determines that there are no reasonable efforts that the school can take, the school may not re-enroll the student.
   iii. If the program to which the student was enrolled is no longer offered, the student may be enrolled to the program that is most similar, unless the student requests or agrees to enrollment in a different program.
       ▪ If the school determines that there are no reasonable efforts that the school can take to prepare the student to resume the program, the school may not re-enroll the student.
2. Notice
   a. To be re-enrolled, the student must give notice (written or verbal) of intent to re-enroll to OEIEC no later than three years after the completion of the period of service.
   b. Any student who, due to military necessity, did not give written or oral notice of service to their program director prior to withdrawal, may, at the time the student seeks re-enrollment, submit documentation that the student served in a branch of the United States Armed Services that necessitated the student's absence from WFUSM.
   c. If the student is recovering from a service-related injury or illness, they must notify OEIEC no later than two years after recovery.
   d. Notice should include documentation (including an official certificate of release or discharge, a copy of duty orders, or other appropriate documentation) to confirm/verify the student's withdrawal was related to service in the uniformed services and that the student is able to resume studies.

E. **Tuition and Fees**
   1. A student re-enrolled from a military leave of absence will be re-enrolled to the same course of study they were in at the time of withdrawal without incurring a re-enrollment fee, unless the student receives a dishonorable or bad conduct discharge or has been sentenced in a court-martial.
   2. For the first academic year in which the student returns, they must be re-enrolled with the same tuition and fees charges the student was or would have been assessed for the academic year when the student left, unless there are sufficient veterans' educational benefits or institutional aid to pay the increased amount of tuition and fees.
      a. For subsequent academic years, the student may be charged the same tuition and fees as other students in the program.

Revised: 8/2022

For the most recent version and to view this policy in its entirety, please access the [Military Leave of Absence Policy (WFUSM)](#) on our institutional policy site.

Atrium Health Wake Forest Baptist Based Policies

Click on the title of the policy you want, to be taken directly to that document

AHWFB Drug Diversion – Prevention, Detection and Response Policy

WFBH Nepotism and Consensual Relationships

WFBMC Medical Student Documentation in the Medical Record

Authorship on Scientific and Scholarly Publications Policy

Research Integrity Policy

WFBMC Data Ownership

Password Security Policy

HIPPA Privacy and Security Sanctions Policy

AHWFB Infectious Disease Prevention Policy

Click here to return to the Table of Contents

AHWFB Drug Diversion – Prevention, Detection and Response Policy

PURPOSE

It is Atrium Health Wake Forest Baptist (AHWFB) is committed to establishing and maintaining a safe and healthy environment for employees, patients and visitors. Drug diversion by healthcare personnel creates a significant patient and staff safety risk. The prevention, detection, and reporting of drug diversion are the responsibility of all AHWFB staff, employees, students and faculty of Wake Forest School of Medicine or Wake Forest University Graduate School of Arts and Sciences-Biomedical Sciences programs (WFSM).

Scope:

This procedure applies to all WFBH employees/WFSM students, who will be referred to collectively as employees, staff or users throughout this policy.

POLICY GUIDELINES

AHWFB is committed to establishing and maintaining a safe and healthy environment for employees, students, patients and visitors. Drug diversion by healthcare personnel creates an unsafe work environment for patients and employees. All AHWFB staff are responsible for prevention, detection, and reporting actual or alleged events of possible drug diversion. All AHWFB staff are required to comply with state and federal laws and regulations regarding medication handling and security as well as all AHWFB policies.

Revised: 4/2022

For the most recent version and to view this policy in its entirety, please access the Drug Diversion - Prevention Detection and Response on our institutional policy site.

Nepotism and Consensual Relationships Policy

PURPOSE

The purpose of this policy is to ensure that relationships in the workplace do not raise the perception of favoritism or bias or raise a concern regarding ethics or conflicts of interest. This policy clearly defines standards for close relatives or those in consensual relationships working for Wake Forest Baptist Health in the same or different departments. Additionally, this policy outlines guidelines for supervisory relationships (real or perceived) and research relationships.

Scope:

This policy applies to WFBH Employees and Faculty.

Revised 3/2021

For the most recent version and to view this policy in its entirety, please access the Nepotism and Consensual Relationships Policy (Wake Market) on our institutional policy site.

Medical Student Documentation in the Medical Record

It is the policy of Atrium Health Wake Forest Baptist to allow medical students to document in the medical record. Any contribution and participation of a student to the performance of a billable Evaluation and Management (E&M) service must be performed in the physical presence of a teaching physician or physical presence of a resident. The teaching physician must perform (or re-perform) the physical exam and/or medical decision-making activities of the E/M service being billed but may **verify** any student documentation in the medical record, rather than re-documenting this work.

This policy applies to all WFBH employees, faculty and staff are responsible for complying with this policy.

Revised 9/2022

For the most recent version and to view this policy in its entirety, please access the Medical Student Documentation in the Medical Record Policy on our institutional policy site.

Authorship on Scientific and Scholarly Publications Policy

It is the policy of Atrium Health, Wake Forest University Health Sciences (WFUHS), and their respective affiliated entities to ensure scholarly integrity and responsible conduct in the reporting of research results.

The purpose of this policy is to provide the principles and criteria used to determine appropriate authorship and the process to follow in resolving authorship disputes.

This policy applies to faculty, staff, students, trainees and other individuals engaged in research activities conducted at Atrium Health, Wake Forest University Health Sciences, and their respective affiliated entities.

Revised 9/2023

For the most recent version and to view this policy in its entirety, please access the Authorship on Scientific and Scholarly Publications Policy (Greater Charlotte Market, Navicent Health, Wake Forest) on our institutional policy site.

Research Integrity Policy

It is the policy of Atrium Health and AHWFB (each as defined below, and collectively referred to herein as the "Institution") to inquire into and, if necessary, to investigate and resolve in a timely and fair manner all instances of alleged research misconduct. In carrying out its research mission, all persons engaged in research are expected to adhere to the highest standards of research integrity to protect the accuracy and reliability of the research record and published results.

The purpose of this policy is to promote the Institution's compliance with federal regulations and best practices for dealing with research misconduct and to protect the integrity and reputation of the Institution and its scholars from false or unproven allegations of research misconduct.

This policy applies to all research and scholarship activities conducted within the Institution, irrespective of the funding source, if any. Individuals accused of research misconduct are presumed innocent of any allegations until the contrary has been established by a final decision reached under this policy.

This policy does not address, and specifically excludes, fiscal improprieties and issues concerning the ethical treatment of human or animal subjects, authorship disputes, sexual harassment or discrimination, general matters not within the definition of scientific misconduct, and criminal matters.

In addition, because of the inherent unfairness and the difficulties presented by any attempt to assess stale evidence, allegations of misconduct based on events that occurred six or more years ago will not be subject to review under this policy unless clear and convincing mitigating circumstances are present, as determined by the Research Integrity Officer.

Revised: 5/2023

For the most recent version and to view this policy in its entirety, please access the Research Integrity Policy on our institutional policy site.

Data Ownership Policy

The purpose of this policy is to describe the basis of data ownership and the standards for the collection and retention of data, in addition to requirements for data access.

This policy applies to faculty, staff, students, trainees and other individuals engaged in scientific and scholarly activities at Atrium Health, Wake Forest University Health Sciences (WFUHS), and their respective affiliated entities and representatives.

Revised 5/2023

For the most recent version and to view this policy in its entirety, please access the Data Ownership Policy on our institutional policy site.

Password Security Policy

Purpose

The purpose of this policy is to protect the confidentiality, integrity, and availability of WFBH data and assets by consistently utilizing and properly safeguarding strong passwords. Passwords are an important aspect of computer security. They are the front line of protection for user accounts. A poorly chosen password may result in the compromise of the entire WFBH corporate network. As such, all WFBH employees (including contractors and vendors with access to WFBH systems) are responsible for taking the appropriate steps, as outlined below, to select and secure their passwords.

Scope:

This policy applies to any and all personnel who have any form of computer account requiring a password on the WFBH

network including but not limited to a domain account and e-mail account. The requirements in this policy are intended to establish a standard for creation of strong passwords, the protection of those passwords, and the frequency of change.

Policy Guidelines

General Requirements

1. When granting access for a new user/account, system administrators will establish a unique user ID and unique, temporary password/phrase. The user password will be conveyed to the user in a secure manner. When the user logs on for the first time, the user will be required to change their initial password/phrase to something that meets the requirements of the Password Security Standard.
2. Passwords shall be prohibited from being displayed when entered
3. Users shall acknowledge receipt of passwords when possible
4. All system-level passwords (e.g. root, enable, Windows admin, application administration accounts, etc.) and all user-level passwords (e.g. e-mail, web, desktop computer, etc.) must be changed in accordance with the Password Security Standard.
5. Medical devices must adhere to the requirements set forth in the Medical Device Password Security Standard.
6. A user account that has system-level privileges granted through group memberships or systems must have a password that is unique from all other accounts held by that user.
7. Where the Simple Network Management Protocol (SNMP) is used to access systems, the community strings must be defined as something other than the standard defaults of "public," "private" and "system".
8. The identity of the individual shall be verified before performing password resets
9. Network devices, such as routers and switches, will have the default passwords changed.
10. Passwords must not be inserted into email messages or other forms of electronic communication such as messaging.

Revised: 5/2023

For the most recent version and to view this policy in its entirety, please access the [Password Security Policy (Wake Market)](#) on our institutional policy site.

HIPAA Privacy and Security Sanctions Policy

Policy Statement

Workforce Members are obligated to safeguard the privacy and security of Confidential Information, including but not limited to Protected Health Information (PHI) as required by HIPAA, as well as to comply with all related Atrium Health policies and state privacy laws (collectively, the "Confidentiality Standards"). When Workforce Members fail to comply with the Confidentiality Standards, Atrium Health will apply appropriate and consistent Sanctions in the form of corrective actions in accordance with this policy.

This policy provides guidance in the administration of corrective actions and should be used in conjunction with any additional Human Resources' disciplinary policies. Medical staff members, students, independent contractors, and vendors will be subject to disciplinary action in accordance with the applicable Medical Staff Bylaws, codes of conduct, or as permitted under the executed contract.

Applicability

This policy applies to Atrium Health Covered Entities, Affiliated Covered Entities, their workforce, and their Business Associates.

Policy Highlights

· Workforce Members who violate the Confidentiality Standard will be subject to corrective action.

· All corrective actions will be applied based on the facts and circumstances of the violation.

· Mitigating factors may be considered when determining the corrective action for violation of the Confidentiality Standard.

Revised 12/2022

For the most recent version and to view this policy in its entirety, please access the [PR.PHI 145.13 HIPAA Privacy and Security Sanctions](#) on our institutional policy site.

AHWFB Infectious Disease Prevention Policy

Atrium Health's teammate vaccine requirement applies to all teammates including remote workers, physicians, medical residents, faculty, fellows, learners, and members of the medical staff. Also, volunteers, contractors, visiting students, trainees, and teammates contracted through agencies, vendors, or other temporary workers are required to meet vaccine requirements or show proof of compliance before entering Atrium Health sites.

Vaccination against infectious diseases is part of Atrium Health's Infectious Diseases Prevention program and is considered necessary for the health and safety of patients, teammates, and the communities we serve. A fully vaccinated workforce is consistent with Atrium Health's commitment to improve health, elevate hope, and advance healing for all. This policy complies with all applicable federal, state, and local rules and regulations, and is based on guidance from the Centers of Disease Control and Prevention (CDC), Centers for Medicare and Medicaid Services (CMS), the Equal Employment Opportunity Commission (EEOC), as well as that of local health authorities, as applicable.

Annual Influenza and COVID-19 requirements:

➢ Teammates are required to receive the annual influenza vaccine (Flu shot) and a minimum of completing the primary series of FDA approved COVID-19 vaccine, within the published time frames.
  o For the COVID-19 requirement, "vaccinated" means the teammate has received two doses of an MRNA COVID vaccine, a single dose of the Johnson & Johnson vaccine, or a World Health Organization (WHO) approved vaccine reviewed and approved by Teammate Health.
  o For the COVID-19 requirement, newly hired teammates, prior to orientation, are required to:
    o have at least one dose of a two-dose series and receive the second dose within the appropriate time period as indicated by the manufacture;
    o be vaccinated and submit proof of vaccination; or
    o request an exemption as part of the health assessment with Teammate Health.

Start dates may be delayed to comply with these requirements.
  o For the Annual Influenza requirement, during the respiratory viral (flu) season, as announced by Teammate Health, all teammates are required to receive the flu shot or request an exemption.
  o Teammates taking approved leave of absence must be compliant with this policy before returning to work. Any offer of a new role after a leave, including temporary assignments, PRN or transfers are contingent on compliance with this policy
  o Proof of vaccination submitted to Teammate Health must include the record of vaccine, date administered, lot number, location where the vaccine was administered and the name of the vaccine administrator.
  o Teammate Health is responsible for tracking and securely documenting the vaccination status of teammate-required vaccinations, including booster doses, as recommended by the CDC.

➢ **Medical or Religious Exemptions from influenza or COVID vaccinations**
  o Teammates may obtain approval for an exemption based on a documented medical or religious belief that prevents them from receiving the vaccine. To receive an approved exemption, Teammates must follow the exemption request process and submit a request with documentation within the published time frame. All exemption requests will be reviewed by a committee that will approve or deny the request. The outcome of the review will be timely communicated to the teammate.
  o Teammates who obtain a medical or religious exemption from a vaccination will also be required to complete certain educational training to further reinforce behaviors that promote the health and safety of our coworkers and patients.
  o Teammates who do not receive the required vaccinations due to an approved medical or religious exemption are required to follow additional infection prevention measures (such as masking and social distancing) when at Atrium Health sites during respiratory viral season or during times of high rates of community cases as directed by Teammate Health.
  o Teammates that do not follow this policy can receive counseling for failing to receive required vaccinations in accordance with the applicable performance management policy, up to and including end of employment.
  o Alternate criteria for exemption requests may apply to contractors, visiting students, trainees, teammates contracted through agencies, vendors, non-employed medical staff, or other temporary workers and relevant guidance will be provided to those groups directly.

➢ **Additional Vaccine Requirements include documentation or receipt of:**
  o The Hepatitis B series
  o Measles, Mumps, and Rubella (MMR)
  o Tetanus-diphtheria booster and Tetanus diphtheria and pertussis (TDP)
  o Varicella (chicken pox) vaccine or serology showing varicella immunity.

When a Teammate comes in Contact with an Infectious Disease

Atrium Health makes every effort to provide a safe and healthy environment for all teammates. Report any incident of contact with an infectious disease to Teammate Health for care and investigation. Teammate Health follows guidelines approved by Infection Prevention.

- o Sometimes, for the safety of the teammate and others, the teammate will be removed from work as a precautionary measure. If this happens, please know:
  - Teammates are responsible for using universal precautions, following additional infection prevention measures (such as masking and social distancing) when at Atrium Health sites, and hand-washing at work and at home to greatly decrease the spread of many infectious diseases.
  - The Attendance policy continues to apply towards any unscheduled absences, unless related to COVID, Influenza, Norovirus or vaccine reaction recovery and approved by Teammate Health.
- o If the teammate's contact with the infectious disease is believed to be work-related, the teammate or leader should complete the appropriate report of illness or injury to the workers' compensation department.
- o Some additional examples of infectious diseases include, but are not limited to, the following:
  - Blood borne pathogen exposure
  - Conjunctivitis (Pink Eye)
  - Draining or open wounds or lesions
  - Hepatitis
  - Herpes Labialis (Cold Sore)
  - Herpes Zoster (Shingles)
  - Meningococcal Meningitis
  - Methicillin-resistant Staphylococcus Aureus (MRSA)
  - Pneumonia
  - Salmonella
  - SARS (Severe Acute Respiratory Syndrome)
  - Tuberculosis
  - Varicella (Chicken Pox)

- ➢ **Infectious Disease Prevention – Fit Testing**
  Teammate Health provides, and at times requires, respirator fit testing and training for teammates in jobs that may be at a risk for at work contact to an airborne infectious disease(s) upon hire by appointment. Thereafter, annual fit testing is completed by Teammate Health.

Teammate Responsibilities

- ➢ On or before applicable published deadlines or starting work, all teammates must receive the required vaccines and submit to Teammate Health documentation of vaccination or receive an approved a medical or religious exemption. If proof of vaccination is not provided or if an exemption is not approved, teammates will be assumed to have not completed the vaccine requirement on time. For some infectious diseases, titers may be drawn and start dates may be delayed pending results.
- ➢ When a teammate has symptoms that could be related to a potential infectious disease, the teammate should not come to work and should notify their supervisor, and immediately contact Teammate Health.
- ➢ Follow additional infection prevention measures (such as masking and social distancing) when at Atrium Health sites, safety precautions and fit testing guidelines when required.
- ➢ If a teammate believes that they have had a potential exposure to an infectious disease, the teammate is to contact Teammate Health for information and health-related counseling.

Leader Responsibilities

- ➢ Ensure all teammates are aware of this policy, its requirements, the exemption process and provide appropriate educational materials.
- ➢ Ensure teammates are aware of and follow any additional infection prevention measures (such as masking and social distancing) when at Atrium Health sites and department-specific requirements for protective equipment.
- ➢ Ensure teammates with exemptions follow all required infection prevention measures, restrictions and safety precautions.
- ➢ When a leader becomes aware that a teammate has a potential exposure to an infectious disease, it is the leader's joint responsibility (with the teammate) to make sure the teammate immediately contacts Teammate Health.
- ➢ If a leader observes that a teammate has symptoms that may be a safety issue to others, it is the leader's responsibility to make sure the teammate contacts Teammate Health.
- ➢ Maintain the confidentiality of medical information disclosed by teammates. Leaders may ask their teammates whether they have received a required vaccine in order to provide further instruction that is consistent with this policy. However, leaders should not ask additional questions regarding why a teammate has not obtained a required vaccine, as doing so may lead the teammate to reveal private medical information. Instead, leaders should direct teammates to other resources for information and education or for obtaining an exemption under this policy.
- ➢ Leaders should not request or collect their teammate's private medical information. Leaders should refer the individual to Teammate Health for assistance.

Revised: 6/2022

For the most recent version and to view this policy in its entirety, please access the Infectious Disease Prevention Policy (SE Region) on our institutional policy site.

Financial Aid

The Office of Financial Aid at Wake Forest University School of Medicine helps students obtain the resources needed to finance their graduate medical education. We also serve as an educational resource for financial planning and debt management. We know that deciding how to manage funding for education requires careful consideration of your options, and we're here to help.

We encourage:

- Prospective students begin the financial planning process early.
- Current students to stay abreast of their financial situation and knowledgeable of all options.
- Alumni to understand available repayment options for their field of residency, helping them make wise financial decisions to balance student loan debt with financial wellness.

For more information please visit the financial aid website at
https://school.wakehealth.edu/education-and-training/financial-aid

Click on the title of the document or section you want, to be taken directly to that document

- Tuition and Fees by program
- Information about student loans
- VA requirements/info
- Return of Federal Financial Aid Funds Policy
- Policy on Satisfactory Academic Progress (SAP) for Financial Aid Eligibility
  Doctor of Medicine
  Graduate School of Arts and Sciences- Biomedical Science
  Physician Assistant
  Academic Nursing
- Student Payment Policy
- Refund of Tuition and Fees Policy

Fees and Expenses

Tuition is payable at the beginning of each semester. As a requirement for graduation, all students are required to pay full annual tuition for each academic year enrolled in Wake Forest University School of Medicine. Students who do not make tuition payments or satisfactory arrangements with the Student Financials office will not be eligible to continue classes or receive credit for course work.

Breakage deposits are not required but students will be held financially responsible for loss or damage to School of Medicine property.

Cost of attendance includes only those expenses associated with the student. Living expenses for the spouse and/or other dependents are not recognized as part of the student's standard cost of attendance. The cost of attendance, as defined by the school, represents the maximum amount of student financial aid a student can receive.

Statements in the Student Handbook concerning expenses and courses cannot be considered an irrevocable contract between the student and the School of Medicine. The School of Medicine reserves the right to change requirements for graduation, schedules, and costs of instruction at any time during the student's enrollment.

Tuition changes authorized by the Board of Trustees will become effective at the opening of the next session after adoption.

Doctor of Medicine Program Tuition and Fees 2023-2024

	First Year (10 Months)	Second Year (10 Months)	Third Year (12 Months)	Third Year (Charlotte)	Fourth Year (11 Months)	Fourth Year (Charlotte)
Tuition	$63,674	$63,674	$63,674	$63,674	$62,424	$62,424
Books and Equipment	$1,700	$1,180	$1,202	$1,202	$1,171	$1,171
Laptop	$1,222					
Food	$4,800	$4,800	$5,760	$5,760	$5,280	$5,280
Health Insurance	$4,984	$4,984	$4,984	$4,984	$4,984	$4,984
Loan Fees	$2,832	$2,758	$2,850	$3,006	$2,750	$2,894
Lodging	$13,000	$13,000	$15,600	$15,600	$14,300	$14,300
Miscellaneous	$1,920	$1,920	$2,304	$2,304	$2,112	$2,112
Transportation	$4,750	$4,750	$5,700	$5,700	$5,226	$5,226
Utilities	$2,950	$2,950	$3,540	$3,540	$3,245	$3,245
Charlotte Allowance				$3,700		$3,388
Total	**$101,832**	**$100,016**	**$105,614**	**$109,470**	**$101,492**	**$105,024**

Physician Assistant Program Tuition and Fees 2023-2024

	First Year Winston Salem	First Year Boone	Second Year
Tuition	$44,645	$44,645	$44,645
Books	$1,600	$1,600	$1,600
Drug Test			$70
Laptop	$1,222	$1,222	
Food	$5,760	$5,760	$5,760

Health Insurance	$4,984	$4,984	$4,984
Loan Fees	$3,174	$3,216	$3,030
Lodging	$15,600	$15,600	$15,600
Miscellaneous	$2,304	$2,304	$2,304
Program Fees	$5,000	$5,000	$2,250
Professional Exam			$550
Transportation	$5,700	$5,700	$5,700
Utilities	$3,540	$3,540	$3,540
Boone Allowance		$1,012	
Total	**$93,529**	**$94,583**	**$90,033**

Doctor of Nursing Practice Tuition and Fees 2023-2024

DNP Program	First Year	Second Year
Tuition	$25,146	$19,558
Books	$1,400	$1,400
Laptop	$1,222	
Food	$5,760	$5,760
Health Insurance	$4,984	$4,984
Loan Fees	$2,160	$1,869
Lodging	$15,600	$15,600
Miscellaneous	$2,304	$2,304
Program Fees	$772	$772
Transportation	$5,700	$5,700
Utilities	$3,540	$3,540
Total	$68,588	$61,487

BSN-DNP Tuition and Fees 2023-2024

	First Year	*Second Year*	*Third Year*
Tuition	$40,406	$40,021	$39,252
Books	$1,400	$1,400	$1,400
Licensure/Boards	$105		$1,045
Laptop	$1,222		
Food	$5,760	$5,760	$5,760
Health Insurance	$4,984	$4,984	$4,984
Loan Fees	$2,920	$2,851	$2,857
Lodging	$15,600	$15,600	$15,600
Miscellaneous	$2,304	$2,304	$2,304
Program Fees	$3,418	$3,418	$3,418
Transportation	$5,700	$5,700	$5,700
Utilities	$3,540	$3,540	$3,540
Total	**87,359**	**$85,578**	**$85,860**

Graduate School Programs Tuition and Fees 2023-2024

	PhD Program (12 Months)	MS Program (12 months)	MS Online (12 Months)
Tuition	$41,000	$41,000	$34,650
Books	$600	$600	$600
Food	$5,760	$5,760	$5,760
Health Insurance	$4,984	$4,984	$4,984
Loan Fees	$52	$2,690	$2,360
Lodging	$15,600	$15,600	$15,600
Miscellaneous	$2,304	$2,304	$2,304
Transportation	$5,700	$5,700	$5,700
Utilities	$3,540	$3,540	$3,540
Total	**$79,540**	**$82,178**	**$75,498**
** Add Laptop for first year students	$1,222	$1,222	$1,222

*Part-time enrollment per credit hour cost: $ $1,650. MS Online programs are considered part-time.

Tuition Payments

Wake Forest University School of Medicine will maintain records of student charges including tuition, insurance, vaccine charges and any other miscellaneous items charged to the student account. Students may view their student accounts and make electronic payments from their checking or savings account online via PeopleSoft Campus Solutions Self-Service. Also, the Student Financials Office accepts paper checks or money orders for payment on your student account. If payment is not received by the due date, WFUSOM will charge a $100 late fee. An additional $100 late fee will be charged every 30 days until the balance is paid in full. Students may not be eligible to advance in the curriculum until the outstanding balance is paid in full. After 90 days, outstanding account balances will be turned over to Program Directors for administrative action. Before registration opens for the next term, the Bursar will report students with unpaid balances to Program Directors for administrative action. Students will not be eligible to advance in the curriculum until the outstanding balance and late fees are paid in full. Students who are on a Leave of Absence and have an outstanding balance should refer to the Leave of Absence policy. Upon matriculation and once each academic year that follows, students will be required to sign a Payment Responsibilities Agreement.

Doctor of Medicine Program 2023-2024

Fall	Tuition Amount	Due by Date
First Year	$31,837	07/17/2023
Second Year	$31,837	07/20/2023
Third Year	$31,837	06/01/2023
Fourth Year	$31,212	05/25/2023
Spring	Tuition Amount	Due by Date
First Year	$31,837	12/14/2023
Second Year	$31,837	12/21/2023
Third Year	$31,837	11/23/2023
Fourth Year	$31,212	11/09/2023

Physician Assistant Program 2023-2024

Summer	Tuition & Fees Amount	Due by Date
First Year	$14,894	06/12/2023
Second Year	$12,192	05/25/2023
Fall	Tuition & Fees Amount	Due by Date
First Year	$14,893	09/21/2023
Second Year	$17,352	08/31/2023
Spring	Tuition & Fees Amount	Due by Date
First Year	$19,858	01/12/2024
Second Year	$17,351	01/12/2024

Graduate School of Arts and Sciences – Biomedical Sciences 2023-2024

MS & PhD	Tuition Amount	Due by Date
Summer 2023	$2,350	06/01/2023
Fall 2023	$19,325	09/07/2023
Spring 2024	$19,325	01/18/2024

Academic Nursing Programs 2023-2024
BSN-DNP

Fall	Tuition & Fees Amount	Due by Date
First Year	$13,888 ($1,450 Holding Fee Credit Applied)	08/24/2023
Second Year	$15,203	08/24/2023
Third Year	$14,934	08/24/2023
Spring	**Tuition & Fees Amount**	**Due by Date**
First Year	$15,338	01/12/2024
Second Year	$15,203	01/12/2024
Third Year	$14,934	01/12/2024
Summer	**Tuition & Fees Amount**	**Due by Date**
First Year	$13,148	05/16/2024
Second Year	$13,033	05/16/2024
Third Year	$12,802	05/16/2024

Doctor of Nursing Practice (Online) 2023-2024

Fall	Tuition & Fees Amount	Due by Date
First Year	$7,202 ($1,450 Holding Fee Credit Applied)	08/24/2023
Second Year	$5,858	08/24/2023
Spring	**Tuition & Fees Amount**	**Due by Date**
First Year	$7,255	01/12/2024
Second Year	$7,255	01/12/2024
Summer	**Tuition & Fees Amount**	**Due Date**
First Year	$10,011	05/16/2024
Second Year	$7,217	05/16/2024

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Financial Assistance and Scholarships

Financial Assistance

Assistance is available for students who, for financial reasons, could not otherwise attend medical school. Scholarships and loans are awarded in accordance with criteria governing each source of funds and on the basis of need. In all cases, parental income information is required and will be considered in determining awards from the School of Medicine's resources.

Financial Assistance to Incoming Students

Applicants are provided with general information about aid and appropriate application resources. On request, individuals and families may consult with a Financial Aid Officer. Financial aid application materials must be completed and returned to the Financial Aid Office prior to March 15. Financial aid awards are released on April 15th, or the first business day following.

Financial Assistance to Upper-class Students

In September and October of each year, the Financial Aid Office will notify current students of procedures to be followed for the next academic year. Applications must be completed and returned to the Financial Aid Office on or before March 15.

Endowed Scholarships

A list of available scholarships may be found on the Wake Forest University School of Medicine's website.

Federal Scholarships

Scholarships are available to U.S. citizens through the Armed Forces Health Service and the National Health Service Corps. Selection is competitive. Interested parties should review information from the following:

Army: http://www.goarmy.com/amedd/education/hpsp.html
Navy: https://www.navy.com/careers/healthcare.html
Air Force: https://www.airforce.com/careers/specialty-careers/healthcare/careers/doctor

National Health Service Corps (NHSC): http://nhsc.hrsa.gov/scholarships/

Veteran's Education Benefits

All veterans and their dependents seeking veteran educational benefits must first apply for those benefits through the Department of Veterans Affairs (VA). Veterans with questions about their eligibility for the various VA educational benefit programs should first consult the VA to determine their eligibility for specific programs. Contact Information: https://www.benefits.va.gov/gibill/

NOTE: Only degree programs are eligible for veteran's benefits at Wake Forest University School of Medicine. All approvals are subject to change.

VA Certification Contacts for School of Medicine Programs:

Doctor of Medicine Program   Ms. Michelle Van Meter – mvanmete@wakehealth.edu
Academic Nursing Program   Ms. Michelle Van Meter – mvanmete@wakehealth.edu
Physician Assistant Program   Ms. Michelle Van Meter – mvanmete@wakehealth.edu
Graduate School Programs   Ms. Michelle Van Meter – mvanmete@wakehealth.edu

Minority Student Scholarships

Applications for limited scholarship opportunities for minority students during the first two years of medical school are available from the National Medical Fellowships Inc. https://nmfonline.org/scholarships-programs/scholarships-and-awards/

VA Compliance Statement

Wake Forest University School of Medicine complies with the requirements of section 3679 of Title 38, U.S. Code.

A student who has been admitted to a Wake Forest University School of Medicine program and who is entitled to educational assistance under chapter 31, Vocational Rehabilitation and Employment, or chapter 33, Post-9/11 GI Bill benefits, is permitted to attend or participate in the course of education without making payment for tuition and fee amounts to be covered by the VA education benefits. Such attendance or participation may begin on the date on which the student provides a VA Certificate of Eligibility and end on the earlier of the following dates:

- The date on which payment from the VA is made to the School of Medicine.
- Ninety (90) days after the date the School of Medicine certified tuition and fees following the receipt of the certificate of eligibility.

Students receiving VA educational benefits will be required to pay the difference between the amount owed on their student account and the amount of the VA education benefit disbursement within 10 days of the start of the term.

Wake Forest University School of Medicine will not impose any penalty, including the assessment of late fees, the denial of access to classes, libraries, or other institutional facilities, or the requirement that a student receiving Chapter 31 or 33 benefits borrow additional funds due to the delayed disbursement of funding from the VA.

Using VA Education Benefits

Questions about eligibility for benefits should be directed to the VA. Apply for benefits:
https://www.va.gov/education/how-to-apply

While the application for VA benefits may begin while the student is in the process of applying to a School of Medicine program, students should be admitted to the program before submitting documents to the Office of Student Records.

- Admitted students must receive a Certificate of Eligibility (COE) from the VA outlining the benefits and eligibility period and submit the COE to the Office of Student Records. A screen shot of the eBenefits Web page, or a VAF 28-1905 form for chapter 31 authorization purposes will also be accepted.
- The COE can be submitted via email to: finaid@wakehealth.edu or delivered in person or mailed to: 475 Vine Street, Winston Salem, NC 27101
- Shortly after receiving the COE, the Office of Student Records will conduct a review of documents needed for the student's VA file. Students will be notified by the Office of Student Records if they are responsible for providing any further documentation.

Loans

NCFELS- North Carolina Forgivable Education Loan for Service:	NC FELS (Forgivable Education Loan for Service) is a loan forgiveness program that provides monies to eligible students from North Carolina in exchange for a service obligation once the student has become a licensed practitioner. The service obligation requires recipients to return to NC to work for each year the loan was awarded.
Unsubsidized Federal Direct Stafford Loan	The Unsubsidized Federal Direct Stafford Loan program is a federal student loan program that allows eligible medical students to borrow up to $47,167; the amount is dependent upon length of academic year. Eligible graduate and physician assistant students may borrow up to $20,500. The federal government does not pay interest. The interest rate is a variable/fixed rate. Any interest that accrues during enrollment is capitalized at repayment. Aggregate loan limits are $224,000 minus subsidized loan amounts for medical students and $138,500 minus subsidized loan amounts for physician assistant students and graduate students.
Federal Direct Grad PLUS Loan	Graduate and professional students may borrow through the Federal Direct Grad PLUS loan. Students may borrow up to the cost of education minus other financial aid. A borrower's creditworthiness is a consideration for lender approval. The interest rate is a variable/fixed rate.
Alternative Loan Programs	Alternative loan programs are credit-based loans that may be used to supplement other forms of financial assistance. In general, alternative loans should be considered as a last resort. Not all alternative loan programs are alike. Always consult the Financial Aid Office before applying for an alternative loan.

Exit Interview

Any student who has received financial aid and who ceases enrollment at Wake Forest University School of Medicine for any reason—leave of absence, dismissal, withdrawal, graduation — must have an exit interview within seven days with the Financial Aid Office. This interview covers "Borrowers Rights and Responsibilities" for all student loan programs and is required by law.

Forfeit of Scholarship Funds

Students who are enrolled in a special program and have received scholarships from that program will forfeit those scholarship funds upon withdrawal or dismissal from the program.

Financial Aid Policies

Click on the title of the policy you want, to be taken directly to that document

Return of Federal Financial Aid Funds Policy

Purpose

Students enrolled in Wake Forest University School of Medicine or Wake Forest University Graduate School of Arts and Sciences who receive federal financial aid and do not complete their classes during a semester or term could be responsible for repaying a portion of the aid they received. Students who do not begin attendance must repay all financial aid that may have been disbursed for the term.

Scope

This policy applies to all Wake Forest School of Medicine and Wake Forest University Graduate School of Arts and Sciences-Biomedical Sciences students.

Definitions

A. Student: The term "Student" is defined as a person who matriculates into, is enrolled in, or is taking courses in the Academic Nursing, the Physician Assistant (PA), or the Undergraduate Medical Education (MD) programs of Wake Forest University School of Medicine or the Wake Forest University Graduate School of Arts and Sciences-Biomedical Sciences programs (hereinafter jointly referred to as "School").

Policy Guidelines

A. Return of Federal Financial Aid Funds

1. In accordance with federal regulations, a Student who receives federal financial aid but does not complete the payment period for which that aid was awarded may not be entitled to all of the financial aid funds awarded and/or disbursed. The requirements of this policy pertaining to return of financial aid funds apply to leaves of absence as well as withdrawals and dismissals.

2. Federal regulations require Title IV financial aid funds to be awarded under the assumption that a Student will attend the institution for the entire period in which federal assistance was awarded. When a Student withdraws from all courses for any reason, including dismissals and leaves of absence, they may no longer be eligible for the full amount of Title IV funds that they were originally scheduled to receive. The return of funds is based upon the premise that Students earn their financial aid in proportion to the amount of time in which they are enrolled. A pro-rated schedule is used to determine the amount of federal Student aid funds they will have earned at the time of the withdrawal. Thus, a Student who withdraws in the second week of classes has earned less of his/her financial aid than a Student who withdraws in the seventh week. Once 60% of the semester is completed, a Student is considered to have earned all of his/her financial aid and will not be required to return any funds. An exception may apply for a leave of absence. See information regarding a leave of absence, below.

3. The School of Medicine is required to calculate how much federal financial aid a Student has earned. Based on this calculation, Students who receive federal financial aid and do not complete their classes during a semester or term could be responsible for repaying a portion of the aid they received. Students who do not begin attendance must repay all financial aid disbursed for the term.

4. Return of financial aid funds is determined according to the following:

    b. The term "Title IV Funds" refers to the federal financial aid programs authorized under the Higher Education Act of 1965 (as amended) and for Students enrolled at the School of Medicine includes the following programs: Federal

Direct Unsubsidized Stafford Loans and Federal Direct Graduate PLUS Loans.

c. The withdrawal date used in the return calculation of a Student's federal financial aid is the actual date indicated on the official drop form. If a Student stops attending classes without notifying the School of Medicine, the withdrawal date will be the midpoint of the semester, or the last date of academic activity as determined by the School of Medicine. Additional documentation supporting the last date of academic activity may be provided by the Student if they verify a later date of attendance than determined by the School of Medicine.

c. Determining the amount of Title IV funds to be returned:

The amount of earned and unearned financial aid is calculated on a daily basis from the first day of the payment period. The process uses calendar rather than business days. Earned aid is determined by the percentage of the number of days attended before enrollment ended divided by the total number of days in the payment period (excluding any breaks of five days or more). There are no returns after the 60% point in time, as the federal regulations view the aid has been "100% earned" after that point in time. The amount of Title IV funds to be returned is calculated by multiplying the unearned aid percentage by the total of all Title IV aid received. A copy of the worksheet used for this calculation and examples can be requested from the Financial Aid Office.

In accordance with federal regulations, the return of Title IV funds is paid in the following order:

- Unsubsidized Direct Loans
- Subsidized Direct Loans
- Federal Perkins Loans
- Direct PLUS Loans
- Other Title IV Assistance
- The Student

5. Institutional and Student Responsibilities

a. The School of Medicine's responsibilities include:

- Providing each Student with the information given in this policy
- Review of examples of the Return of Title IV Aid and the Refund Policy with Students
- Identifying Students who are affected by this policy
- Completing the Return of Title IV Funds calculation for Students who are subject to the policy
- Returning the Title IV Funds that are due the Title IV programs within 30 days of withdrawal, dismissal, or leave.

b. The Student's responsibilities include:

- Students with Federal/Title IV financial aid must notify the Financial Aid Office to discuss the implications of a status change, inclusive of withdrawal, or leave of absence, before it occurs.
- Dismissed students should consult with the Financial Aid Office as directed in their dismissal paperwork. Students are also responsible for returning to the Title IV programs any funds that were disbursed directly to the Student and for with the Student was determined to be ineligible under the Return of Title IV funds calculation. The Student will also be billed for and required to pay any balance that results from a return of funds

B. Post-Withdrawal Disbursements

In some cases, a Student may be eligible to receive a "post-withdrawal" disbursement after the Student withdraws when the amount of aid earned is less than the amount of aid disbursed. In such cases, the Financial Aid Office will notify the Student of the "post-withdrawal" disbursement.

C. Leave of Absence

1. Students are permitted to have one leave of absence (medical, personal, educational, administrative) within a 12-month period that does not require a return of federal financial aid funds provided that:

a. The Student completes the requirements for formal leave of absence in accordance with the Leave of Absence Policy (WFUSM) ;

b. The leave of absence does not exceed 180 days in length; and

c. The leave of absence ends before the next payment period begins.

2. Students who are on a leave of absence as of the first day of the academic year are not eligible to receive financial aid until they return from the leave, register for classes, and begin coursework.

3. Students who begin a leave after the academic year begins are eligible for financial aid already disbursed but are not eligible for additional financial aid disbursements until they return from the leave of absence.

4. If a Student takes an approved leave of absence and then does not return from the leave within 180 days or within the payment period, the Student will be subject to the requirements for the return of federal financial aid. For the purposes of calculating earned financial aid, the last date of attendance will be retroactive to the day the leave of absence began.

References

Leave of Absence Policy (WFUSM),
Military Leave of Absence Policy (WFUSM)
 Refund of Tuitions and Fees Policy (WFUSM), Student Payment Policy

Higher Education Act of 1965 (as amended)

Revision Dates: 12/02/2015, 5/2023

Revised 10/2023
For the most recent version and to view this policy in its entirety, please access the Return of Federal Financial Aid Funds Policy (WFUSM) on our institutional policy site.

Satisfactory Academic Progress for Financial Aid Eligibility

MD Program - Policy on Satisfactory Academic Progress (SAP) for Financial Aid Eligibility

Purpose
Federal law and regulations require Wake Forest University School of Medicine (School of Medicine) to establish and implement a policy to measure whether students applying for and/or receiving federal financial aid are making Satisfactory Academic Progress (SAP). SAP is the successful completion of degree requirements according to established increments that lead to awarding of the degree within specified time limits.

The following policy delineates the standards for Satisfactory Academic Progress for Financial Aid Eligibility for students enrolled in the MD Program at the School of Medicine.

SCOPE
This policy applies to all students enrolled in the MD program at the School of Medicine, whether or not they are recipients of financial aid. Not meeting the SAP requirements may result in loss of or ineligibility for all financial aid, federal or institutional. This policy addresses only the financial aid consequences of failing to make Satisfactory Academic Progress and does not address the consequences to academic standing or eligibility for continued enrollment. For more information about those consequences, refer to the Satisfactory Academic Progress (SAP) Policy - MD Program (WFUSM)

DEFINITIONS
A. *Policy*: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

B. *WFBH*: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

C. *Gateways*: Core educational standards in the curriculum that students are required to pass. Courses, clerkships, and USMLE Step Exams are considered to be Gateways that students must pass to be promoted to the next academic year in the MD program. Criteria for successfully passing courses and clerkships are defined in the syllabus and may consist of any combination of Benchmarks and other components of assessment and participation. Gateway grades are calculated out to 2 decimal places with no rounding.

D. *Benchmarks*: Tests/assignments/evaluations that have been identified by the Course/Clerkship Director as essential measures of satisfactory progress. Students who fail to meet the minimum threshold on a Benchmark must remediate the Benchmark. Numerical grades for Benchmark assessments (i.e., exams) are calculated out to 2 decimal places with no rounding.

POLICY GUIDELINES
A. **Monitoring of Satisfactory Academic Progress**
1. Each student's progress will be evaluated after grades are finalized at the end of each academic year, as defined by

the academic calendars.

2. Efforts will be made to complete evaluations of whether a student is making Satisfactory Academic Progress prior to the start of an academic year; however, the next year may be in progress at the time students are notified of their eligibility or ineligibility.

3. **A student who fails to meet one or more of the standards for SAP (qualitative and/or time frame) is ineligible for financial aid beginning with the term immediately following the term in which the SAP requirements were not met, pending results of the appeal process.**

    a. Students will be notified via their Wake Forest University School of Medicine e- mail account if they have failed to meet the requirements for SAP. Students may appeal the decision. The factors used for determining whether SAP is met are explained below.

B. **Qualitative Measures of SAP: Reviewed at the end of each Academic Year**

1. Each student at the School of Medicine must successfully complete all of the School of Medicine's required courses and identified benchmarks, gateways, clerkships, and examinations by achieving a grade of "Low Pass" or higher. Successful completion is necessary to maintain SAP and is a necessary graduation requirement for the MD degree.

2. Incomplete Grades & Withdrawals

    a. Medical students cannot graduate with a grade of "I". Incomplete grades/hours are not included in SAP evaluation. The finalized grade/hours are reviewed at the time of the next formal SAP evaluation. When an incomplete grade is finalized, it is factored into the SAP calculation at the time of the next evaluation period, at the end of the academic year.

    b. Refer to the Satisfactory Academic Progress (SAP) Policy - MD Program (WFUSM) policy for additional information regarding the standards for progression.

3. Remediated/Repeat Coursework

    a. Students who are required to repeat an entire year of coursework do not meet School of Medicine SAP eligibility requirements for financial aid.

    b. Students not meeting SAP may appeal the decision. (See Section E of this policy).

    c. Under current federal financial aid guidelines, students repeating an entire year of coursework (including previous successfully completed courses) AND who successfully appeal SAP will be eligible for federal loans for the repeat of that year.

        i. Funding will be provided only once for the repeat of the same academic year coursework.

    d. Students are eligible for institutional aid that does not require meeting SAP (such as the Dean's Excellence Scholarship and select endowed scholarships).

C. **Quantitative Measure & Maximum Timeframe: Reviewed at the end of each Academic Year**

1. The normal time frame for completion of required course work for the MD degree is 4 academic years. The maximum time permitted for completion of the MD degree is 6 years.

2. Due to academic, administrative, medical, military, or personal reasons a student may require additional time for completion of degree requirements. In such situations, an academic plan may be established for the student that departs from the normal course of study and that may require the repetition of all or a part of a year of study (i.e., subsequent to incomplete or unsatisfactory course work or an approved leave of absence).

3. Students matriculated into the MD degree program may at times seek an approved Leave of Absence to pursue an advanced degree.

    a. The normal time frame for completion of required course work for the MD degree plus an additional doctorate degree (e.g., PhD, EdD) is 7 years.

    b. The maximum time permitted for completion of the MD degree plus an additional doctorate degree is 9 years. The normal time frame for completion of the MD degree plus an additional master's degree (e.g., MS, MA) is 6 years.

    c. The maximum time permitted for the completion of the MD degree plus an additional master's degree is 8 years.

4. To be making Satisfactory Academic Progress, students ordinarily must complete the first two years of the curriculum by the end of the third year after initial enrollment.

D. **SAP and Leaves of Absence**

1. A student may be granted an academic, administrative, medical, military, or personal leave of absence.

2. The period of leave for which the student has been approved may be excluded from the published maximum time frame in which an individual student will be expected to complete all requirements of the degree program.

    a. *However, unless approved by the Dean, Wake Forest University School of Medicine, students will not be allowed to take more than 10 years from the time of matriculation to complete the requirements for the MD degree, inclusive of leaves of absence.*

    b. A student who is not on-track to complete the requirements for the MD degree by the 9th year following matriculation will be contacted by the Registrar and required to meet with the Vice Dean for Undergraduate Medical Education (or designee).

E. **Appeal Process and Financial Aid Probation**
1. A student who has lost eligibility for financial aid as a result of a failure to make Satisfactory Academic Progress may re-establish eligibility for financial aid only if the student subsequently meets Satisfactory Academic Progress requirements or successfully appeals the decision that SAP has not been met.
2. Students who lose eligibility for financial aid may appeal the decision regarding SAP by following the procedures below.
3. To appeal, the student must:
   a. Submit a letter of appeal to the Financial Aid Office. The appeal letter should include the following:
      i. Mitigating circumstances that prevented the student from meeting the requirements for SAP and that could not have been anticipated. Events such as the death of an immediate family member, extended illness suffered by the student, or other unforeseeable events that may have caused significant hardship for the student may be considered as examples of mitigating circumstances.
      ii. Documentation, if any, that supports the student's basis for appeal.
      iii. Steps the student has taken/will take to ensure future SAP. This plan should outline the student's academic goals for each period that will enable the student to meet the requirements for SAP at a specified future point in time.
      iv. Anticipated graduation date.

   b. In most cases, the SAP Appeals Committee (as defined by the Dean) will render a decision within two weeks of receipt of a fully completed appeal. All decisions of the SAP Appeals Committee are final. Notification of the decision will be sent to the student via the student's School of Medicine e-mail account.
4. If the appeal is approved, the student will be placed on **financial aid probation** and will be eligible for financial aid as long as an approved Academic Plan is in place. An Academic Plan must be formulated with the Offices of Academic Affairs and Student Services, in consultation with the Registrar and student.
   a. The Academic Plan will typically be developed for one academic year. Academic progress will be evaluated at the conclusion of each enrolled term for students on financial aid probation.
5. Students who meet the requirements for SAP during their probationary term will resume financial aid in good standing and again be evaluated at the conclusion of the following academic year.
   a. Students who fail to meet the requirements for SAP during the probationary term or do not complete the requirements of their academic plan will again be ineligible for financial aid. Students may appeal again by following the appeal process.
6. If the SAP appeal is denied, financial aid will be cancelled any funds received by the student at the start of the academic year must be returned to the institution.
7. Students who are ineligible to receive financial aid may use one or more of the following payment options while attempting to regain eligibility: student/family resources or Alternative/Private Educational Loans.

   Note: A student who has lost eligibility for financial aid due to a failure to make SAP cannot automatically regain eligibility by paying tuition for a semester or by taking a Leave of Absence. Eligibility may be regained only by eliminating all SAP deficiencies at the student's expense until all requirements of this policy are met. Students who have reached their maximum time frame are not able to regain eligibility.

F. **Enforcement**
The Offices of the Registrar, Academic Affairs, Financial Aid, and the Student Professionalism and Academic Review Committee (SPARC) will collaborate to monitor and enforce standards for Satisfactory Academic Progress. The School of Medicine Registrar will notify SPARC and the Office of Financial Aid annually of any students who are not meeting the requirements for Satisfactory Academic Progress. SPARC will determine whether academic or other sanctions are warranted and will inform the student of such sanctions. The Financial Aid Office will inform any student whose financial aid has been impacted.

REFERENCES

Satisfactory Academic Progress (SAP) Policy - MD Program (WFUSM)
Leave of Absence Policy (WFUSM)

REVISION DATES: 9/2020; 4/2022, 12/2022; 7/2023

Revised: 7/2023
For the most recent version and to view this policy in its entirety, please access the Satisfactory Academic Progress for Financial Aid Eligibility- Academic Nursing (WFSOM) on our institutional policy site.

Graduate School of Arts and Science – Biomedical Science - Policy on Satisfactory Academic Progress for Financial Aid Eligibility

To determine continuing financial aid eligibility, the financial aid committee evaluates students' satisfactory academic progress at the end of each semester. The receipt of federally-controlled aid requires half-time enrollment (4.5 or more hours on the Reynolda Campus and 4.0 or more hours on the Bowman Gray Campus) in a degree seeking program during the fall and spring semesters and a minimum cumulative grade point average of 2.5 on work attempted in the Wake Forest University Graduate School of Arts and Sciences. Certain programs have higher academic requirements, which are communicated directly to the students by the departments. The Dean may revoke institutionally-controlled financial aid for violation of University regulations, including its honor code, or for violation of federal, state, or local laws.

FEDERAL FINANCIAL AID

The Higher Education Act mandates that institutions of higher education establish minimum standards of satisfactory academic progress for students receiving federal aid. Wake Forest University makes these minimum standards applicable to all programs funded by the federal government. Certain federal aid programs have higher academic and/or other requirements, which are communicated to recipients. To maintain academic eligibility for federal aid, a student must:

- Complete the requirements for a master's degree or a Doctor of Philosophy degree in the maximum time frame as defined in the Wake Forest Graduate School of Arts and Science Bulletin section 'Requirements for Degrees' for his/her program. A student becomes ineligible for aid at the point it is determined that he/she canno longer complete degree requirements within the remaining maximum timeframe.
- Maintain a minimum 2.5 cumulative grade point average on all graded hours attempted
  - Incompletes count as hours attempted, unless from a non-credit course.
  - Audited classes do not count as hours attempted.
  - The grade point average calculation excludes satisfactory/unsatisfactory and pass/fail courses.
  - In cases where a student repeats a course for which he or she received a grade of B- or lower, the cumulative grade point average is calculated by considering the course as attempted only once, with the grade points assigned reflecting the highest grade received. However, this provision does not apply to any course for which the student has received the grade of F in consequence of an honor code violation.
  - During a semester in which a student drops courses or withdraws, all graded hours attempted in the Graduate School of Arts and Sciences includes those graded hours attempted before (1) the withdrawal date, or (2) the last day to drop a course without penalty (as published in the academic calendar.
- Maintain a grade of Satisfactory "S" in research courses. Adequate progress is determined by the standards of the department or program in which the student is enrolled.

The policy on satisfactory academic progress applies only to the general eligibility for aid consideration. There are other federally-mandated requirements a student must meet to receive federal aid. For instance, certain federal loan programs also require either the passage of a period of time or the advancing of a grade level between annual

maximum borrowing, regardless of general eligibility for aid. Other general student eligibility requirements for a student to receive federal financial aid are listed in Funding Your Education: The Guide to Federal Student Aid, a publication of the U.S. Department of Education.

A student who is not making satisfactory academic progress due to one of the reasons outlined above will be placed on probation by the Graduate School of Arts and Sciences. Students placed on academic probation will be notified in writing, along with the Track/Program Director and will be given one semester to resume satisfactory academic standing.

During the probationary period, students will be placed on financial aid warning for one semester and remain eligible to receive federal and institutional assistance during that semester (except when they have exceeded their degree deadline). At the end of the probationary period, progress will be reviewed. If a student cannot re-establish satisfactory academic standing during the probationary semester, the student will become ineligible to receive financial aid and may be dismissed or withdrawn from the Graduate School.

APPEAL PROCEDURE – Bowman Gray Campus

Denial of aid under this policy may be **appealed in writing** to the Dean of the Graduate School and mailed to Medical Center Boulevard, WS, NC 27157.

The Dean may grant a **probationary reinstatement** of one semester to any student, upon demonstration of extenuating circumstances documented in writing to the satisfaction of the committee. Examples of extenuating circumstances and appropriate documentation include, but are not necessarily limited to the following: illness of the student or immediate family members – statement from physician that illness interfered with opportunity for satisfactory progress; death in family – statement of student or minister; temporary or permanent disability – statement from physician. During a probationary period, students are considered to be making satisfactory academic progress under this policy and may continue to receive aid. A determination of satisfactory academic progress for any period of enrollment after the probationary period is made at the end of the probationary period. **Reinstatement** after probation can be made only after the student has received credit for the appropriate percentage of work attempted with the required cumulative grade point average.

Physician Assistant Program - Satisfactory Academic Progress for Financial Aid Eligibility Policy

PURPOSE

The purpose of this policy is to set forth standards to carefully monitor the progress of each student working toward the MMS degree and set forth the requirements for making a determination on each student's Satisfactory Academic Progress at the end of each unit of study.

SCOPE

This policy applies to all students in the Wake Forest University School of Medicine physician assistant program.

DEFINITIONS

Policy: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

WFBH: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), High Point Surgery Center, LLC and Premier Surgery Center.

POLICY GUIDELINES

Wake Forest School of Medicine (WFUSM) is required by federal law and regulation to establish and implement a policy to measure whether students applying for and/or receiving federal financial aid are making Satisfactory Academic Progress (SAP). SAP is the successful completion of degree requirements according to established increments that lead to awarding of the degree within specified time limits. The following policy delineates the standards for Satisfactory Academic Progress for Financial Aid Eligibility in the Physician Assistant Program at WFUSM. This Policy should be read along with the Student Progress Policy which sets forth the standards for evaluating student performance in the PA Program's defined clinical practice competency domains. Failure to maintain SAP may result in loss of or ineligibility for all financial aid, federal or institutional. This policy addresses only the financial aid consequences of failing to make Satisfactory Academic Progress and does not address the consequences to academic standing or eligibility for continued enrollment, which are set forth in the PA Student Progress Policy - PA Program (WFUSM) .

The requirements for the MMS degree from the PA Program include the satisfactory completion of the PA curriculum at WFUSM. The progress of each student is monitored closely by the PA Student Progress Committee (PASPC), with formal review occurring at the end of each unit or clinical term, and at the end of each program year. The student will be notified via their WFUSM e-mail account if they fail to maintain SAP at any time in the program, as outlined in the PA Student Progress Policy. A student who fails to meet one or more of the standards for SAP (qualitative and/or quantitative) is ineligible for financial aid beginning with the term immediately following the term in which the SAP requirements were not met. Students may elect to appeal the decision.

A. **Qualitative Measures of SAP**
   1. Each PA student at WFUSM is required to successfully complete all the PA Program's required courses, supervised clinical practice experiences (SCPE), and examinations in order to graduate with the MMS degree. The WFUSM PA Program measures academic progress with grades of Honors, Competent, Complete, Concern, or Failure, rather than a cumulative grade point average. (Refer to the PA Student Progress Policy in the PA Student Handbook.)

B. **Quantitative Measure & Maximum Timeframe**
   1. The normal time frame for completion of required course work for the MMS degree is two academic years. The maximum time frame is three years. Some students may apply and be approved for dual enrollment in more than one academic program offered by Wake Forest University. Based on the specific program of interest, a maximum time permitted for completion of all course content will be published to the student prior to matriculation but will not exceed the maximum time frame of three years.
   2. Due to academic, administrative, medical, military, or personal circumstances or scholarly enrichment activities, a student may require additional time, up to the maximum time frame of three years, for completion of degree requirements. The only exception to the maximum timeframe is for active military service; this is outlined in the Military Leave Policy. In such situations, an academic plan may be established for the student that departs from the normal course of study and that may require the repetition of all or a part of a year of study (i.e., deceleration or an approved leave). Refer to the PA Student Progress Policy in the PA Student Handbook.

C. **SAP and Leaves of Absence**
1. A student may be granted an academic, administrative, medical, military, or personal leave of absence for a variety of reasons, including pursuit of other scholarly enrichment activities. The period of leave for which the student has been approved may be excluded from the maximum time frame in which an individual student will be expected to complete all requirements of the degree program. A leave of absence should not extend training for more than one year unless as outlined in the Military Leave of Absence Policy (WFUSM).

D. **Appeal Process and Financial Aid Status**
1. A student who has lost eligibility for financial aid as a result of a failure to maintain SAP may reestablish eligibility for financial aid only if the student subsequently meets SAP requirements or successfully appeals the decision that SAP has not been met.
2. Students who lose eligibility for financial aid may appeal the decision by following the procedures below. To appeal, the student must submit a letter of appeal to the Program Director via their WFUSM email account. The appeal letter should include the following:
   a. Mitigating circumstances that could not have been anticipated and that prevented the student from meeting the requirements for SAP;
   b. Documentation, if any, that supports the student's basis for appeal;
   c. Steps the student has taken/will take to ensure future SAP. This plan should outline the student's academic goals for each period that will enable the student to meet the requirements for SAP at a specified future point in time;
   d. Anticipated graduation date.
3. In most cases, the PA Program Director, in consultation with the Financial Aid Appeal Committee, will render a decision within two weeks of receipt of a fully completed appeal. Notification of the decision will be sent to the student via the student's WFUSM e-mail account.
4. If the appeal is approved, the student will be placed on financial aid probation and will be eligible for financial aid as long as an approved academic plan is in place. The academic plan is developed by the PA Program Director, or designee, in consultation with the PASPC, Registrar, and student. It must delineate a plan for the student to achieve successful academic progress, if followed, by a designated point in time. While on financial aid probation, academic progress will be evaluated by the PASPC at the conclusion of each unit or clinical term.
5. Students who meet the requirements for SAP during the defined period of probation will then resume financial aid good standing and be evaluated at the conclusion of the following term.
6. Students who fail to meet the requirements for SAP during the defined period of probation or who do not complete the requirements of their academic plan will become ineligible for financial aid. Students may appeal again by following the appeal process.
7. If the SAP appeal is denied, financial aid will be cancelled.
8. Students who are ineligible to receive financial aid may use one or more of the following payment options while attempting to regain eligibility: student/family resources or alternative/private educational loans.
9. Note: A student who has lost eligibility for financial aid due to a failure to make SAP cannot automatically regain eligibility by paying tuition or by taking a Leave of Absence for a semester or longer. Eligibility may be regained only by remedying all SAP deficiencies at the student's expense until all requirements of this policy are met.

E. **Enforcement**
1. The Office of the Registrar, Office of Financial Aid, PA Program Director, and the PA Student Progress Committee will work collaboratively to monitor and enforce standards of SAP. The PA Program director will inform the Office of Financial Aid of any student who is not making SAP. The Office of Financial Aid will inform any student whose financial aid has subsequently been impacted.

REFERENCES
Military Leave of Absence Policy (WFUSM)
Student Progress Policy - PA Program (WFUSM)

REVISION DATES: 12/2022, 4/2023

Revised: 5/2023
For the most recent version and to view this policy in its entirety, please access the Satisfactory Academic Progress for Financial Aid Eligibility Policy - PA Program (WFUSM) on our institutional policy site.

Academic Nursing Satisfactory Academic Progress Related to Financial Aid

PURPOSE

Federal law and regulations require Wake Forest University School of Medicine (School of Medicine) to establish and implement a policy to measure whether students applying for and/or receiving federal financial aid are making Satisfactory Academic Progress (SAP). SAP is the successful completion of degree requirements according to established increments that lead to awarding of the degree within specified time limits.

The following policy delineates the standards for Satisfactory Academic Progress for Financial Aid Eligibility for students enrolled in the Academic Nursing program at the School of Medicine.

SCOPE

This policy applies to all students enrolled in the Academic Nursing program at the School of Medicine.

DEFINITIONS

A. Policy: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

B. WFBH: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), High Point Surgery Center, LLC and Premier Surgery Center.

POLICY GUIDELINES

A. Federal law and regulations require Wake Forest University School of Medicine (WFUSOM) to establish and implement a policy to measure whether learners applying for and/or receiving federal financial aid are making Satisfactory Academic Progress (SAP). SAP is the successful completion of degree requirements according to established increments that lead to awarding of the degree within specified time limits. The following policy delineates the standards for Satisfactory Academic Progress (SAP) at WFUSOM Academic Nursing Programs, which applies to all matriculated learners, whether or not they are recipients of financial aid. Failure to meet the SAP requirements may result in a learner's loss of all financial aid, including federal and institutional. This policy addresses only the financial aid consequences of not meeting the qualitative measures of SAP and does not address the consequences to academic program standing or eligibility for continued enrollment. For more information about those consequences, see the section in the handbook titled Academic Honor Policy and Standards of Professional Conduct.

1. Quantitative Measures of SAP: Reviewed at the end of each Semester.

   The requirements for all learners include satisfactory achievement of performance objectives of each program's curriculum. Formative and summative evaluation of academic progress occurs throughout the program. The progress of each learner working toward the designated degree is monitored carefully, and the determination of Satisfactory Academic Progress (SAP) is reviewed each semester by the Academic Nursing Program Directors and the WFUSOM registrar. At the end of each academic semester, learners must have demonstrated compliance with WFUSOM academic, professional, and graduation requirements.

   a. The curriculum is set up in a lock step manner. Cohorts will begin and complete the program of study together. In extenuating circumstances, with approval by the program director and the associate director for doctoral education, learners will be given up to two extra years to complete their program of study for a maximum of five years for the both the post master's DNP and Nurse Anesthesia program, including LOA.

2. Qualitative Measures of SAP: Reviewed at the end of each Semester.

   Learners are expected to maintain an overall grade point average (GPA) of 3.0. However, up to 10% of credit hours may be below a "B" average during the completion of the program. The final grade given by the course director will be reported to the registrar.

3. Process of Determination for achieving SAP

   a. Early identification of learners at risk of not meeting quantitative or qualitative measures of SAP. Early intervention and counseling to achieve the measures of SAP.

   b. When interventions of counseling are not satisfactory, learner will be invited to meet with the Student Success Committee. The SSC will identify and be convened other interventions to meet the quantitative and qualitative measures of SAP. Additionally, the SSC may opt to give a warning letter. If the learner unsatisfactory meets the qualitative and quantitative measures of SAP despite previous interventions, the student success committee and financial aid policy will be enforced.

B. Financial Aid Appeal

1. A learner who has lost eligibility for financial aid because of a failure to make Satisfactory Academic Progress (SAP) may re-establish eligibility for financial aid only if the learner subsequently meets SAP requirements or successfully appeals the decision that SAP has not been met.

2. Learners who lose eligibility for financial aid may appeal the decision regarding SAP by following the procedures below. Those wishing to utilize this process must present evidence of mitigating circumstances that occurred during the semester in question that could not have been anticipated prior to that period and that adversely affected their ability to make SAP. Events such as the death of an immediate family member, extended illness suffered by the learner, or other unforeseeable events that may have caused significant hardship for the learner may be considered as examples of mitigating circumstances.

3. To appeal, the learner must submit letters of appeal to the Financial Aid Office. These letters of appeal should include the following:

   a. Mitigating circumstances that prevented the learner from meeting the requirements for SAP.

   b. Documentation that supports the learner's basis for appeal.

   c. Steps the learner has taken/will take to ensure future SAP. This plan should outline the learner's academic goals for each period that will enable the learner to meet the requirements for SAP at a specified future point in time.

   d. Anticipated graduation date.

4. In most cases, the WFUSOM SAP for Financial Aid Committee will render a decision within two weeks of receipt of a fully completed appeal. All decisions of the WFUSOM SAP for Financial Aid Committee are final. Notification of the decision will be sent to the learner via the learner's WFUSOM e-mail account.

5. If the appeal is approved, the learner will be placed on financial aid probation and will be eligible for financial aid if an approved Academic Plan is in place. An Academic Plan must be formulated with the Academic Nursing Student Success Committee in consultation with the Registrar and learner. The Academic Plan will typically be developed to encompass one academic semester. Academic progress will be evaluated at the conclusion of each enrolled term for all learners on financial aid probation.

6. Learners who meet the requirements for SAP during their probationary semester will resume financial aid good standing and again be evaluated at the conclusion of the following academic year. Learners who fail to meet the requirements for SAP during the probationary semester or do not complete the requirements of their Academic Plan will again be ineligible for financial aid. Learners may appeal again by following the appeal process.

7. If the SAP appeal is denied, financial aid will be cancelled.

   Learners who are ineligible to receive financial aid may use one or more of the following payment options while attempting to regain eligibility: learner/family resources or Alternative/Private Educational Loans.

   Note: A learner who has lost eligibility for financial aid due to a failure to make SAP cannot automatically regain eligibility by paying tuition for a semester or by sitting out a term. Eligibility may be regained only by eliminating all SAP deficiencies at the learner's expense until all requirements of this policy are met. Learners who have reached their maximum time frame are not able to regain eligibility. Learners who are withdrawn from WFUSOM are not making SAP and are not eligible to receive financial aid.

C. Monitoring and Enforcement of Satisfactory Academic Progress

1. The progress of each learner working toward a degree is monitored carefully, and the determination of SAP is reviewed each semester. Each learner's progress will be evaluated after grades are finalized at the end of each academic semester. Evaluations of learners' SAP will be completed in a timely manner, however the subsequent term/year, may be in progress at the time learners are notified of their ineligibility. A learner who fails to meet one or more of the standards for SAP is ineligible for financial aid beginning with the academic term immediately following the term in which the SAP requirements were not met, pending results of the appeal process. Learners will be notified via their WFUSOM e-mail account if they have failed to meet the requirements for SAP. Learners may appeal the decision. The program director and the Office of Financial Aid and the Offices of the WFUSOM Registrar collaboratively shall have the responsibility for monitoring and enforcing standards for SAP. At the end of each semester the WFUSOM Registrar will notify the program director of any learners who are not meeting the requirements for SAP. The program director will determine whether academic or other sanctions are warranted and will inform the learner of such sanctions. The Financial Aid Office will inform any learner whose financial aid has been impacted.

Revised: 7/2023

For the most recent version and to view this policy in its entirety, please access the Satisfactory Academic Progress for Financial Aid Eligibility- Academic Nursing (WFSOM) on our institutional policy site.

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Student Payment Policy

Purpose

The purpose of this policy is to maintain records of student charges and to collect those charges in a timely manner.

Scope

This policy applies to: All Wake Forest University Health Sciences/School of Medicine students - inclusive of the Physician Assistant (PA), Nurse Anesthesia (CRNA), Doctor of Nursing Practice (DNP), Doctor of Medicine (MD), and Biomedical Graduate Programs (MS/MHL/PhD) programs -are responsible for complying with this policy. All Wake Forest University Health Sciences/School of Medicine employees, including contract employees/entities, faculty, and staff are responsible for complying with this policy.

Policy Guidelines

Wake Forest University Health Sciences/School of Medicine will maintain records of all student charges (including tuition, fees, student health insurance, and any other miscellaneous charges) for a period of seven years after each student leaves (graduates or withdraws from) the institution. Each educational program follows different term schedules throughout the academic year for tuition/fees. These dates are published on the intranet and internet.

A. Tuition and fees are assessed on financial aid disbursement dates for each respective academic term. Aid disbursement and related charges mark the beginning of the payment period. Payments are due on or before the 10th calendar day following the start f the payment period for each term.

B. If payments are not received within 30 days from the beginning of the payment period and the student is not expecting tuition funds from a third-party source (government, VA, scholarship, etc.), the Bursar will charge a late fee of $100. A late fee of $100 will be charged every 30 days until the balance is paid in full.

C. Before registration opens for the next term, the Bursar will report students with unpaid balances to Program Directors for administrative action. Students will not be eligible to advance in the curriculum until the outstanding balance and late fees are paid in full.

D. Students will not be eligible to receive their diploma or academic transcripts until the outstanding balance is paid in full.

E. If a student withdraws, does not return from a leave of absence, or is administratively terminated and owes an outstanding balance, the Bursar will contact the student to arrange payment in full or monthly installments. If the former student fails to make the agreed-upon payments, his/her delinquent account will be turned over to a collection agency. Once referred, the account will no longer be held by WFUHS and the student must direct all inquiries and payments to the collection agency.

Revision Dates:

5/2018, 4/2021, 4/2023

Revised 5/2023

For the most recent version and to view this policy in its entirety, please access the Student Payment Policy on our institutional policy site.

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Refund of Tuition and Fees

PURPOSE:
A Student who withdraws from the Wake Forest School of Medicine or the Wake Forest University Graduate School of Arts and Sciences-Biomedical Graduate Program during a term will be entitled to a refund of certain charges as set forth in this Policy.

SCOPE
This policy applies to all Wake Forest School of Medicine (WFSM) and Wake Forest University Graduate School of Arts and Sciences-Biomedical Graduate Program students.

DEFINITIONS
A. **Policy:** A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

B. **WFBH:** Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

C. **Student:** A person who matriculates into, is enrolled in, or is taking courses in the Academic Nursing, the Physician Assistant (PA), or the Undergraduate Medical Education (MD) programs of Wake Forest School of Medicine or the Wake Forest University Graduate School of Arts and Sciences-Biomedical Graduate Programs (hereinafter jointly referred to as "School").

POLICY GUIDELINES
A. **Refund of Tuition and Fees**

1. **All School of Medicine and Biomedical Graduate Programs**
   Circumstances may arise during a term that cause significant disruptions to School of Medicine and/or Graduate School operations and result in the closing of campus or a change in course modalities. These circumstances include, without limitation, extreme weather, fire, natural disaster, war, labor disturbances, loss of utilities, riots or civil commotions, epidemic, pandemic, public health crisis, power of government, or any other circumstance like or unlike any circumstance mentioned above, which is beyond the reasonable control or authority of the School of Medicine and/or the Graduate School. There will be no refunds for tuition or any fees paid by students in such circumstances.

   a. Refunds will only be provided for amounts paid by the student. Students will not be refunded for any tuition amounts covered by institutional scholarships.

   b. Students who are dismissed from a program for any reason will not be refunded any tuition or fees paid.

2. **Academic Nursing Programs**

   a. Students who withdraw or take a leave of absence from Academic Nursing Programs before completing 60% of the payment period will be entitled to a partial refund of tuition and fees depending on the number of days completed within the payment period.

   b. Refunds of fees are prorated based on enrollment.

   c. Percent of tuition charged to the student equals the number of days completed up to the withdrawal date divided by the total days in the term. (Any Academic Nursing Program scheduled break of five days or more is not counted as part of the days in the payment period.)

   d. The Financial Aid Office counsels Academic Nursing students individually to provide estimates of a tuition adjustment based on each class year's tuition payment periods.

      i. Because payment structure does not align with the first day of classes or the academic calendar, refunds will be based on the payment period start date.

      ii. Refunds apply to the payment period of withdrawal only. Students are responsible for officially withdrawing or taking a leave of absence to be eligible for a refund. Nonpayment for classes for which a Student is registered or nonattendance in a registered class or classes does not release the Student from financial obligations and will not drop the Student from the class(es) or the Academic Nursing program.

   e. The academic term will start at orientation, or when there is no orientation, with the first day of classes as scheduled for each class year of an educational program.

3. **Biomedical Graduate Programs**

a. Students who withdraw or take a leave of absence from a biomedical graduate program before completing 60% of the payment period will be entitled to a partial refund of tuition and fees depending on the number of days completed within the payment period.

b. Percent of tuition charged to the student equals the number of days completed up to the withdrawal date divided by the total days in the term. Any Biomedical Graduate Program scheduled break of five days or more is not counted as part of the days in the payment period.

c. The Financial Aid Office counsels biomedical graduate program students individually to provide estimates of a tuition adjustment based on each academic term's tuition payment periods.

   i. Payment structure aligns with the Biomedical Graduate Program's academic calendar. As such, refunds will be calculated using the term's orientation day as the first day of the payment period.

   ii. Students are responsible for officially withdrawing or taking a leave of absence to be eligible for a refund. Nonpayment for classes for which a student is registered or nonattendance in a registered class or classes does not release the student from financial obligations and will not drop the student from their class(es) or their biomedical graduate program.

4. **MD Program**

   a. Students who withdraw or take a leave of absence from the MD Program before completing 60% of the payment period will be entitled to a partial refund of tuition and fees depending on the number of days completed within the payment period.

   b. Percent of tuition charged to the student equals the number of days completed up to the withdrawal date divided by the total days in the term. (Any MD Program scheduled break of five days or more is not counted as part of the days in the payment period.)

   c. The Financial Aid Office counsels MD students individually to provide estimates of a tuition adjustment based on each class year's tuition payment periods.

      i. Because payment structure does not align with the first day of classes or the academic calendar, refunds will be based on the payment period start date.

      ii. Students are responsible for officially withdrawing or taking a leave of absence to be eligible for a refund. Nonpayment for classes for which a student is registered or nonattendance in a registered class or classes does not release the student from financial obligations and will not drop the student from the class(es) or the MD program.

5. **PA Program**

   1. Pre-Clinical Phase (Terms I – III): In the pre-clinical phase, students who withdraw or take a leave of absence (including deceleration) from the PA Program before completing 75% of the term associated with that payment period will be entitled to a partial refund on a pro-rata basis of tuition and fees.

   2. Clinical Phase (Terms IV – VI): In the clinical phase, students who withdraw or take a leave of absence (including deceleration) from the PA Program before completing 60% of the term associated with that payment period will be entitled to a partial refund on a pro-rata basis of tuition and fees.

   3. Refunds of fees are prorated based on enrollment.

   4. The percent of tuition charged to the student equals the number of days completed up to the withdrawal date divided by the total days in the term. (Any PA Program scheduled break of five days or more is not counted as part of the days in the payment period.)

   5. Because the payment schedule does not always align with the first day of classes or the academic calendar, refunds will be based on the payment period start date.

   6. Students are responsible for officially withdrawing or taking a leave of absence (including deceleration) to be eligible for a refund. Nonpayment for courses in which a student is registered will not be sufficient to drop the student from the course enrollment or the PA program itself. In addition, non-attendance in a registered course or courses does not release the student from financial obligations.

   7. The Financial Aid Office will work with the PA program to counsel PA students individually by providing an estimate of a tuition adjustment based on each class year's tuition/fee payment periods.

REFERENCES: Higher Education Act of 1965 (as amended)
REVISION DATES: 12/2/2015; 10/17/2019; 8/4/2020; 6/4/2021; 7/2022

Revised: 8/2022
For the most recent version and to view this policy in its entirety, please access the Refund of Tuitions and Fees Policy (WFUSM) on our institutional policy site.

Student-Focused Resources

For more information about student resources please visit our website at https://school.wakehealth.edu

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❖ *Office of Student Records*

The Office of Student Records serves the students enrolled in the Doctor of Medicine Program, the Academic Nursing Program, and the Graduate School of Arts and Sciences Biomedical Sciences Programs.

The Office of Student Records manages and maintains academic records for enrolled and former students and is responsible for enrollment statistics and reporting; course schedules and course registration; enrollment and degree verifications; medical licensure processing; transcripts and diplomas as well as certification of graduation requirements.

The Office of Student Records manages grade rosters, posting grades and tracking timeliness of grade submission based upon accreditation and program requirements.

The Office of Student Records manages, tracks, and negotiates clinical training affiliation agreements for the internal and external visiting student process.

Purpose: To provide, protect and preserve the academic record.

Mission: To provide academic records, institutional data and registration support for our students, alumni, staff, and faculty while maintaining and safeguarding the integrity of the data.

Vision: To deliver the highest level of customer service in a timely manner with accuracy, efficiency, and respect through technology, best practices, and kindness.

Values: respect, integrity, accuracy, service, proficiency

❖ *Office of Educational Excellence*

The Office of Educational Excellence supports individual students and student groups across all educational programs throughout their time at the Wake Forest University School of Medicine. The Office of Educational Excellence is primarily responsible for supporting personal and professional development. These efforts include services and programming that promote health and well-being, academic success, career exploration, community engagement, and interdisciplinary student groups and organizations.

The Office of Educational Excellence strives to achieve the following vision, mission, and goals:

Vision:
Engaged, empowered, and cared for learners become engaging, empowering, and caring health care professionals and scientists.

Mission:
To support a challenging yet nurturing learning environment that produces innovative and ethical health care professionals, and scientists equipped to provide exemplary patient care and research findings to lead medicine and translational science into the 21st century.

Goals:

1. Foster learner personal and professional development
2. Meet all learners where they are and guide them toward their career and academic success
3. Support a learning community that embodies the principles of integrity, diversity, inclusion, and mutual respect
4. Promote wellbeing of the whole learner (intellectual, physical, emotional, and spiritual)
5. Cultivate a culture of character-driven leadership

❖ *Office of Student Inclusion and Diversity (SID)*

Wake Forest University School of Medicine is a learning healthcare system that practices inclusive excellence to improve health. Wake Forest has a strong institutional commitment to increase diversity in its training programs by recruiting a diverse student body that fosters a welcoming and stimulating environment.

The mission of the Office of Student Inclusion and Diversity (SID) is to demonstrate a strong institutional commitment to diversity and inclusion with belonging, respect, value, engagement, and connection throughout the institution and our community.

SID focuses on supporting the educational mission of the medical school and its goal of excellence through inclusive and diverse measures.

Vision: We are a Learning Health Care system that practices inclusive excellence to improve health.

Goals:
- Pipeline – talent identification and development designed to prepare and attract diverse learners into the health professions
- Recruitment – recruit a diverse learner population
- Retention – create an inclusive environment that values all learners and experiences

SID programs and activities include short-term objectives such as assisting the Office of Admissions with recruiting and the Office of Educational Excellence with retention of learners from diverse backgrounds. The long-range objectives focus on medical career awareness and preparation of underrepresented, disadvantaged, and non-traditional learners. In addition, SID assists the Office of Medical Education with efforts to provide an inclusive and culturally sensitive learning environment.

Below are some programming and groups that the Office of Inclusion and Diversity supports in the pursuit of our goals, mission, and vision:

Diversity-focused student groups:

- American Medical Women Association (AMWA)
- Asian Pacific American Medical Student Association (APAMSA)
- Black Graduate Student Association (BGSA)
- Christian Medical and Dental Associates
- Cultural Awareness Council
- Delivering Equal Access to Care (DEAC) Clinic
- Gay Straight Alliance (GSA)
- Latino Medical Student Association (LMSA)
- Medical Students For Choice
- Mentoring the Pipeline
- Muslim Student Association
- My Brother's Healer Student Group
- Safe Zone in Medicine
- Sexual Health Awareness Group (SHAG)
- Society for Advancement of Chicanos/Hispanics and Native Americans in Science (SACNAS)
- Student National Medical Association (SNMA)
- Student Wellness Group
- WF Jewish Medical Student Group

Examples of programming and Events by our office and student groups include the following:

- Admissions Committee
- Affinity Groups
- African American/Black Affinity Group
- American Indian Heritage Month Dancing and Drumming
- Art of A Cure Silent Auction
- Black History Month Celebration & Events
- College Launch programming for high school students Diwali Dinner
- Common Grounds
- Eid Celebration & Iftar Feast
- Diwali Dinner
- Global Diversi-TEA – sample of teas from around the world
- International Dance Festival
- Mentoring the Pipeline Mock Interviews
- Non-profit summer pipeline camps for high school & college students
- Pre-Health Conference
- Sickle Cell Toy Drive
- SNMA Medical Excellence Banquet
- SID Talk Time
- Wake Active Bystander
- Wake Up Winston Open Mic Night

Contact Student Inclusion and Diversity:
Phone: 336-716-4201
Email: sid@wakehealth.edu
Website: https://school.wakehealth.edu/education-and-training/student-affairs/diversity-and-inclusion

Location: We are located on the 1st floor of the Bowman Gray Center for Medical Education in Suite 130

❖ **Resources for Academic Assistance**

In the event of academic difficulty in a particular course or clerkship, or more general problems of academic performance, students are advised to first consult with the faculty director of the course(s), clerkship(s), or block in question. Additionally, students may request academic support to improve or enhance their study, learning, and test-taking skills by contacting The Office of Academic Excellence and Support. An additional resource may be the Assistant Dean for Teaching, Learning, and Engagement in the Office of Educational Excellence.

Center for Learning, Access, and Student Success (CLASS)
CLASS is committed to fostering accessible and equitable learning environments by providing a range of services, education, and resources that extend to the entire campus community. CLASS provides the following services to all School of Medicine students.

- Academic Coaching
- Disability Services
- OWLS (outreach workshop learning series)

For more information about CLASS please visit their website at https://class.wfu.edu/.

Participation in Peer Assisted Learning (PAL)
Wake Forest University School of Medicine strongly supports a collaborative and inclusive learning environment. As such, students are encouraged to participate in our PAL program by becoming a tutor or benefiting from peer tutoring. Application forms requesting tutoring assistance or services may be found on our Advising page. (https://school.wakehealth.edu/Education-and-Training/Student-Affairs/Advising).
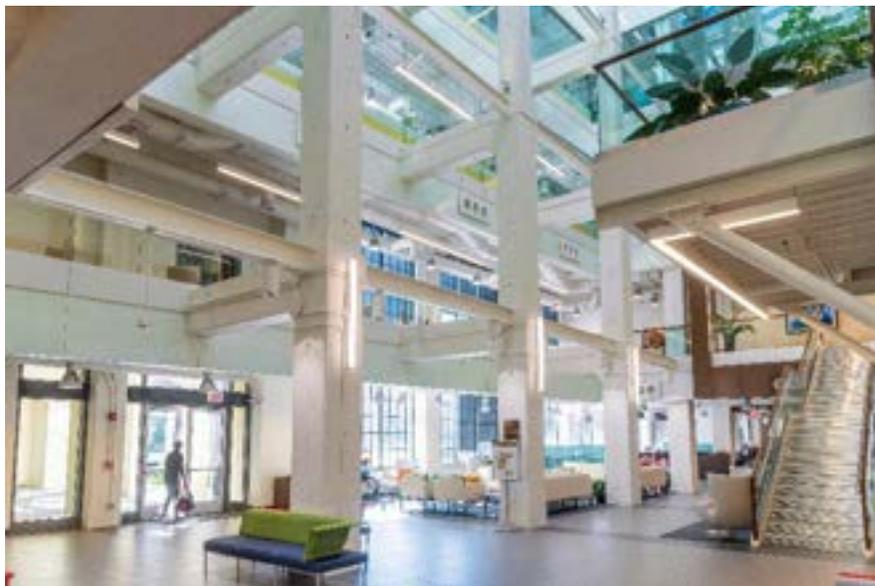
❖ **General Resources**

Academic Applications

Academic Applications is dedicated to the development and support of technology innovations in medical education. The mission is to provide the infrastructure within which faculty, students, and healthcare professionals can effectively utilize technologies to augment the lifelong learning process.

The office has developed a ubiquitous computing environment, focusing on technology standards in hardware, software, and networking. The students enter the Web-based curricula through a customizable portal. The Web-based curricula manage educational content such as problem-based-learning cases, lectures, education-oriented Web sites, schedules, collaborative discussions, and links to specialty content applications.

Coy C. Carpenter Library

The Library has two locations: the main library is located on the first floor of the medical center's James A. Gray Building and a student resource center (SRC) is located on the third floor of the Bowman Gray Center for Education building downtown. The SRC houses a small core collection of textbooks and exam study materials that have been selected specifically for 1st and 2nd year medical students as well as a number of anatomical models. The Gray building location houses the print collection and offers study space, 25 general-use PCs, and computer classrooms for individual and group instruction.

The Library's online digital resources include access to over 2.1 million electronic books, 13K journals, and 446 databases and various diagnostic and point-of-care tools.

Each student group is assigned a dedicated librarian who offers comprehensive research support throughout their academic journey.

Document delivery (Interlibrary loans), printing, scanning, and faxing services are provided free of charge to all students.

Students have several options for accessing Coy C. Carpenter Library resources remotely. Students can log on via the libraries proxy server or VPN to get on the institution's network and access all resources. Proxy access is also accessible via the Library's webpage https://school.wakehealth.edu/Carpenter-Library. Proxied links will prompt students to log in with their institutional credentials. Once the student is connected to the Library, students have electronic access to all of the Wake Forest University Libraries. Coy Carpenter Library's resources are seamlessly integrated with the undergraduate and law libraries on the Reynolda campus, and students can access and borrow from these sites as well. For materials not held by the Coy Carpenter Library, Interlibrary Loans are provided at no cost to students and purchase recommendations are welcomed.

The Library offers in-person and virtual support during hours of operation.

Creative Communications

Creative Communications, located on the first floor of the Gray Building, offers a full range of graphic services. Creative Communications also offers a wide range of video services, including video recording, digital video editing, and DVD generation and transfer. Photography services include medical, scientific, and general photography by award-winning, certified photographers using state-of-the-art digital equipment. Complete scanning, retouching, and computer output services are available, as are large poster printers, laminators, and custom framing.

Wake Forest Printing Services offers high-speed copying and offset printing for large copy and print jobs. These services, as well as business cards, can be accessed online.

Athletic Facilities

The School of Medicine Fitness Center features a complete line of Nautilus machines and aerobic machines. The center is on "E" floor of the Hanes Building and is open 24/7 with ID badge access.

Membership is free for Wake Forest University School of Medicine students. Students may also join the fitness center at Comp Rehab for an additional fee.

Hanes Park is less than a mile away from the medical center campus and contains 20 public tennis courts, which are lighted and in excellent repair. Adjacent to the tennis courts is the YMCA. Special membership rates are available to students at the "Y" upon presentation of a student ID badge. There is also a nearby YWCA located at 1300 S. Main Street, Winston-Salem, and in Innovation Quarter near the new medical school building at 525 Vine St.

Tickets to some WFU athletic events are available in limited numbers.

Banking Facilities:

A branch bank is located on the M level of North Carolina Baptist Hospital and is open Monday through Friday from 9:00 a.m. to 5:00 p.m. ATMs are located on the G and M floors of Reynolds Tower, outside the Gift Shop on the M floor of North Tower, and on the first floor of the Bowman Gray Center for Medical Education. A branch bank is also located in Innovation Quarter in Biotech Place.

Bookstore:

Students can use the Wake Forest University Taylor Bookstore (located at 1834 Wake Forest Road on the WFU Reynolda campus) to purchase textbooks. For additional information, please call 336-758-3388 or e-mail wfu@bkstr.com. The bookstore is open from 8:30-5:00 on Monday-Friday, 10:00-4:00 on Saturday, and 12:00-4:00 on Sunday during the fall semester.

Parking Facilities:

Parking is available in student lots at both the medical center and the Bowman Gray Center for Medical Education. Badge access is required to enter all student lots. Please contact the Office of Educational Excellence for assistance with badge access and parking. Bicycle racks are located beneath the foyer of Babcock Auditorium, at Baptist Hospital under the deck at the basement entrance to the patient tower, and at the Bowman Gray Center for Medical Education in the courtyard.

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Security:

The Medical Center Security Service provides continuous patrols and surveillance throughout the medical center. Care should be taken by all when traveling through darkened halls and parking lots. The medical center Security phone number is 716-3305 and should be called to obtain escort service from the building when needed.

Security at the Bowman Gray Center for Medical Education is provided by Sunstates Security and can be reached by calling (336) 713-1568.

Medical Center Alerts/Codes

When initiating an emergency alert, students should:

- Contact the Emergency Communications Center (ECC) at 716-9111 to report the specifics of the emergency.
- Supply as much information as possible to the ECCOperator.

ECC Operators will script the plain language text and initiate the appropriate notification as expeditiously as possible using the wording in the Plain Text Matrix as appropriate.

Facility Alerts	
Event	Recommended Plain Language
Evacuation/Relocation	Facility Alert + Relocation/Descriptor + Location
Fire/Alarm	Facility Alert + Fire or Type of Alarm + Descriptor/Location
Mass Casualty	Facility Alert + Mass Casualty Plan Activated
ED Surge	Facility Alert + ED Surge Plan Activated
Utility Failure	Facility Alert + Type of Utility Failure/Location
Dangerous Weather (Tornado etc.)	Facility Alert + Dangerous Weather Alert/Descriptor
Security Alerts	
Missing Infant/Child	Security Alert + Missing Person (Infant or child) + Last Know Location
Missing Person > 18 YOA	Security Alert + Missing Person (Adult) + Last Known Location
Armed Intruder/ActiveShooter/Hostage Situation	Security Alert + Special Instructions + Descriptor (Type of Threat) + Location
Medical Alerts	
CPR Involving a Patient	Code Blue + Location

Targeted Communications Only		
Facility Alerts	**Security Alerts**	**Medical Alerts**
HazMat Incident	Bomb Threat/Suspicious Package	Code Stroke
Patient Decontamination	Civil Disturbance	Code Sepsis
Severe Weather Plan	Controlled Access	Code Stemi
	Combative/Unruly Person	Code 44
		Peds Code Blue
		Trauma Codes

To report **security problems**, call **716-3305**.

❖ **Resources for Personal Assistance**

Student Counseling & Well-Being Services

Mission

Counseling & Well-Being Services (CAWS) are available to learners in all programs of the School of Medicine. CAWS' mission is to help learners cultivate their internal and external resources so that they can successfully navigate the demands of medical school, and, ultimately, be thriving citizen-professionals in healthcare. CAWS aims to reduce barriers to mental health care that are unique to this population.

Services:

CAWS offers brief, solution-focused counseling and other well-being services. Services are free and confidential. Services include:

- Individual, couples, and group counseling & coaching
- Triage and crisis intervention
- Consultation
- Clinical case management
- Medication management and psychiatry referral
- Well-being programming

Clinicians provide general mental health treatment and support for such issues as anxiety, depression, grief, trauma, and relationships. NOTE: If student needs are beyond the CAWS clinical scope of practice, the team will refer you to a more specialized provider in the community.

Staff Training
All the clinical staff are licensed in their respective fields and trained in such modalities as:

- EMDR
- Brainspotting
- Somatic Experiencing
- Cognitive Behavior Therapy (CBT)
- Dialectical Behavior Therapy (DBT)
- Acceptance and Commitment Therapy (ACT)
- Mindfulness-Based Cognitive Therapy (MBCT)
- Hypnosis

Confidentiality
All communication between a client and counselor is confidential (to the extent required by law), is not part of the learner educational record, and will not be released without a voluntarily signed consent.

Hours
Counseling appointments are offered Monday through Friday from 8:30 am to 5:00 pm and are 45 minutes long. Thirty-minute triage and consultations are available throughout the week. Some limited evening hours are available upon request.

Scheduling Counseling Services
To schedule a counseling or consultation appointment, email the CAWS confidential email at counselingservices@wakehealth.edu or submit a confidential appointment request on the website at: CAWS Website. NOTE: For students who live outside the state of NC or who are on rotations outside the state, please contact CAWS for information on teletherapy options available through MySSP.

COUNSELING SERVICES 24/7 HELPLINE
Every effort will be made to see students in crisis as soon as possible. Although CAWS is not a 24/7 center, we do have a 24/7 Emergency Counseling Services Helpline. If you are experiencing a mental health emergency, please contact this number at: 336-716-0637.

- Option 1 will allow you to leave a message for the counseling staff, which will be answered within 24 business hours.
- Option 2 will connect you with a live counselor.

Learning Environment Liaison

The Learning Environment Liaison serves as a central resource for reporting mistreatment or unprofessional behavior in the learning environment for all WFUSOM learners (MD, Graduate, PA, and Academic Nursing), as well as for visiting students, non- WFUSM clinical students, and non-affiliated student interns.

Students may report a mistreatment or professionalism concern to the Learning Environment Liaison through the following avenues:

- Via online reporting form in Service Now (accessible on your desktop or by using the following link:https://wakehealth.service-now.com/aclab)
- Via email at edcompliance@wakehealth.edu
- Via phone at Sarah Riney, 336-713-3352
- In person at Bowman Gray Center for Medical Education, 1st floor

Innovation Quarter Chaplain

The Innovation Quarter is promoting innovation in Spiritual Care. Wake Forest University School of Medicine, the Innovation Quarter, Wake Forest University Chaplain's office, and chaplaincy department University of WFBH Faith Health, are co- sponsoring a Manger of Spiritual Care Services for the Innovation Quarter. Chaplain Michelle Nicolle, PhD, BCC, completed a CPE residency at WFBH in August 2016. Prior to this residency, Dr. Nicolle ran a research program, withoffices and a lab in the Innovation Quarter. Michelle is a graduate of the Upaya Buddhist Chaplaincy training program in Santa Fe, NM and was ordained as lay Buddhist minister in 2016. She was board certified by the Association of Professional Chaplains in 2018. In October of 2019, Michelle became a novice priest in the Soto Zen tradition, so you might see her sporting a bald head. Specializing in healthcare chaplaincy and crisis response, Michelle's role will be to provide spiritual care and support for MD, PA, Academic Nursing, and Graduate students, faculty and staff for WFUSM, as well as WFU "Wake Downtown". Michelle is ready to respond to crisis and care for the many businesses and scientists associated with the Innovation Quarter. Michelle's office is located on the 3rd floor of the Bowman Gray Center for Medical Education, Office 3109. Michelle can be reached by phone at (336) 713-9766 or by email at mnicolle@wakehealth.edu

Student Health Services:

The Following medical services are available to students:

Student and Teammate Health:

Winston-Salem Campus:

The following services are available at the Student and Teammate Health Clinic located at
575 N. Patterson Avenue Suite 148, BioTech Place on a walk-in basis only, no appointment is necessary.

Monday through Friday from 8:00 am until 5:00 pm

Services Include:
- All work-related injuries, exposures and illnesses
- Annual compliance requirements such as flu vaccine, as well as maintenance of immunization records
- All human or animal blood and body fluid exposures (initial work-up, treatment, and follow-up)
- Any communicable disease exposures and follow-up
- Yearly tuberculosis testing as required by the medical center
- Work-related injuries
- Coughs, colds and sore throats
- Ear infections
- Fever and flu-like symptoms
- Animal bites
- Allergic reactions (non-life-threatening)
- Rash or other skin irritations
- Urinary tract infections
- Lacerations and foreign body removal
- Minor burns and injuries
- Sprains and strains

For any questions regarding clinic hours, location, or services offered please call 336-716-0131.

Charlotte Campus:

The following services are available at Atrium Teammate Health located at Carolinas Health Center
1000 Blythe Blvd, Annex Building Charlotte, NC 28203.

Monday - Friday; Closed Wednesdays; 7:30 a.m. - 4:30 p.m.

Teammate Health provides services for Atrium Health teammates, volunteers, students and non-employee LIPs (Licensed Independent Practitioners) as required by governmental and accreditation guidelines and services to protect the health and well-being of the same.

Common services provided by Teammate Health:
- Post-Offer Health Screenings
- Immunizations
- Drug and Alcohol Testing
- Return to Work Evaluations
- Medical Surveillance
- Exposure Counseling and Follow Up for Bloodborne Pathogens and Infectious Diseases
- TB Screening and Exposure Follow Up

For any questions regarding clinic hours, location, or services offered please call 704-631-0200.

For Charlotte-based MD students and Boone-based PA students, alternative services are available. Information will be supplied to those students at orientation.

Primary Care and Specialty Care Services:

For assistance with establishing a primary care provider or specialist for your personal acute, preventative, or chronic medical care needs, please contact our nurse case manager by email Studenthealthnavigator@wakehealth.edu*
Our nurse case manager is available to assist in coordination of care, referrals, and engagement of resources on and off campus.

These services are equally available to Charlotte-based and Boone-based students

Options for urgent medical needs on weekends and after hours include the resources listed below:

Urgent Care Clemmons: (336) 713-0400
Weekend Walk-In Family Medicine Reynolda: (336) 713-1298
Atrium Health Urgent Care Morehead (Charlotte): (704) 446-6090
AppFamily Medicine Urgent Care (Boone): (828) 386-2222

Disability Insurance

Disability insurance is provided to each full-time student of Wake Forest University School of Medicine in keeping with the guidelines of the AAMC. This plan provides a monthly income in the event a student becomes disabled by a covered sickness or injury. This plan is designed to provide coverage for the student as well as the opportunity to purchase additional coverage upon graduation into residency. All students are enrolled in the group plan automatically. To file a claim please call: Unum Benefits Center 1-800-858-6843 M-F 8 am to 8 pm Eastern Time.

❖ **Resources for Off-Campus Education**

Global Affiliations
The Medical Center has formal affiliations with Tokai University in Japan; Tromsø University in Norway; Kyungpook National University in Korea; and the University of Vienna in Austria. Global Health electives are arranged for a minimum of one month and must be individually arranged through the Office of Global Health.

Northwest Area Health Education Center
The Northwest Area Health Education Center (AHEC) of Wake Forest University School of Medicine, through its Office of Regional Primary Care Education (ORPCE), provides housing to students for clinical placement in primary care for the state of North Carolina. Additional information about student rotation resources is available on the Northwest AHEC Web site: http://northwestahec.wakehealth.edu.

Academic Nursing

Click on the title of the document or section you want, to be taken directly to that document.

- Academic Nursing Calendar
- Doctor of Nursing Practice
- Nurse Anesthesia
- Technical Standards

Academic Nursing Mission & Vision

Mission:

1. Improve the health of our state, region, and nation by:
   a. Educating nurses to translate research into practice
   b. Educating day-one ready nurse anesthetists to improve access to healthcare

2. Generate leaders in nursing

Vision:

To create a center of excellence in nursing education

As the nation works to ensure adequate nursing capacity, nurses with doctorate degrees will be essential to implementing the evidence that will support contemporary nursing practice, improve patient care, and reduce health disparities. Academic Nursing students will be prepared to practice in service, leadership or academic settings. Academic Nursing graduates will:

1. Apply scientific principles in the provision of advanced practice nursing to promote the health of individuals, communities and populations.

2. Translate scientific evidence into practice and policy to promote ethically sound, high-quality, cost effective patient-centered care.

3. Employ strategic leadership in interprofessional teams within organizations and healthcare systems.

4. Evaluate and utilize data analytic methods, information systems and technology to improve clinical outcomes.

5. Apply legal, financial and regulatory principles to advocate for change in healthcare policy.

6. Disseminate scholarly work.

Department of Academic Nursing
Academic Calendar 2023 – 2024

FALL		2023
First Day of Semester		8/14
Orientation / On site coursework	NAP Y2	8/14 – 8/17
	PM DNP Y1&Y2	8/21 – 8/25
Labor Day		9/4
Thanksgiving Holiday		11/22 – 11/26
Last Day of Didactic Curriculum		12/10
SPRING		**2024**
First Day of Semester		1/2
MLK Day		1/15
Easter Holiday		3/31
Spring Break		4/1 – 4/5
Last Day of Didactic Curriculum		4/29
SUMMER		**2024**
First Day of Semester		5/6
Memorial Day		5/27
Independence Day		7/4
Last Day of Didactic Curriculum		8/23
Graduation (Subject to Change)		8/24

Doctor of Nursing Practice

Complete details about this program may be found in the DNP Learner Handbook and on the web:
http://www.wakehealth.edu/Doctor-of-Nursing-Practice.htm

Wake Forest University School of Medicine has a long tradition of excellence in creating nursing leaders. The department that has offered a distinguished advanced practice nursing program for over 80 years, now offers a Doctor of Nursing Practice degree (DNP). With the convention of *established excellent and innovative education*, the online post-master's DNP program at Wake Forest University School of Medicine prepares the next generation of nurse leaders, expanding nursing roles in practice, management, and education. The DNP program builds on the nursing master's degree, providing doctoral- level content in healthcare law, organizational systems management, policy, translation and implementation research, population health, and nursing informatics. Ingrained in interprofessional and interprofessional collaboration, this unique nursing program housed within a school of medicine offers an unrivaled degree. Partnering with the Wake Forest University School of Law, DNP learners will take elective credits in healthcare law. The post- master's DNP program is a part- time, two-year online program for registered nurses seeking to assume greater leadership and advanced clinical roles that will translate evidence into practice, evaluate clinical outcomes and improve models of healthcare delivery. Through life-long learning, graduates will lead the future of nursing by advancing best practice. Program graduates are awarded the Doctor of Nursing Practice(DNP) degree by the Wake Forest University School of Medicine.

Nurse Anesthesia

Complete details about this program may be found in the Nurse Anesthesia Learner Handbook through [PolicyTech](#) **and on the web:**
https://school.wakehealth.edu/education-and-training/nursing-programs/nurse-anesthesia-crna-program

The Nurse Anesthesia Program was established in 1942 as one of the professional schools of The North Carolina Baptist Hospital (NCBH) and the Bowman Gray School of Medicine. Since then, Atrium Health Wake Forest Baptist has served as the program's sponsor and the major clinical facility for the clinical education of our learners. Currently, the program is one of an elite minority of programs that are housed in a school of medicine. Program graduates are awarded the Doctor of Nurse Practice in Nurse Anesthesia degree by the Wake Forest University School of Medicine. For over 80 years, the nurse anesthesia program has been highly regarded for the exceptional quality of graduates, as well as for housing faculty of outstanding achievement and recognition, nationally and internationally. The program offers high-quality education and experience to a select group of professional nurses to prepare graduates for a life-long study and practice of anesthesia. The program strives to maintain a top-ranked position through the provision of rigorous education and program evolution to capitalize upon emerging trends in health care and education. Our program is renowned for a legacy of leadership development with our graduates serving in or having occupied the highest positions of state, national, and international nurse anesthesia organizations. Our learners are privileged to be educated by professional advocates who have held positions of prominence in our profession. We provide a rigorous education that leads graduates to embody a passion for the art of anesthesia nursing, commitment to professionalism, and stewardship of the profession. Our unique combination of longstanding history and a current, progressive approach is embodied in our tagline:

"**Established Excellence, Innovative Education**".

Technical Standards for Admission, Continuation and Graduation

A candidate for the NAP must be able to demonstrate intellectual-conceptual, integrative and quantitative abilities; skills in observation, communication and motor functions; and mature behavioral and social attributes. Technological compensation can be made for some disabilities in certain areas, but a candidate should be able to perform in a reasonably independent manner ***without a trained intermediary.*** The use of a trained intermediary means that a candidate's judgment or performance must be mediated by someone else's power of selection, observation, or performance.

Sensory

A candidate must be able to detect and interpret changes in monitoring alarms and equipment.

A candidate must have sufficient sensory capacity to observe in the lecture hall, the laboratory, the outpatient setting, and the patient's bedside.

Sensory skills adequate to perform a physical examination are required. Functional vision, hearing and tactile sensation must be adequate to observe a patient's condition and to elicit information from computerized monitors, and through procedures regularly required in a physical examination, such as inspection, auscultation and palpation.

A candidate must be able to observe a patient accurately at a distance and close at hand.

Communication

A candidate should be able to speak, hear and observe patients in order to elicit information; describe changes in mood, activity, and posture; and perceive nonverbal communications.

A candidate must be able to communicate effectively and sensitively with patients. Communication includes speech, as well as reading and writing.

A candidate must be able to communicate effectively via oral and written modalities interacting with all members of the health care team.

Motor

Candidates should have sufficient motor function to elicit information from patients by palpation, auscultation, percussion and other diagnostic maneuvers.

A candidate must be able to negotiate patient care environments and must be able to move self/patients between settings, such as clinic, classroom building, and hospital.

A candidate should be able to execute fine motor activities reasonably required to provide general care, perform direct laryngoscopy, arterial and venous line placement, and performance of peripheral and central nerve blocks, anesthesia gas machine operation and troubleshooting, and provide emergency and urgent treatment to patients such as fiberoptic intubation and therapies of the difficult airway algorithm.

Examples of emergency treatment reasonably required of a nurse anesthetist are cardiopulmonary resuscitation (CPR) and the administration of intravenous medication. Such actions require coordination of both gross and fine muscular movements, equilibrium, and functional use of the senses of touch and vision.

Intellectual-Conceptual, Integrative and Quantitative Abilities

Intellectual-conceptual, integrative and quantitative abilities include measurement, calculation, reasoning, analysis and synthesis. Problem-solving, the critical skill demanded of a nurse anesthetist, requires all of these intellectual abilities.

A candidate should be able to comprehend 3-dimensional relationships and to understand the spatial relationships of structures for the performance of peripheral and central nerve blocks.

A candidate must be able to read and understand medical and nursing literature. In order to complete the degree, candidates must be able to demonstrate mastery of these skills and the ability to use them together in a timely and often critical fashion in problem-solving and patient care.

Behavioral, Emotional, and Social Attributes

A candidate must possess the emotional health required for full utilization of intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the diagnosis and care of patients, and the development of mature, sensitive, and effective relationships with patients and other healthcare personnel.

A candidate must be able to tolerate physically and emotionally taxing workloads and to function effectively under

stress. They must be able to adapt to changing environments, display flexibility and learn to function in the face of uncertainties inherent in the clinical problems of many patients.

Commitment to excellence, service orientation, goal-setting skills, academic ability, self-awareness, integrity, professional advocacy, and interpersonal skills are all personal qualities that are assessed during the admission and education process. Because the nature of nurse anesthesia education is based on a mentoring process, candidates are expected to be able to accept feedback and respond by appropriate modification of behavior. Compassion, integrity, empathy, interpersonal skills, engagement, resilience, adaptability, and motivation are all personal qualities that are required.

Annotations to the Technical Standards

In addition to the existing text incorporated within the **Technical Standards for Nurse Anesthesia Studies** for Admission, Continuation and Graduation, there are specific needs that are relevant to successful completion of curriculum requirements. This addendum provides specific examples to enhance the interpretation of the Technical Standards, particularly within the Motor and Behavioral, Emotional, and Social Attributes categories.

Learners are required to master the skills of a complete physical examination. They must complete Basic Life Support (BLS), Advanced Cardiac Life Support (ACLS), Pediatric Advanced Cardiac Life Support (PALS) and Neonatal Resuscitation Program (NRP) instruction and certification processes. Learners must be available to meet when sessions are available for the mastery of the curriculum objectives. This may include evening, night, weekend, and extended-hour obligations.

During the clinical internship, several mandatory rotations require extended hours, with start times as early as 5:00 am. Evening, on-call, and weekend shifts are common and may extend into 12 to 16 hour days. As a result, learners must be able to perform the identified technical standards, with moderate degrees of sleep deprivation.

Many surgical procedures essential to training may exceed 3 or more hours. Learners may be required to stand in a relatively fixed position for the entirety of the procedure with minimal rest or breaks. In emergency situations, patients may need to be moved, turned or resuscitated, and the learner may be in situations that necessitate short periods of bending, lifting or partial lifting, reaching, squatting or straining.

Within AHWFB rotations, learners may be required to cover large areas of space (different patient-care floors, different wings or sections within institutional building structures). They must be able to transport themselves and patients from one location to another in a timely fashion to facilitate patient care responsibilities and to receive educational training, such as during rounds.

Learners are responsible to ensure that they arrive fit for duty, which is defined as being in sound emotional, physical, and mental health to provide safe anesthesia care. Learners are required to update the program on changes in their mental and physical health status (including medications) which may impact their vigilance, alertness, or ability to provide safe patient care. The presence of communicable disease (such as HIV or Hepatitis) may impair the learner's ability to provide safe care, and the program abides by NC law and the School of Medicine policy on the *Effects of Infectious Disease or Disability on Student Learning Activities*. Learners infected with a communicable disease should consult with the program director to ensure that they are able to safely care for patients.

Doctor of Medicine Degree

Click on the title of the document or section you want to be taken directly to that document.

The MD degree is a broad undifferentiated degree attesting to general knowledge in medicine and the basic skills required for the practice of medicine. Essential abilities and characteristics required for completion of the MD degree consist of certain minimum physical and cognitive abilities and sufficient mental and emotional stability to assure that candidates for admission, promotion, and graduation can complete the entire course of study and participate fully in all aspects of medical training. Students acknowledge that they have received the Technical Standards (see Policy section) and can meet these standards, with or without reasonable accommodation.

For more information about the Wake Forest University School of Medicine MD program please visit our website: https://school.wakehealth.edu/education-and-training/md-program

WFUSOM MD Regional Medical Campus Information

The partnership between Atrium Health and Wake Forest University School of Medicine has been a life-changing combination with a shared mission to improve health, elevate hope, and advance healing for ALL. Approved as a Regional Clinical Campus of Wake Forest University School of Medicine by the LCME in 2021, Atrium Health Carolinas Medical Center (CMC) has been educating medical students since the 1960's. Believing that we are truly one medical school with two campuses, the curriculum in Charlotte, NC for MD students has been designed to be comparable to that in Winston Salem, and students are currently able to complete their **entire third and/or fourth years** of medical school in Charlotte. This includes transition courses, testing, LEAP weeks, and certifications. Additionally, we offer all advising services on both campuses as well as virtually.

Students who wish to spend their **third year** in Charlotte working at Atrium Health Carolinas Medical Center may select this option during the **spring of their first year** of medical school. More information about the process will be sent out to students in the Fall. At present, **40 slots** are available for students to complete their immersion year at the Charlotte campus and information about how to apply is sent out to students in the fall. When students are accepted to the Charlotte campus, they commit to spending the entirety of Year 3 in Charlotte. For year 4 experiences, students choose the campus on a rotation-by-rotation basis.

Admissions

The selection of applicants for admission as medical students to the Wake Forest University School of Medicine involves a competitive evaluation process, the authority and responsibility for which rests with the Committee on Admissions (COA).

The Committee on Admissions establishes and publicizes on the admissions webpage attributes desired of applicants and reviews these attributes annually, aligning them with the School of Medicine's mission and vision and the school's educational goals and objectives.

Please read the full [Selection of Medical Students Policy - MD Program (WFUSM)](#) in Policy Tech.

International Applicants

Applications are only accepted from U.S. citizens and permanent residents as long as the undergraduate, premedical course work has been done in the United States or Canada. If the undergraduate, premedical course work has been done outside the U.S. or Canada, the applicant must complete some recommended coursework in the United States or Canada prior to applying.

Official Transcripts Required for Accepted Students

The School of Medicine requires the use of the American Medical College Application Service (AMCAS), which supplies the school all post-secondary education grades as part of the application process. Accepted students will be required to provide official transcript(s) to the Office of Admissions with degree conferral noted.

Institutional Educational Program Objectives

Wake Forest University School of Medicine MD Program

Wake Forest University School of Medicine MD Program provides a unique medical education developed by faculty that value Compassion, Inclusivity, Service, Collegiality, Innovation, and Integrity. We offer a transformational and supportive experience that develops physicians who set the standard for compassionate, collaborative care; who lead the way in socially responsible healthcare and biomedical sciences locally, nationally, and globally; and who learn, discover, and apply innovative state-of-the-art knowledge and skills to the art of medicine. Students and faculty are equal and active partners in the learning process.

MD Mission Statement:

The mission of the MD Program: Educating future physicians empowered to transform health for all.

Principles of the MD Program

Wake Forest University School of Medicine is defined by a commitment to:
- ❖ Empathy and respect for patients and colleagues
- ❖ Professional and ethical decision making
- ❖ Health equity
- ❖ Intellectual rigor and scientific curiosity
- ❖ Leadership and innovation
- ❖ Patient-centered, team-based care
- ❖ Self-inquiry and lifelong learning
- ❖ The belief that even the most challenging problems can be solved

Our medical school culture and curriculum are based on these principles. Our faculty value them and model them for students. Although our curriculum evolves as medicine changes, we hold firm to these core values so that above all else, our graduates are trained to practice medicine according to these principles.

Objectives of the MD Program

Knowledge for Practice

Each graduate must demonstrate knowledge of the basic, clinical, and behavioral sciences, and apply this knowledge to patient care.

By the time of graduation, students are expected to:
1.1 Demonstrate knowledge of the normal structure and function of the human body and each of its major organ systems.
1.2 Demonstrate a foundation of cell and molecular biology for understanding mechanisms of acquired and inherited human disease.
1.3 Demonstrate knowledge of altered structure and function of major organ systems that are seen in common diseases and conditions.
1.4 Demonstrate knowledge of the clinical, laboratory, and radiologic manifestations of common disease and conditions.
1.5 Demonstrate knowledge of behavioral, psychosocial, genetic, and cultural factors associated with the origin, progression, and treatment of common diseases and conditions.
1.6 Demonstrate knowledge of the epidemiology of common diseases and conditions within a defined population and systematic approaches useful in reducing the incidence and prevalence of these disorders.
1.7 Demonstrate knowledge of the impact of cultural and psychosocial factors on a patient's ability to access medical care and adhere with care plans.

Interpersonal and Communication Skills

Each graduate will communicate and interact effectively with patients, their families, and members of the interprofessional healthcare team.

By the time of graduation, students are expected to:

2.1 Demonstrate empathic and patient-centered interviewing and communication.

2.2 Demonstrate the ability to obtain an accurate and complete medical history considering the patient's culture, beliefs, personal preferences, and level of health literacy.

2.3 Demonstrate the ability to communicate effectively, both orally and in writing, with patients, families, and members of the healthcare team/other healthcare professionals.

2.4 Demonstrate the ability to work as a member of a healthcare team, collaborating effectively with other healthcare professionals in caring for patients.

Patient Care

Each graduate will function as a member of an inter-professional healthcare team and provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health in diverse populations and settings.

By the time of graduation, students are expected to:

3.1 Elicit in-depth and focused patient-centered histories.

3.2 Perform accurate, complete and focused physical and mental status examinations.

3.3 Integrate patient information with clinical and basic science knowledge.

3.4 Select appropriate, relevant laboratory, radiologic and other clinical studies and interpret the results of such studies.

3.5 Develop a differential diagnosis.

3.6 Formulate a plan for the evaluation, diagnosis, and treatment of common clinical problems.

3.7 Recognize patients with life-threatening, emergency conditions and institute appropriate initial therapy.

3.8 Identify opportunities for early intervention, prevention and health education of patients while being mindful of the patient's readiness and barriers to change.

3.9 Demonstrate technical competence of routine medical procedures.

3.10 Recommend appropriate referral of patients including ensuring continuity of care throughout transitions between providers or settings and following up on patient progress and outcomes.

3.11 Synthesize and communicate patient information to other health professionals to accomplish safe care transitions and promote effective teamwork.

Professionalism

Our students are expected to demonstrate a commitment to upholding their professional duties guided by ethical principles.

By the time of graduation, students are expected to:

4.1 Demonstrate respect for patients by using the appropriate form of address, attending to a patient's comfort, displaying appropriate attire, and grooming, and honoring a patient's privacy and right to make decisions.

4.2 Demonstrate responsibility in actions by being punctual, managing emotions when confronted with adversity and confrontation, and recognizing personal and peer impairments.

4.3 Demonstrate honor and integrity by being honest about role and experience level, admitting mistakes and shortcomings, appropriately attributing sources of ideas and data, and respecting boundaries between patients, peers, and educators.

4.4 Demonstrate reverence for human life, understanding that sympathy for suffering is a fundamental concern of the medical profession and that the needs of the patient are paramount and should govern a physician's actions.

4.5 Demonstrate compassion by recognizing and responding with empathy to others' emotions and expectations, regardless of regardless of gender, race, sexual orientation, culture, socioeconomic status, religion, political affiliation, medical diagnosis, level of adherence, or health literacy/education level.

4.6 Demonstrate a dedication to teamwork, and an understanding of and respect for the unique roles of all members of the healthcare team.

4.7 Demonstrate knowledge of the principles that govern ethical decision-making and rules and regulations regarding healthcare delivery, incorporating them into clinical practice and research.

Practice-Based Learning and Improvement

Each graduate must demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and life-long learning.

By the time of graduation, students are expected to:

5.1   Demonstrate the ability to recognize strengths, deficiencies and limitations in their knowledge and skills.
5.2   Demonstrate the ability to set learning and improvement goals.
5.3   Demonstrate the ability to identify and perform learning activities that address gaps in their knowledge, skills and/or attitudes.
5.4   Demonstrate the use of information technology to optimize learning.
5.5   Demonstrate a commitment to continuously improve their medical knowledge, skills and/or attitudes by incorporating formative evaluation and feedback into daily practice.
5.6   Participate in the education of patients, families, trainees, peers and other health professionals.
5.7   Demonstrate the ability to obtain and utilize information about individual patients, populations of patients or communities of patients to improve care.
5.8   Demonstrate life-long learning skills by continually identifying, analyzing and implementing new knowledge, guidelines, standards, technologies, products or services that have been demonstrated to improve outcomes.

Systems-Based Practice
Each graduate will demonstrate awareness and understanding of the broader health care delivery system and will possess the ability to effectively use system resources to provide patient-centered care that is compassionate, appropriate, safe and effective.

By the time of graduation, students are expected to:
6.1   Advocate for quality patient care and optimal care systems.
6.2   Demonstrate a commitment to balancing risks of harm vs. benefit in patient and/or population-based care as well as exercising cost-awareness.
6.3   Use system resources available to patients, families and communities for health promotion and maintenance, disease prevention, education, treatment, and rehabilitation of medical and psychiatric conditions.
6.4   Identify system errors and common sources of medical error and recommend potential systems solutions.

Interprofessional Collaborative Practice
Each graduate will demonstrate the skills to participate as a contributing and integrated member of an interprofessional healthcare team to provide safe and effective care for patients and populations.

By the time of graduation, students are expected to:
7.1   Identify one's own role and the roles of other team members, including limitations and boundaries of each role to optimize healthcare delivery and effective healthcare team functioning.
7.2   Work with other health professionals to cultivate and preserve a climate of mutual trust, respect, dignity, diversity, integrity, and ethicality.
7.3   Communicate with respect for and appreciation of all healthcare team members and include them in all relevant information exchange.
7.4   Participate as a high-functioning team member by contributing one's skills set, supporting other team members as needed and ensuring the functioning of the healthcare team remains optimal (i.e. safe, timely, efficient, effective, and equitable) for patient and population-centered care.

Personal and Professional Development
Each graduate will demonstrate the qualities and commitment required to sustain lifelong learning, personal and professional growth.

By the time of graduation, students are expected to:

8.1   Demonstrate self-awareness in identifying limitations (in knowledge, skill, emotion, etc.) and the ability to seek help appropriately and engage in healthy coping mechanisms.
8.2   Develop skills for ongoing improvement as a healthcare provider through self-reflection, critical self-appraisal, and openness to accepting feedback.
8.3   Understand that situations involving ambiguity and uncertainty are natural elements of the medical profession and respond to such situations by drawing upon appropriate resource.

The Grading System

Grading scale for Courses and Clerkships

All students are assessed using the program level objectives and course objectives as defined by the Undergraduate Medical Education Curriculum Committee (UMECC). The grading system and criteria contributing to a grade are clearly outlined in each course/clerkship syllabus. Students who require remediation are not eligible f or a grade higher than Pass in that course or clerkship.

Grading System for Pass/Fail courses

- Pass (P) assigned to students who successfully pass all benchmarks as defined in the course syllabus. Courses using numerical grades require an overall score of 70% or greater.

- Fail (F) assigned to students who do not successfully pass criteria as defined in the course syllabus. Remediation is required as described below.

- Incomplete (I) assigned to students who have not completed all course components prior to the end of the course due to missing class time due to illness or emergency. Students are required to make-up missed coursework as described in the applicable attendance policy

- Not reported (NR) may be assigned to students who have not successfully achieved minimum competency on one benchmark within the criteria described in the course syllabus or need more time to complete an assignment/experience. Remediation is required as described below.

Grading System for Clerkships/Courses that use a Five Point Scale

- Honors- criteria defined in syllabus

- High Pass - criteria defined in syllabus

- Pass - criteria defined in syllabus

- Low Pass - criteria defined in syllabus

- Fail - criteria defined in syllabus

- Incomplete (I) assigned to students who have not completed all course components prior to the end of the course due to missing class time due to illness or emergency. Students are required to make-up missed coursework as described in the applicable attendance policy

- Not reported (NR) may be assigned to students who have not successfully achieved minimum competency on one benchmark within the criteria described in the course syllabus or need more time to complete an assignment/experience. Remediation is required as described below.

Mechanics of Handling Grades
Final grades are recorded in the Office of Student Records. Students who wish to request a review of grades and appeal the student's educational records, including an exam or assessment within a course, course or clerkship grade, or a narrative assessment, if the student considers the information contained therein to be inaccurate, misleading, or inappropriate should refer to the Appeal of Grade, Summative Assessment, and Narrative Comments policy in Policy Tech.

Class Standing
Class rank is calculated and used to determine nominations for Alpha Omega Alpha (AOA) National Medical Honor Society.

Student Attendance

Because of the critical significance of the mandatory activities of the Pre-clerkship curriculum and the clinical activities of the Immersion and Individualization phases of the curriculum, attendance is required for all mandatory course activities and clinical or clerkship activities. Policies relating to excused and unexcused absences from any required course activities are outlined below, in the MD policy section below and within PolicyTech.

Student attendance is governed by two separate policies:

Attendance for Medical Students in Pre-Clerkship Phase Policy - MD Program (WFUSM)

Attendance for Medical Students in Clinical Clerkships Courses Policy - MD Program (WFUSM)

Students who have infectious and/or environmental exposure should refer to the policies and procedure below for more information.

Exposure to Infectious and Environmental Hazards Policy (WFUSM)

Effects of Infectious Disease or Disability on Student Learning Activities Policy (WFUSM)

Effects of Infectious Disease or Disability on Student Learning Activities Procedures (WFUSM)

Adverse Event Guidelines & Procedures

Adverse events may occur during a term. An adverse event is any event that disrupts WFUSOM and/or MD Program operations and results in the partial or full closing of campus or other WFBH location or a change in course modality. Adverse events include, without limitation, inclement weather, fire, natural disaster, war, labor disturbances, loss of utilities, riots or civil commotions, epidemic, pandemic, or public health crisis.

In the event of an Adverse Event, students are required to visit their learning management system and monitor their email to obtain information regarding any schedule changes for that day. An effort is made to notify students via e-mail of any cancellations or postponements.

1. Students may also be notified of Adverse Events by text message sent via the WFBH Emergency Alert System (MIR3). Students are required to maintain updated and accurate contact information in their PeopleSoft accounts to be included in these messages.

2. In Charlotte, students may be notified of an Adverse Event by text message sent via the Everbridge Mass Notification System. Students register online for these notifications during orientation at https://peopleconnect.atriumhealth.org/departments/emergency-management/emergency-notification-system [peopleconnect.atriumhealth.org]

In situations where classes and clerkship activities are being held during an Adverse Event, students are asked to make personal safety a priority. Students are encouraged to use appropriate discretion and not to travel under unsafe conditions or take unnecessary risks.

Any student who is unable to attend clinical activities in the Immersion or Individualization Phase due to an adverse event must follow the Absence Policy for notification procedures.

Any student who is unable to attend mandatory activities in the Pre-clerkship Phase due to an adverse event must follow the Absence Policy for notification procedures.

Individual questions or concerns can be addressed directly to the Director of UME at the specific campus and/or Senior Associate Dean of Curriculum.

MD Academic Calendars

Wake Forest School of Medicine
Academic Year 2023-2024
FOUNDATIONS 1 - Class of 2027

F1 LAUNCH Course	Friday, July 7 through Wednesday, July 19, 2023
White Coat Ceremony	TBD, 2023
Anatomy Course	Thursday, July 20 through Tuesday, October 24, 2023
Holiday (Labor Day)	Monday, September 4, 2023
Medical Student Research Day	Wednesday, October 11, 2023
Metabolism & Defense (MAD) Course	Thursday, October 26, 2023, through Friday, January 19, 2024
Thanksgiving Recess Begins	Wednesday, November 22, 2023
Classes Resume	Monday, November 27, 2023
Holiday Recess Starts	Monday, December 18, 2023
Spring Semester Begins/Classes Resume	Tuesday, January 2, 2024
Holiday (Martin Luther King, Jr)	Monday, January 15, 2024
Neuroscience Block	Monday, January 22 through Friday, March 22, 2024
Spring Recess	Monday, March 25 through Friday, March 29, 2024
GI Block	Monday, April 1 through Friday, April 25, 2024
CAS Exams – Neuroscience & GI	Monday, April 29 & Tuesday, April 30, 2024
F1 Ends	Tuesday, April 30, 2024
Summer Session (9 ½ weeks)	Wednesday, May 1 through Friday, July 5, 2024

Foundations 2 begins on Monday, July 8, 2024

Wake Forest School of Medicine
Academic Year 2023 - 2024
FOUNDATIONS 2 – Class of 2026

Y2 Orientation	Monday, July 10, 2023
Heme-Lymph Block	Monday, July 10 – Tuesday, August 1, 2023
Pulmonary Block	Thursday, August 3 through Friday, August 25, 2023
Cardiovascular Block	Monday, August 28 through Monday, September 25, 2023
Holiday (Labor Day)	Monday, September 4, 2023
Y2 CAS Exam 1	Thursday, September 28, 2023
Medical Student Research Day	Wednesday, October 11, 2023
Renal Block	Monday, October 2 through Wednesday, October 25, 2023
Rheumatology Block	Thursday, October 26 through Monday, November 6, 2023
Endocrinology/Reproduction Block	Tuesday, Nov 7 – Tuesday, December 12, 2023
Thanksgiving Recess Begins	Wednesday, November 22, 2023
Classes Resume	Monday, November 27, 2023
Y2 CAS Exam 2.	Thursday, December 14, 2023
NBME Practice Exam	Friday, December 15, 2023
Holiday Recess Starts	Monday, December 18, 2023
USMLE Step 1 Preparation	Tuesday, January 2, 2024 – Monday, Feb 5, 2024
Y3 Prep – Transition to Patient Care	Monday, February 12, 2024
Y2 Ends	Friday, March 1, 2024

USMLE Step 1 must be completed by end of: Wednesday, February 7, 2024
(Recommended Step 1 Completion Date is: Wednesday, January 31, 2024)

Please note: An Academic LOA is available for students retaking or delaying the USMLE Step 1 or Step 2 exams requiring the student to be absent from the curriculum longer than 6 weeks. Returning after a leave requires that the student has met all other requirements for progression to the level at which they are returning. See the Satisfactory Academic Progress Policy and the Leave of Absence Policy for details.

Wake Forest University School of Medicine
Academic Year 2023-2024, Class of 2025

Y3 Begins	Monday, March 6, 2023
Holiday (Spring Break)	Friday, April 7 – Sunday, April 9, 2023
Holiday (Memorial Day)	Monday, May 29, 2023
Holiday (July 4th)	Tuesday, July 4, 2023
Clerkship Activities End	Sunday, August 20, 2023
Y3 Vacation (1 week)	Monday, August 28 – September 3, 2023
Holiday (Labor Day)	Monday, September 4, 2023
Clerkship Activities Resume	Tuesday, September 5, 2023
Thanksgiving Recess	Wednesday, November 22 @ noon or after SHELF - Sunday, November 26, 2023
Clerkship Activities Resume	Monday, November 27, 2023
Holiday (Winter Break)	Friday, December 22 @ noon or after SHELF - Sunday, January 7, 2024
Clerkship Activities Resume	Monday, January 8, 2024
Holiday (Martin Luther King, Jr.)	Monday, January 15, 2024
Clerkship Activities End	Sunday, March 3, 2024
Y3/Y4 Transition Weeks Begin	Monday, March 4, 2024

Clerkship activities begin at 7 am and end at 5 pm unless otherwise designated by the clerkship.

Event Dates	
Transition to Patient Care	February 13 – March 5, 2023
1st LEAP Week/CPX	August 21 – 27, 2023
2nd LEAP Week/CPX	March 4 – 10, 2024

Wake Forest University School of Medicine
Y-4 Individualization Phase
Academic Year 2023-2024- Class of 2024

Transition Week 1: ACLS/CPX/OSCE/Orientation	**Mon, March 6 – Fri, March 10, 2023**
*Transition Week 2: Vacation **barring any make-ups*	*Mon., March 13 – Sun., March 19, 2023*
Y4-1 Begins	Monday, March 20, 2023
Holiday (Spring Holiday 1)	*Friday, April 7 – Sunday, April 9, 2023*
Y4-1 Ends	Sunday, April 16, 2023
Y4-2 Begins	Monday, April 17, 2023
Y4-2 Ends	Sunday, May 14, 2023
Y4-3 Begins	Monday, May 15, 2023
Holiday (Memorial Day)	*Monday, May 29, 2023*
Y4-3 Ends	Sunday, June 11, 2023
Y4-4 Begins	Monday, June 12, 2023
Holiday (Independence Day)	*Tuesday, July 4, 2023*
Y4-4 Ends	Sunday, July 9, 2023
Y4-5 Begins	Monday, July 10, 2023
Y4-5 Ends	Sunday, August 6, 2023
Y4-6 Begins	Monday, August 7, 2023
Step 2 CK Deadline	**Saturday, September 2, 2023**
Y4-6 Ends	Sunday, September 3, 2023
Holiday (Labor Day)	*Monday, September 4, 2023*
Y4-7 Begins	Tuesday, September 5, 2023
Y4-7 Ends	Sunday, October 1, 2023
Y4-8 Begins	Monday, October 2, 2023
Y4-8 Ends	Sunday, October 29, 2023
Y4-9 Begins	Monday, October 30, 2023
Y4-9 Ends	Wednesday, November 22, 2023
Thanksgiving Recess	*Thurs., November 23 – Sun., November 26, 2023*
Y4-10 Begins	Monday, November 27, 2023
Y4-10 Ends	Friday, December 22, 2023
Winter Holiday	*Sat., December 23, 2023 – Sun., January 7, 2024*
Y4-11 Begins	Monday, January 8, 2024
Holiday (Martin Luther King, Jr)	*Monday, January 15, 2024*
Y4-11 Ends	Sunday, February 4, 2024
Y4-12 Begins	Monday, February 5, 2024
Y4-12 Ends	Sunday, March 3, 2024
Transition to Residency (Attendance Required)	**Mon., March 4 – Fri., March 8, 2024**
Match Week/Transition to Residency (Attendance Required)	**Mon., March 11 – Thurs., March 14, 2024**
Holiday (Match Day)	*Friday, March 15, 2024*
Y4-13 Begins	Monday, March 18, 2024
Holiday (Spring Holiday 2)	*Fri., March 29 – Sun., March 31, 2024*
Y4-13 Ends	Sunday, April 14, 2024
Transition to Residency (Attendance Required)	**Mon., April 15 – Fri., April 26, 2024**
Graduation Preparation (No duties assigned/3 weeks)	Sat., April 27 – Fri., May 17, 2024
Graduation Weekend	Sat., May 18 – Sun., May 19, 2024
Graduation	Monday, May 20, 2024

MD Program Courses
The Year 1 Curriculum
(Pre-clerkship Phase)

The required courses for the first year of the Pre-clerkship Phase are:

LAUNCH	2.0 credits
Clinical Anatomy and Physiology	10.0 credits
Metabolism and Defense	8.0 credits
Systems Pathophysiology 1	10 credits
- Neuroscience	
- Gastrointestinal System	
Population Health/Epidemiology	2.0 credits
Clinical Skills 1	2.0 credits
Medicine and Patients in Society1	1.0 credits
Integrated Ultrasound 1	1.0credits
Introduction to Clinical Reasoning & Integrative Thinking	3.0 credits
Total:	**39.0 credits**

Year 1 Courses

LAUNCH

This 3-week course provides a basic overview of the knowledge, skills, attributes, and habits that are central to medical student development and success as aspiring physicians.

The course content will be structured around the following concepts represented by the LAUNCH acronym:

L Learning strategies
A Acclimation to the medical profession (expectations of medical students, concept of entrustable professional activities [EPAs], professionalism,)
U Understanding oneself
N New words and ideas
C Careers in medicine
H Healthy living (strategies applicable to myself and my patients, e.g., nutrition, exercise, sleep, stress management)

Clinical Anatomy and Physiology (CAP)

This course is a system-based course designed around topics of structure, development, and function of the human body as applied to medicine. The course is intended to serve only as an *introduction to structure, function, and development*. There is an emphasis on regional relationships between anatomical systems, integration of structure and function at both the gross and microscopic level, and context of clinically relevant anatomical concepts. In general, the course will approach topics by:

- Explaining normal organ system function
- Developing an understanding of radiological imaging
- Informing the physical examination
- Preparing for proficiency in common clinical procedures
- Establishing the foundation for clinical reasoning

Metabolism and Defense (MAD)

The goal of Metabolism & Defense (MAD) is to establish a foundation of cell and molecular biology for understanding mechanisms of acquired and inherited human disease. This course combines subject matter from biochemistry, pathology, microbiology, molecular biology/medical genetics, virology, and immunology. Materials included in class presentations are aligned with clinical scenarios to apply basic science topics. Each of the major topic areas, biochemistry, pathology, microbiology, molecular biology, medical genetics, virology, and immunology, will have a case developed specifically related to the topics presented in the course.

Systems Pathophysiology 1 (SYSPATH 1)

Neuroscience

Medical Neuroscience is the first systems pathophysiology course, and more than half the content focuses on clinical medicine. The medical neuroscience course is a nine-week interdisciplinary block that covers:

- Basic neuroscience
- Core components of neurology
- Core components of psychiatry and behavioral health
- Principles of pharmacology as applied to the nervous system and its disorders.

The course supplies the basic information about neuroscience needed to explore the pathophysiology of the neurological and psychiatric conditions commonly encountered in medical practice. It will introduce you to the principles of neurological and psychiatric diagnosis and supply the basic grounding in pharmacology needed to understand the neurochemical bases of many nervous system disorders and the use of medications in their treatment.

Gastrointestinal System

This course provides instruction regarding the gastrointestinal tract from the mouth to the anus, including the important accessory organs: the liver, the biliary tree, and the pancreas.

- Specific areas of focus include the physiology of digestion and absorption; nutrition; embryology, anatomy, and congenital disorders; genetics; pathology and disease states; microbiology; immunology; and pharmacology.
- Methods of instruction include didactics (35 hours), case-centered interactive learning (6 hours), on-line learning (8 hours), USMLE Step 1-type question review (8 hours), interactive games (3 hours), a live multidisciplinary GI Oncology Conference (1 hour) and self-directed learning. Material covered by on-line learning is addressed in class in the form of USMLE Step 1-type questions and discussion (4 hours, included in the 8-hour total for this method of instruction)
- The course is 4-week in length.
- The course faculty is made up of physician-scientists and clinicians.
- Learner knowledge is assessed weekly throughout the course in the form of SRS questions and at the end of the course with the GI Block exam (summative).
- At the end of the course, the learner should have acquired a solid foundation of knowledge of the physiology, pathophysiology, and pharmacology of the GI tract and liver, as well as a preliminary understanding of the prevention, evaluation, and management of patients with diseases of these organs.

Population Health/Epidemiology

Because we are in an era of rapid generation of new knowledge, special skills are needed to access, critically review, and efficiently use good evidence from medical literature in the care of patients and populations. This course extends across Year 1 and facilitates students' understanding of medical epidemiology and provides an introduction to evidence- based medicine. Included are an understanding of basic epidemiologic principles, strengths and weaknesses of various study designs, use and interpretation of basic statistics, use and interpretation of diagnostic tests, techniques of efficient literature searching, and framing a precise patient (or population) care question in the areas of diagnosis, prognosis, harm, and therapy. The material will be presented in alternating lecture and small-group formats. Student evaluation includes small-group participation, problem sets, and computer-based examinations.

Clinical Skills 1: Foundations in Clinical Skills (CS1)

The clinical skills curriculum provides students with longitudinal clinical skills training through small-group learning, facilitating the development of the essential skills needed to perform as a clinician, including professionalism, history taking, communication and interpersonal skills, physical examinations skills and clinical reasoning skills. The curriculum is delivered through a series of sessions throughout years 1 and 2, and session are led by clinical faculty instructors. The course philosophy supports a patient- and relationship-centered approach that respects the dignity and value of each patient. Throughout the CS curriculum, students have multiple opportunities to meet and practice talking with and examining patients including real patients in our medical center, as well as standardized patients.

The focus of the first year of this curriculum – CS1 – is introductory history taking, communication, physical examination and clinical documentation skills. Class sessions include interactive tutorials of clinical skills, as well as clinical skills practice

with patients, with direct observation and coaching by faculty. For early clinical immersion, students also attend multiple one-week clinical practice experiences (CPEs) with an assigned ambulatory preceptor. Evaluation of students in CS1 consists of a series of performance-based assessments while interacting with standardized patients.

Medicine and Patients in Society 1 (MAPS)
This course sequence is a broad and basic overview longitudinal seminar, designed to prepare students for the integration of behavioral, social and ethical considerations into MS1 core learning about patient care and the role of health care in society. It covers core medical education content in ethics and professionalism, behavior, the medical social sciences, and the medical humanities, and is structured for optimal teaching of these key concepts and skills in the preclinical years. Promotion of critical reflection and respectful dialogue in small groups is an essential component of teaching and learning this material.

Integrated Ultrasound 1
The Integrated Ultrasound Curriculum is a supplemental instructional time intended to clarify difficult anatomical relationships and to reinforce knowledge of anatomy and physiology during the study of pathophysiology. The course is designed to maximize student engagement via hands-on laboratory sessions where students will be responsible for obtaining ultrasound images and investigating various anatomic structures.

Each course module consists of a 30-45 minute online didactic component to describe the relevant anatomy and ultrasound imaging combined with a one-hour laboratory session. During the laboratory sessions students will use ultrasound machines to image each other and obtain views of the relevant structures.

Introduction to Clinical Reasoning and Integrative Thinking (iCrit)
The Introduction to Clinical Reasoning and Integrative Thinking (iCRIT) course is a small group foundational course in the preclinical curriculum that introduces students to the fundamentals of clinical reasoning and medical decision making using a small group, interactive model based upon interactions with "virtual patients." This course teaches students how to formulate a differential diagnosis using a hypothesis-driven approach to data-gathering based upon a patient's complaints and physical examination in the context of their overall health and concurrent medical problems.

The Year 2 Curriculum

The required courses for the second half of the Foundations Curriculum include:

Systems Pathophysiology 2	**12 credits**
- Hematopoietic/Lymphatic	
- Cardiovascular	
- Pulmonary	
Systems Pathophysiology 3	**10 credits**
- Musculoskeletal	
- Renal	
- Endocrinology and Reproduction	
Clinical Skills 2	**2.0 credits**
Medicine and Patients in Society 2	**0.5 credits**
Integrated Ultrasound 2	**0.5 credits**
Transition to Patient Care	**3 credits**
Total	**28.0 Credits**

Year 2 Courses

Systems Pathophysiology 2 (SYSPATH 2)

Hematopoietic/Lymphatic

This block further introduces the student to elements of the hematologic and lymphatic systems. The first week is focused on normal hematopoiesis and lymph node development from embryogenesis to aging. The second week is focused on malignant hematologic disorders, and the third week is focused on the coagulation cascade and various coagulopathies. Each week is comprised of large group teaching, small group teaching where self-directed learning is emphasized, and weekly examinations, both formative and summative. A multidisciplinary approach to teaching is taken, with faculty including clinical specialists, pharmacists, micro-anatomists, and pathologists. The emphasis will be on concepts central to understanding hematology and the effects on patients experiencing the disorders.

Cardiovascular

The cardiovascular course provides a comprehensive overview of cardiac and vascular physiology, pathology, pathophysiology, and pharmacology. A special effort is made to keep the material both clinically relevant and useful for USMLE Step 1 preparation. The course begins with a brief overview of normal anatomy and function. Next, the course will review how the body maintains blood pressure with particular attention given to hypertension and its sequel. To complement the vascular function of blood pressure, cardiac output and its determinants will be reviewed. Using this material, the course will then synthesize an understanding of how to diagnose and develop treatment strategies for hypotension. Building upon this foundation, we will further develop understanding of congestive heart failure and its treatment. Potential causes of congestive heart failure, such as valvular heart disease and coronary artery disease will be reviewed. Recognizing that atherosclerosis is not limited to the coronary arteries, the next section will review the various manifestations and management of vascular disease. Throughout the course, material covered in lecture will be reinforced with case-based learning sessions to demonstrate how best to use the information to diagnose and formulate treatment plans. The final week of the course includes our patient simulation lab, where students have the opportunity to visualize pathophysiologic processes at work in a simulated patient environment. The student will have the opportunity to demonstrate their knowledge and understanding through multiple choice quizzes, case-based learning activities, and the final multiple-choice examination.

Pulmonary

The course guides learners from a basic understanding of respiratory anatomy and mechanics to an understanding of complex respiratory disease states. This is accomplished through addressing a particular "theme" with each week of the course. Within each week, appropriate material is assigned for independent study and other material is discussed in large or small group settings (see LCMS+ for the specific activity schedule). The final week includes integrative activities designed to help students connect their learning to clinical medical practice.

Systems Pathophysiology 3 (SYSPATH 3)

Musculoskeletal

The musculoskeletal system is a complex system that encompasses a broad array of conditions and diseases. Some elements are very localized to specific muscles, nerves, etc. but many of the diseases that will be discussed in this block involve not only the musculoskeletal system but also overlap with other systems such as pulmonary, renal and cardiac. The first week will focus on systemic and inflammatory diseases with special attention to the clinical presentation, diagnosis and treatment. Although there may be some "spilling" of these topics into the next week, the second week will be predominately regional musculoskeletal conditions – again focusing on the presentations, diagnosis and treatment. The faculty providing instruction are mostly all clinicians and include a broad array of disciplines including, but not limited to, infectious diseases, oncology, orthopedics, pediatrics, radiology and rheumatology.

Renal

The Renal Course is designed to provide students with a strong background in basic renal physiology and pathology. With a comprehensive base, the primary objective of the course is to prepare students to identify, diagnose and manage complex renal patients in their third- and fourth-year clerkships. Each week is comprised of both large and small group sessions where self-directed learning is emphasized. A multidisciplinary approach to teaching is taken, with faculty including clinical specialists, micro-anatomists, pharmacologists and pathologists. During the first part of the course, students will initiate their introduction to the field of nephrology with a review of renal anatomy and microanatomy.

Through the nephron, the basic unit, students will explore the many vital functions of the kidney as it relates to blood pressure, water regulation, acid-base balance, excretion of metabolic waste and electrolyte handling. In addition, students will learn the key endocrine hormones of the kidney (i.e. renin, aldosterone, and erythropoietin) and understand their impact on our organ systems. During the second part of the course, students will be exposed to a number of common renal diseases as it relates to structure and function. Students will be able to differentiate between various clinical syndromes, such as nephrotic and nephritic, acute and chronic renal failure. Lastly, students will be exposed to end stage manifestations and treatment modalities of kidney disease through discussions on dialysis and transplant. Students will learn and practice a systematic clinical approach to renal injury. The course will delineate the clinical presentations, diagnostic approaches, and treatment principles of each disease process. This course will employ case centered learning to help integrate the students' knowledge in renal physiology and pathology with clinical applicability.

Endocrinology and Reproduction

This five-week course further introduces the student to essential elements of the endocrine and reproductive systems.

The Endocrinology/Reproduction block focuses on the normal function and disease states of the hormonal control mechanisms that regulate homeostasis, metabolism, reproduction, growth, and stress response. The system is taught from the perspectives of relevant anatomy [including microanatomy], physiology, pathophysiology, pathology, and pharmacology. The block emphasizes and understanding of both normal function and diseases of the hypothalamus, pituitary, adrenals, thyroid, parathyroid glands, endocrine pancreas, and gonads, in addition to a focus on topics of great importance such as diabetes mellitus and reproductive medicine. Educational methods include large group teaching, small group activities where self-directed learning is emphasized and intermittent assessment through quizzes that focus on student learning outside of the lecture room. A multidisciplinary approach to teaching is taken, with faculty including both clinicians and basic scientists.

Clinical Skills 2: Applied Clinical Skills (CS2)

The Clinical Skills 2 (CS2) course is the second-year component of students' longitudinal clinical skills curriculum.

The overall objective of CS2 is to build upon the foundational clinical skills learned in Year 1 of the curriculum and to prepare students for their upcoming clinical rotations in Year 3. As in Year 1, students will continue to practice and build their fundamental clinical skills including doctor-patient relationship building and communication (DPRC) skills, history taking skills, physical examination (PE) skills, and clinical documentation skills, with an ongoing emphasis on patient –center care, professionalism, and professional identity development. In contrast to Year 1, however, where training is primarily focused on basic data gathering, Year 2 clinical skills training will challenge students to learn and practice focused data gathering, data interpretation based on your understanding of pathophysiologic mechanisms of disease, iterative differential formulation, and initial diagnostic management decision-making.

Medicine and Patients in Society 2 (MAPS)

This course sequence is a broad and basic overview seminar, designed to prepare students for the integration of behavioral, social and ethical considerations into MS2 core learning about patient care and the role of health care in society. It covers core medical education content in ethics and professionalism, behavior, the medical social sciences, and the medical humanities, and is structured for optimal teaching of these key concepts and skills in the preclinical years. Promotion of critical reflection and respectful dialogue in small groups is an essential component of teaching and learning this material. In these domains, as is true for many aspects of modern medical education, the ability to engage in continual learning, starting from a core set of basic concepts, is becoming at least as important as mastery of a body of factual knowledge that is constantly changing and expanding. This overview of core content is intended to provide a knowledge base and learning approach that should be built upon with additional curriculum content in the clinical years.

Integrated Ultrasound 2

The Integrated Ultrasound Curriculum is a supplemental instructional time intended to clarify difficult anatomical relationships and to reinforce knowledge of anatomy and physiology during the study of pathophysiology. The course is designed to maximize student engagement via hands-on laboratory sessions where students will be responsible for obtaining ultrasound images and investigating various anatomic structures. Each course module consists of a 30-45 minute online didactic component to describe the relevant anatomy and ultrasound imaging combined with a one-hour laboratory session. During the laboratory sessions students will use ultrasound machines to image each other and obtain views of the relevant structures.

Transition to Patient Care

The Transition to Patient Care (T2PC) Course occurs after the Pre-Clerkship phase and forms the bridge from pre-clerkship to clerkship years. The purpose of the 3-week T2PC Course is to provide knowledge, communicate expectations, and provide hands-on training to enable students to function competently when they begin the Immersion Phase clerkships. The T2PC course also serves as an introduction and orientation to the Immersion Phase curriculum, general clerkship information, longitudinal courses, curricular threads and WFUSOM clerkship related policies. During the course, students will be on-boarded as teammates to the hospital system, learn practical procedural skills, refresh skills learned in pre-clerkship courses, and become familiar with Immersion Phase online applications, the electronic medical record, and the healthcare system to best prepare them to start delivering excellent patient care.

Immersion Phase Curriculum

The Immersion Phase of the curriculum consists of two 24-week blocks of clinical clerkship rotations in the major specialties, as follows:

	Weeks	Credits
Inpatient Internal Medicine	8 weeks	8.0
Surgery	8 weeks	8.0
Pediatrics	6 weeks	6.0
Ambulatory Internal Medicine (WS)	2 weeks	2.0
Ambulatory Internal Medicine (CLT)	Longitudinal	
OB-GYN/Women's Health	6 weeks	6.0
Family Medicine	4 weeks	4.0
Emergency Medicine	4 weeks	4.0
Psychiatry	4 weeks	4.0
Neurology	4 weeks	4.0
Anesthesiology	2 weeks	2.0
Radiology	Longitudinal	1.0
Basic Clinical Procedures	Longitudinal	1.5
Total	**48 weeks**	**50.5**

Year 3 Courses

Inpatient Internal Medicine
During this 8-week clerkship, students are assigned to patient care teams and are responsible for the day-to-day care of identified patients. Student responsibilities include obtaining histories and physical examinations, generating differential diagnoses and treatment plans, assessing patients at the bedside, writing daily progress notes to demonstrate level of understanding, presenting patient information to house staff and faculty, and participating actively on rounds by responding to questions of faculty and house staff regarding disease processes and patient care issues.

Surgery
During this 8-week clerkship, students will rotate on a number of services and gain experience in factors contributing to the management of many common surgical diseases – including anatomy, disease process, diagnosis, and treatment. They will gain practical clinical experience in operating rooms, the emergency department, intensive care units, floors, and clinic. Students are expected to be well-prepared for all encounters and become an active member of the patient care teams with whom they work. They will also be expected to demonstrate competence in basic surgical skills, such as removal of skin sutures or staples.

Obstetrics/Gynecology/Women's Health

This 6-week experience provides students with exposure to common topics in women's health in both the inpatient and ambulatory settings. Inpatient activities include exposure to peripartum problems, operative obstetrics, operative gynecology, and common OB/GYN diagnostic and therapeutic modalities. In addition, as part of the high-risk obstetrics team, students are responsible for following patients from admission to discharge, participating in all aspects of care from the initial physical examination to the formulation of a management plan. The ambulatory component focuses on issues relevant to outpatient women's care.

Pediatrics

This 6-week experience is a blend of outpatient and inpatient clinical activities in pediatric health care. The goal of the rotation is to facilitate the development of communication skills and competency in the physical examination of infants, children, and adolescents; an understanding of the influence of family, community, and society on the child in health and disease; the enhancement of clinical problem-solving skills; and the acquisition of knowledge necessary for the diagnosis and initial management of common acute and chronic illnesses in the pediatric population. Clerkship objectives are met via participation as a member of the inpatient ward team and discussion of case vignettes in a small-group setting. The ambulatory component utilizes outpatient clinical settings to enhance students' skills in synthesis of clinical information, interpretation of physical examination findings, generation of a differential diagnosis, selection of diagnostic tests, and development of a treatment plan.

Ambulatory Internal Medicine

The 2-week clerkship focuses on the basic competencies of ambulatory internal medicine. In Winston-Salem, students will spend time in a variety of outpatient clinical settings. In Charlotte, students are paired with a clinical preceptor who they will rotate with during part of the semester. Students on both campuses will have the opportunity to work with residents, advanced practice providers, faculty, and other members of the interprofessional ambulatory healthcare team.

Psychiatry

This 4-week clerkship facilitates student attainment of the knowledge, attitudes, and skills including how to conduct a psychiatric interview and the formulation of an initial differential diagnosis for common psychiatric presentations.

Students are routinely expected to evaluate patients, read about the diagnostic possibilities raised by the case, synthesize information, and present the patient on rounds, pursue further diagnostic testing, participate in planned therapeutic activities, and report and record patients' progress. While on the clerkship rotation, students are expected to read material relevant to their patients' conditions. They are also expected to utilize standard textbooks and review materials to familiarize themselves with clerkship objectives not addressed by their clinical exposure.

Neurology

This 4-week clerkship assists students in addressing the primary clerkship objectives relating to the identification of common neurologic diseases, the recognition of emergency neurologic situations, the management of common neurologic problems, and communication with patients and families of patients with motor, sensory, and cognitive deficits. The process of daily rounds and clinic (ambulatory) conferences, as well as weekly grand rounds, provides students with relevant examples of integrated clinical thinking. Students are expected to pursue independent reading on cases encountered on the wards and in clinics.

Family Medicine

The Third-Year Family Medicine Clerkship of the Wake Forest School of Medicine is a 4-week rotation. This clerkship has been designed to expose third-year medical students to the discipline of Family Medicine and its role within the larger health care system; our specific course goals and objectives are listed below. This experience will consist of outpatient clinic, seminars and small group discussions, department conferences, and opportunities for direct clinical observation with our Clinical Coaches.

Emergency Medicine

This 4-week clerkship provides students with experience in the diagnosis and initial management of patients presenting to the emergency department. Students complete ten eight-hour shifts during the clerkship and participate in simulation labs, lectures, and bedside teaching with Emergency Medicine faculty.

Anesthesia

During this 2-week introduction to the management of perioperative patients- including preoperative assessment, intraoperative management, resuscitation skills and pain management – students will gain practical clinical experience in operating rooms and clinics. These settings will expose them to anesthesiology and surgical faculty and residents, other care providers, and patients and their families. This practical clinical experience will be supplemented by appropriate educational experiences in various conferences.

Radiology
Radiology is a required year-long course which introduces diagnostic radiology. The purpose of this clerkship is for the third-year medical student to gain a basic understanding of diagnostic radiology and its role in patient diagnosis and treatment. The radiology curriculum is integrated into several clinical clerkships of Year 3: internal medicine, surgery, emergency medicine, neurology, psychiatry, OB/GYN, and pediatrics. During each of these clerkships (or clerkship blocks), individual radiology sessions will highlight disease processes that the students will likely encounter on those clinical clerkships. During the sessions, which last from 1 to 2 hours, the students will independently review pre-learning modules, to be followed by an interactive case conference whose goal is to illustrate concepts described in the modules.

Basic Clinical Procedures
Basic Clinical Procedures is the first of two required courses that comprise the Wake Forest Procedures Curriculum. In this course, students are introduced to basic clinical procedures and given the opportunity to learn about each procedure via multi-media online educational modules. Students then observe and participate in these procedures, students are expected to seek out opportunities to perform the procedures under appropriate supervision. The final examination for this course is the Procedures Objective Structured Clinical Examination (OSCE), a proctored exam where students are observed performing selected procedures in standardized simulated environments.

The Year 4 Curriculum

Year 4 consists of 4-week blocks including three required selectives (Advanced Inpatient Management, Acting Internship, and Critical Care), and six electives. All students are required to take Geriatric and Palliative Care, longitudinal Advanced Clinical Procedures Course, and Transition to Residency. Students also have a 4-week block for USMLE Step 2 preparation, and 2 four-week blocks for residency interviews. The remaining time is available for approved electives. All Year 4 scheduling, including the Course Catalog and course selection is available through the PeopleSoft Student Center.

	No. of Weeks	Credits
Advanced Inpatient Management/Acting Internship Management (AIM) - Two 4-week rotations	8 weeks	8.0
Critical Care	4 weeks	4.0
Electives	24 weeks	24.0
Geriatric and Palliative Care	2 weeks	2.0
Advanced Clinical Procedures	Longitudinal	1.0
Transition to Residency	4 weeks	4.0
Total	**42 weeks**	**43.0**

Year 4 Courses

Advanced Inpatient/Acting Internship Management Selectives (AIMs)
Students complete at a minimum two AIM rotations, selected from one of the following disciplines: Surgery, Psychiatry, Emergency Medicine, Anesthesiology, Obstetrics & Gynecology, Internal Medicine, Neurology, and Pediatrics. The primary goal of this selective experience is the development of students' abilities in complete patient management. Students are actively involved in all aspects of patient care, including primary work-up, development of differential diagnoses, in-hospital patient management, and post-hospital care planning. Goals and objectives for each approved AIM are listed in the Year 4 Program Guide published online. As part of the AIM rotations, students must complete a Self-Directed Learning activity in which they drive their learning to meet a self-identified knowledge gap.

Critical Care Selective
The primary objective of this selective is to expose students to patient care in the intensive care setting, with emphasis on patient management issues, such as differential diagnosis, rational laboratory and radiologic testing, and acute and chronic management of patients with multiple medical and surgical problems. Students participate as an integral part of the intensive care team, in the Medical Intensive Care Unit (MICU), Coronary Care Unit (CCU), Neurosurgical Intensive Care Unit (NSU), Cardiothoracic Surgery Intensive Care Unit (CTSU), Pediatric Intensive Care Unit (PICU), Neonatal Intensive Care Unit (NICU), Surgical Intensive Care Unit (SICU) or the Trauma Surgery Unit (TICU).

Students assume supervised responsibility for patient admission, evaluation, diagnostic testing, and initiation and evaluation of therapy and are exposed to patient-care issues such as end-of-life decisions, patient disposition, and family healthcare dynamics. Students also spend time in the Patient Simulation Laboratory (PSL), where they have the opportunity to learn and practice management skills relating to acute cardiovascular, pulmonary, renal, and neurologic intensive care. As part of the Critical Care rotations, students must complete a Self-Directed Learning activity in which they drive their learning to meet a self-identified knowledge gap.

Geriatric and Palliative Care
This two-week clerkship provides students with an introduction to the principles of Geriatric and Palliative Care Medicine. The goal of this rotation is to understand levels of care available in the health system; and facilitate the assessment and care of the whole-person–physical, cognitive and emotional, social and spiritual--recognizing and managing multi-morbidity; and focusing on supporting aging and dying patients with high quality of care. The course provides direct patient care in Outpatient and Inpatient care settings.

Advanced Clinical Procedures
Advanced Clinical Procedures is the second of two required courses that comprise the Wake Forest Procedures Curriculum. In this course, students are introduced to advanced clinical procedures and given the opportunity to learn about each procedure via multi-media online educational modules. Students then observe and participate in these procedures as part of their clinical experiences. For specifically identified procedures, students are expected to seek out opportunities to perform the procedures under appropriate supervision. Procedures are tracked during the first course in this series, Basic Clinical Procedures, will be credited towards the requirements for completing this course.

Transition to Residency

This course serves as the final capstone experience of the Wake Forest University School of Medicine curriculum. The course is required for all students who will have completed all required elective preclinical coursework and clinical clerkships and is mandatory for successful graduation.

The course is designed to augment the transition of senior medical students from their supervised clinical clerkships to their role as interns/residents. The course consists of approximately 80 required hours of curricular activity spread over 4 weeks. These four weeks will cover a variety of topics that will not only prepare them for Day 1 of intern year, but also for a career in medicine. The overall course divided into the following components:

1. Required activities: these activities are mandatory for all students; attendance and participation are required for successful completion of the course. Each Campus will designate specific mandatory activities.

2. Specialty-oriented "selective" tracks: these specialty-specific tracks consist of a group of lectures, small and large group activities which are oriented towards students who will be pursuing like-internships (i.e., internal medicine, surgery, emergency medicine, family medicine, obstetrics & gynecology, pediatrics, psychiatry). Students are required to complete one of the specialty-specific tracks.

3. Electives: these activities are optional and designed to provide students with the ability to tailor a component of their capstone experience to meet their own curricular needs. Students are not required to complete all electives but will be required to complete a designated minimum number of credits of the elective options depending upon the campus. For elective hour requirements please see Appendix A for Winston Campus and Appendix B for Charlotte Campus. Each elective will be designated a number of credits based on the time required for the elective. Electives sessions will be on a variety of topics and include workshops such as Code Simulation, Heart Failure, Procedures skills, Musculoskeletal Examination, Ultrasound skills, and the opportunity to hold a pager and triage pages.

4. Intern as Teacher: this will focus on developing the students' skills to teach in unteachable moments. On Day 1 of intern year, interns are expected to interact with and teach learners on wards or in clinic all while juggling seeing patients, writing notes, calling consults, etc. We recognize the stress of managing all those things simultaneously so have developed a session to assist interns in choosing short, but meaningful opportunities to engage learners effectively. This will be a component of the required activities.

5. Individualized Learning Plan: All students will establish, monitor, and assess a personalized learning plan which will be facilitated by the course director and course liaisons. All students will be required to submit a reflective worksheet in the second week (first week in April) to analyze their personal and professional development over their medical school careers and establish goals for further enhancing their personal and professional development. All students will be required to assess their area of academic needs prior to the course so as to develop this personalized learning plan, turn in a mid-course assessment of their progress, and complete a final reflective assessment of their learning plan for successful completion of the course.

Required activities are mandatory. Students have the opportunity to select one of multiple "selective/bootcamp" tracks. Within each track, all coursework is mandatory. Electives will be predominantly in-person. Methods of instruction include mini-didactics (i.e., 30–40-minute rapid reviews), small and large group activities, gamification, simulation, and procedure-based experiential activities.

MD Student Responsibilities

Employment: The time available for gainful employment during medical school is limited. If additional funds are necessary, the student should discuss concerns with a Financial Aid Officer. A student who decides to accept a job should notify the Office of Undergraduate Medical Education (UME) so that academic progress may be monitored.

Equipment Purchases: Medical students at Wake Forest University School of Medicine are required to purchase a number of items for use in classes such as Clinical Anatomy and Physiology and for clinical situations. Details are provided to students during Orientation.

Health Insurance: Wake Forest University School of Medicine requires that all students have adequate and applicable medical insurance. Any charges generated that are not covered by the student's insurance policy will be the personal responsibility of the student. Students who are eligible to continue coverage under a parent's or spouse's policy may do so. As an alternative, Wake Forest University School of Medicine offers a student plan through Aetna. Details of the plan are found at https://www.universityhealthplans.com/WFUSM. The cost of this insurance is billed to the student each semester on the student account. Students are automatically enrolled in the plan each semester and are required to waive out of the plan each semester if coverage is not needed. Students who fail to waive during the designated waiver period will be automatically enrolled in the plan and responsible for all premium costs.

Disability Insurance: Wake Forest University School of Medicine provides disability insurance to all medical students at no cost to the students through UNUM Life Insurance Company America.

Dental & Vision Insurance: Optional dental and vision insurance is offered to all medical students through United Healthcare. Students must enroll in the dental and vision plans each year directly with United Healthcare. Open enrollment occurs once each year during the month of August.

Identification: The Wake Forest Baptist Health badge is issued at Orientation and should be worn above the waist by the student at all times while in the Medical Center or while in other affiliated hospitals, offices, and clinics. Once activated, it is used for identification purposes and for activities at Wake Forest and will give access to the Wake Forest University School of Medicine library services. Students who lose their badges will have to purchase replacements and may do so by contacting the Badge Office at (336) 716-0069 for assistance.

Students rotating in Charlotte should wear their Atrium Health badge above the waist at all times while in Atrium Health Carolinas Medical Center or while in affiliated hospitals, offices, and clinics.

Laboratory Coats: Students are provided with disposable laboratory coats as needed, according to OSHA guidelines.

White Coats: Students are provided with white coats to wear on the wards and during patient interactions. White coats are presented to students during the White Coat Ceremony. Additional white coats may be ordered at the students' cost by contacting stuserv@wakehealth.edu.

Mail: Each student is provided with a Medical Center e-mail address. Students are responsible for checking their e-mail account on a daily basis for official correspondence. Physical mailboxes and combination locks for medical students are assigned upon matriculation and located on the third floor of the Bowman Gray Center for Medical Education. **Students are responsible for any correspondence sent to the student mailbox.** The student should use his or her year of graduation as part of his or her Medical Center address. Students are responsible for checking their box often to collect official communications. The address for the Medical Center is Medical Center Boulevard, Winston-Salem, NC 27157.

Pager/Messaging Services: Pager service is essential for all Year 3 and 4 students. Prior to Year 3 orientation, the Office of Educational Excellence and the Wireless Communications Office will provide students in Winston-Salem information regarding the Medical Center pager service. Service is offered through two sources: the SPOK Mobile app or a physical pager. The SPOK Mobile App is used on smartphones, and demos of the app and downloading assistance are provided by the Wireless Communications office. The Wireless Communications office is located on the first floor of the Gray Building near the Hawthorne Road parking deck tunnel entrance. All associated fees for the pager service will be funded by the Office of Undergraduate Medical Education (UME).

Atrium Health in Charlotte uses Haiku for pager service. Registration for the Atrium Health pager service is requested for each student rotating in Charlotte by the UME office as a part of their onboarding process.

Laptop: Students are required to provide their own device that meets the minimum requirements set forth by Academic Computing.

MD Student-Focused Resources

❖ *Office of Undergraduate Medical Education*

The Office of Undergraduate Medical Education (UME) promotes educational development activities and supports the students, faculty, and administration through service and research. The mission of the UME is to foster a supportive teaching-learning environment by facilitating curriculum design and implementation, developing and implementing program and student evaluation, and conducting educational research.

Course and Curriculum Facilitation: The UME facilitates the curriculum and its component courses and clerkships by providing essential support services for curriculum committees; topic, course, and clerkship directors; teaching faculty; and students.

Student Assessment The UME supports student assessment by providing comprehensive testing services, including performance assessments.

Program Evaluation: The UME guides the development of evaluation plans, conducts evaluations in support of the curriculum, and reports and makes results-based recommendations to committees that oversee the curriculum.

Educational Research: The UME initiates and/or collaborates with medical school faculty in designing, conducting, and analyzing data and reporting results of educational research studies.

The services of the unit are available to all faculty members. Services from Evaluations include assisting with editing of test questions, scoring of examinations, analyzing examination data, and consulting on the interpretation of examination statistics. The UME conducts educational research and evaluation studies and provides consultation in these areas to the central administration, departments, and individual faculty members.

Instructional design services include assistance with curricular design and individual consultation with instructors to develop and design online and in-person courses that are functional, intuitive, informative, and consistent with sound instructional design principle.

Boards & Beyond Step 1-Preclinical, through its online virtual curriculum, offers short, board style vignette questions to ensure information is retained. Instead of buzzwords or mnemonics, Boards & Beyond emphasizes understanding of the basic and preclinical sciences, enabling students to study smarter for success in medical school and on the USMLE Step 1 exam. Boards & Beyond enables students to track video viewing statistics, mark favorites, and record notes. It also provides a comprehensive dashboard to review quiz results and enable retakes.

Beginning in 2013, the Wake Forest University School of Medicine established Learning Communities or "Houses," in support of the education of our students. Upon matriculation, medical students are randomly assigned to four color-coded houses with their own unique mottos within their House, each house is assigned a Center for Personal and Professional Development (CPPD) coach, an academic advisor, an advanced career advisor (ACA) as well as having one early career advisor (ECA) for every 4 students. The ECAs are also faculty that work with students as Clinical Skills Coaches.   Students are introduced to this team during Orientation and LAUNCH in their first days on campus. Students may contact these advisors at any time for guidance and support. In Year 1, students are required to meet with their CPPD coach and once per semester with career advisors in a small group. These two individuals can facilitate connections with other resources. This team mentoring approach builds a solid foundation of support for medical students from day one of medical school all the way through graduation.

The mottos of each house are as follows:

- *Blue House: "If you're going to be a doctor, be the best."*

- *Green House: "While we live, we serve."*

- *Red House: "In everything, compassion."*

- *Yellow House: "We labor not for ourselves."*

The goals of the Learning Communities or "Houses" are as follows:

- *Fostering relationships between students and faculty*

- *Vertical integration of medical students across class years*

- *Advising, mentoring, and career planning*

- *Modeling medical professionalism*

- *Creating community service opportunities*

- *Social networking*

Each House will plan activities according to the interests of its members and the mission of each House. The Houses occupy physical space on the 3rd floor of the new Bowman Gray Center for Medical Education to facilitate the goals of these Learning Communities.

❖ *Resources for Career Planning*

Early Career Advisors (ECA)
Upon matriculation, students are assigned to Clinical Skills groups. Each group has two faculty members assigned to teach physical exams as well as to begin discussions on career exploration. These faculty have a roughly 1:4 ratio to students and meet with students each semester to begin discussions of steps to progress towards residency at the end of medical school. The ECA's can connect students to ACAs at any point. They will also introduce students to the resources within AAMC's Careers in Medicine, which is a free resource for all students.

Advanced Career Advisors (ACA)
As students enter the clinical years of medical school, they are provided with additional support from a team of advisors whose expertise is the residency application process. They are also provided with contacts from the specialty in which they will apply for residency. **ACA**s provide academic and career advice, strategic schedule planning, and interviewing advice specific to the specialty of choice. The primary goal of this relationship is to provide students with resources to obtain a successful residency match most effectively.

Workshops & Other Career Resources
The ACAs, in collaboration with the Office of Educational Excellence (OEE), host regular workshops targeting key aspects of the residency application process. These are communicated to 3rd and 4th year students. Individual appointments and advising are also available for review of CVs, personal statements, and for mock interviews, in addition to a required meeting for the development of each student's noteworthy characteristics for their Medical Student Performance Evaluation. A list of the various workshops offered is included below.

- Building a CV
- Writing a Personal Statement (informational and interactive)
- Medical Student Performance Evaluation (MSPE)
- Electronic Residency Application Service (ERAS) Q&A
- Interview Prep Informational Session
- Mock Interview Practice Sessions
- Rank Order List (ROL) and SOAP/Match Q&A

The following resources are provided by third-party organizations and are free to medical students:

AMA FREIDA
AMA FREIDA is an interactive database that provides access to fellowship and residency information:
https://freida.ama-assn.org/.

ACGME
ACGME also provides residency information from a graduate medical education perspective:
https://freida.ama-assn.org/.

AAMC Careers in Medicine
The AAMC Careers in the Medicine (CiM) can help students choose specialties that best fit their attributes, provide details about more than 120 specialty choices, and compare qualifications and programs. All US MD students receive free access to CiM and can sign up by using their AAMC account that was created when signing up for the MCAT, AMCAS, etc. Get started now: https://www.aamc.org/cim/.

AAMC Residency Explorer Tool
The AAMC residency explorer tool allows students to enter their key applications data and compare their application profile to previously matched applicants. https://www.residencyexplorer.org

Texas STAR Data
Medical students can search a database to compare their application profile to previously matched medical students across various medical specialties and residency programs. The Office of Student Affairs will grant students access to the Texas STAR data around the same time that ERAS tokens are issued, usually in December of the third year of medical school.

MD Program Awards and Honor

Each year students who have demonstrated excellence in the field of medicine are selected to receive awards. These are given by the clinical departments, faculty, and student body. A plaque or certificate and a monetary gift may accompany the award. The following are the awards and honors bestowed annually:

Alpha Omega Alpha Honor Medical Society:	A professional medical organization that recognizes and advocates for excellence in scholarship and the highest ideals in the profession of medicine. The top 25 percent of a medical school class is eligible for nomination to the society, and up to 16 percent may be elected based on leadership, character, community service, and professionalism.
American Academy of Neurology Medical Student Prize for Excellence:	To recognize a graduating medical student for excellence in clinical Neurology.
Charles Brian Clark Memorial Award:	Presented to a faculty or staff member who is recognized for outstanding service to the senior class.
Charles B. and Agnes Cree Deane Cancer Research Award:	For outstanding work in clinical Oncology
Charles M. Howell Memorial Excellence in Dermatology Award:	For the graduating medical student who, during his or her interaction with the faculty of the Department of Dermatology, best exemplifies leadership, intellectual ability, achievement, and humanity.
Cultural Awareness Award:	For outstanding service in cultural awareness.
David Bryan Sloan III, M.D. Award for Excellence in Ophthalmology:	For the graduate showing the most interest and aptitude in Ophthalmology
Dr. Martin and Sandra Castelbaum Award for Excellence in Internal Medicine:	For the senior student with the best overall performance in Internal Medicine. Dr. Martin Castelbaum graduated from Wake Forest Medical School in 1958, and his career in Internal Medicine epitomized a dedication to the welfare of his patients. The Department of Internal Medicine at Wake Forest University School of Medicine has recognized an outstanding member of the graduating class who best embodies the principles and ideals of the specialty of Internal Medicine. These ideals include the overriding principle, "to be undivided in the fight against illness and premature death and to be trustworthy in our knowledge for every patient that comes to see us."
Gold Humanism Honor Society:	Recognizes medical students who are exemplars of humanistic patient care and who can serve as role models, mentors, and leaders in medicine. The institution may elect 10 to 15 percent of the graduating class.
The Helms Award in Internal Medicine:	For the senior student who best embodies the tenets of the ideal physician – the person we would want to be on call with, have care for our families, and see on our healthcare team on July 1[St]. Jeff Helms graduated from Wake Forest Medical School in 1962. He has practiced Internal Medicine in Winston-Salem for 44 years and embodies those traits we look for in our colleagues and ourselves.
Isadore and Rachell Meschan Award for Academic Excellence in Radiologic Sciences:	To the student who has performed outstanding research and demonstrated academic excellence in Radiology.
The Leonard Tow Humanism in Medicine Award Presented by the Arnold P. Gold Foundation:	To the student and faculty member who best demonstrate the foundation's ideals of outstanding compassion in the delivery of care; respect for patients, their families, and healthcare colleagues; and clinical excellence.
M. Robert Cooper Scholarship Awards:	For expressing serious interest in the field of Oncology.
Medical Alumni Association Excellence Award:	For the senior who embodies the concept of the total physician
Medical Student Award for Excellence in Anesthesiology:	For the most outstanding student in Anesthesiology
Michael R. Lawless Pediatric Merit Award:	For all-around ability and interest in Pediatrics.
Norman D. and Dot G. Potter Award in Geriatrics:	For excellence in the field of Geriatrics.

Obstetrics and Gynecology Merit Award:	For outstanding academic and professional stature in OB/GYN
Outstanding Medical Student in Psychiatry Award:	For the most outstanding student in Psychiatry.
Peacock Plonk Award:	The Peacock Plonk Award is given to students who achieve the highest clerkship grade of Honors on all their Year 3 clerkship rotations. The Peacock Plonk Award was established in 2017 in honor of James E. Peacock, MD, Professor of Infectious Diseases, and George W. Plonk, MD, Associate Professor of Vascular Surgery, who are widely revered for their clinical expertise, their diagnostic acumen, their bedside manner, and their humility.
M. Robert Cooper Scholarship Awards:	For expressing serious interest in the field of Oncology.
Medical Alumni Association Excellence Award:	For the senior who embodies the concept of the total physician
Medical Student Award for Excellence in Anesthesiology:	For the most outstanding student in Anesthesiology.
R. W. Prichard History of Medicine Award:	Given in memory of Robert W. Prichard, M.D., a distinguished member of the faculty for 44 years and longtime chair of the Department of Pathology and Director of Laboratories for North Carolina Baptist Hospital. Dr. Prichard was also widely respected as a medical historian. The award is given to a medical student who is judged to have written an outstanding paper on the history of medicine.
Richard T. Myers Surgical Merit Award:	For excellence in the field of Surgery .
Robert P. Vidinghoff Memorial Award:	For aptitude and devotion to the field of Family Practice.
SAEM Medical Student Excellence in Emergency Medicine Award:	Presented annually to each medical school in the United States. Awarded to the medical student who best exemplifies the qualities of an excellent Emergency Physician.
Strickland Award in Primary Care:	For the senior student who demonstrates the highest potential for and commitment to the practice of primary care in Internal Medicine. The award is given by the Robert Strickland family to honor Dr. William Y. Rice, III. Dr. Rice has practiced General Internal Medicine at our institution since 1992 and epitomizes the definition of the consummate primary care physician. He strives to practice and model caring for his patients in a manner that we would want for ourselves and for our families. Outstanding performance in the field of Primary Care
Tinsley R. Harrison Award in Internal Medicine:	For the senior student with the highest rank in medical knowledge in Internal Medicine. This award is named for the first Chair of Internal Medicine at this institution and a founding member of the original medical school. His famous text, Principles of Internal Medicine, which was conceived when Harrison was Chair here, is now in its 19th edition and still bears his name.
Wake Forest University School of Medicine Excellence in Neurology Award:	For the most outstanding student in Neurology.

Doctor of Medicine Program Policies and Procedures

Click on the title of the policy you want, to be taken directly to that document

Technical Standards for Medical School Admission, Continuation, and Graduation
Code of Honor and Professional Conduct
MD Conflict of Interest Disclosure
Dress Code Policy
Transfer and Admissions of Medical Students with Advanced Standing Policy
Selection of Medical Students Policy
Matriculation Policy
Campus and Location Assignment Policy
Final Grade Submission for MD Program
Narrative Description of Medical Student Performance Policy
Formative Assessment and Feedback Policy
Satisfactory Academic Progress (SAP)
Student Professionalism and Academic Review Committee (SPARC)
Appeal of Grades, Summative Assessment including Narrative Comments Policy
Computer-Based Exam Policy
Lecture Recording
Note Exchange
Clinical Supervision Policy
Medical Student Contact Hours for the Pre-Clinical Curriculum
Clinical Duty Hours for Medical Students on Clinical Clerkships/Courses
Attendance Policy for Medical Students Pre-clerkship Phase
Attendance Policy for Medical Students Clinical Clerkships/Courses
Withdrawal

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Technical Standards for Medical School Admission, Continuation, and Graduation

PURPOSE

The MD degree is a broad undifferentiated degree attesting to general knowledge in medicine and the basic skills required for the practice of medicine. Essential abilities and characteristics required for completion of the MD degree consist of certain minimum physical and cognitive abilities and sufficient mental and emotional stability to assure that candidates for admission, promotion, and graduation are able to complete the entire course of study and participate fully in all aspects of medical training.

Wake Forest School of Medicine is committed to the full and equitable inclusion of qualified learners with disabilities. We have a proud history of training and employing physicians and researchers with disabilities, as well as developing and employing leaders with disabilities. The School of Medicine provides reasonable accommodations for all qualified individuals with disabilities who apply for admission to the MD degree program and who are enrolled as medical students.

SCOPE

This policy applies to all MD program applicants and students.

DEFINITIONS

A. **Policy**: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

B. **WFBH**: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

POLICY GUIDELINES

Technical (Non-Academic) Standards for Medical School Admission

Critical skills needed for the successful navigation of core experiences are outlined below:

A. Observation: Students must be able to obtain information from demonstrations and experiments in the basic sciences. Students must be able to assess a patient and evaluate findings accurately.

B. Communication: Students must be able to communicate effectively, sensitively, and efficiently with patients, their families, health care professionals, colleagues, faculty, and staff. Students must be able to acquire the patient's medical history in a timely manner, interpret non-verbal information, and establish a therapeutic rapport with patients. Students are also required to record information accurately and clearly; and communicate efficiently in English with other health care professionals.

C. Motor: Students must possess the capacity to perform a physical examination and diagnostic examination and to provide or direct general care and emergency treatment to patients. Performing these examinations requires coordination of both gross and fine muscular movement.

D. Intellectual: Conceptual, Integrative and Quantitative Abilities: Students must be able to assimilate detailed and complex information presented in both didactic and clinical coursework, and engage in problem solving. Students are expected to possess the ability to measure, calculate, reason, analyze, synthesize, and transmit information. In addition, students must be able to comprehend three-dimensional relationships and to understand the spatial relationships of structures and to adapt to different learning environments and modalities. Students must be able to effectively learn, participate, collaborate and contribute as a part of a team. Students will need to synthesize information effectively both in person and via remote technology. Students must be able to formulate a hypothesis, investigate the potential answers and outcomes and formulate appropriate and accurate conclusions.

E. Behavioral and Social Attributes: Students should possess the emotional health required for full utilization of their intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the diagnosis and care of patients, and the development of mature, sensitive, and effective relationships with patients, fellow students, faculty, and staff. Training and practice in the medical profession may be physically and mentally taxing. Students should be able to adapt to changing environments, to display flexibility and learn to function in the face of uncertainties inherent in the clinical problems of many patients. Compassion, integrity, concern for others, interpersonal skills, professionalism, interest, and motivation are all personal qualities that are expected during the education processes.

F. Process for Assessing the Applicant's Compliance with the Technical Standards

1. By accepting an offer of acceptance, a student is acknowledging that they have read these Technical Standards and can meet these standards, with or without reasonable accommodations. Once matriculated, if a student is

unable to meet these Technical Standards with reasonable accommodations, the student may not be able to successfully meet the requirements of a medical degree.

2. Students who, after review of the Technical Standards for their program, determine that they require reasonable accommodation to fully engage in the program should contact the Center for Learning, Access, and Student Support to confidentially discuss their accommodations needs.

    a. Reasonable accommodations may include and are not limited to technological adaptations or trained intermediaries, such as interpreters, who facilitate without supplanting, the student's performance of an essential skill.

3. Given the clinical nature of our programs, time may be needed to create and implement the accommodations. Accommodations are not provided retroactively; therefore, timely requests are essential and encouraged.

4. It is the responsibility of a student with a disability, or a student who develops a disability, and who requires accommodations in order to meet these Technical Standards, to self-disclose to the Center for Learning, Access, and Student Support and request accommodations.

REFERENCES
Student Disability Accommodations Requests Policy and Procedures (WFUSM)
LCME Element 10.5

REVISION DATES
5/2021; 6/2022; 5/2023

Revised 7/2023
For the most recent version and to view this policy in its entirety, please access the Technical Standards for Medical School Admission, Continuation, and Graduation - MD Program (WFUSM) on our institutional policy site.

Code of Honor and Professional Conduct

I. Philosophy of Honor System

We at the Wake Forest School of Medicine believe medicine is an honorable profession. Those endeavoring to practice medicine are motivated by a desire to help heal the sick and infirm and to comfort the dying and their loved ones. Thus, inherent to the practice of medicine are the virtues of honesty and responsibility. We must remain accountable and responsible for our actions and failures to act.

Our responsibility as medical students to uphold said virtues also requires us to abide by this Code of Honor and Professional Conduct for the Wake Forest School of Medicine. The purpose of the Code is to state our commitment to the principles of honesty, trustworthiness, and responsibility among students, faculty, staff, and patients, as well as to establish a system to promote the practice of these virtues. It will also provide a means to investigate, and, if necessary, pass judgment on alleged infractions of the Code. The Code also tasks students with the responsibility for holding themselves and others accountable to its principles.

II. Standards of Honor and Professional Conduct

Physicians are called to the highest standards of honor and professional conduct. However, our responsibility to patients, their families, faculty and staff precedes the receipt of a medical degree. This responsibility begins upon matriculation as a medical school student. As such, the students of the Wake Forest School of Medicine commit to embody the following virtues and uphold the standards they entail throughout the duration of enrollment:

A. Honesty
1. Be truthful and forthcoming in communication with others.
2. Refrain from cheating, including, but not limited to, copying the answers of another student on an examination, unauthorized use of previous editions of examinations, reproducing information on an examination for other students who have not taken the examination, or any other use of unauthorized information or assistance on an examination or assignment.
3. Refrain from plagiarism, including, but not limited to, dishonest representation of another's work as one's own.
4. Refrain from lying or making misrepresentations in the fulfillment of academic requirements.
5. Refrain from falsifying or deceitfully representing information regarding clinical work or patient care, including, but not limited to, reporting or documenting false lab values or other unverified patient information.

B. Trustworthiness
1. Maintain the confidentiality and security of patient information.
2. Admit errors and not promote ourselves at the patient's expense.

C. Professional demeanor
1. Be thoughtful and professional when interacting with patients and their families.
2. Strive to maintain our composure under pressures of fatigue, professional stress, or personal problems.
3. Avoid offensive language, gestures, or inappropriate remarks that are reasonably offensive to others.
4. Maintain a neat and clean appearance, and dress in attire that is reasonable and accepted as professional to the patient population served.

D. Respect for the rights of others
1. Create an atmosphere which encourages learning, characterized by cooperation and respectful relationships with the patient population served.
2. Deal with all members of the health team in a considerate manner and with a spirit of cooperation.
3. Act with an egalitarian spirit toward all persons encountered in a professional or academic capacity, regardless of race, religion, gender, sexual preference, age, disability or socioeconomic status.
4. Respect the right of patients and their families to be informed and share in patient care decisions.
5. Respect patients' modesty and privacy.

E. Personal accountability
1. Participate responsibly in patient care to the best of our ability and seek out help or appropriate supervision when necessary.
2. Responsibly complete any clinical duties that we have undertaken.
3. Notify the responsible person if something interferes with our ability to perform clinical tasks effectively.

F. Concern for the welfare of patients
1. Treat patients and their families with respect and dignity both in their presence and in discussions with others.

2. Recognize when our ability to function effectively is compromised, and ask for relief or aid.

3. Refrain from alcohol or drug use that compromises or could compromise patient care or our own performance

4. Not engage in romantic, sexual, or other non-professional relationships with a patient, even at the request of a patient.

G. Non-retaliation

Refrain from any action that could be construed as retaliation against a fellow student or faculty member who has reported a potential violation of the Honor Code or other Medical School policy, regardless of the outcome of such a report.

H. School Representation

In addition to the behavior described in the Code of Honor and Professional Conduct, we shall demonstrate behavior which is considered appropriate for a career in medicine and will avoid conduct on and off campus which would discredit the School of Medicine, ourselves, or the profession of medicine. This includes violations of criminal statutes. Inappropriate or unprofessional conduct relevant to the student's eventual successful career in medicine may be reviewed by The Honor Council and subsequently both the Associate Dean of Student Affairs and the Senior Associate Dean of Healthcare Education (referred to collectively as "Deans" for the remainder of the Code) and SPARC as prescribed in Section V.

I. Witnessing Violations

Each student carries the personal responsibility to report concerns regarding possible violations of the Code that he or she witnesses. In addition, each student must report concerns when s/he has sufficient information to believe a violation has occurred. Failure to report such concerns will be considered a violation of the Code.

III. Interpretations and Applications

A. Upon acceptance to the Wake Forest School of Medicine, each new student shall receive a copy of The Code and/or information regarding where to find electronic copies of the Code.

B. Each matriculating student will sign the Honor Pledge during orientation. Students are required to sign the Honor Pledge. An official record will be made of the signees and will be kept in the Office of Student Records. The Honor Code and System will be applicable to all students. The Honor Pledge can be found in Appendix II; this pledge may be used as deemed appropriate by students and faculty, e.g., as a posting in a lab or lecture hall, but **it may not substitute** for Appendix I on a graded assignment.

C. Appendix I will apply to all graded assignments during any phase of the Wake Forest School of Medicine course of study, and will appear on all quizzes or examinations. If the assignment is electronic, the student is responsible for reading all of Appendix I and will be required to press an "I Accept" button or its equivalent before being allowed to begin the assignment. For paper assignments, the student will be asked to sign below Appendix I as a symbol of acceptance and understanding that the Honor Code pertains to the assignment.

IV. The Honor Council

A. Composition

1. Twelve student members will comprise the Honor Council, with a quorum of seven members required when the Council is voting on any matter, is holding a hearing, or is voting on revisions to the Code. Each class will elect three members to serve terms of three and one-half years. Election of new members will take place in November of each academic year. No one shall be considered eligible for election to the Honor Council if they are not in good academic and professional standing as defined in the yearly WFSM Bulletin, which can be found through the eWake website. A quorum will be five members when there are only nine members of the Honor Council during the first half of each year.

2. One faculty member will be appointed to a one year term by the Council to serve as Advisor to the Honor Council. This faculty member must also be a member of the SPARC. There is no limit on the number of terms a faculty member may serve as Advisor. The advisor may be present at meetings of the Honor Council.

3. Terms and Conditions of Office

a. Medical students who are candidates for a joint degree are eligible to serve as their matriculating class' Honor Council representative. However, at the time they leave their medical school class to begin the other component of their degree, they will permanently cease to be an Honor Council member. Should this situation arise, four members will be elected from the original matriculating class of the joint degree candidate to ensure adequate representation when the student leaves.

b. Members who do not progress with their matriculating class will no longer be eligible to serve as an Honor Council representative. Election of a new member from the appropriate class will take place as soon as possible.

c. Honor Council members may not also serve as the president, vice president, secretary, or treasurer of his

or her individual class or of the Student Body. Also, no Council member will hold a position on the Health and Effectiveness Committee.

    d. In the event that a Council member is believed to be performing their duties unsatisfactorily, the Honor Council Chair shall be informed and will call for a meeting to discuss the case. After discussion, the member in question may be removed from the Council by a three-quarters vote of the Council members. Election of a new member from the appropriate class will follow as soon as possible.

    e. No student that has previously been convicted of an infraction against the Code in a hearing shall be elected to the Honor Council. Any Council member found guilty of an Honor Code violation in a formal hearing shall be immediately removed from the Council, with his or her position filled as soon as possible by election from the appropriate class.

    f. If a council member is dismissed from the Wake Forest School of Medicine, an election for a replacement council member from the appropriate class will be held as soon as possible to replace this member.

4. Officers

    a. The Chair and Vice Chair of the Honor Council shall be elected annually and shall have served at least one year on the Honor Council. He or she shall be elected by the Honor Council in March or April and shall serve a term of one year. The duties of the Chair are as detailed in the Disciplinary Procedures section of this document. The Vice Chair shall fulfill the duties of the Chair when the Chair is unavailable.

    b. The Secretary of the Honor Council shall be elected annually. A one year prior service requirement is not required to hold this position. He or she shall be elected by the Honor Council in March or April and shall serve a term of one year. The Secretary shall keep record of Honor Council meetings and draft Honor Council correspondence. The Secretary shall fulfill the duties of the Chair when the Chair and Vice Chair are unavailable.

    c. All three officer positions cannot be held simultaneously by 4th year medical students.

5. Faculty Advisor

    a. The Faculty Advisor will be an active faculty member, and shall be a current member of SPARC.

    b. The responsibilities of the Faculty Advisor are to serve as both an educator for and a liaison between the faculty and the Honor Council.

    c. To maintain the confidentiality of the accused student's identity during disciplinary procedures, the Faculty Advisor will not be present during the hearing or deliberations. However, the Faculty

    d. Advisor will be available for consultation by phone during deliberations. Should the faculty member be consulted at such time, identifying information of the accused will not be discussed.

    e. The Faculty Advisor may request to be dismissed from his/her duties at any time by notifying the Honor Council Chair. At such a time, the Honor Council Chair will notify the Dean and may request the Dean's assistance in selecting a new Advisor. A majority vote of the Council will appoint a new Advisor.

B. Duties and Responsibilities

1. The members of the Honor Council shall uphold the values of The Code and act in accordance with the requirements of the Code as examples for all medical students and members of the medical profession.

2. The Honor Council shall educate the student body on the Code and the duties of individuals in the Wake Forest School of Medicine community living under the Code.

3. The Honor Council shall be responsible for receiving accusations, initiating investigations of suspected infractions, holding hearings in a fair and impartial manner, and counseling students when appropriate. The Council shall seek objective evidence that an infraction has occurred. At all times, the members of the Honor Council should maintain an attitude of impartiality when reviewing the evidence presented to them. Furthermore, all cases will proceed under the assumption that the accused is innocent until proven responsible for a violation of the Code.

4. Each member of the Honor Council, excluding the Chair and the Secretary, may be required to participate in the Honor Council process as an Investigator of reported violations. The member who is selected to serve as the Investigator in a case will solicit evidence and interview witnesses in an unbiased manner. Members of the Honor Council shall not serve as Investigator for a particular case if they feel themselves unable to act fairly or impartially in this duty. If another Honor Council member feels another member will be unable to do so, the Honor Council member must share the concern with the Chair, who will make a decision. In the event the concern pertains to the Chair, the Vice Chair will make a decision. Also, any Council member who feels unable to deliberate hearings for a particular case fairly or impartially, for any reason, should inform the Chair and discuss a plan for proceeding without that member's participation.

5. The Chair of the Honor Council shall prepare an annual report to be presented to the Wake Forest School of Medicine student body, faculty, and administration, detailing the number of hearings held and, the offenses, verdicts, and sanctions recommended by the Honor Council. The report will also contain a tally of accusations resolved by counseling, as categorized under Section II. Anonymity of the involved parties will be maintained. This report shall be submitted annually prior to graduation of the fourth-year class.

C. Confidentiality

All information relating to any Honor Council proceeding, including investigations, shall be considered confidential. All individuals involved in an Honor Council proceeding must maintain that confidentiality at all times, unless disclosure is required by law, or when disclosure is otherwise permitted under this Code. Violation of this confidentiality requirement is itself an Honor Code offense. The student accused of violating the Honor Code may choose to waive his or her right to confidentiality at any time by giving written notice to the Chair of the Honor Council. The accused shall have the right to divulge any information concerning his or her case, except for the names of the witnesses, to any person whose confidence he or she has chosen to seek.

V. Disciplinary Procedures

A. Reporting a suspected infraction of The Code

1. When a member of the Wake Forest School of Medicine community has reason to believe that a medical student has violated the Code, he or she should discuss the concern with an Honor Council member or address the concern to one of the Deans. The usual and preferred action from the Dean who receives the concern will be to refer the matter to the Honor Council for review in accordance with this Code. The Dean may, however, choose to not refer to the matter to the Honor Council in his/her discretion, such as when the Dean determines the matter is too sensitive or egregious for the Council's purview, or when other policies warrant direct referral to SPARC or another process for review and resolution. The Deans and Chair will meet biannually to discuss, in general terms and without revealing the identity of the students involved, the concerns reviewed by each, including cases not referred to the Council, to promote a mutual understanding of the types of circumstances that may or may not warrant referral to the Council.

2. To bring a formal charge before the Honor Council, the concerned person should report the complaint in writing by email or via the SGA website to the Chair of the Honor Council or an Honor Council member. At this time, he or she must disclose his or her name, the name of the accused student, the names of any witnesses and the suspected violation. The name of the reporting witness will only be known to the Honor Council member who received the report and the Chair. A member of the Wake Forest School of Medicine community has a duty to report a suspected infraction to the Honor Council or the Deans within 30 days of becoming aware of the infraction.

B. Post-reporting Procedures

1. The Chair of the Honor Council shall follow one of four courses upon receipt of a concern:

   a. Initiate an investigation

   b. Convene a meeting of the Honor Council if the Chair feels for any reason that a reported behavior does not constitute a violation of the code and thus may not need to proceed to a formal hearing. The Chair will set forth their concerns before the Council, and a majority vote by members present will decide whether the reported behavior constitutes a violation of the Code. A quorum is not necessary for such a vote, but all reasonable effort must be made to consult as many members as possible.

   c. Allegations of an Honor Code violation which would also constitute a violation of the School of Medicine's Student Sexual Misconduct Policy, or other policies of the School of Medicine or Wake Forest Baptist Health, or where criminal charges related to the allegations are pending against the accused, must be referred by the Honor Council to the Deans for proper handling. The Deans reserves the right, after careful consideration, to refer any such case to the SPARC or back to the Honor Council to be managed according to the Honor Council process.

   d. If council members are concerned about the wellbeing of the accused, the Chair will share this information with the Deans to aid in helping the student.

C. Investigation

1. Upon appointment by the Chair of the Honor Council, the Investigator shall promptly begin collecting information about the suspected violation. The Investigator shall:

   a. interview the accused student;

   b. interview the person(s) placing the complaint;

   c. conduct interviews with any others, including students or faculty, who may have pertinent information relating to the alleged infraction;

   d. review document(s) or other evidence relevant to the suspected violation;

    e.   report findings to the Honor Council.

    f.   If a case proceeds to a hearing, the Investigator will compile a case summary and provide it to the accused and council members at least 24 hours before a hearing.

  2. During the investigation, the names of all witnesses and the accused will be anonymous to the rest of the Honor Council.

D.   Determination of need for hearing

  1. When a formal hearing is deemed unwarranted by majority vote, Council members may opt to counsel and provide appropriate resources to the accused regarding his/her professional conduct. The accused will be notified that a meeting will take place with an Honor Council officer and at least one other Honor Council member. The purpose of the meeting will be to address the accused's professional conduct as it pertains to the allegation. A report will be maintained by the Chair of the Honor Council, including a brief description of the event and the student's name, for record-keeping purposes. The Chair shall reveal to the Council records of any such meetings at the time of a future investigation of the accused, but will maintain the anonymity of the accused until the determination of a need for a hearing.

  2. If the Honor Council determines the need for a meeting with the accused student as described above, such action is considered to be a finding by the Council of a violation of the Code, and the name of the student and nature of their infraction, as well as the result of the meeting, will be given to the faculty advisor for the Honor Council to ensure a faculty record of the meeting is maintained. The student's identity will remain anonymous to all other faculty members unless the faculty advisor determines that further action may be necessary due to the student's prior disciplinary history.

  3. If a majority vote of the council determines the need for a formal hearing, the Chair of the Honor Council will:

    a.   compile the list of formal charges;

    b.   deliver the charges to the accused;

    c.   schedule the date for the Honor hearing. Except under extenuating circumstances, such as unavailability of Council members or witnesses, the date of the hearing will be no later than **ten** business days after the formal complaint has been received, excluding school holidays;

    d.   send notices to all persons who must be present at the Honor Hearing, including all witnesses. The Chair will also inform the Council members of the name of the accused.

    e.   The accused student will be told the names of all witnesses, with the reporting witness' name included only as a witness to the violation, at the time they are notified of the scheduled date of the hearing.

E.   Rights of the accused

  1. Any student who has been accused of violating the Code and whose case is proceeding to a hearing shall have the following rights. The accused student shall be given a copy of this Honor Code when he or she receives initial notification of the charges.

    a.   Right to timely notification of the charge(s) against him or her.

    b.   Right to have all details of any charges and knowledge of Honor Council proceedings kept confidential. Only individuals specified in this Code should be provided information regarding Honor Council business and proceedings, except when disclosure of information may otherwise be required by law.

    c.   Right to a prompt hearing, as described in section V.d.2.c.

    d.   Right to request, with satisfactory explanation, nonparticipation of any members of the Honor Council. These requests shall be reviewed by the Honor Council as a whole, and a majority vote of a quorum of the Council in favor of proceeding with the hearing is required in order to proceed.

    e.   Right to be assisted or represented at the Honor Hearing by a Wake Forest School of Medicine student of his or her choosing. This representative may not be a member of the Honor Council.

    f.   Right to present a statement in his or her own defense or decline to testify at the Honor Hearing.

    g.   Right to call and question, directly or through his or her representative, witnesses during the Honor Hearing. The accused will give the designated Investigator the names of witnesses he or she would like to call for questioning at least 48 hours prior to the hearing. The Investigator will notify the Chair of the Honor Council, who is responsible for notifying witnesses that they are being called to testify.

    h.   Right to have his or her innocence judged solely on the evidence and testimony presented during the Honor Hearing, though a history of prior offenses can affect sanctioning.

    i.   Right to appeal decisions to SPARC on the grounds of procedural unfairness or perceived bias

F.   Rights of the witnesses

    a.   Any student who has reported or is a witness in a hearing regarding an alleged violation of the Honor Code

shall have the following rights:

b. Right to have testimony given in an Honor Code hearing used only for the purposes of the Honor Code or SPARC proceedings, except when otherwise required by law.

c. Right to remain anonymous to the accused student until the time the accused is informed of the scheduled date of the hearing.

d. Right to be protected from retaliation for participating in the Honor Code process. Any student who retaliates against an individual who has participated in and Honor Code process will be held in violation of the Honor Code.

G. The Honor Hearing

1. Participants

   a. A quorum of council members is required to hold a hearing. A quorum will be defined as greater than half the number of voting members. Therefore, five voting members (excluding the Investigator) must be present prior to the election of first year students, and seven voting members must be present following their election. A hearing will be delayed until such time as these members are available.

   b. Honor Hearings are closed hearings unless the accused student requests an open hearing.

   c. In a closed hearing, only the following people are to be present:
      i. accused and his or her designated representative;
      ii. members of the Honor Council;
      iii. Investigator for the case;
      iv. witnesses, allowed one at a time and only during their own testimony;

   d. In an open hearing, all members of the Wake Forest School of Medicine may be present. The general public and members of the press or media are not permitted to be present.

2. Records of proceedings

   a. A formal record of all proceedings of the Honor Hearing, except the deliberations of the Honor Council, shall be kept in a locked file in the Office of Student Affairs for a period of six years from the date of the Hearing, and then destroyed.

   b. The formal record of proceedings shall be in the form of an audio or video recording created by the Secretary of the Council.

   c. These recordings shall be the sole property of the Wake Forest School of Medicine.

   d. Access to these recordings shall only be allowed with joint permission of the Chair of the Honor Council and the Deans, unless required by law. The recordings will be available to SPARC if the student was determined by the Council to have violated the Code.

3. Hearing procedures

   a. The Chair of the Honor Council shall call the Hearing to order, reminding those present that in an Honor hearing the members of the Wake Forest School of Medicine community are bound to honesty and integrity, and that all details of the hearing are to remain confidential.

   b. The Chair shall read the formal statement of charges.

   c. The Chair shall call for the presentation of evidence by the Investigator in summary format.

   d. The Chair shall call for the presentation of evidence by the accused in summary format. Questioning of the accused will then occur by the Investigator, followed by members of the Honor Council.

   e. The Chair shall call for the testimony of witnesses as called by the Investigator. Each presentation is followed by a period of time set aside for questioning by the Investigator, the accused and his or her representative, followed by members of the Honor Council.

   f. The Chair shall call for the testimony of witnesses as called by the accused. Each presentation is followed by a period of time set aside for questioning by the accused and his or her representative, the Investigator, followed by members of the Honor Council, in that order.

   g. The Chair shall call for clarifying remarks and final questions.

   h. Conclusion of the Honor Hearing. All present, including the Investigator, are dismissed, with the exception of the Chair and members of the Honor Council.

H. Deliberations

It shall be the duty of the members of the Honor Council to determine if it is more likely than not that the accused student has committed the action of which he or she is accused and that such actions constitute a violation of The Code.

I. Decision and Reporting

1. Upon completion of the deliberations, all present members of the Honor Council shall vote on a verdict. A majority of members must return a verdict of guilty in order for the student to be found responsible for a violation of the Honor Code.

2. Immediately following the Honor Council's decision and, if applicable, determination of recommendations for disciplinary actions, the Honor Council Chair will notify the accused student of the Council's decision and the next steps that will take place according to the verdict.

3. If the Honor Council has decided that a violation of the Code has occurred, a formal written report shall be made to the Deans by the Honor Council Chair which includes the name of the student who was found in violation of the Code, the infraction(s) committed, a brief summary of the events surrounding the violation, the Honor Council's decision and a recommendation for disciplinary action. This notification will be hand delivered to the Dean or their delegate before the end of the second business day following an Honor Hearing.

4. If the Honor Council has decided that the student has not violated the Code, the charges against the accused shall be dropped. A written report to the Deans by the Honor Council Chair will relate the events of the hearing, but will not include the names of the accused or any other involved students. This report will be given to the Dean before the end of the second business day following an Honor hearing. The Chair will also send this report to the Council's faculty advisor. The Chair will inform the assistant director for student affairs of the student's identity. The assistant director for student affairs will maintain a file regarding previous investigations and will report to the Deans and the faculty advisor if a student found responsible for a code violation has had prior accusations of violations of the Code. The Deans will then determine whether additional action is warranted.

5. Following the resolution of a formal allegation, regardless of the method of resolution, the Chair reserves the right to inform the witnesses that their concerns were addressed through the Honor System. Faculty inquiries addressed to the Council concerning the outcome of a case will be referred to the Deans.

J. Policy for Student Disciplinary Procedures

If the Honor Council has determined that a violation of the Code has occurred, the Dean will review the Honor Council's findings and may refer the case to SPARC and the case may be heard as defined in the policy for SPARC, which can be found in the yearly WFSM Bulletin through the eWake website.

VI. Student Professionalism and Academic Review Committee (SPARC)

A. Decision Regarding Sanctions

At the discretion of the Deans, the SPARC shall be the body to whom recommendations regarding sanctions will be made by the Honor Council in the case that a student is found responsible for a violation of the Honor Code. SPARC will then review the case and issue a decision regarding sanctions.

B. Composition

The SPARC is a standing committee of the School of Medicine appointed by the Dean. Members representing both the basic science and clinical faculty serve overlapping terms to provide continuity among Committee Members.

VII. Faculty Involvement

A. Faculty Support

The cooperation and support of the faculty are essential in carrying out the spirit and principles of the Honor Code. They, too, benefit from the freedom created by living in a community of honesty and trust. Likewise, the faculty has individual and corporate responsibility to uphold the Honor System.

B. Faculty Rights

All reports of suspected Honor Code violations shall be dealt with under the Honor System as described herein. The reporting faculty member shall have the same rights, obligations, and responsibilities under the Honor System as any student reporting a suspected violation. The only penalties or sanctions which may be imposed against an accused student are sanctions imposed by SPARC.

C. Reducing Temptations and Misunderstandings

The faculty shall use their best efforts to minimize the potential for Honor Code violations. For example, the faculty shall

a. give clear directions and instructions concerning course requirements and the limits of acceptable collaboration in coursework.

b. carefully maintain the security of examinations.

c. clearly explain whether old examinations may be used by students in preparing for current examinations,

being sure to make such old examinations equally accessible to students when their use is permitted.

    d. reduce the temptation to pass information about exams from class to class by changing the content of exams from year-to-year as much as is practical. This includes exams for both the basic science courses and clinical rotations.

VIII. Revision of the Honor System

A. Petition for consideration of change to this document may be submitted in writing to the Chair of the Honor Council by any student or faculty member.

B. A three-quarters majority vote of the Honor Council is required to pass the proposed changes. Revisions to the Honor Code will be submitted to the Dean for final approval.

C. Any proposed changes in the Honor Code and System will be sent to all classes via e-mail attachment for student body evaluation and input, no less than one week prior to the official Council vote.

D. Copies of the most current version of The Honor Code and System will be kept in the Office of Student Services. Current versions will also appear on the Honor Council portion of the SGA website, the Educational Services portion of the eWake website, and in the Wake Forest School of Medicine Student Bulletin which is revised and published annually.

Appendix I.

To be attached to any quizzes or exams per section III.C:

"I acknowledge that the principles of the Honor Code and Honor Pledge pertain to this assignment. On my honor, I pledge that I will neither give nor receive unauthorized assistance or information on this assignment and I will not tolerate such conduct on the part of others. My signature or electronic submission of this assignment symbolizes my awareness and acceptance of the fact that this and all other academic activities at Wake Forest School of Medicine are governed by its Honor Code."

Appendix II.

The Honor Pledge of the Wake Forest School of Medicine

"Physicians are called to the highest standards of honor and professional conduct. However, our responsibility to patients, their families, faculty, and staff precedes the receipt of a medical degree. This responsibility begins upon matriculation as a medical school student. As such, the students of Wake Forest School of Medicine commit to embody the virtues and uphold the standards as described in the Wake Forest School of Medicine Code of Honor and Professional Conduct throughout the duration of enrollment.

As a Wake Forest School of Medicine student, I pledge to demonstrate behavior which is considered appropriate for a career in medicine. Appropriate behavior includes, but is not limited to, honesty, trustworthiness, professional demeanor, respect for the rights of others, personal accountability, and concern for the welfare of patients. In these areas, I, as a medical student, will endeavor to live by and uphold The Code"

Policy of the Student Professionalism and Academic Review Committee (SPARC)

PURPOSE

The Wake Forest University School of Medicine provides a fair and formal process for taking any action that may affect the status of a medical student, which includes providing notice of the impending action, disclosure of the information that will be considered by the committee making a decision about the medical student's status, an opportunity for the medical student to address the concerns under review, and an opportunity to appeal an adverse decision related to advancement, promotion, graduation, or dismissal.

SCOPE

This policy applies to Wake Forest University School of Medicine (School of Medicine) Undergraduate Medical Education (MD) program students, and faculty and staff who have responsibilities related to assessment of MD program students.

POLICY

A. Student Professionalism and Academic Review Committee (SPARC)

1. The Student Professionalism and Academic Review Committee (SPARC) is a standing committee of the School of Medicine and is charged with reviewing and approving the continuation of MD students in the curriculum, reviewing and approving MD students for graduation, and reviewing and making a decision about the outcome of MD students with unsatisfactory academic or professional performance.

2. **SPARC Composition**
   a) SPARC is comprised of eleven (11) voting faculty members for three-year terms; five (5) faculty are peer-selected and six (6) are appointed by the Dean. The Senior Associate Dean for Curriculum or designee, Senior Associate Dean for Student Affairs or designee, a staff member from Student Affairs, and a representative from Student Inclusion and Diversity (SID) are ex-officio, non-voting members.
   b) A quorum for meeting is at least six (6) out of eleven (11) voting members present. The voting procedure will be via simple majority of the present voting members. Members of SPARC abide by the recusal policy set forth in Section 3 below.

3. **Recusal of SPARC Committee Members**
   a) Members of SPARC are required to declare any conflicts of interest with a student using the Conflict of Interest Related to Student Assessment Policy (WFUSM) and declare any conflicts with the students who will be discussed prior to each meeting. In addition, members with a conflict as described below must also declare a conflict. Conflicts of interest include:
      (1) Professional relationship (including advising, research or mentorship);
      (2) A course/clerkship director whose course/clerkship is or has been directly involved in a SPARC report against the student; and/or
      (3) Faculty member that has witnessed the circumstance of an honor code violation or unprofessional behavior.
   b) The member(s) with conflicts are required to step out of the meeting when SPARC begins discussion of the student for whom the member(s) has a conflict, does not participate in the portion of the hearing that involves the student, and does not participate in any decisions by SPARC regarding the student.

B. Promotion and Graduation

1. The Senior Associate Dean for Curriculum and the Senior Associate Dean for Student Affairs (or their designees), at least annually, present to SPARC a list of students who are eligible for promotion and/or graduation based on the criteria described in the Satisfactory Academic Progress (SAP) Policy - MD Program (WFUSM) This list shall include the academic and professional standing of these students.
   a) SPARC reviews and approves students for promotion and/or graduation.

C. SPARC Notification for Unsatisfactory Academic Performance

1. The Senior Associate Dean for Curriculum (or designee) notifies the SPARC Chair and the Student Affairs staff member with a list of students who meet either of the following criteria:
   a) First failure of a course/clerkship.
   b) First failure of the USMLE Step 1 or USMLE Step 2 exams.

2. A student who is the subject of a SPARC Notification will automatically be placed on Warning.
   a) The Warning will remain in place for one (1) calendar year. A student will be automatically removed from Warning if they do not have any further performance concerns that arise during the Warning period.
   b) Additional performance concerns arising during Warning period will result in SPARC Referral (see Section D).
   c) A student on Warning remains in "Good Academic and Professional Standing" and this Warning does not appear on external medical school documents such as the MSPE.
   d) Formal written documentation of the SPARC Notification is sent to the student's School electronic-mail account within 3 business days of SPARC's receipt of the referring Dean's Notification. The Notification includes the student's new academic standing, effective date, and expiration date. The letter is signed by the SPARC Chair

(or designee).

D. SPARC Referral for Unsatisfactory Academic or Professional Performance

1. The Senior Associate Dean for Curriculum (or designee) refers to the SPARC Chair and the Student Affairs staff member students who meet any of the following criteria:
   a) Two or more failures of a course/clerkship, and/or a USMLE Step exam.
   b) Additional Academic or Professional Concerns occurring while a student is on Warning.
   c) Three or more Professionalism Feedback reports (See Formative Assessment and Feedback Policy - MD Program (WFUSM).
   d) Students found responsible for Code of Honor and Professional Conduct violations by the Honor Council (See Code of Honor and Professional Conduct in Wake Forest University School of Medicine Student Handbook (WFUSM).
   e) Referral for Honor Council matters too sensitive or egregious for the Council's purview, as determined by the Dean.

2. Typically, a student is permitted to proceed in the curriculum while under SPARC Referral. If there is reasonable cause to believe that the student has engaged in or threatens to engage in behavior that poses a significant risk of harm to the safety or security of themselves, others, or to property, or directly or substantially impedes the activities of members of the institution's community, including employees, other students, patients, or visitors, an associate dean may place the student on interim suspension pending the outcome of the SPARC review.

E. Hearing Procedures

1. The student's past, present, and pending professionalism and academic issues are presented to SPARC by the referring dean.

2. The Senior Associate Deans (or designees) will not be present during deliberation on any SPARC Referral; however, SPARC may, at its discretion, consult the Deans during deliberations.

3. A student with a SPARC Referral may either appear before SPARC or submit a written statement addressing the professionalism or academic performance concerns under review prior to the SPARC meeting.
   a) The student has the right to appear before SPARC, either in-person or virtually, to present relevant information on their own behalf but may not be present for SPARC deliberations.

4. A student with a SPARC Referral may have advisors, legal counsel, and other individuals available to lend support throughout the process, but only the student will be permitted to meet with SPARC.

5. During deliberations, SPARC may request additional information from others that SPARC determines in its sole discretion is relevant to its review of the concern(s).

F. SPARC Decisions

1. Following review of the SPARC Referral, SPARC will vote to decide the outcome(s) from the following options:
   a) The student remains in Academic/Professional Good Standing.
   b) The student is placed on or remains on Warning.

      (1) The student remains in Good Academic and Professional Standing while on Warning.
      (2) The Warning will remain in place for one (1) calendar year.
      (3) This status does not appear on the Medical Student Performance Evaluation (MSPE) letter.

   c) The student is placed or remains on Probation.

      (1) The student is not considered to be in Good Academic and Professional Standing while on Probation.

      (2) The Probation will remain in place for one (1) calendar year.

      (3) The date and the reason for the Probation (academic or professional) is documented in the Medical Student Performance Evaluation (MSPE) letter for the student.

      (4) While the student is on Probation, the student is not eligible to participate in the following School of Medicine activities, including, but not limited to:

         (a) Service on the Student Government Association (SGA).

         (b) Participation on external away rotations (extramural and international).

         (c) Serving as a representative of the school either internally (e.g., serving as a voting member on a curriculum committee) or externally (e.g., serving as an Official School Representative).

   d) The student is required to repeat a course or repeat the academic year. These directives may be used in conjunction with Outcomes b-c, as defined above.

   e) Other directives, such as community service, counseling, etc., as deemed appropriate by SPARC. These directives may be used in conjunction with Outcomes a-d, as defined above.

f) The student is dismissed from the MD program.

   (1) A student who is dismissed from the MD program must follow the exit procedures as outlined in the SPARC decision letter.

   (2) A student wishing to appeal any dismissal decision must follow the procedures outlined in the Student Appeal of Dismissal Policy (WFUSM).

2. A student who is permitted to proceed in the curriculum does so with the understanding that any subsequent concern(s) regarding the student's academic performance or professionalism require an additional SPARC Referral and subsequent review.

3. Prior to reinstatement to Good Academic and Professional Standing, SPARC will review the original SPARC Referral and decision to ensure the student has no additional performance concerns and to ensure the student has fulfilled any requirements for return set forth by the SPARC decision. year.

G. Communication of SPARC Decisions

1. SPARC decisions are communicated to the student:

   a) Formal written documentation of the SPARC decision is sent to the student's School electronic mail account within 3 business days. The decision includes the student's new academic standing, effective date, and expiration date. The letter is signed by the SPARC Chair (or designee).

H. SPARC Decision Appeal Process

1. Appeal of SPARC action other than Dismissal

   a) A student who wishes to appeal a SPARC decision other than dismissal must request an appeal form by emailing the Office of Student Records. The appeal form must be submitted within 5 business days of the dated SPARC decision letter.

   b) In the appeal form, the student must state the grounds for appeal. Permissible grounds for appeal are:
      (1) Procedural error;
      (2) Sanction was inappropriate based on the circumstances; and/or
      (3) Additional evidence is now available that was unavailable at the time of the SPARC hearing.

2. The MD Appeals Committee reviews the appeal, which may include meeting(s) with the student, course/clerkship director, or others. Refer to Section I for additional information.

I. MD Appeals Committee

1. The MD Appeals Committee is responsible for making decisions on student requests for appeals for any adverse action against a student, including but not limited to final grades, summative narrative assessments, repeating a course, repeating an academic year, interim suspension, and any other SPARC decisions other than dismissal.

2. The MD Appeals Committee is composed of a pool of 12 faculty members appointed by the Dean for a term of three years, which may be renewed.

3. Members of the MD Appeals Committee are required to declare any conflicts of interest with a student using the Conflict of Interest Related to Student Assessment Policy (WFUSM)

   a) In addition, members with a conflict as described below are not selected to review the student's case. Conflicts of interest include:
   (1) Professional relationship (including advising, research or mentorship);
   (2) A course/clerkship director whose course/clerkship is or has been directly involved in a SPARC report against the student; and/or
   (3) Faculty member that has witnessed the circumstance of a Code of Honor or Professional Conduct violation or unprofessional behavior.

4. For each appeal request, at least 5 of the 12 Committee members, in compliance with the conflicts of interest criteria set forth above, will meet to consider the appeal.

5. A hearing on the student's request to amend the assessment or final grade will be conducted in compliance with Student Education Records Policy (WFUSM) .

6. The MD Appeals Committee hearing may include meeting(s) with the student, course/clerkship director, or others.

7. The MD Appeals Committee may decide to uphold the decision, overturn the decision, or modify the sanction. All decisions of the MD Appeals Committee are final.

8. The MD Appeals Committee issues a decision and notifies the student in writing within 15 business days of the appeal submission. A copy of the final decision is forwarded to the Registrar in the Office of Student Records. SPARC and the Referring Dean will also be notified.

J. Appeal of Dismissal

1. A Student who wishes to appeal a dismissal decision issued by SPARC must make a formal request for appeal in

writing (which may include electronic mail) to the Vice Dean for Medical Education within seven (7) business days of notification of the dismissal.

2. Students must follow the procedures outlined in the Student Appeal of Dismissal Policy (WFUSM).

3. During the dismissal appeal process, the student will not participate in the curriculum.

PROCEDURE/GUIDELINE: Not Applicable

CROSS REFERENCES
Conflict of Interest Related to Student Assessment Policy (WFUSM)
Formative Assessment and Feedback Policy - MD Program (WFUSM)
Satisfactory Academic Progress (SAP) Policy - MD Program (WFUSM)
Student Appeal of Dismissal Policy (WFUSM)
Student Education Records Policy (WFUSM)

REVISION DATES 6/2020; 6/2023, 10/2023; 11/2023

Revised 11/2023

For the most recent version and to view this policy in its entirety, please access the Student Professionalism and Academic Review Committee (SPARC) Policy - MD Program (WFUSM) on our institutional policy site.

MD Conflict of Interest Disclosure

As course coordinators/clerkship coordinators are preparing your schedules, we would like to ask you to submit any potential conflicts of interest you foresee during your courses, clerkships, and rotations.

Conflicts of interest important to consider include but are not limited to:

- You are an immediate family member of the individual.
- You are in a consensual relationship with the individual.
- You have a personal financial relationship with the individual.
- You have received medical or mental healthcare from the individual.
- Any other issue not included in the above-mentioned situations you may perceive as a conflict (additional information about the nature of the perceived conflict may be requested under this circumstance).

For further details, please see the Conflict of Interest Related to Student Assessment Policy (WFUSM)

To report a Conflict of Interest, CLICK HERE. Please provide the full name (first and last) of any faculty or house officer in a department(s) or section(s) with whom you perceive as having a conflict of interest. This information will be forwarded to the Senior Associate Dean of Healthcare Education and his/her designee (such as course coordinators and directors) for consideration and, if necessary, management.

Dress Code Policy

The Dress Code Policy requires students to comply with the following requirements:
- Clothing should be clean, neat, properly fitting, and not excessively worn.
- Revealing, tight-fitting, or otherwise provocative clothing should not be worn. Specifically, short skirts, lowneck lines, and any amount of exposed midriff are inappropriate.
- Visibly wear your WFSM identification at all times. Do not use items to cover your name.
- Scrubs are generally intended for procedurally-based specialties or when spending the entire night in the hospital. They still should be clean and fit appropriately.
- Body odor and heavy scents are not allowed. No perfumes, colognes, or aftershave should be worn in the clinical setting as per WFBMC institutional policy.
- Nails should be kept neat and trimmed per OSHA requirements.

Additional policy guidelines specific to patient care areas, standardized patient (SP) assessments, and observed structured clinical evaluations (OSCEs) consist of the following:

- Business casual attire. No T-shirts of any type should be worn as an outer garment. If a T-shirt is worn under scrubs, it should not have a visible logo or slogan on it.
- Blue jeans or shorts are never acceptable.
- Closed-toe shoes are required in the Emergency Department, Operating Room, Labor and Delivery, and other areas where there is a high risk of blood, body fluid, or sharp exposure. Flip flops are never acceptable. Shoes should not be excessively worn or soiled.
- A white lab coat should be white, clean and not torn.
- Hair should be clean and neatly cut.
- Beards and mustaches should be clean and neatly trimmed.
- Jewelry should not pose a hazard or invade patient space during an exam (e.g., long necklaces).
- Religious-based exceptions to any of the above will be reviewed on a case-by-case basis.

Students should adhere to the dress code practices for the site or clinic at which they are rotating.

Further policy guidelines specific to the use of WFSM white coats and other logo and branding components of the institution:

- Students are not to utilize the Wake Forest School of Medicine logo and other branding components for purposes other than school-sanctioned activities. As a 501(c)(3) tax-exempt organization, the institution must avoid engaging in politically partisan advocacy or activities. If students are representing the institution and engaging in political activities, the tax-exempt status could be jeopardized. It is not always clear in every situation when a student is representing the institution, and that is particularly true when students are wearing white coats with the WFSM logo affixed. For this reason:
  - Students are not allowed to wear their WFSM branded white clinical jackets/lab coats for any purpose other than school-sanctioned activities.
  - Students should not use the School of Medicine attire-related branding except for school-sanctioned activities (for example, scientific meetings).
- Individuals or groups that wish to request an exception to this policy for a particular event may appeal in advance to the Dean of Wake Forest School of Medicine, or designee.

Revised: 8/2021
For the most recent version and to view this policy in its entirety, please access the Dress Code for Medical Students Policy - MD Program (WFUSM) on our institutional policy site.

Please Note: Charlotte students must wear their Atrium Health identification badges at all times and are expected to wear closed toe shoes in all clinical spaces.

Transfer and Admissions of Medical Students with Advanced Standing Policy

PURPOSE
The purpose of this policy is to set expectations for policy on admissions for transfer students and students with advanced standing.

SCOPE
This policy applies to all Wake Forest University School of Medicine (WFUSOM) prospective undergraduate medical education (MD) program applicants.

DEFINITIONS
A. Policy: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

B. WFBH: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

POLICY GUIDELINES
1. The Wake Forest University School of Medicine does not accept applicants for transfer or for admission with advanced standing.

REFERENCES
LCME Standard 10.7

REVISION DATES
7/2017; 11/2020; 3/2023

Revised: 3/2023
For the most recent version and to view this policy in its entirety, please access the Transfer and Admissions of Medical Students with Advanced Standing Policy - MD Program (WFUSM) on our institutional policy site.

Selection of Medical Students Policy

Purpose

The purpose of this policy is to establish a process for the selection of medical students.

Scope

This policy applies to all undergraduate medical education (MD) program students.

Definitions

A. **Policy:** A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

B. **WFBH:** Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

POLICY GUIDELINES

A. The selection of applicants for admission as medical students to the Wake Forest School of Medicine involves a competitive evaluation process, the authority and responsibility for which rests with the Committee on Admissions (COA).

B. The Committee on Admissions establishes and publicizes on the admissions webpage attributes desired of applicants and reviews these attributes annually, aligning them with the School of Medicine's mission and vision and the school's educational goals and objectives.

    a. The selection of applicants is also aligned with the School of Medicine's diversity statement and technical standards to allow for the matriculation of a class of students who demonstrate the ability and commitment to fulfill the purpose of a Wake Forest School of Medicine medical education.

    b. This selection process is also intended to be compliant with applicable laws and regulations.

C. The Committee on Admissions establishes a competitive evaluation process to include: the initial review of applicants, a secondary application process, extending invitations for and coordinating and conducting on-campus or virtual interviews, voting to extend an offer of admission to an applicant by the COA, management of applicants on the waitlist, and processing offers of admission.

    a. These processes and the training related to them are reviewed annually and approved by the COA.

    b. The details of these processes are specified in the approved training guide, which is reviewed and approved annually by the COA Executive Committee.

References: LCME Standards 10.2, 10.3   **Revision Dates:** 7/2017; 11/2020

Revised: 3/2021

For the most recent version and to view this policy in its entirety, please access the Selection of Medical Students Policy - MD Program (WFUSM) on our institutional policy site.

Matriculation Policy

PURPOSE
The purpose of this policy is to establish the point at which incoming students are matriculated.

SCOPE
This policy applies to new undergraduate medical education (MD) students.

DEFINITIONS
A. Policy: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.
B. WFBH: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

POLICY GUIDELINES
A. For the new medical student(s), matriculation will be official when the Associate Dean for Medical Student Admissions, or a designated representative, states to the student(s), "You are now officially matriculated at the Wake Forest School of Medicine." This statement will usually be made at the first day of Orientation.

Revision Dates: 8/2013; 1/2021

Revised: 3/2021
For the most recent version and to view this policy in its entirety, please access the Matriculation Policy - MD Program (WFUSM) on our institutional policy site.

Campus and Location Assignment Policy

The purpose of this policy is to establish standards and detail the procedure for Wake Forest School University of Medicine (School of Medicine) undergraduate medical education (MD) students to request an educational campus.

This policy applies to all accepted and current School of Medicine MD students.

DEFINITIONS:

Compelling Need: Urgent or emergent situations, including but not limited to: lack of access to reliable transportation; medical emergency; family care responsibilities; or other urgent unforeseen circumstances.

POLICY

Upon Acceptance

1. Accepted students to the Wake Forest University School of Medicine have the opportunity to indicate a preference for attending either the Charlotte or Winston-Salem campus.

    a) Upon acceptance, accepted students may indicate a preference either for a Charlotte or Winston-Salem campus assignment. Accepted students also have the option to select "No Preference" in their campus assignment.

    b) A student's indication of a preference for a campus location does not guarantee that the student will be assigned to that location, and a student who elects to enroll at the School of Medicine does so with the understanding that the student may be assigned to either campus location.

    c) Swaps of campus assignments between accepted or current students are not allowed.

2. After accepted students may request an alternative campus assignment if a compelling need arises. Requests to change a campus assignment must be made in writing to the Office of Admissions and submitted in a timely manner. The request must explain the compelling need. Such requests will be reviewed by the Senior Associate and Assistant Dean of Admissions. While the School of Medicine will attempt to accommodate requests, changes are not guaranteed.

Current Students

1. Current students may request an alternative campus assignment if a compelling need arises. Requests to change a campus assignment must be made in writing to the Senior Associate Dean for Curriculum (or designee) and submitted in a timely manner. The request must explain the compelling need. Current student requests will be reviewed by the Senior Associate Dean for Curriculum (or designee). While the School of Medicine will attempt to accommodate requests, changes are not guaranteed.

    a) Swaps of campus assignments between accepted or current students are not allowed.

Clinical Clerkship Campus

1. After into a given clinical training campus for clinical clerkships, students may request an alternative clinical training campus if a compelling need arises. Requests to change a clinical training campus must be made in writing to the Registrar and submitted in a timely manner. Such requests will be reviewed by the Associate Deans for Clinical Education, Associate/Assistant Deans of Student Affairs, and Senior Associate Dean for Curriculum (or their designees). While the School of Medicine will attempt to accommodate requests, changes are not guaranteed.

2. Swaps of campus assignments between current students are not allowed.

Clinical Rotation Sites (example: clinic site, inpatient service site)

1. After assignment into a given clinical training site for clinical rotation(s), students may request an alternative clinical training site if a compelling need arises. Requests to change the clinical training site must be made in writing to the clerkship director and coordinator in a timely manner. Such requests will be reviewed by the clerkship director and coordinator. While the School of Medicine will attempt to accommodate requests, changes are not guaranteed.

2. Swaps of rotation site assignments between current students are not allowed.

PROCEDURE/GUIDELINE

A. Procedure for Requesting Alternative Initial Campus Assignment

1. Accepted students may submit a written request to change an initial campus assignment to the Admissions Office within 5 business days of receiving their initial campus assignment. This request must include a description of the compelling need for the change in campus assignment. The request will be reviewed by the Senior Associate and Assistant Dean of Admissions, whose decision will be final.

B. Procedure for Requesting Alternative Pre-Clerkship Campus Assignment
1. Current students may submit a written request for a change of campus location to the Senior Associate Dean for Curriculum (Winston-Salem) and Associate Dean for Pre-Clerkship Curriculum and Director of Growth and Development (Charlotte) (or their designees). The request must include a description of the compelling need for the change in campus assignment.

C. Procedure for Requesting Alternative Campus for Clerkship Year
1. Students must submit a request for an alternative clinical training campus in writing to the Registrar at least 8 weeks prior to the start of the academic year. This request must include a description of the compelling need for the change in clinical campus.
2. The request will be reviewed by the Associate Deans of Clinical Education, the Assistant Deans of Student Affairs, and the Senior Associate Dean for Curriculum (Winston-Salem) and Associate Dean for Pre-Clerkship Curriculum and Director of Growth and Development (Charlotte) (or their designees) and the decision will be final.
3. If a change in clinical training campus is approved by the Deans, clerkship leadership at both campuses will be notified of the change in rosters as soon as possible, but no later than 4 weeks prior to the start of the clerkship affected by the change.

D. Procedure for Requesting Alternative Clinical Rotation Sites (example: clinic site, inpatient service site)
1. Students may submit a written request for a specific rotation site to the clerkship director and coordinator upon receipt of email inquiry by clerkship for site scheduling prior to the start of the clerkship/course. The request must include a description of the compelling need for a rotation site within the student's designated campus.
   a) If approved, the clerkship director will be responsible for updating the service assignments and notifying the teams at the specified clinical sites.
   b) If not approved, the student is responsible for completing the clerkship at the sites originally assigned. Students may not appeal the decision of the clerkship director.

REVISION DATES 6/2020; 2/2021; 4/2022; 9/2023

Revised: 10/2023
For the most recent version and to view this policy in its entirety, please access the Campus and Location Assignment Policy - MD Program (WFUSM) on our institutional policy site.

Final Grade Submission Policy

PURPOSE

The purpose of this policy is to ensure timeliness in which medical students are informed about their final and comprehensive performance in a course and/or clerkship and is an important element for students to self-assess their progression in the medical school curriculum. In addition, the submission of grades in a timely manner ensures verification of grades for transcript deadlines, such as ERAS (Electronic Residency Application Service) submission, graduation, and enrollment verification. The Liaison Committee on Medical Education (LCME) expects that a medical school has in place a system of timely summative assessment of medical student achievement in each course and clerkship of the medical education program.

SCOPE

This policy applies to Wake Forest University School of Medicine Undergraduate Medical Education (MD) program faculty and staff.

DEFINITIONS

A. *Policy*: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

B. *WFBH*: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

POLICY GUIDELINES

A. It is the expectation of the Medical School that final grades are submitted in the student record system within 30 calendar days from the end date of all courses and clerkships. Automated reminders are issued to course/clerkship directors through the learning management system.

   1. To ensure all course/clerkship directors meet the expectation for timeliness of grade submission within 30 calendar days, reminders are sent from the Associate Dean for Curriculum on Day 29. Grade reports exceeding 6-weeks result in notification to the applicable department chair to be taken into consideration in the annual performance evaluations of the Course/Clerkship Director. Timeliness of grades is tracked by the registrar and monitored by Undergraduate Medical Education Curriculum Committee (UMECC).

REFERENCES: LCME Element 9.8: Fair and Timely Summative Assessment

REVISION DATES: 6/30/20, 4/2022, 5/2023

Revised 7/2023
For the most recent version and to view this policy in its entirety, please access the Final Grade Submission Policy - MD Program (WFUSM) on our institutional policy site.

Narrative Description of Medical Student Performance Policy

PURPOSE

The purpose of this policy is to ensure that a narrative description of a medical student's performance, including non-cognitive achievement, is included as a component of the assessment in each required course and clerkship of the medical education program whenever teacher-student interaction permits this form of assessment.

SCOPE

This policy applies to Wake Forest University School of Medicine Undergraduate Medical Education (MD) program students, faculty, and staff.

DEFINITIONS

A. *Policy*: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

B. *WFBH*: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

C. *Narrative assessment*: Written comments from faculty that assess student performance and achievement in meeting specific objectives of a course or clerkship, such as professionalism and clinical reasoning. (LCME Element 9.5)

D. *Formative feedback*: Information communicated to a medical student in a timely manner that is intended to modify the student's thinking or behavior in order to improve subsequent learning and performance in the medical curriculum. (LCME Element 9.7)

E. *Medical Student Performance Evaluation (MSPE) Letter*: A summary letter of evaluation, required by the National Residency Matching Program (NRMP) for residency applications.

Policy Guidelines

A. It is the policy of the Wake Forest University School of Medicine that a narrative assessment describing a student's performance is provided by the Course/Clerkship Director whenever teacher-student interaction permits this form of assessment.

   1. The Undergraduate Medical Education Curriculum Committee (UMECC) has defined the appropriate interaction to be four or more hours of mandatory faculty-led, small group work during the duration of a course (including laboratory, simulation, and case-based learning instructional methods), between the same group of students and faculty.

   2. The narrative assessment can be formative or summative and will be articulated in the course/clerkship syllabus.

B. **Pre-clerkship Phase**

   1. Courses in the pre-clerkship phase of the MD curriculum provide narrative feedback when the course meets the teacher-student interaction definition described above.

   2. Pre-clerkship phase courses are graded as pass/fail. Narrative comments are provided to students as described in the syllabus but are not included on transcripts or in the Medical Student Performance Evaluation (MSPE).

C. **Immersion Phase**

   1. For all required clerkships that are four weeks or longer, Clerkship Directors or their designee provide formative, narrative feedback at the midpoint of the clerkship as described in the Formative Assessment and Feedback Policy - MD Program (WFUSM) .

   2. Summative, narrative feedback is provided with the final grade at end of each required course or clerkship where teacher-learner interaction permits, based on the definition above. These comments are used in the student's Medical Student Performance Evaluation (MSPE) letter.

D. **Individualization Phase**

   1. For all required acting internships (AIs) and critical care rotations that are four weeks or longer, Course Directors or their designee provide formative, narrative feedback at the midpoint of the course as described in the Formative Assessment and Feedback Policy - MD Program (WFUSM) .

   2. Summative, narrative feedback is provided with the final grade at end of acting internships (AIs) and critical care rotations. These comments are used in the student's Medical Student Performance Evaluation (MSPE) letter.

E. **Appeal of Narrative Assessments**

   1. Students may appeal the content of a summative, narrative assessment. Please see the Appeal of Grades, Summative Assessments, and Narrative Comments Policy - MD Program (WFUSM) for details.

F. **Monitoring**

   1. It is the responsibility of the Clerkship/Course Director to adhere to this policy and implement it in collaboration with teaching faculty.

   2. Adherence to this policy is monitored by the Undergraduate Medical Education Curriculum Committee (UMECC) and the applicable subcommittees through approval of the course syllabus.

   3. Student satisfaction on narrative feedback will be reported to UMECC by the Director of CQI and LCME on an annual basis.

References

Attendance for Medical Students in Clinical Clerkships Courses Policy - MD Program (WFUSM)
Formative Assessment and Feedback Policy - MD Program (WFUSM)
LCME Element 9.5

Revision Dates
6/2020; 6/2023

Revised 7/2023
For the most recent version and to view this policy in its entirety, please access the Narrative Description of Medical Student Performance Policy - MD Program (WFUSM) on our institutional policy site.

Formative Assessment and Feedback Policy

PURPOSE

The Wake Forest University School of Medicine's curricular governance committee has established this policy to assure that each medical student is provided with formal formative feedback early enough during each required course or clerkship to allow the student to improve subsequent learning and performance in the medical curriculum in a timely manner. Formal formative feedback occurs at least at the midpoint of the course or clerkship. A course or clerkship less than four weeks in length provides alternate means by which a medical student can measure their progress in learning.

This policy is also intended to explain the system of academic advising in place for medical students that integrates the efforts of faculty members, Course and Clerkship Directors, and Student Affairs staff with its counseling and tutorial services.

SCOPE

This policy applies to Wake Forest University School of Medicine (School of Medicine) Undergraduate Medical Education (MD) program students, faculty, and staff.

DEFINITIONS
A. *Formative feedback***:** Information communicated to a medical student in a timely manner that is intended to modify the student's thinking or behavior in order to improve subsequent learning and performance in the medical curriculum.
B. *Narrative assessment***:** Written comments from faculty that assess student performance and achievement in meeting specific objectives of a course or clerkship, such as professionalism and clinical reasoning.

POLICY GUIDELINES
A. School of Medicine students enrolled in required courses/clerkships are provided formative feedback throughout the course/clerkship by a variety of means, including but not limited to quizzes, clinical performance exams, small group feedback, simulation exercises, and feedback from direct observations by faculty and/or residents. The intent is to allow students to understand their progress throughout the curriculum and identify areas to improve performance. Students enrolled in required courses or clerkships of four weeks or more in duration are provided formal formative feedback by at least the midpoint of the course/clerkship. This formal formative feedback is to be given in either a scheduled in-person or virtual format or through quizzes, or narrative comments or a rubric. The method and timing of this formal formative feedback is included in each course/clerkship's syllabus.

B. **Pre-clerkship Phase**
   1. Formative quizzes should use significant rigor to provide students with feedback as to their progress toward achievement of passing summative assessments and achievement of course objectives. Numerical scores are monitored by the Course Director and students have access to their performance results, including numerical scores, through the learning management system. Feedback including these numerical scores are communicated to students by the Course Director or Coordinator no later than the course midpoint.
   2. Formative simulation exercises, Clinical Performance Exams (CPX), and feedback from a small group faculty facilitator may be used to provide feedback to students on the acquisition of knowledge and clinical skills. Results are provided to the student no later than the midpoint of courses longer than four weeks.
   3. Formative assessments may be a component of the overall grade calculation, at the discretion of the course director, which is outlined in the course syllabus. Dates of formative assessments are communicated in the course syllabus.

C. **Immersion Phase**
   1. All required clerkships that are four weeks or longer utilize the Common Clerkship Mid- Rotation Feedback Form to provide formative feedback to students. The form consists of a required self-assessment by the student as well as a formative narrative assessment from the clerkship director. The narrative assessment includes the clerkship director's review of the student's clinical evaluations, progress on the required clinical conditions and skills to date, and the student's performance on practice medical knowledge assessments. This form is reviewed in an in-person or virtual session with the student and the Clerkship Director (or faculty designee) no later than the midpoint of the clerkship. The completed form is signed by the student and the Clerkship Director, or faculty designee, and is uploaded into the learning management system. The process for completion of this form is included in the syllabus.
   2. In the longitudinal Radiology course, a formative quiz is administered prior to the midpoint of the course.
   3. In the Basic Procedures course, formative feedback is given in real time by faculty. As part of this formative feedback, students are informed of their progress in completing modules and required procedures.

D. **Individualization Phase**
   1. For all required acting internships (AIs) and critical care rotations, a Formative Feedback Form is completed and

reviewed in an in-person or virtual session with the student and the Course Director (or faculty designee) no later than the midpoint in the course/clerkship. The form is signed by the student and the Course Director (or designee) and uploaded into the student's file under the mid-rotation feedback tab for the corresponding course. The process for completion of this form is included in the syllabus.

2. In the longitudinal Advanced Procedures course, students receive a report of their progress in completing modules and required procedures.

E. **Referral Process for Student Support**

1. Results of academic formative assessments, attendance policy, and Code of Honor and Professional Conduct violations are monitored by Course/Clerkship Directors and the Committee for Review of Educational Support and Success (CRESS). Students who demonstrate deficiencies in knowledge or skills acquisition on summative and/or formative assessments or professionalism violations are referred to the Academic Advising team or other support services for assistance.

2. Students are expected to illustrate personal accountability and professionalism towards the Wake Forest School University of Medicine community throughout their medical school experience. A student who fails to comply with the Attendance policy or who does not respond to faculty/administration expectations as explained in course syllabi or in other formats, could result in a referral to the Student Professionalism and Review Committee (SPARC). See SPARC policy for reference on guidance on SPARC referrals.

F. **Monitoring**

1. It is the responsibility of the Course/Clerkship Director to adhere to this policy and implement it in collaboration with teaching faculty. Adherence to this policy is monitored by the Undergraduate Medical Education Curriculum Committee (UMECC) through approval of the course syllabus. Student satisfaction on quality and quantity of formative feedback will be reported to UMECC by the Director of CQI and LCME on an annual basis.

CROSS REFERENCES
Attendance for Medical Students in Clinical Clerkships Courses Policy - MD Program (WFUSM)
Attendance for Medical Students in Pre-Clerkship Phase Policy - MD Program (WFUSM)
Code of Honor and Professional Conduct
Student Professionalism and Academic Review Committee (SPARC) Policy - MD Program (WFUSM)

RESOURCES AND REFERENCES
LCME Element 3.5, 9.7, 11.1
REVISION DATES
6/2020; 6/2023

Revised: 10/2023
For the most recent version and to view this policy in its entirety, please access the Formative Assessment and Feedback Policy - MD Program (WFUSM) on our institutional policy site.

Satisfactory Academic Progress (SAP) Policy

PURPOSE

A medical school ensures that the medical education program has a single set of core standards for the advancement, promotion, and graduation of all medical students across all locations. The faculty of a medical school establishes this policy to set these criteria for student advancement, promotion, and graduation.

SCOPE

This policy applies to undergraduate medical education (MD) program students at Wake Forest University School of Medicine.

DEFINITIONS

A. **Gateways:** Core educational standards in the curriculum that students are required to pass. Courses, clerkships, and USMLE Step Exams are considered to be Gateways that students must pass to be promoted to the next academic year in the MD program. Criteria for successfully passing courses and clerkships are defined in the syllabus and may consist of any combination of Benchmarks and other components of assessment and participation. Gateway grades are calculated out to 2 decimal places with no rounding.

B. **Benchmarks:** Tests/assignments/evaluations that have been identified by the Course/Clerkship Director as essential measures of satisfactory progress. Students who fail to meet the minimum threshold on a Benchmark must remediate the Benchmark. Numerical grades for Benchmark assessments (i.e., exams) are calculated out to 2 decimal places with no rounding.

C. **Remediation:** a faculty-led process in which a student actively participates to satisfactorily address deficiencies identified in knowledge, skills, and/or professional behavior.

POLICY GUIDELINES

A. Students are assessed using the Wake Forest University School of Medicine's educational program objectives as defined by the Undergraduate Medical Education Curriculum Committee (UMECC). Assessment of academic performance and professional behavior in each course and clerkship in the curriculum are essential components of a medical education. This policy defines the criteria for promotion and graduation based on the overall conduct and demonstration of academic performance and professional behavior. Students must demonstrate, to the satisfaction of the Wake Forest University School of Medicine, that they are fit, both academically and professionally, to be a Wake Forest University School of Medicine student and graduate.

B. **Promotion and Graduation Criteria**
   Students achieving all criteria defined below are submitted to the Student Professionalism and Academic Review Committee (SPARC) by the Associate Dean for Curriculum (or designee) for formal promotion to the next phase or for graduation.

   1. **Pre-clerkship Phase requirements for Promotion to Immersion Phase**

      a. Students must receive passing grades for all courses. To be enrolled in Year 2 curriculum courses, students must pass all courses in Year 1 curriculum. See the Student Handbook for a list of courses required for Year 1 and Year 2.

      b. Students must have no outstanding reports for professionalism concerns. Any reports have been addressed and resolved.

      c. Students must receive a "Pass" on the USMLE Step 1 exam (See Section on USMLE below).

   2. **Immersion Phase requirements for Promotion to Individualization Phase**

      a. Students must receive passing grades for all clerkships and courses. See the Student Handbook for a list of courses required.

      b. Students must have no outstanding reports for professionalism concerns. Any reports have been addressed and resolved.

   3. **Individualization Phase requirements for Graduation**

      a. Students must receive passing grades for all courses. See the Wake Forest University School of Medicine Student Handbook (WFUSM) for a list of courses required.

b. Students must have no outstanding reports for professionalism concerns. Any reports have been addressed and resolved.

c. Students must receive a "Pass" on the USMLE Step 2 Clinical Knowledge (CK) exam (See Section on USMLE below).

C. **Requirements for Graduation**

1. Successful completion of all required courses and clerkships demonstrated by receipt of passing grades.

2. Satisfactory demonstration of appropriate professional conduct.

3. Receive a "Pass" on USMLE Step 1 exam, the USMLE Step 2 CK exam, and the CPX exam administered at the end of the Immersion Phase.

4. Compliance with the Student Payment Policy .

5. Technical Standards for Medical School Admission, Continuation, and Graduation - MD Program (WFUSM) – Pease refer to the Wake Forest University School of Medicine Student Handbook (WFUSM).

D. **USMLE Step 1 and USMLE Step 2 CK**

1. The USMLE examinations are national standards for student performance and are considered by the School of Medicine in determining student competency in the MD program.

2. Following the successful completion of the pre-clerkship phase of the curriculum, students must complete the USMLE Step 1 exam by the deadline specified on the academic calendar. Students must receive a "Pass" on Step 1 prior to participating in the required clinical clerkships in the Immersion Phase. In collaboration with the Academic Advising team, students may submit a request to delay completion of the Step 1 exam to the USMLE Review Committee. Students are informed of the implications for academic progress and financial aid. Students who request a delay of six weeks or longer are required to take a leave of absence in accordance with the Leave of Absence Policy (WFUSM) . Students on an approved delay of Step 1 may participate in the Transition to Patient Care course prior to taking Step 1. Students on an approved Step 1 delay may be approved to participate in a non-clinical elective rotation while Step 1 exam results are pending. Refer to the elective catalog for more pending.

3. Likewise, after the completion of the Immersion phase of the curriculum, must complete the USMLE Step 2 CK examination by the deadline specified on the academic calendar. Students are required to receive a "Pass" on USMLE Step 2 CK before submitting a rank order list for the NRMP. Students who request a delay of six weeks or longer are required to take a leave of absence in accordance with the Leave of Absence Policy (WFUSM).

4. Students are allowed no more than three (3) attempts to pass each of the USMLE Step exams. Students who fail their first attempt at a USMLE Step exam are referred to Academic Advising resources to determine a plan to remediate the failure. In addition, SPARC is notified of a failure of a USMLE Step exam. Students who fail the second attempt of a USMLE Step exam are reviewed by SPARC. Students who fail the third attempt of a USMLE Step exam are reviewed by SPARC and are dismissed from the School of Medicine.

E. **Grading scale for Courses and Clerkships**

1. All students are assessed using the Wake Forest University School of Medicine's educational program level objectives and course objectives as defined by the Undergraduate Medical Education Curriculum Committee (UMECC). Grading criteria and Benchmarks contributing to a grade are identified in each course/clerkship syllabus. Students who require remediation are not eligible for a grade higher than Pass in that course or clerkship.

2. Grading System for Pass/Fail courses/clerkships:

a. Pass (P) is assigned to students who successfully pass all core standards as defined in the course.

b. Fail (F) is assigned to students who do not meet the core standards for the course/clerkship as written in the syllabi.

c. Incomplete (I) is assigned to students who have not completed all course components prior to the end of the course due to illness, emergency, or other extenuating circumstances approved by the course director. Students are required to make-up missed coursework as described in the applicable attendance policy.

d. Not reported (NR) may be assigned to students who have not successfully achieved minimum competency on one or more Benchmarks within the criteria described in the course syllabus and are in the remediation process as written in the course syllabus.

3. Grading System for Five Point Scale courses/clerkships:

a. Includes ratings of Honors, High Pass, Pass, Low Pass, and Fail

     b.   Criteria for each are identified in the course/clerkship syllabus.

     c.   Incomplete (I) is assigned to students who have not completed all course components prior to the end of the course due to illness, emergency, or other extenuating circumstances approved by the course director. Students are required to make-up missed coursework as described in the applicable attendance policy.

     d.   Not reported (NR) may be assigned to students who have not successfully achieved minimum competency on one or more Benchmarks within the criteria described in the course syllabus and are in the remediation process as written in the course syllabus.

4. In addition to a requirement to remediate as described below, receipt of a failing grade (F) in any course or clerkship results in the review of student performance by the Student Professionalism and Academic Review Committee (SPARC) for consideration for a change of academic status to Warning, Probation, or Dismissal from the School of Medicine. SPARC may also require a student to repeat a course or repeat the academic year. See the [Student Professionalism and Academic Review Committee (SPARC) Policy - MD Program (WFUSM)](#) for details.

F. Remediation

1. Remediation of Benchmarks in the Pre-clerkship Phase (including Longitudinal):
   a. Students who fail to achieve the minimum criteria for Benchmarks in a pre-clerkship course must review the Course Syllabus to review remediation procedures.
   b. Students must meet with the Course Director to identify the specific areas of deficiency and learning needs for the remediation of the failed Benchmark(s). Students should refer to the Course Syllabus for details on remediation expectations and timing.
   c. If the remediation plan requires an exam, it is the responsibility of the student to contact the Course Director and the Assessment and Evaluations Team within five (5) business days of the remediation notification to schedule the remediation using the published schedule.
   d. If the student does not meet the minimum criteria for passing the course through the remediation process, the student receives a failing grade and is referred to SPARC by the Senior Associate Dean for Curriculum.

2. **Remediation for Immersion and Individualization Phases**
   a. Students who did not complete all clinical time or required clinical experiences should refer to the syllabus for procedures on scheduling additional time in the clinical setting. Upon approval of the clerkship/course director, students may also complete the required experience using an approved alternative method as described in the syllabus.
   b. Students may also be required to remediate clinical experiences and skills.
   c. Students who fail to achieve the minimum requirements for passing a Benchmark exam in a Clerkship (i.e., NBME Subject exam) must meet with the applicable Clerkship Director to identify clerkship-specific resources to aid in knowledge acquisition.
   d. Dates and times to retake exams are pre-determined and published annually by the Assessment and Evaluation Team. It is the responsibility of the student to contact the Assessment and Evaluation Team within one week of the remediation notification to schedule the re-take exam using the published exam schedule. Students may consider retaking the exam during the semester break (i.e., Leap Week) so as not to conflict with other clerkship requirements.
   e. Students are allowed two re-take attempts to remediate the failed Benchmark. If the student does not meet the minimum criteria through the remediation process, the student receives a failing grade and is referred to SPARC by the Senior Associate Dean for Curriculum or designee.

G. Time Frame for Graduation and LOA

1. The normal time frame for completion of required course work for the MD degree is 4 academic years.

2. A student may be granted an academic, administrative, medical, military, or personal leave of absence which may extend the time period for completion of required course work for the MD degree. See the [Leave of Absence Policy (WFUSM)](#) for details.

3. Please note: In addition to the time frames below, students taking or returning from a Military Leave of Absence are subject to the time frame provisions set forth in the [Military Leave of Absence Policy (WFUSM)](#). Students should consult the [Military Leave of Absence Policy (WFUSM)](#) for additional details.

   a. Students matriculated into the MD degree program may at times seek an approved Leave of Absence to pursue an advanced degree. The normal time frame for completion of required course work for the MD degree plus an additional doctorate degree (e.g., PhD, EdD) is 7 years. The maximum time permitted for completion of the MD degree plus an additional doctorate degree is 9 years. The normal time frame for completion of the MD degree plus an additional master's degree (e.g., MS, MA) is 6 years. The maximum time permitted for the completion of the MD degree plus an additional master's degree is 8 years.

b. Due to academic, administrative, medical, military, or personal difficulties or scholarly enrichment activities, a student may require additional time for completion of MD degree requirements. In such situations, an academic plan may be established for the student that departs from the normal course of study and that may require the repetition of all or a part of a year of study (i.e., subsequent to incomplete or unsatisfactory performance in course work or an approved leave). To make Satisfactory Academic Progress, students ordinarily must complete the pre-clerkship phase of the curriculum by the end of the third year after matriculation.

c. The period of leave for which the student has been approved may be excluded from the published maximum time frame in which an individual student will be expected to complete all requirements of the degree program.

d. However, unless approved by the Dean, Wake Forest University School of Medicine, students will not be allowed to take more than 10 years from the time of matriculation to complete the requirements for the MD degree, inclusive of leaves of absence.

e. A student who is not on-track to complete the requirements for the MD degree by the 9th year following matriculation is contacted by the Registrar and required to meet with the Senior Associate Dean for Curriculum (or designee) and referred to SPARC for review.

REFERENCES
Attendance for Medical Students in Clinical Clerkships Courses Policy - MD Program (WFUSM)
Attendance for Medical Students in Pre-Clerkship Phase Policy - MD Program (WFUSM)
Leave of Absence Policy (WFUSM)
Military Leave of Absence Policy (WFUSM)
Student Professionalism and Academic Review Committee (SPARC) Policy - MD Program (WFUSM)
Technical Standards for Medical School Admission, Continuation, and Graduation - MD Program (WFUSM)
Wake Forest University School of Medicine Student Handbook (WFUSM)
LCME Element 9.9, 10.3

REVISION DATES
6/2020; 10/2020; 5/2022; 5/2023, 8/2023

Revised: 10/2023

For the most recent version and to view this policy in its entirety, please access the Satisfactory Academic Progress for Financial Aid Eligibility Policy - MD Program (WFUSM) on our institutional policy site.

Appeal of Grades Summative Assessment and Narrative Comments Policy

PURPOSE

The purpose of this policy is to establish standards for Wake Forest University School of Medicine ("School of Medicine") Undergraduate Medical Education ("MD") students to request a review of grades and to request an amendment to the student's educational records, including an exam or assessment within a course, course or clerkship grade, or a narrative assessment, if the student considers the information contained therein to be inaccurate, misleading, or in violation of the student's right of privacy.

SCOPE

This policy applies to Wake Forest University School of Medicine Undergraduate Medical Education (MD) program students, faculty, and staff.

DEFINITIONS

A. *Review*: An initial review of a summative assessment or grade by the course/clerkship director.

B. *Appeal*: Following the initial review, a subsequent review completed by the MD Appeals Committee ("the Committee"). The Committee only considers appeals on final course and clerkship grades and narrative comments. The Committee does not consider appeals for formative assessments within a course/ clerkship, including numerical exam grades.

POLICY GUIDELINES

A. Students are assessed on knowledge and skills as well as professionalism during a given course/clerkship, using the grading scale and grading components as defined in the course/clerkship syllabus. Each course/clerkship syllabus is approved by the Undergraduate Medical Education Curriculum Committee (UMECC).

B. A student may request a Review of the following:

 1. Summative assessment;

 2. A final grade for a course or clerkship; or

 3. A summative narrative assessment.

C. **Summative assessment**

 1. The student must notify the Course/Clerkship Director within 5 business days from the time that the summative assessment grade is released to the student and state the reason for review.

 2. The Course/Clerkship Director evaluates the student's request for review. During this review period the Course/Clerkship Director or the student may request a meeting to discuss the case. The Course/Clerkship Director will notify the student in writing of the decision regarding the summative assessment grade within 10 business days of the request for review.

 3. If the review by the Course/Clerkship Director does not resolve the student's concerns, the student may appeal the summative assessment to the MD Appeals Committee by emailing studentrecords@wakehealth.edu and requesting the appeal form within 5 business days of the date of the written communication from the Course/Clerkship Director. In the appeal form, the student must state the grounds for appeal as described below.

 4. A student may request an appeal of a summative assessment based on one of the following reasons:

 a) Mathematical or clerical error in calculating grades;

 b) The assessment was misleading, inaccurate, or in violation of the student's right of privacy; or

 c) Application of an assessment or grading system that was not defined in the syllabus.

D. **Course or Clerkship Final Grade**

 1. The Course/Clerkship Director assigns a final grade for the student based upon the assigned grading rubrics and procedures as outlined in the course/clerkship syllabus. For required clerkships, the grade is reviewed by the Clerkship Grading Committee and posted by the Clerkship Director.

 2. The student must notify the Course/Clerkship Director within 5 business days from the time that the final course/clerkship grade is released to the student and state the reason for a review.

 3. The Course/Clerkship Director evaluates the student's request for review. During this review period the Course/Clerkship Director or the student may request a meeting to discuss the case. The Course/Clerkship Director will notify the student in writing of the decision regarding the final course/clerkship grade within 10 business days of the request for review.

 4. If the review by the Course/Clerkship Director does not resolve the student's concerns, the student may appeal the summative assessment to the MD Appeals Committee by emailing studentrecords@wakehealth.edu and requesting the appeal form within 5 business days of the date of the written communication from the Course/Clerkship Director. In the appeal form, the student must state the grounds for appeal as described below.

 5. A student may request a review of a final course or clerkship grade. The grounds for a review should specify one of the following reasons:

a) Mathematical or clerical error in calculating grades;

b) The grade assigned was misleading, inaccurate, or in violation of the student's right of privacy; or

c) Application of an assessment or grading system that was not defined in the syllabus.

E. **Summative Narrative Assessment**

1. Summative narrative assessments are provided to students when the instructor to learner interaction permits and may appear in the Medical Student Performance Evaluation (MSPE) letter as described in the Narrative Description of Medical Student Performance Policy - MD Program (WFUSM) .

2. Summative narrative assessments reflect a holistic description of the student's performance in the course across all criteria. Students receive these summative narrative comments with the final grade to the course.

3. Students cannot appeal formative narrative comments.

4. The student must notify the Course/Clerkship Director within 5 business days from the time that the summative narrative assessments are released to the student and state the reason for a review.

5. The Course/Clerkship Director evaluates the student's request for review. During this review period the course/clerkship director or the student may request a meeting to discuss the case. The course/clerkship director will notify the student in writing of the decision regarding the summative narrative assessment within 10 business days of the request for review.

6. If the review by the Course/Clerkship Director does not resolve the student's concerns, the student may appeal the summative assessment to the MD Appeals Committee by emailing studentrecords@wakehealth.edu and requesting the appeal form within 5 business days of the date of the written communication from the Course/Clerkship Director. In the appeal form, the student must state the grounds for appeal as described below.

7. A student may request a review of summative narrative assessment. The grounds for a review should specify one of the following reasons:

a) Clerical error; or

b) The narrative comments were misleading, inaccurate, or in violation of the student's right of privacy.

F. **Medical Student Performance Evaluation**

1. The School of Medicine provides a Medical Student Performance Evaluation (MSPE) for all MD students during the Individualization Phase of the curriculum. The MSPE is required for residency applications and is released in alignment with the timeline set by the Association of American Medical Colleges/Electronic Residency Application Service (AAMC/ERAS).

2. The Office of Student Affairs is responsible for compiling content for the MSPE for each student. Each student has the opportunity to review the final draft of their MSPE and provide feedback within 5 business days by emailing studentrecords@wakehealth.edu. Students may request the Office for Student Affairs to make edits for grammar, pronouns, or to correct any information that is inaccurate, misleading, or in violation of the student's right to privacy, but students are otherwise not permitted to edit the content of the letter.

G. **MD Appeals Committee**

1. The MD Appeals Committee is responsible for making decisions on student requests for appeals for any negative action against a student, including but not limited to final grades, summative narrative assessments, repeating a course, repeating an academic year, interim suspension, and Student Professionalism and Academic Review Committee (SPARC) decisions other than dismissal.

2. The MD Appeals Committee is composed of a pool of 12 faculty members appointed by the Dean for a term of three years, which may be renewed.

3. For each appeal request, an ad-hoc group of five faculty members are selected by the Vice Dean for Undergraduate Medical Education from the pool of 12 in compliance with the conflicts of interest criteria set forth below.

4. A hearing on the student's request to amend the assessment or final grade will be conducted in compliance with the Student Education Records Policy (WFUSM).

5. The MD Appeals Committee hearing may include meeting(s) with the student, course/clerkship director, or others.

6. The MD Appeals Committee may decide to overturn the decision or change the sanction. All decisions of the MD Appeals Committee are final.

7. The MD Appeals Committee issues a decision and notifies the student in writing within 15 business days of the appeal submission. A copy of the final decision is forwarded to the Registrar in the Office of Student Records.

8. Members of the MD Appeals Committee are required to declare any conflicts of interest with a student using the Conflict of Interest Related to Student Assessment Policy (WFUSM).

a) In addition, members with a conflict as described below are not selected to review the student's case. Conflicts of interest include:

Computer-Based Exam Policy

I. PURPOSE

To establish student expectations and guidelines for administration during computer-based written examinations.

II. SCOPE

This policy applies to all medical students enrolled in the undergraduate medical education (MD) program at Wake Forest University School of Medicine.

III. DEFINITIONS/ABBREVIATIONS

A. USMLE: United States Medical Licensing Examination is a three-step examination program for medical licensure in the United States sponsored by the Federation of State Medical Boards and the National Board of Medical Examiners.

IV. POLICY

The MD Program Computer-Based Exam Policy requires students to comply with the following requirements:

A. Students must secure ALL personal effects (including bags/backpacks, cellphones, smartwatches, etc.) in their designated, secured space in the medical education building prior to the start of the exam.

B. Students should arrive in the exam room (report to the proctor for remotely proctored exams) 15 minutes prior to the start of the exam unless otherwise specified by the Evaluations staff in the testing instructions provided prior to the exam date.

C. Students must complete the exam compatibility check, restart their computers, and complete all network security and software updates prior to test day to ensure that computers are working properly on the day of the exam.

D. For remotely proctored exams, students are required to show the proctor 360 degree of the testing room and workstation. At the end of testing, the student is required to show the proctor the entirety of notes taken on paper during testing.

E.   Any students arriving more than 10 minutes late will be required to meet with a proctor prior to starting the exam.

F. The time allocated to complete an exam will **NOT** be extended due to late arrival, barring extenuating circumstances, at the discretion of the proctor.

G. Students distracted by background noise may bring non-electronic soft-foam earplugs (with no wires/no airpod style earplugs) for use during testing, in accordance with the testing regulations for USMLE Step exams: http://www.usmle.org/bulletin/testing/#PersonalItems

H. No electronics are allowed in the exam room with the exception of laptops used to take the exam. Smartwatches may not be worn or brought into the exam room.

I. In an effort to maintain a quiet testing atmosphere, students should enter and leave the testing area as quietly as possible when taking breaks. Students who bring snacks and/or drinks into the exam are asked to open beverage

cans and remove food from noisy wrappers prior to the start of the exam to lessen noise distractions to their classmates.

J. Any student wishing to take a break during an exam must log in and log out of the exam room. Students may be permitted breaks but may not receive additional time within the examination. Students taking a break are restricted to movements within the foyer and to and from the bathroom facilities only. All other areas are off limits. Students discovered entering, within or leaving restricted areas, before completing the exam, will be reported to the Senior Associate Dean for Curriculum or designee for the related curriculum and the Senior Associate Dean for Student Affairs or designee. An additional investigation may be conducted by the Honor Council.

K. For remotely proctored testing, the student would report to the proctor for breaks.

L. Only ONE student may be out of the exam room at a time.

M. Breaks are limited to 10 minutes out of the exam room.

N. From the time a student begins an exam until he/she completes it, the student must remain in the same building and on the same floor in which the exam is being administered.

O. All exams are governed by the Honor Code.

Resources and References: https://www.usmle.org/

Revised: 10/2023
For the most recent version and to view this policy in its entirety, please access the Computer-Based Exam Policy - MD Program (WFUSM) on our institutional policy site.

Lecture Recording

Wake Forest University School of Medicine recognizes that there may be some circumstances where it may be inappropriate to record lecture content using the lecture capture system. When Academic Affairs or faculty determine that content is inappropriate for recording (for example, due to patient privacy, confidentiality, or content covered is directly related to actual assessment questions) students are prohibited from a making audio or video recordings or photographs during the session. Disclosing such confidential material is an honor code violation.

Note Exchange

Wake Forest encourages student collaboration and discourse within our learning communities and between classes to share study materials and resources to enhance learning and acquisition of knowledge and competency. However, actual assessment questions on tests and quizzes are confidential and should not be shared in any format between classes. Disclosing such confidential material is an honor code violation.

Clinical Supervision Policy

The purpose of this policy is to ensure that undergraduate medical education (MD) students in clinical learning situations involving patient care are appropriately supervised at all times in order to ensure patient and student safety, that the level of responsibility delegated to the student is appropriate to the student's level of training, and that the activities supervised are within the scope of practice of the supervising health professional. Supervision of medical student learning experiences is provided throughout the clinical curriculum by members of the school's faculty.

This policy applies to Wake Forest University School of Medicine (School of Medicine) Undergraduate Medical Education (MD) program students, faculty, and staff.

POLICY

A. While completing clinical activities and clerkships, students should be incorporated as an integral member of the healthcare team;

   1. While completing required clerkships and clinical courses, students are permitted to participate in patient care, including procedures. This includes opportunities to collaborate and work with interprofessional teams and staff from a variety of disciplines.

   2. Specific guidance and information about the student's minimum level of responsibility and expected procedures is provided for all required clerkships. A student's minimum level of responsibility for required procedures is approved by the Undergraduate Medical Education Committee (UMECC).

B. Clinical and Procedural Supervision

   1. Students must be appropriately supervised during all clinical duty and call hours by a supervisor, as defined above.

   2. It is the responsibility of the course/clerkship director to ensure adequacy and availability of supervision. A faculty physician or Course/Clerkship Director may assign a credentialed healthcare provider as a supervisor of teaching activities, but must ensure:

     a) The level of supervision is appropriate for the student's level of responsibility.

     b) The procedure falls within the supervisor's scope of practice, (example: phlebotomist for phlebotomy, nurse for IV placement, etc.).

     c) Continued monitoring of the student's supervision on the clinical service to protect student and patient safety.

   3. Determination of appropriate level of supervision is made by the supervisor and should foster an environment of progressive responsibility, based on many factors, including:

     a) The acuity/complexity of the patient and/or procedure;

     b) Level of training of the student; and

     c) Previous experience, knowledge, and skill level of the student relevant to the clinical activity and setting.

   4. Supervision fosters a safe learning environment for students, ensuring feedback to the student to allow for growth of clinical skills while also facilitating formative feedback and summative assessment.

   5. Students on clinical clerkships/courses may enter information into the electronic medical record of the patient with the approval of the faculty physician, course, and department leadership and consistent with the Medical Supervision of Cardiopulmonary Care Services .

   6. Medical students are not permitted to perform breast, genitourinary, rectal exams, or other culturally sensitive exams without agreement from the patient and supervisor and must be chaperoned.

C. Procedure Supervision

   1. It is the responsibility of the clerkship director to ensure adequacy and availability of supervision. Students can report concerns regarding adequacy of supervision directly to the clerkship director. The clerkship director and student will then work together to resolve the violation/concern. If the situation is not resolved, the student can then escalate the issue to the Associate Dean for Clinical Education and the Assistant Dean of the Clinical Regional Campus (if applicable).

   2. Also, students can anonymously report concerns regarding adequacy of supervision using the end of course/clerkship evaluation. The Office of Education Institutional Effectiveness and Compliance (OEIEC) monitors concerns regarding supervision reported through the end of course/clerkship evaluation. The OEIEC notifies the Associate Dean for Clinical Education and the Assistant Dean of the Clinical Regional Campus (if applicable) to review and resolve the concern. The OEIEC is informed of the resolution. Responses to student surveys regarding adequate supervision are monitored on an annual basis by UMECC.

   3. Faculty and residents attest to receiving this policy on an annual basis. Faculty and resident attestations are centrally monitored by the OEIEC and reported to UMECC.

Revised: 5/2023

For the most recent version and to view this policy in its entirety, please access the Clinical Supervision Policy - MD Program (WFUSM) on our institutional policy site.

Policy on Medical Student Contact Hours for the Pre-Clinical Curriculum

Purpose

To ensure that students have sufficient unscheduled time to complete independent and self-directed learning required for participation and success in the pre-clerkship curriculum, the curriculum committee has established expectations for the amount of time medical students spend in required activities in the pre-clerkship curriculum.

Policy

A. The calendar of each course in the pre-clerkship phase of the curriculum is recommended by the course director, reviewed by the appropriate curriculum subcommittee, and approved by UMECC.

B. The pre-clerkship curriculum may be delivered via lecture, small group or team-based learning activities, simulation activities, self-directed learning, online, or laboratory-based activities, among others.

C. The total duration of required class time and required assignments does not exceed 40 hours per week and does not exceed 30 hours per week averaged over four weeks. Independent reading and study performed at the discretion of the student are not included in this time.

D. Monitoring
   1. Student contact hours in the curriculum and required assignments are tracked in the Learning Management System.
   2. Academic workload across foundational science courses and longitudinal courses is monitored by UMECC and reported on an annual basis.
   3. Student satisfaction on academic workload will be reported to UMECC on an annual basis by the Director of Continuous Quality Improvement (CQI).

Revised:10/2023

For the most recent version and to view this policy in its entirety, please access the Medical Student Contact Hours for the Preclinical Curriculum Policy (WFUSM) on our institutional policy site.

Policy on Clinical Duty Hours for Medical Students on Clinical Clerkships/Courses

The purpose of this policy is to establish standards for Wake Forest School University of Medicine (WFUSM) undergraduate medical education (MD) students regarding the amount of time medical students spend in required activities, including the total number of hours medical students are required to spend in clinical and educational activities.

This policy applies to all undergraduate medical education (MD) students at WFUSM during the immersion and individualization phase of the curriculum.

POLICY GUIDELINES

Immersion Phase Duty Hours

1. In general, a medical student should not be required to work longer hours than interns on the same service.
2. A student may be scheduled for an average of 80 duty hours per week during a four-week period.
3. Duty hours must be structured to allow a minimum of four 24-hour time periods free over a four-week time period for the duration of the clerkship.
4. Duty hours may not exceed 16 continuous hours, following which students should have at least 8 hours duty free.
5. Duty hours may include overnight calls or shifts. The maximum frequency of overnight calls is once every third night. For students completing overnight shifts, the maximum number of overnight shifts is 5 nights sequentially. Following 5 overnight shifts, students will not be expected to return to duty hours until the next calendar day.
6. Students must be excused from duty hours no later than midnight of the night prior to a shelf or final examination.
7. Students are to be excused from duty hours on all days that have been identified as holidays on the Wake Forest School of Medicine Academic Calendar.
8. Students should follow the policy on Attendance Policy for Medical Students in Immersion and Individualization phases to make requests for absences.

Individualization Phase Duty Hours

1. In general, a medical student should not be required to work longer hours than interns on the same service.
2. A student may be scheduled for an average of 80 duty hours per week during a four-week period.
3. Duty hours must be structured to allow a minimum of four 24-hour time periods free over a four-week time period for the duration of the clerkship.
4. Duty hours may not exceed 24 continuous hours, following which students should have at least 14 hours duty free. Periods of assigned responsibility may not exceed 24 continuous hours, with 4 additional hours for patient care continuity.
5. Duty hours may also include overnight call or shifts. The maximum frequency of overnight call is once every third night.

For students completing overnight shifts, the maximum number of overnight shifts is 5 nights sequentially. Following 5 overnight shifts, students will not be expected to return until the next calendar day.

6. Students must be excused from duty hours no later than midnight of the night prior to a shelf or final examination.
7. Students are to be excused from duty hours on all days that have been identified as holidays on the Wake Forest School of Medicine Academic Calendar.
8. Students should follow the policy on Attendance Policy for Medical Students in Immersion and Individualization phases to make requests for absences.

Reporting and Monitoring Procedures

1. It is the responsibility of the clerkship director to monitor and prevent duty hour violations. Students can report concerns or violations of duty hour policies directly to the clerkship director. The clerkship director and student will then work together to resolve the violation/concern. If the situation is not resolved, the student can then
2. escalate the issue to the Associate Dean for Clinical Education and the Assistant Dean of the Clinical Regional Campus (if applicable).
3. Also, students can anonymously report duty hour violations using the end of course/clerkship evaluation. The Office of Education Institutional Effectiveness and Compliance (OEIEC) monitors duty hour violations reported through the end of course/clerkship evaluation. OEIEC will notify the Associate Dean for Clinical Education and the Assistant Dean of the Clinical Regional Campus (if applicable) to investigate and resolve the concern. OEIEC will be informed of the outcome of the investigation.
4. Duty hours are monitored twice per year through reports to the Subcommittee on Clinical Education (SOCE) and Undergraduate Medical Education Curriculum Committee (UMECC) and appropriate action is taken to ensure any duty hour infractions do not continue.

Note: students may make an informed decision in specific circumstances to exceed these limits if they believe that doing so provides an exceptional educational experience.

Revised:3/2023
For the most recent version and to view this policy in its entirety, please access the Clinical Duty Hours for Medical Students on Clinical Clerkships-Courses Policy - MD Program (WFUSM) on our institutional policy site.
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Attendance Policy for Medical Students in Pre-Clerkship Phase

PURPOSE

This policy aims to establish guidelines for medical student attendance and absences from mandatory learning activities in the Pre-clerkship Phase of the MD curriculum to support student's growth and success as medical learners and future physicians. The Liaison Committee for Medical Education (LCME) expects that a medical school has policies and procedures in place that permit students to be excused from these experiences to seek healthcare.

The primary focus of the MD Program pre-clerkship curriculum is to develop competence in the foundational basic science knowledge necessary for the practice of medicine as well as the clinical skills, attitudes, professional behaviors, and critical thinking skills necessary to be an effective part of the healthcare team when the student enters their clinical rotations. The pre-clerkship curriculum offers a variety of learning opportunities determined by the course directors to be most effective for the given content. Importantly, there are curriculum events that are crucial to student learning and that require direct engagement of the learner in real-time. These events are attendance-mandatory and include all small-group instructional activities, anatomy sessions where students work together, and selected large-group events deemed necessary by the course directors.

SCOPE

This policy applies to the Pre-clerkship phase of the Curriculum of the undergraduate medical education (MD) program students at Wake Forest University School of Medicine (School of Medicine).

DEFINITIONS

A. **Absence**: Missing at least 1 mandatory event in one day or being more than 10 minutes late to a mandatory event.

B. **Excused Absence**: An absence that has been 'approved' in the student online absence request system (see Procedure Guidelines below).

C. **Unexcused Absence**: An absence that is taken that was previously denied in the system, an absence for which a request has not been submitted by the student in the system per this policy, any non-emergent absence from an attendance-required activity that is taken without prior approval, and unapproved tardiness of 10 minutes or more for a mandatory event are all considered unexcused absences and are reported for Professionalism Feedback (see Policy Guidelines below).

D. **Professionalism:** Dedication to the values, commitments, and responsibilities—demonstrated through one's actions, habits, and behaviors—that establishes one's trustworthiness to serve as a physician. Professionalism includes:

- Commitment to achieving professional competence through the acquisition of the knowledge, skills, and attitudes essential for performing effectively as a physician;

- Commitment to behaving in an ethical manner, including demonstrating honesty, integrity, and taking responsibility for one's actions;

- Commitment to humanism, including treating all those with whom one interacts in a collegial and respectful manner; and

- Commitment to fulfilling one's professional responsibilities.

As it relates to attendance at required learning and assessment activities, student's professional responsibilities include the following:

- Monitoring the academic calendar for student attendance expectations: Students are expected to reference the academic calendar in the learning management system regularly to determine which learning events have required attendance. Any event noted in the event details as 'mandatory' is attendance required.

- Attending all mandatory learning events as outlined in Wake Forest University School of Medicine's learning management system, including but not limited to small-group learning events, sessions in which patients are present, and all inter-professional educational activities.

- Attending all exams: This includes course exams, retake exams, exams for course remediation, observed structured clinical exams (OSCEs), clinical performance exams (CPXs), NBME exams, and any other scheduled exam.

- Demonstrating honesty and integrity with attendance sign-in: Students may ONLY sign in/submit an attendance sheet/form for themselves and no other students. Signing in or submitting an attendance sheet/form for another student is considered a Code of Honor and Professionalism Conduct violation. In addition, students who sign in for an attendance-mandatory event must be present for the entire event to receive credit for attendance, unless

approved to leave early by the course director; leaving an attendance-required event early without prior approval is considered an absence.

- Prompt submissions of absence requests: The student must submit an absence request a minimum of 14 calendar days in advance for any planned absences, and it must be recorded using the system. Unplanned absences must be entered into the system as soon as the student becomes aware that they are unable to attend a mandatory event.

POLICY GUIDELINES

Whenever possible, students should attempt to minimize planned absences during mandatory learning and assessment events to minimize interruptions to the student's learning experience.

Students are responsible for completing all missed coursework, as outlined in the syllabus, regardless of whether an absence request is planned or unplanned, excused or unexcused as defined in this policy. Make up of missed assignments or learning activities resulting from an absence from a mandatory event may be required by the course director in order for a student to receive credit for successfully completing the course. If make-up assignments or learning activities are required of a student, a plan must be made promptly with the applicable course director for completion of required missed assignments or activities.

A. **Planned Absences**
   1. Planned absences include time away from pre-clerkship curriculum responsibilities in which the student may request in advance altered scheduling and/or an absence for the mandatory event.
   2. All planned absence requests must be entered into the system at least 14 calendar days prior to the applicable mandatory event. If a system request is entered fewer than 14 calendar days prior to the mandatory event, the absence request may not be approved.
   3. Absence requests are reviewed by staff who determine if the request is approved or not based on a set of standardized criteria used for absence requests for all courses. The following categories of absence requests are examples that are approved/excused. Note that students who accumulate absences beyond specified thresholds may have implications for their progress in the curriculum (see Section E2 below):
      a) Routine health appointments: An excused absence is granted for scheduled healthcare appointments.
      b) Presentation at a professional conference: An excused absence may be granted for a student who is invited to present at a professional conference. Proof of acceptance to the conference where the student is presenting must be provided via the system by uploading supporting documentation. Conference attendance alone, without presentation responsibilities, does not meet the criteria for an excused absence.
      c) External Leadership activity: An excused absence may be granted for a student to represent Wake Forest University School of Medicine in a leadership capacity at a professional conference or meeting. Supporting documentation must be uploaded into the system.
      d) Religious observance. An excused absence is granted for a student to observe a religious holiday, in accordance with University policy.
      e) Jury Duty: An excused absence may be granted for a student to fulfill this civic responsibility. Students may request a letter from the Office of Student Affairs in support of deferral or excuse from jury duty.
      f) Ceremonies: For example: weddings and graduations for close family members/friends, or other events. Students must balance the significant responsibility of their medical education with these events and are advised to prioritize those that are most significant.
   4. Planned absences, as defined in this policy, are not approved for assessment events unless permission is granted from the Senior Associate Dean of Curriculum or designee in collaboration with the course director (i.e., course/block exams, CAS exams and CPX assessment events).

B. **Unplanned Absences:**
   1. All unplanned absences must be entered into the system as soon as the student becomes aware that they are not able to be present for a mandatory pre-clerkship event. If the student is unable to enter an absence request into the system at that time, students should email stuserv@wakehealth.edu and the applicable course director.
   2. Absence requests for unplanned absences are reviewed by staff and excused or unexcused based on a set of standardized criteria used for absence requests for all courses. The following are examples of unplanned absences that may be excused:
      a) **Illness:** An excused absence is granted in the case of a student's own illness or injury; it is the student's responsibility to ensure that an absence request is submitted no more than 2 business days after absence. Documentation from Student Health or a healthcare provider is required if the illness results in an absence spanning more than two (2) consecutive days of instruction.
      b) **Bereavement**. An excused absence is granted because of the death of the student's spouse, parent (natural parent, step-parent, adoptive parent), parent-in-law, sibling, child (natural child, adoptive child, foster-child,

step-child), grandparents, grandchildren, brother- or sister-in-law, or any other person who is a member of the student's household.

    c) **Personal or family emergencies**: An excused absence may be granted to students for unforeseen personal and/or family emergencies.

3. Any non-emergent absence from an attendance-required activity that is taken without prior approval in the system is considered an unexcused absence.

C. **Late arrival to mandatory events:**
1. Students are expected to arrive on time for all attendance-mandatory events to ensure an optimal learning experience for all students.
2. As above for planned absences, students are expected to submit absence requests for all instances of a planned late arrival to attendance-mandatory events. Approval of time missed from mandatory events is considered on a case-by-case basis to determine if the missed time is considered an excused absence, as per the guidelines established by this policy.
3. If a late arrival to a mandatory learning activity is not approved as an excused absence, it is considered an unexcused absence, and the policy described herein applies (See Policy Definition F - Professionalism Expectations).
4. Students arriving late to a mandatory activity, irrespective of the reason, will not be given additional time to complete learning activities or assessments.
5. Students arriving more than 10 minutes late to a mandatory event without prior approval will result in an unexcused absence and a report for Professionalism Feedback.

D. **Absences on Exam Days:**
1. If a student's absence request for an exam is approved (i.e., excused), the student is expected to communicate with the applicable course director and/or assessment team within 48 hours of the request to reschedule the exam.
2. If the student is more than 10 minutes late to an exam without prior notification and approval in the system, the student's opportunity to take the exam is at the discretion of the course director. No additional time is granted to complete the exam. Students arriving more than 10 minutes late for an exam will result in an unexcused absence and a report for Professionalism Feedback.

E. **Course and Academic Year Expectations for Absences**:
1. Course Directors set attendance expectations within the learning management system for required learning events and exams. Students who are unable to meet the attendance expectations outlined in the course syllabus may be required to meet with the Course Director or designee. Students not meeting expectations for attendance and assessments described in the syllabus may receive an Incomplete grade until all criteria are met to successfully pass the course. The Course Director and the student may request to meet with the Associate Dean for Pre-Clerkship Education to assist in determining a schedule to make up missed coursework and assessments in collaboration with the Academic Advising team, if indicated.
2. Students who accumulate absences (excused or unexcused, planned or unplanned) totaling six (6) absences for the first year of the curriculum (July-June) or three (3) absences for the second year of the curriculum (July-December), respectively, must meet with the Senior Associate Dean for Curriculum to determine if the student is on track for successful completion of the Pre-clerkship Phase of the Curriculum, and if the student would benefit from student support services. A schedule will be developed to make up missed coursework and assessments in collaboration with the Academic Advising team, if indicated.
3. Students who accumulate planned absences exceeding six (6) absences for the first year of the curriculum (July-June) or three (3) absences for the second year of the curriculum (July - December), respectively, must meet with the Senior Associate Dean for Student Affairs to discuss excessive absences and may be reported for Professionalism Feedback.
4. If the amount of time away is expected to be six (6) weeks or longer, students should refer to the [Leave of Absence Policy (WFUSM)](#).

F. **Referral Process for Student Support**
1. Results of academic formative assessments, attendance policy, and Code of Honor and Professional Conduct violations are monitored by Course/Clerkship Directors and the Committee for Review of Educational Support and Success (CRESS). Students who demonstrate deficiencies in knowledge or skills acquisition on summative and/or formative assessments or professionalism violations are referred to the Academic Advising team or other support services for assistance.
2. Students are expected to illustrate personal accountability and professionalism towards the Wake Forest School University of Medicine community throughout their medical school experience. A student who fails to comply with

the Attendance policy or who does not respond to faculty/administration expectations as explained in course syllabi or in other formats, could result in a referral to the Student Professionalism and Review Committee (SPARC). See SPARC policy for reference on guidance on SPARC referrals.

REFERENCES
Formative Assessment and Feedback Policy - MD Program (WFUSM)
Leave of Absence Policy (WFUSM)
Student Professionalism and Academic Review Committee (SPARC) Policy - MD Program (WFUSM)
Code of Honor and Professional Conduct
LCME Element 12.4

REVISION DATES
6/2020; 10/2020; 5/2023; 10/2023

Revised 10/2023

For the most recent version and to view this policy in its entirety, please access the Attendance for Medical Students in Pre-Clerkship Phase Policy - MD Program (WFUSM) on our institutional policy site.

Attendance Policy for Medical Students Clinical Clerkships/Courses

PURPOSE
The purpose of this policy is to establish guidelines around attendance during the student's clinical years.

SCOPE
This policy applies to Wake Forest University School of Medicine Undergraduate Medical Education (MD) program third and fourth year students.

DEFINITIONS
A. Excused Absence: An absence that has been deemed 'approved' in the student scheduling and absence system.
B. Unexcused Absence: An absence that is taken by a student and is either not submitted in the student scheduling and absence system or has been denied in the student scheduling and absence system.

POLICY GUIDELINES
A. General Policy Statement:
   1. Because of the critical significance of the clinical activities of the Immersion and Individualization phases of curriculum, attendance is required for all scheduled clinical or clerkship activities. An absence is defined as any time away from required clinical activities. The policies relating to excused and unexcused absences from any course or clerkship activity are outlined below. All activities during Clinical Curriculum are ATTENDANCE REQUIRED.

B. Policy on Excused Absences during Clinical Curriculum
   1. Students may be excused from classes or clinical activities in order to access health services. Students will follow the appropriate Attendance Procedure as outlined for planned or unplanned absences related to accessing health services.
   2. Only requests submitted through the system will be considered by the Assistant Deans of Clinical Curriculum.
   3. Approval of scheduling requests and absences is at the ultimate discretion of the Assistant Deans of Clinical Curriculum. This includes absences during orientation and transition events for Immersion and Individualization phases of the curriculum. Decisions will be communicated to the Course/Clerkship Director and Coordinator, as well as the student, at the earliest possible opportunity.
   4. If a student absence is necessary during the course of a rotation, all outstanding curricular activities must be completed in accordance with the goals and objectives of the course, and in adherence with the MD Program Satisfactory Academic Progress (SAP) Policy - MD Program (WFUSM). The student will receive a grade of "Incomplete (I)" until the coursework is completed. Please see the MD Program Satisfactory Academic Progress (SAP) Policy - MD Program (WFUSM) for information on advancement in the MD curriculum.
   5. If a student anticipates the need for a scheduling or absence request before a rotation begins:
      a) An online request should be placed through the system at the earliest possible opportunity and by the required deadline. (Note: The act of submitting a request does not guarantee that the request will be approved.)

b) Excused absences will not result in punitive measures, but curricular activities missed may need to be completed at a later time at the discretion of the Course/Clerkship Director.

c) If a student wishes to appeal the decision of the Assistant Deans of Clinical Curriculum, an appeal may be made to the Associate Deans for Clinical Education within 3 business days of the initial decision. The Associate Deans for Clinical Education will consult the student and Assistant Deans of Clinical Curriculum and make a final determination regarding the request.

6. If a student has an absence after a rotation has started that could not be anticipated (e.g., illness or extenuating circumstance during which a student is unable to access the absence request system), the student should:

a) Contact the Course/Clerkship Director as soon as possible (preferably by phone or in person).

b) If clinical responsibilities have started, contact the Course/Clerkship Director and/or Course/Clerkship Coordinator as outlined in the course/clerkship syllabus to inform them of the absence.

c) The absence should be submitted through the system within 24 hours of initial contact with the Course or Clerkship Director.

d) If a student absence is necessary on the day of an exam (shelf exam, OSCE, quiz or other), the student may be asked by the Assistant Deans of Clinical Curriculum to provide documentation. regarding his/her absence on that day. The exam must be completed within the timeline determined and communicated by the Assistant Deans of Clinical Curriculum.

C. Policy on Unexcused Absences during Clinical Curriculum

1. All unexcused absences will be reported by the Course/Clerkship Director or Coordinator to the Assistant Deans, and the student may be referred to the Student Professionalism and Academic Review Committee (SPARC).

2. Unexcused absences may result in remediation of some portion of the clerkship or failure of the entire course or clerkship as well as a referral to the SPARC.

D. Policy for Residency Interviews during Individualization

1. Most students will be interviewing for house officer positions during the fall of their senior year. The following policies apply to these absences.

a) Only requests submitted through the system will be considered.

b) No more than 2 working days' absence for residency interviews will be allowed during Acting Internship or Critical Care rotations, and those absences will be excused only if they are approved at least 14 days prior to the start of the rotation. Students who receive interview offers at short notice should communicate their absence needs to the Course Director to formulate a mutually agreeable plan for accommodating the absence and (if necessary) making up any additional missed time from the course. Short-notice absences would still need to be submitted in the system. A working days' absence refers to any absence greater than 4 hours in duration.

c) No more than 3 working days' absence for residency interviews will be allowed for all other 4- week elective rotations, and those absences will be excused only if they are approved at least 14 days prior to the start of the rotation. For 2 week rotations, only 1 excused absence is permitted. Students who receive interview offers at short notice should communicate their absence needs to the Course Director to formulate a mutually agreeable plan for accommodating the absence and (if necessary) making up any additional missed time from the course. Short-notice absences would still need to be submitted in the system. A working days' absence refers to any absence greater than 4 hours in duration.

d) The student is responsible for checking with the individual Course Director to ensure that there are no additional requirements for attendance.

E. Policy for all other absences during Individualization

1. All other absences during the Individualization phase must comply with the above policies for excused and unexcused absences.

2. Failure to participate all scheduled days/shifts of a Year 4 rotation without an excused absence or appropriate remediation will result in no credit being awarded to the student for that course/clerkship.

F. Referral Process for Student Support

1. Results of academic formative assessments, attendance policy, and Code of Honor and Professional Conduct violations are monitored by Course/Clerkship Directors and the Committee for Review of Educational Support and Success (CRESS). Students who demonstrate deficiencies in knowledge or skills acquisition on summative and/or formative assessments or professionalism violations are referred to the Academic Advising team or other support services for assistance.

2. Students are expected to illustrate personal accountability and professionalism towards the Wake Forest School University of Medicine community throughout their medical school experience. A student who fails to comply with the Attendance policy or who does not respond to faculty/administration expectations as explained in course syllabi or in other formats, could result in a referral to the Student Professionalism and Review Committee (SPARC). See SPARC policy for reference on guidance on SPARC referrals.

REFERENCES
Satisfactory Academic Progress (SAP) Policy - MD Program (WFUSM)
Student Professionalism and Academic Review Committee (SPARC) Policy - MD Program (WFUSM)
LCME Element 12.4

REVISION DATES

7/1/2014, 6/1/2020, 9/2022; 2/2023; 8/2023

Revised: 10/2023
For the most recent version and to view this policy in its entirety, please access the Attendance for Medical Students in Clinical Clerkships Courses Policy - MD Program (WFUSM) on our institutional policy site.

Withdrawal

Students who wish to withdraw from the School of Medicine must complete the appropriate form, which requires approval from either the Associate Dean for MD Program Academic Affairs or the Associate Dean for Educational Excellence. Students who withdraw from the program will have the grade of W (Withdraw) assigned for each course/rotation in progress.

A student who withdraws from the School of Medicine during a semester may be entitled to a refund of certain charges. A withdrawal also affects financial aid eligibility and could require a return of federal financial aid funds. Please see the Refund and Return of Financial Aid Funds Policy for further details.

Students will be required to meet with the following offices to complete exit procedures:

Office of Financial Aid
Student Financials
Academic Applications
Library
Office of Student Records

Any student who has withdrawn and wishes to be considered for readmission must apply and follow all the processes and procedures of the regular admissions process. Applicants will be considered as described in the Policy on the Selection of Medical Students.

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– Biomedical Sciences Program

In addition to the policies outlined for all students enrolled in programs administered on the School of Medicine campus as found in this Student Handbook. Biomedical Graduate Program students are expected to familiarize themselves with the procedures, processes, and practices found in the 2023-2024 Graduate Bulletin for Biomedical Graduate Programs Administered on the School of Medicine Campus. The Graduate Bulletin may be found by current students in their All Graduate Student Canvas resource page or on the web **here.**

Program Overview

The Wake Forest University Graduate School of Arts and Sciences offers biomedical graduate degree programs in the following areas on the School of Medicine campus:

Addiction Research and Clinical Health (MS)	Health Disparities in Neuroscience-related Disorders (MS)
Biochemistry and Molecular Biology (PhD)	Healthcare Leadership (MHL)
Biomedical Engineering (MS/PhD)	Integrative Physiology and Pharmacology (PhD)
Biomedical Informatics (MS)	Medical Physics (PhD/MS/CRT)
Biomedical Science (MS)	Microbiology and Immunology (PhD)
Cancer Biology (PhD)	Molecular Genetics and Genomics (PhD)
Clinical Research Management (MS)	Molecular Medicine and Translational Science (MS/PhD)
Comparative Medicine (MS)	Neuroscience (MS/PhD)
Genetic Counseling (MS)	Translational and Health System Science (MS)
	Translational Biotechnology (MS)

The Graduate School also offers joint degree programs with the MD program and the Business School (MBA) for all listed PhD degree programs, with the MD program for the MS program in Translational and Health System Sciences, the PA program with the Molecular Medicine and Translational Science PhD program, and the undergraduate campus on BS/MS or BA/MS in Neuroscience.

Mentors for graduate students enrolled in the biomedical graduate programs are predominantly drawn from the School of Medicine and are focused on six key focus areas that the Medical Center has identified as core to our research expertise, with a desire to synergize across these areas as appropriate. The six areas of focus are:

Cancer • Lung cancer • Precision oncology • Tobacco control	**Neurosciences/Brain** • Substance abuse and addiction • Pain
Regenerative Medicine • Micro-nan fabrication • Body on a chip • In situ regeneration • Manufacturing innovation	**Aging/Alzheimer's Disease** • Healthy aging • Effect of brain aging on peripheral metabolism and physical function • Role of energy metabolism in the pathogenesis of Alzheimer's disease and dementia
Diabetes/Obesity /Metabolism • Translational programs in the precision medicine of diabetes and obesity • Brain and metabolism • Diabetes and heart disease	**Cardiovascular disease** • Cardiovascular disease prevention • Prediction and prevention of heart failure

Supporting these scientific focus areas are three primary activities and services that function to maximize the impact of our research, and particularly in our efforts to become a continuously learning health care system. These activities and services include Implementation Science; Clinical Informatics; and Population Health. As a learning healthcare system, we have the unique opportunity of translating the knowledge that we gain in our research environment into our business of improving health. Graduate students in biomedical sciences graduate programs have the opportunity to have an impact in these areas in support of improving human health.

SUMMER 2023

May	18	New Student Orientation
May	22	Classes Begin
May	29	MEMORIAL DAY HOLIDAY
June	**12**	Last day to add/drop a course; **Deadline for September graduates: Statement of Intent to Graduate module**
June	19	JUNETEENTH HOLIDAY
July	4	INDEPENDENCE DAY HOLIDAY
July	5	Course Registration for the next term opens
August	**9**	**Deadline for September graduates: Last day to defend**
August	16	Classes End; **Deadline for September graduates: ETD Student Advisor Agreement, submission of final copy of thesis/dissertation, Exit Survey**
August	17-19	Examinations
August	28	Grades Due
September	5	Graduation (Degrees Conferred)

FALL 2023

August	23	New Student Orientation
August	25	Ethics RCR Bootcamp (GRAD 713)
August	28	Classes Begin
September	4	LABOR DAY HOLIDAY
September	**18**	Last day to add/drop a course; **Deadline for January graduates: Statement of Intent to Graduate module**
November	6	Course Registration for the next term opens
November	22 – 24	THANKSGIVING HOLIDAY
December	**12**	**Deadline for January graduates: Last day to defend**
December	14	Classes End
December	15-19	Examinations
December	**18**	**Deadline for January graduates: ETD Student Advisor Agreement, submission of final copy of thesis/dissertation, Exit Survey**
January	4	Grades Due
January	12	Graduation (Degrees Conferred)

SPRING 2024

January	4	New Student Orientation
January	8	Classes begin
January	15	MARTIN LUTHER KING JR. HOLIDAY
January	**29**	Last day to add/drop a course; **Deadline for May graduates: Statement of Intent to Graduate module**
March	4 – 8	SPRING BREAK
March	18	Course Registration for the next term opens
March	29	GOOD FRIDAY HOLIDAY
April	**18**	**Deadline for May graduates: Last day to defend**
April	26	Classes end
April 29 – May 2		Examinations
May	**2**	**Deadline for May graduates: ETD Student Advisor Agreement, submission of final copy of thesis/dissertation, Exit Survey**
May	8	Grades Due
May	11	Hooding and Awards Ceremony/Graduation (Degrees Conferred)
May	13	Wake Forest University Commencement

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Physician Assistant Program

Our Physician Assistant Student Handbook can be found in the [PolicyTech](#) system and on the web at [www.wakehealth.edu/Physician-Assistant-Program.](#)

Program Overview

The Wake Forest University School of Medicine physician assistant program has a unique history of curricular innovation in medical education. From its beginning in 1969, it has featured inquiry-based, small-group, self-directed learning centered around real patient medical problems. We remain one of the few programs in the country with an educational experience focused on adult and applied learning principles. Our patient-centered approach immerses students in real-life cases and fosters their clinical problem-solving abilities.

The Wake Forest University School of Medicine PA Program is composed of diverse students whose individual characteristics comprise an extensive variety of life experiences, cultural, racial and ethnic backgrounds, academic studies, work history, volunteer exposures and leadership roles. The program attracts students from across the United States and is dedicated to preparing PA providers to serve across all communities and the entire spectrum of primary care and specialty scopes of practice.

The PA program is located on two campuses in North Carolina - one in the city of Winston-Salem and one in the western mountains of Boone in order to incorporate the rich experiences of both rural and urban exposures for students.

Important PA Policies

Please note that these are just a few selected policies for you to review. Visit our [PolicyTech](#) system for the unabbreviated versions of these and all applicable policies for PA students.

Advanced Placement Policy

PURPOSE: The purpose of this policy is to set standards for advanced placement status in the Physician Assistant (PA) program at Wake Forest School of Medicine (WFSM). This policy applies to all prospective and current PA program students.

SCOPE: This policy applies to all prospective and current PA program students

DEFINITIONS

A. Policy: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

B. WFBH: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

C. Advanced Placement: A waiver of required coursework included in the PA curriculum for applicants to the program and/or a waiver of required coursework included in the PA curriculum for currently enrolled students in the program which results in the student advancing in the curriculum without completing required curriculum components at the sponsoring institution.

POLICY GUIDELINES:
The PA Program does not grant advanced placement outside of the Wake Forest School of Medicine or Graduate School.

REFERENCES: ARC-PA Standard A3.16

Revised: 7/2021

For the most recent version and to view this policy in its entirety, please access the [Advanced Placement Policy - PA Program (WFUSM)](#) on our institutional policy site.

Student Employment Policy

PURPOSE:

The purpose of this policy is to establish employment expectations for matriculating students in the Wake Forest School of Medicine Physician Assistant (PA) Program.

SCOPE:

This policy applies to all Wake Forest School of Medicine PA Program students.

POLICY GUIDELINES:

Students must not work, substitute, or function as instructional faculty, clinical staff, or administrative staff in the Wake Forest School of Medicine PA Program itself, or in any instructional sites, to include clinical rotation sites where a student is placed.

Due to the rigorous nature of the curriculum, employment during the period of matriculation is highly discouraged.

Revised 2/2021
For the most recent version and to view this policy in its entirety, please access the Student Employment Policy - PA Program (WFUSM) on our institutional policy site.

Health Screening and Background Check Policy

PURPOSE: The purpose of this policy is to require all students who enter the PA Program to have a criminal background check completed prior to matriculation.

SCOPE: This policy applies to all Wake Forest School of Medicine PA Program students.

POLICY GUIDELINES:

Health Screening
1. All students in the Wake Forest School of Medicine PA Program are required to undergo health screenings before matriculation and prior to beginning supervised clinical practice experiences (SCPEs). The health screenings may include but are not limited to: verification of required immunizations, FitTesting, TB testing, and drug screening.
2. Additional health screenings may be required to verify that the student meets technical standards. The student may be responsible for the cost of these additional screenings. If the student does not meet technical standards, this could disrupt the timeline and/or ability of the student to participate in program curriculum

Background Check
1. A signed background check authorization form is obtained from each applicant who has accepted an offer of admission to the program. The cost of this background check is covered by the deposit paid by the student on acceptance to the program.
2. The criminal background check includes but is not limited to the following:
    a. National Sex Offender Registry search
    b. a determination of areas of residence for the past seven years through a social security number check
    c. a state and local (county)-level search based on areas of residence for the past seven years for:
        • all levels of criminal offense
        • all types of adjudications
        • all legal processes not yet resolved
        • all types of offenses
3. If additional background checks or health screenings are required, the student may be responsible for the cost.
4. An offer of admission and/or continued enrollment in the PA program are conditional upon results of the background check. Should the background check uncover a criminal history, an offer of admission may be revoked, or an enrolled student may be dismissed.

Revised: 5/2022

For the most recent version and to view this policy in its entirety, please access the Health Screening and Background Check Policy - PA Program (WFUSM) on our institutional policy site.

Technical Standards for Admission, Continuation and Graduation

PURPOSE

These technical standards for PA Program admission, continuation and graduation specify the attributes and behaviors essential for successfully completing PA training within a generalist education model at Wake Forest University School of Medicine and enabling each graduate to enter clinical practice. Within this document, the terms "applicant" and "candidate" mean an applicant for admission to the PA Program and an enrolled PA student who is a candidate for promotion and graduation.

The Wake Forest University School of Medicine PA Program will consider for admission any applicant who meets its academic and nonacademic criteria and who can perform the skills listed in this document, with or without reasonable accommodation consistent with the Americans with Disabilities Act and the Rehabilitation Act. Our institution does not discriminate based on race, color, national origin, religion, sex, age, sexual orientation, gender identity, gender expression, or physical or mental disability and is committed to the full and equitable inclusion of qualified learners.

SCOPE

This policy applies to all PA Program applicants and enrolled PA program students who are candidates for promotion and graduation.

DEFINITIONS

A. Policy: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

B. WFBH: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

C. Applicant/Candidate: For purposes of this document and unless otherwise defined, an applicant for admission to the PA program as well as an enrolled PA student who is a candidate for promotion and graduation.

D. Technical Standards: Nonacademic requirements for participation in an educational program or activity. They include physical, cognitive, and behavioral abilities required for satisfactory completion of all aspects of the curriculum and for entry into the profession.

POLICY GUIDELINES

A. **Technical standards for PA Program admission, continuation and graduation**

1. Students in the PA Program must possess the intellectual, physical and emotional capabilities necessary to undertake the required curriculum in a reasonably independent manner and must be able to achieve the levels of competence required by the faculty. A candidate for the Master of Medical Science (MMS) degree must have abilities and skills in the six functional areas described below.

   i. Observation: In addition to being able to observe and obtain information from a patient in an encounter, the candidate must be able to observe and obtain information from demonstrations and experiments in the basic sciences.

   ii. Communication: Candidates must be able to communicate effectively and efficiently with classmates, faculty, patients, families and members of the health care team. They must be able to obtain a medical history in a timely fashion, interpret non-verbal aspects of communication, and establish therapeutic relationships with patients. Candidates must be able to record information accurately and clearly and to communicate effectively in English.

   iii. Motor: Students must possess the capacity to perform a physical examination and diagnostic examination and to provide or direct general care and emergency treatment to patients. Performing these examinations requires coordination of both gross and fine muscular movement.

   iv. Intellectual, conceptual, integrative and quantitative abilities: These abilities include measurement, calculation, reasoning, analysis and synthesis. Problem-solving, the critical skill demanded of PAs, requires that a candidate be able to learn, retrieve, analyze, sequence, organize, synthesize and integrate information efficiently and to reason effectively. In addition, the candidate should be able to measure and calculate accurately and to understand the spatial relationships of structures.

   v. Behavioral and social attributes: Candidates must possess the maturity and emotional health required for full use of their intellectual abilities. They must accept responsibility for learning, exercise good judgment and promptly complete all responsibilities attendant to the diagnosis and care of patients. Candidates must be able to interact effectively,

respectfully and professionally with patients, families and health care personnel. They must be able to tolerate taxing workloads and long work hours, function effectively under stress, display flexibility and adapt to changing environments. They must demonstrate regular, punctual attendance for academic and clinical activities. Candidates must be able to contribute to collaborative, constructive learning environments; accept constructive feedback from others; and take responsibility for making appropriate positive changes.

vi. Ethical and legal standards: Candidates must understand the legal and ethical aspects of the practice of medicine and function within both the law and ethical standards of the medical profession. They must meet the legal standards to be licensed to practice medicine. As such, applicants for admission must acknowledge and provide written explanation of any felony offense or disciplinary action taken against them prior to matriculation. Students convicted of any felony offense while in PA school should immediately inform the Program Director of the conviction. Failure to disclose prior or new offenses can lead to disciplinary action that may include withdrawal of an offer of admission or dismissal from the PA Program.

B. **Process for assessing compliance with the technical standards**

1. By applying to the Wake Forest University School of Medicine PA Program and by accepting an offer to matriculate, applicants are attesting that they have read and can meet these technical standards, with or without reasonable accommodations. After admission, students must continue to meet these standards until program completion and during PA school may be asked formally to re-attest that they do so. These standards are not intended to deter any student who might be able to complete the requirements of the curriculum with reasonable accommodations.

C. **Accommodation for students with disabilities**

1. After review of the technical standards, a candidate or student may determine that reasonable accommodations may be required to successfully complete the program. In this case the student is required to self-disclose by contacting the Wake Forest University Center for Learning, Access, and Student Success (CLASS) to confidentially discuss the accommodation needs. The student is responsible for contacting CLASS via the contact information posted on the Wake Forest University website and should do so as soon as possible after determining that accommodation may be needed. Accommodations are not granted retroactively and may take time to develop and implement; timeliness is essential to maximize the student's chances to perform well in the curriculum.

2. The determination of whether an accommodation is reasonable is made thoughtfully by CLASS informed by the Department of PA Studies. Reasonable accommodations may include and are not limited to technological adaptations or trained intermediaries, such as interpreters or readers. To be considered a reasonable accommodation, an intermediary may facilitate but may not perform essential skills on behalf of the student. Nor is it permitted to use an intermediary whose powers of selection and observation mediate the student's judgment. In all cases, a student with accommodations must continue to perform in a reasonably independent manner.

3. For additional information about the process for assessing an applicant's compliance with technical standards, please contact the Director of Student Services in the Department of PA Studies.

4. For additional information about applying for accommodations, please see the School of Medicine policy Student Disability Accommodations Requests Policy and Procedures.

REFERENCES
Student Disability Accommodations Requests Policy and Procedures, ARC-PA Standard A3.13

REVISION DATES
11/2020; 2/2022; 1/2023

Revised: 2/2023
For the most recent version and to view this policy in its entirety, please access the Technical Standards - PA Program (WFUSM) on our institutional policy site.

PA Class of 2024 Academic Calendar

<u>Pre-Clinical Year</u>

Semester I

WS Housing for Boone Cohort Opens		May 31, 2022
Program Orientation I		June 1-2, 2022
Unit 1 Begins		June 3, 2022
Unit 1 Final Examinations		June 27- 29, 2022
Unit 2 Orientation		June 30–July 1, 2022
Boone Campus Move-Out		July 1, 2022
July 4th Holiday		July 4, 2022
Boone Campus Orientation		July 5, 2022
Unit 2 Begins		July 6, 2022
Unit 2 Final Examinations		August 29-September 2, 2022
Labor Day Holiday No Classes		September 5, 2022
September Break-No Classes		September 6-9, 2022

Semester II

Unit 3 Begins		September 12, 2022
Mid-Unit Examinations		October 24-25, 2022
Fall Break		October 26-28, 2022
Thanksgiving Holiday-No Classes		November 23-25, 2022
Unit 3 Final Exams		December 12-16, 2022
Winter Break- No classes		December 19, 2022- December 30, 2022

Semester III

Unit 4 Begins		January 3, 2023
Martin Luther King Holiday-No Classes		January 16, 2023
Unit 4 Final Examinations		March 6-10, 2023
March Break-No Classes		March 13-17, 2023
Unit 5 Begins		March 20, 2023
Unit 5 Evaluation Week		May 8-12, 2023
Preclinical Year Ends		May 12, 2023

<u>Clinical Year*</u>

Semester IV

Clinical Year Prep Separate Campuses		May 15-18, 2023
No Classes-Hold for AAPA Travel		May 19, 2023
AAPA Annual Conference		May 20-24, 2023
Break Week		May 22-26, 2023
WS Housing for Boone Cohort Opens		May 29, 2023
Memorial Day Holiday		May 29, 2023
Clinical Year Prep Ends		June 23, 2023
White Coat Ceremony		June 23, 2023
Clinical Year R1 Starts		June 26, 2023
Graduation		May 18-20, 2024

*Specific dates for rotations and callbacks within the clinical year are to be determined.

Class of 2025 Academic Calendar

Pre-Clinical Year
Semester I		
	WS Housing for Boone Cohort Opens	May 29, 2023
	Program Orientation	May 31- June 1, 2023
	Unit 1 Begins	June 2, 2023
	Unit 1 Final Examinations	June 26- 28, 2023
	Unit 2 Orientation	June 29- June 30, 2023
	Boone Campus Move-Out	June 30-July 1, 2023
	Unit 1 Break- No Classes	July 3- July 4, 2023
	Unit 2 Begins	July 5, 2023
	Unit 2 Final Examinations	August 28-September 1, 2023
	Unit 2 Break-No Classes	September 4-8, 2023

Semester II		
	Unit 3 Begins	September 11, 2023
	Mid-Unit Examinations	Oct. 23-24, 2023
	Fall Break	Oct. 25-27, 2023
	Thanksgiving Holiday-No Classes	November 22-24, 2023
	Unit 3 Final Exams	December 11-15, 2023
	Winter Break- No Classes	December 18, 2023-January 1, 2024

Semester III		
	Unit 4 Begins	January 2, 2024
	Martin Luther King Holiday-No Classes	January 15, 2024
	Unit 4 Final Examinations	March 4-8, 2024
	March Break-No Classes	March 11-15, 2024
	Unit 5 Begins	March 18, 2024
	Unit 5 Final Examinations	May 6-10, 2024

Clinical Year*
Semester IV		
	Clinical Year Prep Separate Campuses	May 13-16, 2024
	No Classes-Hold for AAPA Travel	May 17, 2024
	AAPA Annual Conference	May 18-22, 2024
	Break Week	May 20-24, 2024
	WS Housing for Boone Cohort Opens	May 27, 2024
	Memorial Day Holiday	May 27, 2024
	Clinical Year Prep Ends	June 21, 2024
	White Coat Ceremony	June 21, 2024
	Clinical Year R1 Starts	June 24, 2024
	Graduation	May 17-19, 2025

*Specific dates for rotations and callbacks within the clinical year are to be determined.

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