



2024 - 2025

Doctor of Medicine
STUDENT HANDBOOK

IMPORTANT NOTE FOR ALL STUDENTS

Circumstances may arise during a term that cause significant disruptions to School of Medicine and/or Graduate School of Arts and Sciences – Biomedical Sciences 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.

NOTICE:

The information in this student handbook applies to the academic year 2024-2025.

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 student handbook contains only a subset of policies for students. For the most recent version of policies, students should access <u>PolicyTech</u>, the institutional policy site. Students who are uncertain about how to access program specific information should contact their Vice Dean and/or program director.

Wake Forest University 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.

*Each student is provided with an email account. The Wake Forest School of Medicine email account are used for official school communication. All students are expected to check and respond to emails in a timely manner.

**Each student is provided with an identification badge. Badges must be worn at all times while on all campuses. 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
 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 Statistic 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-andcommunity-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.

Table of Contents

Introduction to the Doctor of Medicine Degree	5
Our Campuses	7
Accessing Policies	8
MD Program Policies	9
Wake Forest University School of Medicine Policies	
Hospital Based Policies	10
Faculty-Staff-Student Communication Guidelines	11
Admissions	12
Tuition Fees and Expenses	13
VA Compliance Statement	17
Technical Standards	
Code of Honor and Professional Conduct	18
Educational Program Objectives	28
The Grading System	31
Student Attendance	32
Adverse Event Guidelines & Procedures	33
MD Academic Calendar	34
FOUNDATIONS 1 - Class of 2028	34
FOUNDATIONS 2 – Class of 2027	35
Y-3 Immersion Phase – Class of 2026	36
Y-4 Individualization Phase – Class of 2025	
MD Program Courses	39
Year 1 Curriculum	39
Year 2 Curriculum	42
Year 3 Curriculum	45
Year 4 Curriculum	48
MD Student Responsibilities	51
Student Support Services and Resources	53
Student Success Resources	53
Student Information and Financial Resources	58
Student Health and Wellness	59
Off-Campus Resources	62
General Resources	63

Introduction to the Doctor of Medicine Degree "MD Program"

The Wake Forest University School of Medicine MD Program provides a unique medical education developed by faculty that values 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. For more information visit:https://school.wakehealth.edu/education-and-training/md-program

Our Mission

Educating future physicians empowered to transform health for all.

Our Vision

To be national leaders in medical education & innovation, graduating purpose and equity-driven physicians committed to improving the health of individuals & communities through lifelong learning.

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 and staff 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

Who Are We?

Wake Forest University School of Medicine, in both Winston Salem, NC and Charlotte, NC, was founded by Wake Forest College in 1902, is a top-ranked medical school fully integrated into the Advocate Health system. Advocate Health is the fifth largest hospital system in the country, operating over 67 hospitals, 7 freestanding emergency departments, over 30 urgent care centers, and more than 2,000 care locations across the US in six states: North Carolina, South Carolina, Georgia, Alabama, Wisconsin and Illinois.

As a student, you will have access to the finest learning environments and the full breadth of clinical facilities in our system, drawing from a wide range of patients and case types from across a multi-state region.

The partnership between Advocate Health system and Wake Forest University School of Medicine has been a transformative collaboration with a shared mission to improve health, elevate hope, and advance healing for all.

We are truly one medical school with two campuses, offering a comprehensive medical education experience. Part of the vision of the new Advocate Health includes building the "Silicon Valley" for health care innovation, spanning from Winston-Salem to Charlotte, North Carolina, and beyond.

Our Campuses

Wake Forest University School of Medicine - Winston-Salem

Located in the downtown of Winston Salem, NC, the Wake Forest University School of Medicine - Winston Salem offers a four-year Doctor of Medicine program. It is situated in the "Innovation Quarter," an innovation hub that now hosts more than 90 companies, including many in healthcare, research, and technology organizations. Several major School of Medicine research and educational facilities are located within the Innovation Quarter, including the Bowman Gray Center for Medical Education, Wake Forest Biotech Place, and the Richard H. Dean Biomedical Research Building, which houses the Wake Forest Institute for Regenerative Medicine.

Atrium Health Wake Forest Baptist (AHWFB) hospital, also located close to downtown Winston-Salem, is Wake Forest University School of Medicine's primary academic medical center partner in Winston Salem, North Carolina. AHWFB is an 885-bed tertiary level I trauma care center. This campus includes an NCI-designated cancer center, a nationally recognized center for aging and Alzheimer's, a children's hospital, centers for stroke and burn treatment, as well as many other vital and specialized medical services.

In addition to the main tertiary-care hospital in Winston-Salem, AHWFB operates five community hospitals in the surrounding region.

Wake Forest University School of Medicine - Charlotte

Currently based on the Atrium Health Carolinas Medical Center (AHCMC) campus in the Medical Education Building in Charlotte NC, the Wake Forest University School of Medicine - Charlotte offers a longitudinal integrated curriculum for third- and fourth-year medical students enrolled in the Doctor of Medicine program. The curriculum in Charlotte is comparable to that in Winston-Salem, allowing students to complete their third and/or fourth years, including transition courses, testing, LEAP weeks, and certifications. Advising services are available on both campuses and virtually.

AHCMC, is Wake Forest University School of Medicine's primary academic medical center partner in Charlotte, NC. The AHCMC is an 874-bed non-profit, tertiary level I trauma care center. This campus includes James G. Cannon Research Center which participates in and contributes to system-wide and regional research, a nationally recognized Levine's children's hospital, and Sanger Heart & Vascular Institute. In addition to the main tertiary-care hospital in Charlotte, Atrium Health operates 14 community hospitals which serves southern North Carolina, northern South Carolina, and the Metrolina region.

In the 2024-2025 academic year, matriculating students can choose to spend their third year at Atrium Health Carolinas Medical Center in Charlotte during the spring of their first year, with 40 slots available. Accepted students commit to Year 3 in Charlotte, while Year 4 experiences are chosen on a rotation-by-rotation basis.

The Pearl, in the Charlotte Innovation core, broke ground in Q1 2023. This is a multi-phased, mixed-use development featuring office, lab, retail, residential (including affordable housing), community gathering, and academic spaces. The first phase will include Charlotte's first four-year medical school, Wake Forest University School of Medicine Charlotte in the Howard R. Levine Center for Education building.

The Wake Forest University School of Medicine Charlotte campus will expand to seat its first four-year MD program class in July of 2025.

Accessing Policies

There are four ways to navigate to Policy Tech:

1. Via the Intranet page (Winston Salem Campus)

- Select "Policies' from the bottom banner of any Wake Market Intranet page.
- Click 'View All Policies' and PolicyTech will open.

2. Via the Intranet Home Page (Charlotte campus)

- Access People Connect or Intranet Home Page via Chrome or Edge
- Click 'Policies' and select 'All Policies' tab.
- Click 'Access Policy Tech' and PolicyTech will open.

3. Via Citrix Portal (All campuses)

- Locate Citrix Workspace on your desktop and scroll down to the 'Policies' button.
- Log in with your credentials.
- Click the star to easily locate it in your Citrix Favorites

4. Via the PolicyTech website (all campuses)

- Visit: https://atrium.policytech.com/
- Log in with your credentials when prompted.

Students who would like additional training or assistance accessing policies should contact edcompliance@wakehealth.edu.

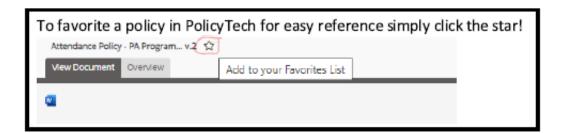
Favoriting important policies is a great way to make sure that all applicable policies are easy to find in the future. Students are strongly encouraged to add applicable policies to their PolicyTech 'Favorites' for quick access.

There are two ways to favorite policies:

When viewing the policy title on the 'Browser' page, click the 3 dots to the right of the policy name and select "Add to Favorites." OR

When viewing the policy, click the star at the top left of the page.

Students may reach out to edcompliance@wakehealth.edu to obtain a quick reference list of applicable policies for their program.



Wake Forest School of Medicine maintains policies that apply to all SOM students, including policies on health requirements and immunizations, disability accommodations, leave of absence, refunds of tuition, financial aid, education records, appeal of dismissal, substance abuse and sexual misconduct.

Students are strongly urged to familiarize themselves with the database housing these policies at https://atrium.policytech.com/.

MD Program Policies

- Technical Standards for Medical School Admission, Continuation, and Graduation MD Program (WFUSM)
- > MD Conflict of Interest Disclosure
- Dress Code Policy
- > Transfer and Admissions of Medical Students with Advanced Standing Policy
- Selection of Medical Students Policy MD Program (WFUSM)
- 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
- 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

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.

Wake Forest University School of Medicine Policies

(that applies to the MD Program)

- Leave of Absence Policy (WFUSM)
- Military Leave of Absence Policy (WFUSM)
- Student Appeal of Dismissal Policy (WFUSM)
- Anti-Harassment Policy (WFUSM)
- Conflict of Interest Related to Assessment Policy (WFUSM)
- Effects of Infectious Disease or Disability on Student Learning Activities (WFUSM)
- Exposure to Infectious and Environmental Hazards Policy (WFUSM)
- Distance Education Policy (WFUSM)
- Medical Health Requirements and Immunization Policy (WFUSM)
- Mistreatment Reporting Policy (WFUSM)
- Nondiscrimination Statement (WFUSM)
- Posthumous Degrees and Degrees in Memoriam Policy (WFUSM)
- Refund of Tuitions and Feed Policy (WFUSM)
- Return of Federal Financial Aid Funds Policy (WFUSM)
- Student Disability Accommodations Requests Policy and Procedures (WFUSM)
- Student Disability Grievance Procedures (WFUSM)
- Student Education Records Policy (WFUSM)
- Studenty Health Insurance Requirements and Responsibilities Policy (WFUSM)
- Student Payment Policy (WFUSM)
- Student Substance Abuse Policy (WFUSM)
- ➤ Title IX and Non-Title IX Sexual Misconduct Policy and Grievance Procedures (WFUSM)

Hospital Based Policies

- Drug Diversion Prevention, Detection and Response Policy
- Nepotism and Consensual Relationship
- Medical Student Documentation in the Medical Record
- Authorship on Scientific and Scholarly Publication Policy
- Research Integrity Policy
- Data Ownership
- Information Security Policy (WFUSM)
- HIPAA Privacy and Security Sanctions Policy
- Infectious Disease Prevention Policy

Faculty-Staff-Student Communication Guidelines

The guidelines provide faculty, staff, and students with expectations for communication that are reasonable and consistent for all parties.

- All students have a school (@wakehealth.edu) email account and should use it for all school-related correspondence. Students should check their email account on a daily basis to ensure they are up to date on a school-related correspondence.
- Faculty and staff will respond to an email from a student within three (3) business days. This time frame will allow faculty and staff who may be out of the office to act on the email after returning to the office.
- Students should note that although they will receive a response within three business days, the issue may require a longer period to be completely resolved.
- Students who do not receive a response to their initial email within the three-day period should proceed
 as follows:
 - Preclerkship year students: Contact the Associate Dean of Pre-Clerkship (faculty) or Director of Curricular Affairs (staff)
 - Clerkship year students: Contact the Associate Dean of Clinical Education (faculty) or Director of Curricular Affairs (staff) campus dependent.
 - Student Affairs services: Contact the Associate/Assistant Deans (faculty) based upon campus location or the Associate Director of Student Affairs (staff) at stuserv@wakehealth.edu.

The respective Dean(s) or Director(s) of Curricular Affairs may follow-up with the recipient of the student's initial email or may resolve the issue directly with the student and notify the initial recipient.

**Please use the linked <u>Canvas site</u> for MD program faculty and staff site for the most up-to-date contact information.

- Faculty and staff who will be out of the office and/or out of contact will post an "out of office" message that will reply automatically to emails. This message should tell students whom to contact if their need must be addressed before the faculty/staff member's return to the office.
- Students who cannot wait three (3) business days for a response to their email should contact the recipient in person or by telephone.
- Students may also reach out to the Student Affairs at stuserv@wakehealth.edu or Curricular Affairs at medadmit@wakehealth.edu for assistance.

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 PolicyTech.

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.

Doctor of Medicine Program Tuition Fees and Expenses 2024-2025

Program Tuition and Fees

	First Year (10 Months)	Second Year (10 Months)	Third Year (12 Months)	Third Year (Charlotte)	Fourth Year (11 Months)	Fourth Year (Charlotte)
Tuition	\$64,947	\$64,947	\$64,947	\$64,947	\$63,672	\$63,672
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	\$5,310	\$5,310	\$5,310	\$ 5,310	\$5,310	\$5,310
Loan Fees	\$3,110	\$3,036	\$3,170	\$ 3,328	\$3,050	\$3,192
Lodging	\$18,000	\$18,000	\$21,600	\$21,600	\$19,800	\$19,800
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	\$108,709	\$106,893	\$113,533	\$117,391	\$108,866	\$112,396

Tuition Payment Schedule

Fall	Tuition Amount	Due by Date
First Year	\$32,473.50	7/26/2024
Second Year	\$32,473.50	7/26/2024
Third Year	\$32,473.50	5/31/2024
Fourth Year	\$31,836.00	5/24/2024
Spring	Tuition Amount	Due by Date
First Year	\$32,473.50	12/20/2024
Second Year	\$32,473.50	12/27/2024
Third Year	\$32,473.50	11/22/2024
Fourth Year	\$31,836.00	11/08/2024

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.

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.

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 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 decisions to balance student loan debt with financial wellness.

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.

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 15th.

Endowed Scholarships

A list of available scholarships may be found on the Wake Forest University School of Medicine's website: https://school.wakehealth.edu/about-the-school/alumni-relations/endowed-scholarships

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/

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.

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.

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 Financial Aid Office accepts paper checks or money orders for payment on your student account. If payment is not received by the due date, WFUSM 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 administration 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.

Please review the following important financial Aid policies in our PolicyTech system:

- Return of Federal Financial Aid Funds Policy (WFUSM)
- Refund of Tuitions and Fees Policy (WFUSM)

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: <u>finaid@wakehealth.edu</u> 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.

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 Contact for School of Medicine Programs: Ms. Michelle Van Meter – mvanmete@wakehealth.edu

Doctor of Medicine Degree Technical Standards

The Doctor of Medicine 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.

At matriculation, students will acknowledge that they have received the Technical Standards and can meet these standards, with or without reasonable accommodation. (see Policy: <u>Technical Standards</u> for Medical School Admission, Continuation and Graduation – MD Program (WFUSM)

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

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.
- 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.

Terms and Conditions of Office

- a. Medical students who are candidates for a joint degree are eligible to serve as their matriculating class's 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

- 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

- 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;
- 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

- 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 bylaw.
 - 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.
 - Right to appeal decisions to SPARC on the grounds of procedural unfairness or perceived bias

F. Rights of the witnesses

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.
- 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 guizzes 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"

MD Program Educational Program Objectives

1. 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.

2. 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.

3. 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.

4. 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.

5. 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 lifelong 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 lifelong learning skills by continually identifying, analyzing, and implementing new

knowledge, guidelines, standards, technologies, products or services that have been demonstrated to improve outcomes.

6. 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 for patients and populations.

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.

7. 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.

8. 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 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 resources.

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 for 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.
- 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 makeup 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 Tiered Scale

Students should refer to their course/clerkship syllabus for details regarding the specific tiered scale including criteria for each tier.

- 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 PolicyTech.

Class Standing

Class quartile is calculated based on numeric grades in the pre-clerkship curriculum and performance on clerkships and is 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 WFUSM and/or MD Program operations and results in the partial or full closing of a 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.

- Students may also be notified of Adverse Events for the Winston Salem Hospital system 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. Safety issues at BGCME will be alerted through the **WakeSafe app**. Students should all download this app to get instantaneous information.
- 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

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 Curricular Affairs at the specific campus and/or Senior Associate Dean of Curriculum.

MD Academic Calendar

Wake Forest School of Medicine Academic Year 2024-2025

FOUNDATIONS 1 - Class of 2028

Y1 Orientation	Thursday, July 11 through Friday, July 12, 2024
F1 LAUNCH Course	Monday, July 15 through Wednesday, July 24, 2024
White Coat Ceremony	Saturday July 20, 2024
Clinical Anatomy and Physiology Course	Thursday, July 25 through Friday, October 25, 2024
Holiday (Labor Day)	Monday, September 2, 2024
Medical Student Research Day	Wednesday, October 16, 2024
Metabolism & Defense (MAD) Course	Monday, October 28 through Wednesday January 22, 2025
Thanksgiving Recess Begins	Wednesday, November 27, 2024
Classes Resume	Monday, December 2, 2024
Holiday Recess Starts	Monday, December 23, 2024
Spring Semester Begins/Classes Resume	Monday, January 6, 2025
Holiday (Martin Luther King, Jr)	Monday, January 20, 2025
Neuroscience Block	Monday, January 27 through Friday, March 28, 2025
Spring Recess	Monday, March 31 through Friday, April 4, 2025
Digestive System and Nutrition (GI) Block	Monday, April 7 through Friday, May 2, 2025
Neuroscience CAS Exam	Tuesday May 6, 2025
Digestive System and Nutrition (GI) CAS Exam	Wednesday May 7, 2025
F1 Ends	Tuesday, May 7, 2025
Summer Session (9 ½ weeks)	Wednesday, May 7 through Friday, July 11, 2025

Foundations 2 begins on Monday, July 14, 2025

MD Academic Calendar

Wake Forest School of Medicine Academic Year 2024 - 2025

FOUNDATIONS 2 - Class of 2027

Y2 Orientation	Monday, July 15, 2024
Heme-Lymph Block	Monday, July 15 – Tuesday, August 6, 2024
Pulmonary Block	Thursday, August 8 through Friday, August 30, 2024
Holiday (Labor Day)	Monday, September 02, 2024
Cardiovascular Block	Tuesday, September 3 through Tuesday, October 01, 2024
Syspath 2 (Heme-Lymph, Pulmonary, and Cardiovascular) CAS Exam	Thursday, October 03, 2024
Medical Student Research Day	Wednesday, October 16, 2024
Renal Block	Monday, October 07 through Wednesday, October 30, 2024
Rheumatology Block	Thursday, October 31 through Monday, November 11, 2024
Endocrinology/Reproduction Block	Tuesday, Nov 12 – Tuesday, December 17, 2024
Thanksgiving Recess Begins	Wednesday, November 27, 2024
Classes Resume	Monday, December 02, 2024
Sysath 3 (Renal, Rheumatology, Endocrine/Reproductive) Y2 CAS Exam 2	Thursday, December 19, 2024
Comprehensive Basic Science Exam (CBSE)	Friday, December 20, 2024
Holiday Recess Begins	Monday, December 23, 2024
Classes Resume	Monday, January 05, 2025
USMLE Step 1 Preparation	Monday, January 06 – Tuesday, February 4, 2025
Holiday (Martin Luther King)	Monday, January 20, 2025
Y3 Prep – Transition to Patient Care (T2PC)	Monday, February 10 through Sunday, March 02, 2025
Y2 Ends	Sunday, March 02, 2025

USMLE Step 1 must be completed by end of: Wednesday, February 5,2025

(Recommended Step 1 Completion Date is: Wednesday, January 29, 2025)

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.

MD Academic Calendar

Wake Forest University School of Medicine Academic Year 2024-2025

Y-3 Immersion Phase - Class of 2026

Y3 Begins	Monday, March 4, 2024
Holiday (Spring Break)	Friday, March 29 – Sunday, March 31, 2024
Holiday (Memorial Day)	Monday, May 27, 2024
Holiday (July 4 th)	Thursday, July 4, 2024
Clerkship Activities End	Sunday, August 18, 2024
Y3 Vacation (1 week)	Monday, August 26 – September 1, 2024
Holiday (Labor Day)	Monday, September 2, 2024
Clerkship Activities Resume	Tuesday, September 3, 2024
Thanksgiving Recess	Wednesday, November 27 @ noon or after SHELF - Sunday, December 1, 2024
Clerkship Activities Resume	Monday, December 2, 2024
Holiday (Winter Break)	Monday, December 23 @ noon or after SHELF - Sunday, January 5, 2025
Clerkship Activities Resume	Monday, January 6, 2025
Holiday (Martin Luther King, Jr.)	Monday, January 20, 2025
Clerkship Activities End	Sunday, March 2, 2025
Y3/Y4 Transition Weeks Begin	Monday, March 3, 2025

Clerkship activities begin at 7 am and end at 5 pm unless otherwise designated by the clerkship.

MD Academic Calendar

Wake Forest University School of Medicine Academic Year 2024-2025

Y-4 Individualization Phase - Class of 2025

Transition Week 1: ACLS/CPX/OSCE/Orientation	Mon, March 4 – Fri, March 8, 2024	
Transition Week 2: Vacation **barring any make-ups	Mon., March 11 – Sun., March 15, 2024	
Y4-1 Begins	Monday, March 18, 2024	
Holiday (Spring Holiday 1)	Friday, March 29 – Sunday, March 31, 2024	
Y4-1 Ends	Sunday, April 14, 2024	
Y4-2 Begins	Monday, April 15, 2024	
Y4-2 Ends	Sunday, May 12, 2024	
Y4-3 Begins	Monday, May 13, 2024	
Holiday (Memorial Day)	Monday, May 27, 2024	
Y4-3 Ends	Sunday, June 9, 2024	
Y4-4 Begins	Monday, June 10, 2024	
Holiday (Independence Day)	Thursday, July 4, 2024	
Y4-4 Ends	Sunday, July 7, 2024	
Y4-5 Begins	Monday, July 8, 2024	
Y4-5 Ends	Sunday, August 4, 2024	
Y4-6 Begins	Monday, August 5, 2024	
Step 2 CK Deadline	Saturday, August 31, 2024	
Y4-6 Ends	Sunday, September 1, 2024	
Holiday (Labor Day)	Monday, September 2, 2024	
Y4-7 Begins	Tuesday, September 3, 2024	
Y4-7 Ends	Sunday, September 29, 2024	
Y4-8 Begins	Monday, September 30, 2024	
Y4-8 Ends	Sunday, October 27, 2024	
Y4-9 Begins	Monday, October 28, 2024	
Y4-9 Ends	Sunday, November 24, 2024	
Y4-10 Begins	Monday, November 26, 2024	
Thanksgiving Recess	Wednesday, November 27 @ noon – Sun., December 1, 2024	
Y4-10 Ends	Friday, December 20, 2024	
Winter Holiday	Sat., December 21, 2024 – Sun., January 5, 2025	
Y4-11 Begins	Monday, January 6, 2025	
Holiday (Martin Luther King, Jr)	Monday, January 20, 2025	
Y4-11 Ends	Sunday, February 2, 2025	

Y4-12 Begins	Monday, February 3, 2025
Y4-12 Ends	Sunday, March 2, 2025
Transition to Residency Session 1 (Attendance Required)	Mon., March 3 – Fri., March 14, 2025
Y4-13 Begins	Monday, March 17, 2025
Holiday (Match Day)	Friday, March 21, 2025
Y4-13 Ends	Sunday, April 13, 2025
Transition to Residency (Attendance Required)	Mon., April 14 – Fri., April 25, 2025
Holiday (Spring Break)	Fri., April 18 – Sun., April 20, 2025
Graduation Preparation (No duties assigned/3 weeks)	Sat., April 26 – Fri., May 16, 2025
Graduation Weekend	Sat., May 17 – Sun., May 18, 2025
Graduation	Monday, May 19, 2025

MD Program Courses

Year 1 Curriculum

(Foundations Phase 1)

The required courses for the first year of the Foundations Phase are:

AUNCH 2.0 credits	
Clinical Anatomy and Physiology	10.0 credits
letabolism and Defense 8.0 credits	
Systems Pathophysiology 1	10.0 credits
- Neuroscience	
- Gastrointestinal System	
Population Health / Epidemiology	2.0 credits
Clinical Skills 1	2.0 credits
Medicine and Patients in Society 1	1.0 credits
Integrated Ultrasound 1	1.0 credits
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 of 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 introduces 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" and incorporates student-directed learning to generate and resolve individualized learning objectives. 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.

Year 2 Curriculum

The required courses for the second half of the Foundations Curriculum include:

Systems Pathophysiology 2	12.0 credits
- Hematopoietic/Lymphatic	
- Cardiovascular	
- Pulmonary	
Systems Pathophysiology 3	10.0 credits
- Musculoskeletal	
- Renal	
- Endocrinology and Reproduction	
Clinical Skills 2 2.0 credit	
Medicine and Patients in Society 2	0.5 credits
Integrated Ultrasound 2	0.5 credits
Transition to Patient Care	3.0 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 f unction. 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 devel op 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 Canvas 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 f unction 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 WFUSM 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 preclerkship 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 Year 3 Curriculum

The Immersion Phase of the curriculum consists of two 24-week blocks of clinical clerkship rotations in the major specialties, as follows:

	No. of 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.

Individualization Phase Year 4 Curriculum

Year 4 consists of 4-week blocks including three required selective (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:

- <u>Required activities:</u> 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.
- 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 likeinternships (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. <u>Electives:</u> 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. <u>Intern as Teacher</u>: 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. <u>Individualized Learning Plan:</u> 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 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 can 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 MD Program's department of Student Affairs through stuserv@wakehealth.edu 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 student 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. Students who transfer to the Charlotte campuses or are rotating in Charlotte will be give an Atrium Health badge. All students are required to wear their badge worn above the waist at all times while in the Medical Center's 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.

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 students cost by <a hre

E-mail: In addition to the student's academic email, each student will be provided with a Medical Center e-mail address based upon their clinical location. Students are responsible for checking their e-mail account on a daily basis for official medical center correspondence.

Mail: 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 in the Winston Salem campus 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. At this time, there are no physical mailboxes on the Charlotte campus.

Pager/Messaging Services: Pager service is essential for all Year 3 and 4 students.

Winston Salem

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).

<u>Charlotte</u>
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.

Student Support Services and Resources

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

The MD Program students are able to take advantage of various programs offered through the school of medicine. Below is a summary of the various departments which all students can leverage in your journey:

Student Success Resources

The Office of Undergraduate Medical Education (UME) is the administrative support for all students under the MD program. This function manages the following departments: admissions, student affairs, and curricular affairs for the MD Program. This office 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.

Office of Educational Excellence

The Office of Educational Excellence (OEE) 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.

Examples of services that roll up to OEE includes Teammate Health, Counseling and Well-Being Services, and the CPPD coaches.

In addition, OEE partners with the Office of Justice and Belonging to focus on supporting the educational mission of the medical school and its goal of excellence through inclusive and diverse measures.

Center for Personal and Professional Development (CPPD)

The Center for Personal and Professional Development (CPPD) support Wake Forest University School of Medicine students' personal and professional development while also equipping them with skills that promote personal reflection, lifelong learning, and collaboration.

! Learning Communities (Houses)

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 as well as a faculty mentor. The Clinical Skills and Career Coaches are generally assigned by house as well.

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 Bowman Gray Center for Medical Education to facilitate the goals of these Learning Communities.

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/.

Committee for Review of Educational Support and Success (CRESS)

Our early intervention committee is comprised of student coaches and mentors. The goal of the committee is to monitor overarching student academic progress and to support students for success supporting academic success, professional performance, and early outreach mechanisms to enhance student performance through the various program areas.

* Clinical Skills and Career Coaches

Upon matriculation, students are assigned to Clinical Skills groups. Each group has two faculty members assigned to teach physical exams and 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. These faculty serve to guide early thoughts about career choices, connection to mentors, and facilitate discussions about factors involved in career choice. They will also introduce students to the resources within AAMC's Careers in Medicine, which is a free resource for all students.

* Faculty Mentors

Each student is assigned an additional faculty mentor. This faculty member will have access to student performance and meet with students individually and as a group to help guide their overall progress towards being a physician. Faculty mentors help students strike an appropriate balance of study and extracurricular activities to maximize their time and success as a medical student. The primary goal of this relationship is to guide students through critical junctures as they progress through the curriculum, developing their curriculum vitae as part of their residency application.

Learning Specialist

We have a dedicated Learning Specialist to assist in maximizing study strategy and academic performance. She is available for 1:1 help sessions in addition to providing group supports and sessions related to board preparation, study skills, etc. Additionally, our learning specialist heads the Peer Tutoring group, providing training as well as ongoing support for our Peer Tutors.

Peer Tutoring Program

Wake Forest University School of Medicine strongly supports a collaborative and inclusive learning environment. Students are encouraged to meet with an upper-class peer tutor to help navigate challenges. Application forms requesting tutoring assistance or services may be found on our Advising page. Additionally, our peer tutors will host group review sessions before major exams as well as content for Step 1 preparation. https://school.wakehealth.edu/education-and-training/md-program/student-affairs

Career Advising Workshops

There will be regular workshops targeting key aspects of the residency application process, primarily for 3rd and 4th year students. Individual appointments and advising with MD mentors 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

Learning Environment and Compliance

The Wake Forest University School of Medicine is committed to creating and maintain a learning environment that supports and encourages respect for every individual and promotes the development of professionalism among medical students. All faculty, staff, medical students, residents and fellows on our campuses and across all instructional sites share responsibility for creating a positive and supportive learning environment.

Our goal is to create a culture that embraces patient care, learning, scholarship and research, commitment to the health care needs of society, and the ability of all members of Wake Forest University School of Medicine community to interact and carry out their responsibilities in a supportive and respectful fashion. Learning Environment and Mistreatment concerns may be reported to the Learning Environment Liaison. The Learning Environment Liaison serves as a central resource for reporting mistreatment or unprofessional behavior in the learning environment for all WFUSM learners, as well as for visiting students, non- WFUSM clinical students, and non-affiliated student interns.

The Liaison Committee on Medical Education (LCME) states, "Mistreatment, either intentional or unintentional, occurs when behavior shows disrespect for the dignity of others and unreasonably interferes with the learning process."

Examples include: discrimination and harassment; public humiliation; physical harm or threats of harm; and threats of lower evaluations or lower grades.

Additional information about the services provided and contact information can be found by visiting our website at: https://school.wakehealth.edu/about-the-school/professionalism-and-student-mistreatment

The following relevant policies can be found in our PolicyTech System:

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

How to Report Mistreatment & Learning Environment Concerns

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://atrium.service-now.com/aclab
- Via email at: edcompliance@wakehealth.edu
- In person at: Bowman Gray Center for Medical Education, 2nd floor.
- Via phone at Sarah Riney, 336-713-3352
- Anonymous Reporting: Concerns may also be reported anonymously through the Compliance Hotline at 844-587-0825 or at atriumhealth.ethicspoint.com

Additional Ways to Report:

Teammate Relations (within Human Resources)

- Provides guidance and support for workplace issues.
- Advises on HR policies.
- Receives reports and conducts fair, timely investigations and resolutions processes.
- Concerns may be reported to the HR Service Center at 336-716-6464 or by visiting the online portal: <u>atrium.service-now.com/esc</u>

Mistreatment & Learning Environment Reporting Process Report is received via: Direct Report Course Evaluation Survey Learning Environment Liaison (LEL) Team Student Outreach Direct outreach via email w/ invitation to meet and/or connect the Student with resources. Reminder of the Retaliation Policy Reminder of the Mandated Reporting obligation to Title IX office Requests more information LEL Team evaluates report to determine if it is Mistreatment or Learning Environment Concern Mistreatment Reports **Learning Environment Reports** Mistreatment Reporting Policy Learning Environment Enrichment Referral for formal review/investigation: Group (LEEG) Title IX LEEG Unnamed report Workplace Violence or other Named report policies Aggregated data shared quarterly w/ Discrimination/Harassment LEL Team follows up with Student and the report is Wake Forest University School of Medicine 12/2023

Student Information and Financial Resources

Office of Student Records

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. This office also manages, tracks, and negotiates clinical training affiliation agreements for the internal and external visiting student process.

Office of Financial Aid

The office of financial aid at Wake Forest University School of Medicine helps students obtain the resources needed to finance their medical education program. They also serve as an educational resource for all financial planning and debt management. We know that deciding how to manage funding for education requires careful consideration of your options and they are here to help.

Student Accounts (Bursar)

The Student Accounts office at Wake Forest University School of Medicine is the contact for tuition and fees billing and student health insurance.

Student Health and Wellness

Student Counseling & Well-Being Services

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

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.

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. Counseling appointments are offered virtually to students in Winston Salem and Charlotte, in-person regularly in Winston Salem, and at least monthly in Charlotte.

Scheduling Counseling Services

To schedule a counseling or consultation appointment for students in Winston Salem or Charlotte, 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.

Spiritual Supports

Wake Forest University School of Medicine, offers several options for spiritual supports for students:

Winston Salem

Wake Forest University Chaplain's office, and chaplaincy department University of WFBH Faith Health, co- sponsor the Manager of Spiritual Care Services for the Innovation Quarter, Chaplain Michelle Nicolle, PhD, BCC.

Michelle's office is located on the 1st floor of the Bowman Gray Center for Medical Education, Office 1104. Michelle can be reached by phone at (336) 713-9766 or by email at mnicolle@wakehealth.edu.

Charlotte

Wake Forest University School of Medicine students can reach out to Greg Hathaway or Terri Bolotin for Spiritual Care. Gregg Hathaway is also a member of the WFUSM Care Team.

Contact Information

- Greg Hathaway, Director, Spiritual Care and Education can be reached at 704-355-1764 or Gregory.Hathaway@atriumhealth.org
- Terri Bolotin Director, Spiritual Care and Education can be reached at 704-304-5909 or Terri.Bolotin@atriumhealth.com

Additionally, students have access to Atrium Health's Code Lavender Services by calling 1-980-212-HOPE (4673). ***Just as we call a "Code Blue" when someone's heart has stopped and the individual needs CPR, we call a Health "Code Lavender" when a teammate's heart and mind have been negatively impacted by a personal or professional crisis and the teammate needs a compassionate response.

Student Medical 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, 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

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

Livewell Care provides quick and easy access to urgent care and primary care services. From sick visits, injury care and annual wellness exams to vaccinations, labs and common prescription medicines available on-site. Dr. Lindsay Peral is a LiveWELL physician who oversees the medication management of mental health and ADD/ADHD for WFUSM learners primarily through the Innovation Quarter site or virtually. https://intranet.wakehealth.edu/departments/livewell-care

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; 7:30 a.m. - 4:30 p.m.

Teammate Health provides services for Atrium Health teammates, volunteers, students and nonemployee 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.

Livewell Care provides quick and easy access to urgent care and primary care services. From sick visits, injury care and annual wellness exams to vaccinations, labs and common prescription medicines available on-site. Dr. Lindsay Peral is a LiveWELL physician who oversees the medication management of mental health and ADD/ADHD for WFUSM learners primarily through the Innovation Quarter site, monthly on the Charlotte campus or virtually. https://teammates.atriumhealth.org/human-resources/livewell-care

Also, our LiveWell Care at Carolinas Medical Center offices offer weekday and weekend hours for urgent care. One of our students just had appt on Sat. Here's link to all the info: <u>LiveWELL Care</u> (atriumhealth.org)

Primary Care and Specialty Care Services:

For assistance with establishing a primary care provider, initial appointment with Dr. Peral or specialist for acute, preventative, or chronic medical care needs, please contact our nurse case manager by email Studenthealthnavigator@wakehealth.edu*. For Charlotte-based MD student, alternative services are available. Information will be supplied to those students at orientation.

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 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

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: 800-858-6843 M-F 8am to 8pm Eastern.

Off-Campus Resources

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.

South Piedmont Area Health Education Center

The South Piedmont AHEC offers housing to medical and health science students during their short-term rotations in Charlotte and the surrounding counties. Housing is provided at Eastover Ridge Apartments. South Piedmont AHEC has eleven two bed/two bath units. Four students are assigned to each apartment. South Piedmont AHEC apartments are not co-ed. We will be migrating to single occupancy bedrooms beginning January 1, 2025. More information can be found at https://www.southpiedmontahec.org/student-services/housing

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 offers in-person and virtual support during hours of operations. Online digital resources include access to over 2.1 million electronic books, 13K journals and 446 databases and various diagnostics and points 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.

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

All Wake Forest School of Medicine students have access to the Wake Forest University athletic events. There are a limited number of tickets available.

Winston Salem

Students have access to the Fitness Center 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.

The YMCA is adjacent to the tennis courts in Hanes Park. 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 medical school building at 525 Vine St.

Charlotte

Students have access the gym located in the CMC Annex building, next to the Medical Education Building. Access to the gym is restricted to medical students and residents.

Additionally, students in Charlotte are eligible to participate in the "Active and Fit" program run through Atrium Health. The Active and Fit program provides access to a variety of fitness centers throughout the region for a reduced cost. A direct link to register through Active and Fit can be found on the Charlotte Campus Resources Canvas page.

Banking Facilities:

A branch bank is located on the M level of Atrium Health Wake Forest 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.

Currently in Charlotte, there are ATMs at Atrium Health Mercy Hospital and Atrium Health Carolinas Medical Center by each of their gift shops. There are no bank branches on-site.

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

Winston Salem

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.

Charlotte

Parking is available in employee lots on the campus of CMC including the Scott Parking Deck which is directly adjacent to the Medical Education Building. Badge access is required to enter the employee parking decks.