



Student Handbook

2020-21




Icahn
School of
Medicine at
Mount
Sinai

January 2021

This Student Handbook is subject to review and change from time to time, and policies may be revised in the course of any given academic year. We therefore suggest that you check this Handbook to confirm policies and requirements in effect at any given time. This Handbook is not intended and should not be construed to constitute a contract.

For questions about the handbook please reach out to:

The Department of Medical Education
Annenberg 13-30
212-241-6691

Our mission is to produce physicians and scientists who are prepared to enter society as informed advocates and activists, able to advance clinical care and science, and capable of promoting change.

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Greetings from the Deans

The Student Handbook contributes toward our objectives. It is designed to provide you not only with a reference source detailing the relevant school policies, procedures, and programs that affect your day-to-day functions as a student but also with a guide to an understanding and clarification of its components. As such, we hope you will find it a useful distillation of the cumulative experiences of those who have dealt with the many school, state, and federal rules and regulations that affect student interests. It should be read carefully and used as a reference whenever any questions concerning policy or procedures arise.

While this Handbook serves to clarify and codify, it remains just a guide and should not limit individual potential or preferences. On the contrary, it should assist you in choosing from the wide range of educational and counseling opportunities available to you. To enhance your flexibility as you undertake your studies, the Administration and the Faculty are prepared to review and modify procedures and programs to improve overall effectiveness and, when appropriate, in response to individual student needs. Your suggestions and comments are welcomed and should be forwarded through individual members of the Faculty, the Department of Medical Education, or through one of your various student representatives who serve you in committee functions.

Again, welcome and best wishes for a happy and productive year.

Dennis Charney, MD

Dean, Icahn School of Medicine at Mount Sinai

David Muller, MD

Dean for Medical Education

Statement of Accreditation

The Icahn School of Medicine at Mount Sinai is regionally accredited by the Middle States Commission on Higher Education, 3624 Market Street, Philadelphia, PA 19104; 215-662-5606. The Middle States Commission on Higher Education is an institutional accrediting agency recognized by the U.S. Secretary of Education and the Council for Higher Education Accreditation.

The Icahn School of Medicine at Mount Sinai is accredited by the Liaison Committee on Medical Education of the Association of American Medical Colleges and the American Medical Association. Its teaching hospitals are accredited by the Joint Commission on Accreditation of Healthcare Organizations.

All educational programs of the School of Medicine and its affiliated institutions have been approved by the governmental, academic, and professional bodies having responsibility in the respective areas. These include the Board of Regents of the State of New York, the State Education Department, the Board of Higher Education of the City of New York, Council on Education for Public Health, American Board of Genetic Counseling, and medical specialty boards and professional societies.

Academic Difficulty

In order to provide support in a timely manner for students in academic difficulty, a system is in place that tracks a student's performance across all four years of medical school. Based on a student's performance, a student may remain in Satisfactory Academic Status, may be designated as Monitored Academic Status, or may be put in Serious Academic Status.

Years 1 and 2 Policy

A student who fails a course must undergo a remediation or an equivalent course, as determined by the Course Director. First year students must achieve a Pass in the remediation or equivalent course by August 1 in order to progress on to the next academic year. Second year students must achieve a Pass in the remediation or equivalent course by June 15 in order to progress to the next academic year. Remediation of courses may not occur while a student is taking another course, and typically occurs during spring break or the summer and must be planned in conjunction with the Course Director, and the Offices of Curricular Affairs and Student Affairs. Year 1 students participating in research during the summer is dependent on the timing and extent of any remediation. A failure in a course is listed as "F" on the transcript. Once the student has successfully remediated the course, it is listed as "FP." Students who fail to pass the remediation for a failed course will be in Serious Academic Status and will be required to appear before the Promotions Committee.

Years 3 and 4 Policy

Students who fail a shelf exam are required to remediate the shelf exam during a specified make-up date in July, or by special arrangement during vacation or elective time. Students may not make up a shelf exam for a clerkship while they are taking another clerkship or during FlexTime on a clerkship. All failures must be remediated before the student can do a required Year 4 course or clerkship.

A failure on a NBME shelf exam is listed as a "C" on the transcript. Once the student has successfully remediated the shelf exam on the second attempt, the clerkship grade is listed as a "P" or "HP". Students who fail a shelf exam are not eligible for a grade of Honors. Repeat failure of the shelf will result in a failing grade in the clerkship. Students who fail a clerkship are required to appear before the Promotions Committee, who will decide timing and type of remediation. A failure in a clerkship is listed as "F" on the transcript. Once the student has successfully remediated the clerkship, it is listed as "FP."

USMLE Step Exams Policy

To receive a Doctor of Medicine from ISMMS, students must pass USMLE Step 1, USMLE Step 2 CK and Step 2 CS, each within a maximum of three attempts.

Satisfactory Academic Progress

Federal Regulations require all students receiving federal financial assistance to maintain standards of Satisfactory Academic Progress (SAP). SAP is the successful completion of degree requirements according to established

increments that lead to awarding the degree within published time limits. The SAP policy applies to all MD students enrolled at the Icahn School of Medicine at Mount Sinai.

1. *Frequency of SAP* – The Office of Enrollment Services and the Promotions Committee will assess each student’s academic progress on an annual basis. Each academic year is composed of two terms (fall and spring).
2. Quantitative Measures of SAP (pace and progression) - The timeframe to complete the MD program is 4 years of full-time enrollment, and many students elect to do a 5th year of Scholarly Year. The maximum time limit a student may be enrolled to meet their degree requirements is 7.5 years. A Scholarly Year or a decelerated year will count in the assessment of pace. Leave of absence and Extended Scholarly Status will not be counted in the assessment of pace.
3. Qualitative Measures of SAP (successful completion) - Academic progress is not measured by a cumulative grade point average. In Years 1 and 2, academic progress is measured by grades of Pass/Fail. In Years 3 and 4, academic progress is measured by grades of Honors, High Pass, Pass, Fail in selected courses.
 - Year 1: All courses must be completed with a grade of pass to advance to year 2.
 - Year 2: All courses must be completed with a grade of pass and.
 - Year 3: All third year clerkships must be taken and completed with a grade of Pass or higher to advance to year 4.
 - Year 4: All fourth year rotations must be taken and completed with a grade of Pass or higher. Students must pass Step 2 CK and CS as well as complete 28 weeks of elective credit prior to graduation.
4. Failure to Meet the Requirements for SAP- A student who fails to meet one or more of the standards for SAP is ineligible for institutional and federal financial aid beginning with the term immediately following the term in which the SAP requirements were not met.
5. Appeals- Students who do not meet the minimum standards for Satisfactory Academic Progress may appeal to an ad hoc committee comprised of representatives from Enrollment Services, Curricular Affairs and Student Affairs for reinstatement of financial aid eligibility. The appeal must first be submitted in writing to the Associate Dean for Enrollment Services within 10 days of notification of ineligibility. The appeal must include what has changed in the student’s situation that will allow him or her to meet the requirements for SAP at the next evaluation. Circumstances which may be considered as a basis for an appeal may include family emergency, death in the student’s immediate family, a student’s medical illness or injury, or other undue hardships. If the committee determines that the student’s appeal should be approved, the student’s financial aid will be reinstated.
6. Financial Aid Probation- Once an appeal has been approved, a student is placed on financial aid probation and is eligible for financial aid. The Promotions Committee will develop an academic plan for the student that will ensure, if followed, that the student is able to meet SAP standards. A student must be enrolled in at least 50 percent of course load to remain eligible for financial aid. A student shall become eligible again for financial aid when he or she has successfully completed sufficient coursework to meet the standards of progress within the maximum time frames delineated above.
7. Loss of Financial Aid Eligibility- A student who does not meet the SAP requirements by the end of the financial aid probationary period is ineligible for financial aid. The loss of financial aid eligibility will continue until the student has met both the qualitative and quantitative standards established for their level of study.

Academic Standing

Academic Progress is related to Academic Standing. A student will be considered in “Good Standing” if they meet the following requirements:

- Is not in Serious Academic Status (see Academic Status section below) or academic probation (see Academic section of Graduate School Handbook).
- Passes licensing examinations by graduation;
- Pays all bills on time including tuition, fees and, if applicable, housing.
- Meets school standards and deadlines for health assessments, immunization status, PPD testing, BLS training, and other requirements as determined by the Office for Medical Student Affairs.

A student who fails to meet one or more of the components above will be placed on registration hold preventing a student from advancing to the next year of training, from receiving an official copy of their transcript or from receiving a letter of recommendation from the administration. Please see the Registrar section of this handbook for a more detailed explanation of holds.

Academic Status

At the Icahn School of Medicine, academic status falls into three categories: Satisfactory Academic Status, Monitored Academic Status, and Serious Academic Status.

Satisfactory Academic Status

Satisfactory Academic Status means that a student has met all course/clerkship requirements or has successfully remediated any course/clerkship failures or other issues pertaining to academic performance as detailed in the following sections.

If a student is not meeting Satisfactory Academic Progress, they will be at risk of not being eligible for federal student aid.

The bottom five percent of students passing each course will be internally designated as having a marginal pass. The grade is recorded as a pass on the transcript and the designation of marginal pass is NOT reflected on the transcript or MSPE. A student’s Faculty Advisor will reach out to him or her in the event of a marginal grade on an examination or in a course to determine the significance of the grade and the need for support. A student with three or more marginal course passes will be considered in Monitored Academic Status.

Monitored Academic Status

Students will be considered in Monitored Academic Status in the event of any one of the following:

- A course failure in Years 1 or 2.
- Three marginal performances in an academic year. Marginal is defined as falling in the bottom five percent of passing grades.
- A failure of USMLE Step 1 or Step 2 CK.
- Failure of two NBME subject examinations in Year 3 clerkships.

Students in Monitored Academic Status will be notified in writing of this determination and will be required to meet with their Faculty Advisor and the Director of Programs and Resources for Academic Excellence to help plan appropriate interventions, and if necessary meet with the financial aid office to understand the impact on any federal and institutional aid. This status is an internal designation only and will not be noted on the transcript or the MSPE. Students who meet one of the criteria for Monitored Academic Status as specified above will be advised to prioritize studying for courses, but will not be required to relinquish school-related extracurricular activities. Students are permitted to take a Scholarly Year but must remediate any failures before starting the time away from the standard curriculum.

For Year 1 students in Monitored Academic Status, participation in summer research activities will depend on the nature and timing of any necessary remediation. Students should meet with their Faculty Advisor and the Medical Student Research Office to plan their projects.

Students in Monitored Academic Status can return to Satisfactory Academic Status if they complete one semester in Year 1 or 2, or six months of clerkships in Year 3 or Year 4 without any evidence of the above criteria, or, if they are in Monitored Academic Status for a failure on a USMLE exam, they pass it on the second attempt. A student who was once in Monitored Academic Status in Year 1 or 2 will return to that status if he or she has an additional marginal grade in Year 1 or 2.

Serious Academic Status

Students will be considered in Serious Academic Status in the event of any one of the following:

- Two course failures in an academic year during Year 1 or 2.
- A repeated failure of a Year 1 or 2 course.
- A failure on USMLE Step 1 or Step 2 CK on a second attempt.
- A Year 3 or 4 clerkship failure.
- Failure of three NBME subject examinations in Year 3 clerkships.
- Multiple occurrences of unprofessionalism or one serious occurrence as determined by the Office for Medical Student Affairs.

Students in Serious Academic Status will be required to appear before the Promotions Committee, will be subject to its decisions and will be notified in writing of this determination (see Promotions Committee section for more information). This status will not be noted on the transcript or the MSPE unless mandated by the Promotions Committee, but students risk being placed on financial aid probation if they are unable to demonstrate that they can maintain Satisfactory Academic Progress.

A student who fails three (3) or more courses in a year may be required to repeat the entire year, at the discretion of the Promotions Committee.

Remediation of any course may include tailored and/or external remediation programs (at the student's expense), and/or repetition of the semester or year (tuition required).

Students in Serious Academic Status will not be permitted to participate in any Icahn School of Medicine extra-curricular activities. Year 1 students in Serious Academic Status will need to discuss the timing of remediation and summer research with their Faculty Advisor and the Medical Student Research Office. Students in Serious Academic Status are not considered to be in "Good Standing" (see above) and therefore will not be permitted to take a Scholarly Year.

While in Serious Academic Status, clerkship directors will be notified of their changed academic status, referred to as 'forward fed'.

In addition, any student in Serious Academic Status who experiences an additional course or clerkship failure must be presented again to the Promotions Committee. Failure of remediation may be grounds for dismissal.

Students will remain in Serious Academic Status until they complete remediation and complete one semester in Year 1 or 2, or six (6) months of required clerkships in Year 3 or 4 without any course or clerkship failures or marginal course grades, or if they pass a USMLE exam on the third attempt. Students will be changed to Monitored Academic Status and from Monitored Academic Status to Satisfactory Academic Status as specified above.

Forward Feeding

Information regarding a student's marginal or failing academic performance and any documented issues related to professionalism may be forwarded from the Office for Student Affairs to a course or clerkship director at the discretion of the Senior Associate Dean for Student Affairs and/or the Promotions Committee. Students in Serious Academic Status will be forward fed as long as they remain in that status. Forward-fed information will be of a general nature to

alert the course or clerkship director to be aware of any issues that may arise with the student. Personal information will not be forwarded except when requested by the student. The student will be notified that this transfer of information is taking place. Information will flow from the Office for Student Affairs to course or clerkship directors, not between course directors or clerkship directors.

Forward feeding allows for monitoring of a student's performance and to provide support and remediation as necessary. The student should receive regular feedback throughout the new course or clerkship.

The forwarding of any material to a subsequent course or clerkship directors will continue as long as monitoring is necessary for educational purposes. There will be no mention of any of the forwarded information in the student's evaluation from that clerkship. It will be documented in the student's internal school file that information has been forwarded and to whom and specifically what information. This will not be reflected on the transcript nor will this be mentioned in the Medical Student Performance Evaluation (MSPE).

Assessment and Grading

The Course or Clerkship Director is responsible for clearly delineating and communicating at the outset of the learning experience the criteria utilized for assessment and evaluation of student performance.

The Icahn School of Medicine at Mount Sinai transcript will reflect a complete and accurate grading history for all courses in the School.

Years 1 and 2 Assessment and Grading

Grading in Years 1 and 2 is on a Pass/Fail basis. A student who does not complete a course will receive an Incomplete. Types of situations where a student may not complete a course include illness or family emergencies. The Incomplete will change to a Pass or Fail once the student has completed the course. A student who receives a failing grade in a course will follow a remediation plan devised by the Course Director. Successful remediation of a failing grade results in a final grade of FP (Fail remediated to Pass).

Course Directors will identify the bottom five percent of passing students. Students in this score range will be designated internally as having received a “marginal pass” for tracking and monitoring purposes only. **Marginal grades are considered a full Pass on the transcript.** However, marginal grades are tracked by Student Affairs as part of an early warning system for students at risk of academic difficulty. As part of this system a student’s Faculty Advisor will reach out to him or her if he or she receives a marginal grade on an examination or in a course. A student who has three marginal passes in an academic year will be placed on Monitored Academic Status. See section on Academic Status for a full description.

A student who fails a course in Year 1 must remediate the course by August 1 before starting Year 2. A student who fails a course in Year 2 must remediate the course before the start of Year 3. The Course Director determines the remediation process.

Online Testing

For the purposes of this policy, “test” refers to both exams and quizzes. Tests in Year 1 and 2 are administered online through Blackboard outside of class time. To avoid technical difficulties during the test-taking process, students should take their test using a wired internet connection/strong and stable wireless internet connection on a computer (NOT a mobile device, smartphone, tablet, phablet). Students will not be able to submit answers using a mobile device’s web browser.

Students are strongly advised to take tests during times when the Library Help Desk is available to assist should technical problems arise. The Library Help Desk is open Monday through Friday 8 am – 8 pm, Saturday 9 am – 5 pm, and Sunday 12pm – 8pm.

Duration of Exam Windows

The standardized exam window for all courses opens after the final course session for the week, or by 4 pm on Friday, and closes at 8am on Monday. When an institutional holiday occurs on a Monday, the exam window will be extended to close at 8 am on Tuesday. For courses that end at a break (i.e., Winter break, Spring break, or end of Spring semester), the exam window will open immediately after the final session of the course and will close on the following Tuesday at 8am. If a student misses an exam window, they will receive a zero for the assessment. Students who are unable to complete an exam in the standard window for a valid reason, as outlined in the “Missed Test Policy” below, will have the option of scheduling an alternative exam window.

Duration of Quiz Windows

There is no standardized quiz window. The window for quizzes is determined by the Course Director and will be communicated to students in the course syllabus and on the Google calendar.

Exam Review Policy for Year 1 and 2 Courses

In an effort to provide expedited feedback to students after tests, quizzes administered in the first two years of medical school will be available for review online immediately after the student submits his/her quiz. Students will be able to view their own quiz, see the answer they chose and the correct answer, as well as an explanation for why the correct answer is the only reasonable option. For exams, at 9 am on the next business day after the exam closes, the Year 1 or Year 2 Coordinator will release the exam for student viewing for 7 days ONLY. Students will be able to view their own exam, see the answer they chose and the correct answer, as well as an explanation for why the correct answer is the only reasonable option.

Other options for reviewing exams include:

- Making an appointment to go over the exam with the Course Director
- Reviewing the exams binder in the Office of Curriculum Support (OCS). To review the binder, students must make an appointment by contacting OCS at 212-241-7057.

Policy for Scheduling an Alternate Online Assessment Window

In Years 1 and 2, the ability to take an online assessment (examination or quiz) during a prescribed assessment window provides students with flexibility when and where they take the assessment. Given this flexibility, there are only a few instances when permission to take an assessment outside the window may be granted by the Office for Student Affairs.

Students must request permission to take an online assessment outside of the assessment window:

For urgent reasons such as illness that physically prevents a student from completing the assessment or a personal emergency:

- A student must request such permission from medstudentabsence@mssm.edu and cc the Course Director(s) **before the assessment window closes**. In this case, the student may assume the request is granted. If the request is because of an illness, the student must provide a clinician's note to that effect to medstudentabsence@mssm.edu.

For religious holiday observance that extends over the entire assessment window:

- A student must request such permission from medstudentabsence@mssm.edu and cc the Course Director(s) **two (2) weeks in advance**. The request will be reviewed by the Office of Student Affairs and if the request is granted, a specified time to take the online assessment will be arranged with the student.

Years 3 and 4 and the Art & Science of Medicine Assessment and Grading

The Art & Science of Medicine (ASM) course in Years 1 and 2 as well as the clerkships in Years 3 and 4 have a special focus on the teaching and assessment of clinical skills and may use any of the following in assessing a student's performance:

- Clinical performance assessments by faculty, preceptor or resident
- Oral and/or written examinations
- NBME subject test exams
- Written or oral presentations of a specific subject related to the clerkship or course
- Exams using standardized patients or simulators
- Direct observation of history taking and physical examination skills

The weight given to specific parameters may vary with an individual clerkship or course.

Each Clerkship or Course Director submits a final grade plus a comprehensive narrative paragraph. The final grades and narrative paragraphs for ASM and the third-year clerkships are included verbatim in a student's MSPE.

All reports of student performance are due in the Office of the Registrar within six weeks of the clerkship's completion.

The grading system for all required clerkships is H (Honors), HP (High Pass), P (Pass), and F (Fail). ASM in Years 1 and 2 and Introduction to Internship in Year 4 are graded Pass/Fail. Electives are graded on a system of Honors/High Pass/Pass/Fail.

A student will receive a temporary grade of Conditional (C) in the event they fail the NBME subject exam or other final exam if other assessments and clinical evaluations are satisfactory. Upon successful completion of the failed exam, the grade is revised to a Pass (P) or High Pass (HP). A student cannot get an Honors if they do not pass the shelf on the first attempt. If the student fails the exam on the retake, he or she will receive an overall failing grade and will need to retake the entire clerkship and then take the NBME exam or final exam again. Students are not permitted to retake a passed NBME subject examination.

A student can fail a clerkship based on overall clerkship score, unsatisfactory clinical evaluations or a repeated failure on an NBME subject exam or final exam. Students who behave unprofessionally during the clerkship are also at risk of failing. If a student is felt to be unprofessional to the point that evaluators do not feel that the student is a reliable, accurate reporter of clinical data and a trustworthy team member, the student will receive a failing grade. As mentioned above a student who fails a shelf exam on the second attempt also fails the clerkship overall. A student who receives a failing grade for a clerkship must retake all or part of the clerkship at the discretion of the Clerkship Director and the Promotions Committee. Upon successful completion of remediation, a student will receive a grade of Fail-Pass FP, and the narrative paragraph will describe the remediation.

Grade cutoffs are set by each clerkship director to create a goal distribution of grades that is 60 percent Honors, 30 percent High Pass and 10 percent Pass at the completion of each quarterly module during the academic year.

All students must pass all clerkships in Year 3 to advance to Year 4.

Policy for Scheduling an Alternate Test Window for Years 3 and 4

In Years 3 and 4, a student must request permission from the Clerkship Director(s) and medstudentabsence@mssm.edu to miss an NBME subject examination or other clerkship examination. The policy for making up a missed NBME subject examination is below. The Clerkship Director will schedule any other clerkship exams with the student.

Shelf Exam Retake Policy and Guidelines

This policy applies to students taking the Shelf Exam due to:

- Shelf failure
- Excused missed test (illness, death in family, religious observance, other emergency)

Options for shelf retakes are as follows:

- During the Shelf Retake Day in July (students will not be charged for the exam)
- During elective or vacation time; Monday through Friday only
- Exceptions to this rule are made only under approval of a student's advisor/Student Affairs and Clerkship Director
- Student Affairs will coordinate with the curricular team to help arrange for a shelf retake. The following information is needed to make the arrangements:
 - Original test date
 - Timeframe for shelf retake (students should please provide 3 potential dates during your elective or vacation time)
- Students may NOT complete their shelf retake during FlexTime while on another clerkship.

Shelf failures:

- Students who fail a Shelf Exam must meet with their Faculty Advisor and Clerkship Director to determine when they will retake the exam.
- Deadline for shelf retakes for the academic year is the retake day which occurs in July during the Board Review course.

Excused absences:

- If a student anticipates that they will miss a Shelf Exam due to illness, death in family, religious observance or other emergency, they must notify the Clerkship Director and medstudentabsence@mssm.edu.
- Student Affairs will coordinate with the curriculum team based on the options above.

Unexcused absences:

- If you are unable to make up a missed exam on Shelf retake day in July, you will be charged the cost of the exam. Please check the NBME website for current cost information.
- A check in the amount of the exam and additional fees (if applicable) is to be made out to the *Icahn School of Medicine at Mount Sinai* and submitted to Jennifer Reyes prior to taking the exam.

Grades and Transcripts

Official transcripts of courses taken at the Icahn School of Medicine at Mount Sinai toward fulfillment of the MD degree requirements will identify a grade for each course or clerkship as described above.

Written narrative evaluations are not part of the transcript and will not be duplicated or mailed with transcripts; however, all clinical narratives for clinical courses and clerkships completed by the end of Year 3 are included in the MSPE.

Grade Appeals Policy

If a student believes that they have received a final grade for a course/clerkship or the narrative grade paragraph does not adequately represent their performance, the student may appeal. The outcome of the appeal will not result in a lower grade than the first grade posted by the course/clerkship director.

Procedure

1. Within ten business days of receipt of the posted grade, the student must request a meeting to review the grade with the course/clerkship director. The goal of the meeting is to review and understand the criteria and rubric by which the student was assessed and the grade determined.
 - a. Clerkship grades adjusted at the end of an academic year are not eligible for appeal.
2. If after meeting with the course/clerkship director the student wishes to continue the appeal process, the student has five business days to inform the Senior Associate Dean for Student Affairs via the Grade Appeal Form.- https://mountsinai.formstack.com/forms/grade_appeal Before the Appeal moves forward, the Senior Associate Dean for Student Affairs will consult with the Office of Assessment and Evaluation and/or course/clerkship director to determine if the process was followed.
 - a. If the process was not followed, the grade may be changed without completing the Appeal process and the Senior Associate Dean for Student Affairs will inform the Registrar in the Office of Enrollment Services of the grade change, if applicable. The student's record and official school transcript will be amended to reflect the changed grade.
 - b. If the process was followed, the Senior Associate Dean for Student Affairs will continue the Appeal process.
3. The Senior Associate Dean for Student Affairs will schedule a meeting with the Appeals Subcommittee of the Promotions Committee (Appeals Subcommittee) within ten business days after the process review is complete. The Senior Associate Dean for Student Affairs will provide the Appeals Subcommittee with the course/clerkship grade policy, student performance data and any other information to assist with the thorough appeal process.
4. The Appeals Subcommittee meeting will include separate conversations with the student and the course/clerkship director. Following this, the Appeals Subcommittee may request to meet jointly with the student and course/clerkship director. The student is permitted to have an advocate attend any or all portions of the meeting(s) described above.
5. Within ten business days of the meeting(s), the Appeals Subcommittee will provide a final decision via ISMMS email communication to the student, the course/clerkship director, the Senior Associate Dean for Student Affairs, and the Senior Associate Dean for Curricular Affairs. The Senior Associate Dean for Student Affairs will inform the Registrar in the Office of Enrollment Services of the grade change, if applicable. The student's record and official school transcript will be amended to reflect the changed grade.
6. The decision made by the Appeals Subcommittee is final and not subject to further appeal.
7. The Appeals Subcommittee will report all findings to the Promotions Committee.

Promotions Committee - Appeals Subcommittee

The Promotions Committee can create subcommittees as needed to perform various tasks under the direction of the Senior Associate Dean for Student Affairs with consultation from the Promotions Committee Chair.

The Appeals Subcommittee shall consist of at least three voting members and the Promotions Committee Chair. All Appeals Subcommittee meetings will be chaired by the Promotions Committee Chair, who will act as a non-voting member of the Subcommittee.

Attendance Standards

General Principles

Active participation in the medical education program is a critical component of the professional development of a physician. Lack of attendance for any reason does not relieve a student from responsibility for material covered during that absence.

Students must notify their course and/or clerkship director, and small group preceptor, about any anticipated or sudden absence from a required didactic or patient care session. Students should make certain that they have the appropriate phone, email, and/or pager numbers to carry out this responsibility. Absences due to illness for more than two (2) days require that a written doctor's note be sent to Student Affairs. Absences from examinations will only be accommodated under extreme circumstances (see Policy for Scheduling an Alternate Test Window).

Security IDs

A student's security ID serves to track attendance for all large group mandatory sessions in the lecture halls. Students must scan into these sessions prior to the session start. Failure to do so will result in an unexcused absence from the mandatory session. Students may scan in as early as 30 minutes prior to session start.

Students receive a security ID from the Security Department when they arrive for Orientation in their first year. Per Mount Sinai Health System policy, students and employees must wear IDs at all times while on hospital grounds. Security IDs must be visible and hang above the waist.

Students who lose their ID must go to the Security Department on the MC level of Guggenheim immediately to replace their ID. There is a modest fee for ID replacement. A student must also go to the Office of Curriculum Support in Annenberg 13-40 to register their ID for the attendance system immediately after receiving their new ID.

Regarding Illnesses

Students with concerns about their ability to function as a clerk or about the risk that they might transmit an infection to patients because of an illness should contact the clerkship directors. The faculty and staff in Medical Education are here to help students through any challenges that arise.

Religious Observances

The School of Medicine recognizes and respects the religious beliefs and practices of its students and seeks to accommodate them reasonably within the requirements of the academic schedule. Students who anticipate being absent because of religious observance must request permission two (2) weeks in advance (see notification guidelines below).

In the event a student is unable to complete an examination or assessment due to a religious observance, the student will be provided the opportunity to make up the examination or assessment. No fees of any kind shall be charged by the School of Medicine for making available an opportunity to make-up the missed examination or assessment.

Jury Duty

The School of Medicine cannot excuse students from Jury Duty. For a first deferral in New York, students have the chance to select a date that they are available. First-year students should defer to summer; second-year students should defer to board study time or elective time in their third year; third-year students should defer to their fourth year during their elective period, and fourth-year students should find time during elective time (avoid peak interview time, when possible).

When requesting a deferment, students should go in person with a student ID. The Court has allowed deferments even for more than a year in several cases. The visit can be made at any time preceding the assigned date or on the assigned date, and this visit should be made at the most flexible time. Jury Duty is an excused clerkship absence, but students will have to make up all missed time. It is suggested that students use flexible time as suggested above.

Students may try calling 646-386-5960 to avoid the visit downtown if this is after the first deferment. You may also [request a letter from the Registrar](#) that states a student's full time status at the Icahn School of Medicine.

Year 1 and 2 Excused Absence Policy

Attendance is mandatory at all small group sessions, laboratories, ASM sessions, Frontiers in Science lectures, COMPASS I, and any sessions or classes designated as "patient encounters" where patients or families are present.

Students should refer to the Academic Calendar on the Registrar's website (<http://icahn.mssm.edu/education/students/registrar>) when planning any travel. The course calendars may be changed without advance notice. If plans are made for time away based on a day having only lectures scheduled, the student could be in jeopardy of missing a required activity if the schedule is changed. If the course schedule changes within two (2) weeks of the planned absence, the student will be excused from the required activity. Unexcused absences are considered unprofessional behavior, will be recorded, and may have an adverse effect on a grade including failure of a component of a course or an entire course. The following will be considered excused absences:

- Illness that physically prevents a student from participating in a session
- Urgent medical evaluation or healthcare management appointments
- Religious holiday observance
- Jury duty
- Significant family event (e.g., wedding or religious ceremony)
- Personal emergency (e.g., unanticipated caregiver obligation; death of a loved one)
- Presenting work at a regional, national or international conference
- Attending a meeting of a national committee (e.g., AMSA, AMA, AAMC) of which student is a member with a leadership role.
- One conference (medical or scientific) per academic year as an attendee, if student receives funding from a department, a scholarship, or grant
- Attending an Executive Oversight Committee (EOC), Promotions Committee, or Mistreatment Committee meeting as a student member; or Longitudinal Clinical Experience (LCE) patient appointment

Reporting your absence for Years 1 and 2

To request an excused absence, students must fill out the Year 1 and Year 2 Absence Request Form (<https://mountsinai.formstack.com/forms/year1and2absences>) and attest that they are abiding by the Absence Policy and the Student Code of Conduct. This form will notify Student Affairs and the students' Course Director(s). In the event of an urgent situation, a student may email medstudentabsence@mssm.edu AND their Course Director for an immediate response.

Requests for excused absences are reviewed by Student Affairs and students will be notified of approval or non-approval within three (3) business days of sending a request.

- Students must fill out the Year 1 and Year 2 Absence Request Form to request an excused absence: <https://mountsinai.formstack.com/forms/year1and2absences>.
- Excused absences need to be requested two (2) weeks in advance (this does not pertain to illness that physically prevents a student from participating in the session, unexpected caregiver obligation, urgent medical appointment, or death in the family).
- Requests made after a class session begins will not be considered except in extenuating circumstances.
- Absences longer than two (2) days for illness require that a doctor's note be submitted to medstudentabsence@mssm.edu.

- Students attending a conference will have to submit an acceptance letter, or proof of funding from a department, scholarship or grant.
- Student Affairs reserves the right to request a doctor's note or other documentation in the event of a pattern of absences or any absences immediately preceding or following a holiday.
- Although an absence may be excused, students are responsible for any missed work. The Course Director will inform the student of appropriate make-up work and timeline.
- It is the student's responsibility to make sure that the make-up is completed in a timely manner.
- Students should refer to the Policy for Scheduling an Alternate Test Window for details on how to request an excused absence.

Consequences of Unexcused Absences for Years 1 and 2

Students must attend all mandatory sessions (as listed above) or submit an absence request prior to the session. Unexcused absences will be tracked with a Flag in My Access and Resource Center (MARC) and will have the following consequences:

First absence:	2 points off final grade
Second absence:	2 more points off final grade and an Incident Report
Third absence:	Course failure

Punctuality

Timely attendance is an expectation of performance for all School of Medicine students. This shows respect for peers, patients, faculty and staff. Students will be held accountable for adhering to their course schedule, and all late arrivals will be tracked with a Late Flag in My Access and Resource Center (MARC) regardless of reason. A pattern of lateness during an academic year will be escalated to the Senior Associate Dean for Student Affairs and the Senior Associate Dean for Curricular Affairs, and may result in an Incident Report.

Test Policy

In Years 1 and 2, the ability to take an online assessment (examination or quiz) during a prescribed assessment window provides students with flexibility when and where they take the assessment. Given this flexibility, there are only a few instances when permission to take an assessment outside the window may be granted by the Office for Student Affairs. Students must request permission to take an online assessment outside of the assessment window. Please see the *Policy for Scheduling an Alternate Test Window* in the Assessment and Grading section of the handbook for full details.

Longitudinal Clinical Experience (LCE) Absences

A student who wishes to be excused from a mandatory course session in order to meet with their LCE patient must fill out the Year 1 and Year 2 Absence Request form: <https://mountsinai.formstack.com/forms/year1and2absences>. The ASM course directors, the relevant course director and Student Affairs will jointly decide whether the event is of significant magnitude to justify the Year 1-2 session absence.

Year 3 and 4 Excused Absence Policy

The clinical phase of the curriculum requires a full-time commitment by the student in patient care and didactic activities. Students serve as members of the health care team and assume an active role in the care of patients. Student presence, participation and engagement at the bedside form the cornerstone of learning in the clinical environment. In these clinical years, students are required to attend all clerkship functions including night, holiday, and weekend duty, as well as participate in all educational exercises (e.g., InFocus Weeks, any required remediation). Unexcused absences from any of the above may result in an Incident Report or failing grade, and students may be required to make up days missed or the entire clerkship depending on the length of time involved.

The following will be considered excused absences:

- Sitting for a USMLE Step exam
- Illness that physically prevents a student from participating in patient care or an educational session
- Urgent medical evaluation or healthcare management appointments
- Religious holiday observance
- Personal emergency (e.g., unanticipated caregiver obligation; death of a loved one)
- Significant family event (e.g. wedding or religious ceremony))
- Interview for residency/job or scholarly year experience
- Presenting work at a regional, national or international conference
- Attending a meeting of a national committee (e.g., AMSA, AMA, AAMC) of which student is a member with a leadership role
- One conference (medical or scientific) per academic year as an attendeeAttending an Executive OversightCommittee (EOC), Promotions Committee, or Mistreatment Committee meeting as a student member
- Jury duty

Reporting your absence for Years 3 and 4

To secure an excused absence, the following email must be sent at the student's initiative:

To: Clerkship Director(s), Clerkship Coordinator(s), site preceptor(s), elective(s) director

Cc: Student Affairs (medstudentabsence@mssm.edu)

Body:

Name of student:

Name of clerkship:

Dates and number of days excused:

Reason for the excused absence from list of approved excused absences:

At the discretion of your clerkship, you may also be required to report your absence by calling and/or paging your preceptor(s). This shall happen in addition to the email outlined above.

It is the expectation that students are present on exam days (NBME shelf exam and direct observation) and students should review the [Policy for Scheduling an Alternate Test Window for Years 3 and 4](#) for details for requesting an absence.

Note:

- Excused absences need to be requested a minimum of one (1) month in advance of the clerkship (this does not pertain to illness or death in the family).
- Absences longer than two (2) days for illness or disability related accommodations require a written doctor's note be submitted to Student Affairs (medstudentabsence@mssm.edu) and the Clerkship Director.
- Student Affairs reserves the right to request a doctor's note or other documentation in the event of a pattern of absences or any absences immediately preceding or following a holiday.
- Requesting absence from a scheduled shelf exam or direct observation follows the Policy for Scheduling an Alternate Test Window for Years 3 and 4, as mentioned above..
- For any absences that occur in the clerkship:
 - The clerkship director may offer make-up experiences, if available or possible.
 - If make-up experiences are not possible, then at the discretion of the clerkship director, the student will need to reschedule the clerkship.

If the student knows that they will need more than three days of excused absences during a rotation, they will need to request elective time for that period when completing the lottery. Requests for excused absences are approved by the

Clerkship Director and are reviewed by Student Affairs. Students will be notified of approval or non-approval within three (3) days of sending a request.

Policy for Residency Interviews and Second Looks

Advance notification of at least one (1) month to the clerkship director(s) and clerkship coordinator is critical to ensure that clinical obligations are met. It is understood that on occasion this is not possible, but students are expected to advise the Directors and Coordinators immediately or with one month's notice.

If a student needs to miss for residency interviews and/or second looks, they will be expected to make up the missed time. The clerkship director(s) will determine when and how this happens.

If a student needs to miss three (3) or more days during a clerkship, then s/he will need to do one extra week of the clerkship. The timing of this will be determined in conjunction with the clerkship director(s).

As with all absences, the student should email the clerkship director, clerkship coordinator and copy medstudentabsence@mssm.edu using the template outlined above.

Awards and Honors

Gold Humanism Honor Society

The Gold Humanism Honor Society (GHHS) honors those students who have demonstrated humanistic values in their clinical training. The Arnold P. Gold Foundation defines humanism as:

“Humanism encompasses those attributes and behaviors that emanate from a deep sensitivity and respect for others, including full acceptance of all cultural and ethnic backgrounds. Further, humanism is exemplified through compassionate, empathetic treatment of all persons while recognizing each one’s needs and autonomy.”

Students are nominated at the end of their third year by their peers with whom they have completed third year. The three nominating questions are:

1. Please choose a classmate who best personifies the quote, “the secret of good patient care is in caring for the patient.”
2. Please choose a classmate who demonstrates respect for colleagues and the health care team.
3. Please choose a classmate you would want as the doctor for yourself or a loved one.

Each student can nominate three peers per question, and can state why they nominated this person.

The GHHS selection committee, which is comprised of faculty members and residents who are GHHS members themselves, chooses the final list of students to be inducted based on the quantity and quality of votes. Per GHHS guidelines, this will not be more than 15 percent of the class. GHHS inductees are honored in the Gold Humanism Award Ceremony held in the fourth year and at graduation. GHHS students may mark the designation on ERAS.

Distinction in Medical Education

Distinction in Medical Education (DIME) recognizes those students who have taken leadership roles in medical education and have developed and implemented a scholarly project related to the field of medical education. DIME is not for all students who teach, but rather it is awarded to those unique students who have dedicated significant time to and demonstrated excellence in teaching and/or curriculum development and who have taken a scholarly approach to their work in education. Students primarily engaged in teaching are required to produce scholarly work, evaluate their teaching/education interventions, and describe how they used results to improve their teaching/intervention. Education products for teachers may include the development of concept maps, slide sets, resource materials, web-based cases, etc. Learner evaluations will provide important evidence of quality if a project is primarily related to teaching. Students apply for DIME in their fourth year of medical school. Applications are reviewed by a committee within the Institute of Medical Education. There are no limits on how many students can be awarded DIME: each application is reviewed on its own merits. Students who are awarded DIME will receive diplomas at Commencement stating that they have graduated with "Distinction in Medical Education" and they will be recognized at the Graduation Achievement Ceremony. Program guidelines and a link to the application form are available on the [Distinction in Medical Education web page](#).

Distinction in Research

This award is for students who carry out an original research project, rather than participating in a technical capacity on an ongoing project. Case studies and narrative literature reviews do not count as original research, however, a

meta-analysis would. Graduation with Distinction in Research (DIR) is awarded to students who publish a peer-reviewed research manuscript in a journal with an impact factor score of ≥ 2 in which they are the first author. Students will receive diplomas at Commencement stating that they have graduated with "Distinction in Research" and will be recognized at the Graduation Achievement Ceremony. This is an exciting opportunity for students to receive recognition for creativity and originality. It is a valuable educational component for those interested in a career in either academic or clinical medicine. Students apply for DIR in their third or fourth year of medical school. In cases where students have exceptional research accomplishments but not meet the above criteria, a research committee will review applications. This would include the lead writing of a strong/successful NIH grant, a second authored paper to a top tiered journal in combination with other first authored research publications, for example. The application form is available on the [Distinction in Research web page](#) and must be submitted by the deadline. Other outstanding research accomplishments during medical school Distinction in Research requirements may be revised in the future.

Distinction in Global Health

Graduating medical students are welcome to apply for the Distinction in Global Health (DIGH). DIGH recognizes students who have shown significant dedication to global health during their time at ISMMS through scholarly work, education, leadership, and/or service. We define Global Health work broadly as "the area of study, research and practice that places a priority on improving health and achieving equity in health for all people worldwide". This typically involves work with underserved populations, and can be performed either abroad or in the United States. Graduating MD students in good academic standing are eligible to apply during the open call period in early spring. We are looking for those students with a longitudinal engagement in Global Health throughout their time at ISMMS.

More information and the application can be found on the [Global Health Blackboard page](#).

Achievement Ceremony Awards

There are a number of student awards given at the [Graduation Achievement Ceremony](#) the day before Commencement. The medical student awards are given by a clinical or research department or by the Department of Medical Education. The awards given by Medical Education are determined by the awards selection committee based on a nomination and essay. Departmental Awards are selected by the respective department, and research awards are selected by the Medical Student Research Office. Other awards are selected by the Center for Multicultural and Community Affairs, the Gold Humanism Honor Society Selection Committee, and the Alumni Office.

Awards determined by the Department of Medical Education:

- Dr. David K. McDonogh Award for Diversity in Medical Education: Awarded to a graduating medical student who has worked diligently to increase diversity in medicine and on our campus and has worked to create and support an environment where diversity and inclusion are valued.
- James Felt Award for the Promotion of Social and Racial Justice: Awarded to a graduating medical student who exemplifies the view of medicine as a socially responsible human service profession and has demonstrated engagement in and commitment to deconstructing and mitigating racism and bias in our school, community and health care system.
- Pat Levinson Award for the Advancement and Inclusion of Women in Medicine: Awarded to a graduating medical student who has contributed significantly to the advancement of women leaders in medicine and science and has worked toward gender equity in academic medicine. The awardee has track record of advocating for the development of women leaders as well as enhancing the professional environment for women in medicine.
- Judith and Nathan Kase Humanities in Medicine Prize: Awarded to a graduating student who was accepted via the Humanities and Medicine Program and who exemplifies the principles of the program. It will recognize

outstanding performance in clinical studies and diverse interests that impact the study and practice of medicine.

- Barry Stimmel Award for Medical Education: Awarded to a graduating medical student who has contributed to the education and advancement of their fellow students and exemplified a commitment to and leadership in teaching and advancing medical education. This student has made lasting changes to the curriculum or learning environment.
- Harold Elster Memorial Prize for Clinical Acumen: Awarded to a graduating medical student for their clinical excellence, including patient communication skills, reasoning ability, teamwork, and medical knowledge.

Awards determined by clinical departments:

- Geriatrics and Palliative Medicine: Milton C. Engel, MD, Award in Geriatric Medicine
- Surgery: Mrs. David A. Dreiling Surgery Prize
- Internal Medicine: the Barry Coller Award for Excellence in Clinical Medicine
- Pediatrics: Dr. Howard Rappaport Pediatric Award
- Neurology: Dr. Morris B. Bender Award in Clinical Neurology
- Anesthesiology: Dr. Joseph R. Jagust Anesthesiology Award
- Psychiatry: Dr. M. Ralph Kaufman Psychiatry Prize
- Family Medicine: Steven B. Tamarin, MD, Memorial Award for Excellence in Family Medicine
- Obstetrics and Gynecology: Dr. Alan F. Guttmacher Obstetrics and Gynecology Prize

Awards selected by the Medical Student Research Office:

- Mount Sinai Auxiliary Board Prize for Excellence in the Study of Health Care Delivery Services
- Dr. Harold Lamport Biomedical Research Prize

Award selected by Center for Multicultural and Community Affairs

- Irwin Gelernt, MD, Award for Service to the Community

Award selected by the Gold Humanism Honor Society Selection Committee:

- The Leonard Tow Humanism in Medicine Student Award

Award selected by the Alumni Office:

- Mount Sinai Alumni Student Leadership Award

Diversity

Statement On Diversity, Inclusion, And Equity

At the Icahn School of Medicine at Mount Sinai (ISMMS) we center our approach to education, research, clinical care and service to society on the values of diversity, inclusion, and equity.

At ISMMS:

Diversity embodies inclusiveness and values multiple perspectives. Diversity embraces and celebrates intersectional social identities including but not limited to race, ethnicity, gender, gender identity, sexual orientation, socioeconomic status, language, nationality, religion, geographic location, disability status, and age.

Inclusion fosters belonging, “connectedness,” respect and value for all. Inclusion considers differences in ideas, thoughts, opinions, experiences, beliefs and practices in all discussions and decision-making.

Equity is the experience of freedom from bias or favoritism, where everyone has the opportunity to attain their full potential and no one is disadvantaged or favored due to social position or other socially-determined circumstances.

We believe diversity, inclusion and equity

- are imperative to achieving excellence in all our missions
- create an environment of respect and affirmation of intersecting social identities and lived experiences
- allow our community of learners, educators, providers and investigators to use medicine, science, and policy as platforms for advocacy and social justice

We are committed to increasing and sustaining the representation of individuals underrepresented in medicine and science. We will focus our recruitment and retention efforts on students, residents and trainees, faculty, and staff who identify as Black, Latino/a, educationally and economically disadvantaged, and women. We will also be intentional in our efforts to create an inclusive and welcoming environment for all LGBTQ identified students, faculty, residents and trainees, staff, and patients.

As individuals pursuing careers, or working in, medicine and science, we have the obligation to be agents of change. We are committed to providing an authentic and intentionally diverse, inclusive, and equitable environment for all patients, students, residents and trainees, staff and faculty. Our goal is to be a health system that is free from racism and bias, in which healthcare is a human right and is accessible to all.

Mount Sinai Health System Office for Diversity and Inclusion

The Office for Diversity and Inclusion (ODI) is a System-wide entity charged to support the Mount Sinai Health System (MSHS) in embracing the principles of diversity and inclusion as key drivers for excellence and innovation for unrivaled healthcare service delivery, medical and health education, and research. The ODI is organized into three units which include the Patricia Levinson Center for Multicultural and Community Affairs (CMCA, described below), the Center for Excellence in Youth Education (CEYE described below), Corporate Health Services Affairs (CHSA), and the Diversity Innovation Hub.

Visit ODI’s [website](#) to learn more about the [CHSA](#) unit and resources, programs, and activities that support diversity and inclusion at MSHS

ODI Executive Leadership:

The ODI is led by Gary Butts, MD, who is the Executive Vice President, Chief Diversity Officer and Dean for Diversity Policy, Programs, and Community Affairs, and a Professor Pediatrics, Medical Education, and Preventive Medicine. The executive leadership team includes Dr. Butts, Dr. Ann-Gel Palermo, DrPH, MPH Chief of Diversity, Equity, and Inclusion for Education and Research and Senior Associate Dean for Diversity, Equity, and Inclusion, and Associate Professor of Medical Education, and Pamela Abner, MPA Vice President and Chief of Diversity, Equity, and Inclusion of Mount Sinai Hospital Groups.

For more information:

Office for Diversity and Inclusion

Tel: 646-605-8280

Fax: 646-605-3009

Web page: <http://www.mountsinai.org/about/diversity>

Email: diversity@mountsinai.org

The Patricia S. Levinson Center for Multicultural and Community Affairs (CMCA)

A unit of ODI, the Center for Multicultural and Community Affairs (CMCA) is the diversity center of the Icahn School of Medicine at Mount Sinai (ISMMS). The mission of CMCA is to eliminate health disparities through the use of innovative, integrative, and coordinated approaches in the areas of Community, Clinical Care, Education, and Research to improve the health of all populations by diversifying the health care workforce and influencing health policy and research. The CMCA supports students and faculty from backgrounds underrepresented in medicine and science and advances diversity at all levels by directing innovative and coordinated approaches in the areas of educational pipeline programs, diversity affairs, school-wide diversity initiatives, and training and education programs focused on the intersection of medicine, science, and social justice through an urban health lens.

What CMCA Offers Students:

- Strong, multi-faceted partnerships with local community organizations that allow integration of community-oriented care, research, and service learning
- Teaching and instructional opportunities to educationally and economically disadvantaged youth through ODI's Center for Excellence in Youth Education
- Student Academic and Career Advisement, which supplement the existing faculty advisement program
- Faculty Advising for nearly all student groups involved in youth education, community engagement, service learning and advocacy, as well as affinity groups.
- Research support and mentorship in collaboration with the Medical Student Research Office and the Arnhold Institute for Global Health in the areas of community engaged scholarship and health disparities
- Access to faculty mentors for research and career advisement
- Educational resources on the intersection of race, racism, bias, culture, disability, sexual orientation and gender identity, spirituality, and medicine and health in medical education
- Student cubicle for students to check email and do limited printing and faxing
- Resources and advisement to students interested in service learning, community-engagement, policy and advocacy, and public and urban health issues

ISMMS recruitment and outreach efforts to ensure a diverse applicant pool by coaching and mentoring for individuals interested in applying to ISMMS's MD and PhD programs; and for current students interested in graduate degree programs

For more information about CMCA, contact:

Center for Multicultural and Community Affairs (CMCA)
1468 Madison Avenue
Annenberg Building, 21st Floor, Room 21-70
Tel: 212-241-8276
Fax: 212-241-3594
Email: cmca@mssm.edu
Web page: icahn.mssm.edu/cmca

Center for Excellence in Youth Education (CEYE):

A unit of ODI, the CEYE exposes and enriches hundreds of youth from underrepresented and or economically disadvantaged backgrounds to careers in science and medicine through hands-on curriculum and internships. Founded by Lloyd R. Sherman, EdD, in 1975, CEYE serves close to 300 students in grades 7 through the collegiate level each year. Uniquely situated in the real-time environment of the ISMMS, CEYE students are able to participate in challenging learning experiences that prepare them for future careers in the health professions. CEYE offers students teaching and instructional opportunities to youth participating in their programs.

For more information about CEYE, contact:

Center for Excellence in Youth Education (CEYE)
1468 Madison Avenue
Annenberg Building, Twelfth Floor, Rooms 12-35/36
Tel: 212-241-7655
Email: ceye@mssm.edu
Web page: icahn.mssm.edu/ceye

Diversity Innovation Hub (DIH):

Housed in ODI, the Diversity Innovation Hub aims to facilitate and accelerate the participation of women and people of color in the health tech space; innovate the practice of diversity, innovation, and equity in academic medicine and health care; and initiate, accelerate, and launch innovative solutions to address social and structural determinants of health that perpetuate disparities in health and health care. The DIH offers the ISMMS Student Fellowship, a summer innovation fellowship at Mount Sinai which provides a comprehensive, educational and hands-on eight-week program focused on introducing interested underrepresented minority (URiSM) and female students at the Icahn School of Medicine to biodesign, healthcare venture capital, and technology fields early in their medical career

For more information about the Diversity Innovation Hub contact:

1468 Madison Avenue
Annenberg Building, 21st Floor, Room 21-70
Tel: 212-241-8276
Email: hi@dihub.co

Web page: www.dihub.co

Disability Services

The Office of Student Disability Services (SDS) works with all students of the Icahn School of Medicine at Mount Sinai to facilitate equal access for students with physical, learning, psychological, sensory and chronic health disabilities by coordinating reasonable accommodations through a variety of support services (i.e., access modification, learning-related technology, extended test times). SDS provides access to all aspects of the student experience so that each student is viewed on the basis of their ability—not disability. Individually designed accommodation plans and services are determined based on the documented needs of each student in conjunction with their program requirements.

Students register with the office and access accommodations by completing 3 steps;

1. submitting the [Application for Accommodations and Services](#),
2. submitting documentation of the disability
3. meeting with SDS staff.

The Director of Disability Services is responsible for determining the acceptability of documentation and reserves the right to require additional information. Students requesting academic accommodation for a disabling condition must be approved for the academic accommodation prior to the date of exam(s) or course assignments and deadlines. Accommodations cannot be made retroactively once approval is granted through SDS.

For any questions or to make an appointment, please email the Director of Disability Services, Christine Low, MSW at christine.low@mssm.edu. The SDS [webpage](#) has helpful information including the application and related policies.

Students who do not have documentation of their condition, and /or who believe they have an undiagnosed condition, should contact the Director of Disability Services to discuss their circumstances further. In general, students are welcome to seek evaluation on their own at their own expense. However, administrative referrals for students with academic challenges will be supported by the Office for Student Affairs at the School of Medicine; the Associate Dean supports referrals for Graduate School students.

For more information, see the Disability Services [webpage](#)

Financial Services

Below are policies and procedures related to tuition, financial aid, and student health insurance. To learn more about tuition and fees, please visit the Office of Student Financial Services at <https://icahn.mssm.edu/education/financial-aid>

Student Billing: Tuition

Payment may be made by personal check, bank draft, wire transfer or money order, **drawn to the order of Icahn School of Medicine at Mount Sinai**. Payment must be made by each term's invoice due date.

Domestic Students - A payment plan option is available through Nelnet Campus Commerce. Information is available on the [Student Financial Services website](#).

Domestic and International Students - PayMyTuition is available for students interested in paying by wire transfer. Information is available on the [Student Financial Services website](#). The Board of Trustees reserves the right to revise tuition and fees at any time..

All financial obligations must be cleared prior to the completion of each academic term. Students who have not cleared their account by the due date will not be allowed to register for upcoming terms, receive an official transcript or letter of recommendation, have academic credits certified, receive a leave of absence, receive other student services, attend class/clerkship for the current academic term, or have a degree conferred. Late fees of \$100 will be charged on balances, if deemed delinquent. Unpaid balances will be turned over to an outside collection agency at the end of each academic year.

Tuition Refund Policy

Students who withdraw from the Institution during an academic term will receive a tuition refund based on the below institutional schedule. Tuition refunds will be calculated based on the date the student completes the withdrawal process with the Registrar's Office.

- Withdrawal through the first calendar week of the term: 100 percent of Tuition Only
- Second calendar week of the term: 75 percent of Tuition Only
- Third calendar week of the term: 50 percent of Tuition Only
- Fourth calendar week of the term: 25 percent of Tuition Only
- After the Fourth week of the term: No Refund

For students receiving federal financial aid processed through the Office of Student Financial Services, be advised that all funds from federal Title IV programs will be returned to the government according to federal regulations. Returned funds previously credited towards tuition will leave an outstanding balance that students are personally responsible for paying. Students are advised to understand the above tuition schedule as withdrawing after the first week of class creates a financial obligation which, if not cleared by the end of the academic year, will be referred to an outside collection agency.

No refunds will be granted to students dismissed or suspended. The Institution reserves the right to dismiss a student whose academic standing or general conduct is considered unsatisfactory.

Repetition of Course Work

For medical students repeating work in their medical school curriculum, a student permitted to repeat deficient work must pay full tuition and other regular fees in effect at the time of the repetition. Financial Aid is not available for

students repeating coursework. A student who requires a special matriculation will be charged 1 to 2 additional semesters of tuition to complete their education. Additional tuition is determined by the administration in terms of the amount of coursework being repeated.

Financial Aid

General Policy

The Icahn School of Medicine at Mount Sinai consistently provides as much financial assistance as possible to all students who are in good academic standing, maintain satisfactory academic progress, meet filing deadlines and require financial assistance in order to attend the School. Admission to the School of Medicine is completely independent of financial requirements. Financial aid decisions are made on the basis of documented need without discrimination due to age, race, color, language, religion, sex, sexual orientation, gender identity or expression, genetic disposition, ethnicity, culture, creed, national origin, citizenship physical or mental disability, socioeconomic status, veteran status, military status, marital status, being the victim of spousal abuse, or based on any other characteristic protected by law.

Financial Aid Application Process

All students, both entering and returning, are furnished application information in January of each year. Application materials from returning MD students must be completed and submitted by April 15th prior to the start of the fall academic year to be considered for the Icahn School of Medicine grant and scholarship aid. Entering new MD students are also expected to complete the application process by March 15th. Information on the financial aid application process is available on the [Student Financial Services website](#). Reapplication is required annually.

Financial Aid Appeal Process

Students may submit a need-based Reconsideration Request, if changes have occurred that may change a student's financial aid eligibility. If after Reconsideration Request a student wishes to make an appeal of the financial aid decision, they may request a Financial Aid Appeal. Information regarding both of these processes is found on the Office of Student Financial Services website: <https://icahn.mssm.edu/education/financial-aid/application>.

Entrance Counseling (required)

As part of their financial aid process, all students requesting student loans must complete entrance counseling. The Office of Student Financial Services will provide information to new borrowers on how to complete this process.

Exit Counseling (required)

Student loan borrowers are required to complete exit counseling prior to separating from Icahn School of Medicine. Students who have been issued loans from the Icahn School of Medicine. Each exit counseling will provide loan balances; terms of repayment, deferment and forbearance options available to borrowers. Students must complete all required exit counseling prior to being cleared for graduation. The Office of Student Financial Services will provide information to students on how to complete this process.

Debt Management

Throughout medical school the Office of Student Financial Services is available to discuss indebtedness, career choices, and money management issues. It is important to maintain contact with Icahn School of Medicine at Mount Sinai and the appropriate lending institutions to understand the terms of each loan program, and to plan for repayment. Timely loan repayments are essential in establishing a good credit rating. The extent that loan indebtedness will impact future expense budgeting can be considerable. In order to assist students in tracking loans, interest rates and various conditions of the loans, the Student Financial Services suggests that one of the websites below be consulted for debt-management information and encourages students to avail themselves of these tools. The methodology converts cumulative educational debts into estimates of approximate periodic repayments over a ten-year period. AAMC FIRST can be accessed here: https://www.aamc.org/services/first/first_for_students/

Satisfactory Academic Progress for Financial Aid

Federal Regulations require all students receiving federal financial assistance to maintain standards of Satisfactory Academic Progress (SAP). SAP is the successful completion of degree requirements according to established increments that lead to awarding the degree within published time limits. The SAP policy applies to all MD students enrolled at the Icahn School of Medicine at Mount Sinai. Information on SAP is presented in the 'Academic Difficulty' section on this handbook.

Institutional Policies and Guidelines

Campus-Wide Policies, Regulations, and Requirements

In accordance with the requirements of the Education Law of the State of New York, the Trustees of the Icahn School of Medicine at Mount Sinai have adopted rules and regulations for the maintenance of order and have established a program for their enforcement:

Violations of these policies and regulations by students shall be referred to the Dean for Medical Education or Dean of the Graduate School and be handled as set forth in this handbook.

Rules of Conduct

1. All members of the School community, which for the purposes of these Rules and Regulations shall be defined as including faculty, students, organizations, members of the staff of the School, and all visitors and other licensees and invitees are expected to obey all national, state, and local laws.
2. All members of the School community are prohibited from conduct which is proximate cause of or does unreasonably and unduly impede, obstruct or interfere with the orderly and continuous administration and operation of the School in the use of its facilities and the achievement of its purposes as an educational institution, or in its rights as a campus proprietor. Such conduct shall include, but is not limited to, that which is the actual or proximate cause of any of the following:
 - a. Unreasonable interference with the rights of others;
 - b. Intentional injury to school property;
 - c. Unauthorized occupancy of classrooms, laboratories, libraries, faculty and administrative offices, patient care facilities, auditoriums, public halls and stairways, recreational areas and any other facilities used by the School (unauthorized occupancy being defined as failure to vacate any such facility when duly requested by the Dean, an Associate Dean, Assistant Dean, Hospital Administrator of similar responsibility or chair of a department of the School);
 - d. Malicious use of or intentional damage to personal property, including records, papers and writings of any member of the School community;
 - e. Any action or situation which recklessly or intentionally endangers the mental or physical health or involves the forced consumption of liquor or drugs for the purpose of initiation into or affiliation with any organization. The penalties set forth in Part II are in addition to any penalty pursuant to the penal law or any other chapter to which the violator or organization may be subject for violation of this paragraph.
 - f. Violations of these policies and regulations by students shall be referred to the Dean for Medical Education or Dean of the Graduate School.
 - g. Nothing contained in any of the foregoing Rules and Regulations is intended to nor shall it be construed to limit or restrict freedom of speech or of peaceful assembly, or other individual rights guaranteed by the Constitution.
 - h. The administration and faculty of the School are committed to providing a safe and healthy learning environment for all students. Students should conduct themselves appropriately everywhere on the campus of Icahn School of Medicine at Mount Sinai, Mount Sinai Health System, and at affiliated institutions. Appropriate behavior is mandatory when participating in patient care or attending any functions at which patients may be present. In small group seminars, as well as during clinical activities, students are evaluated not only on their fund of knowledge and ability to use this knowledge but also on their responsibility, dependability, reliability, maturity, motivation, attitude, honesty, integrity, and ability to relate and interact effectively with others.
 - i. Equally important is the realization that one's responsibilities do not end with individual behavior but also include not tolerating inappropriate behavior among others. While formal mechanisms, outlined in

other sections, exist to provide due process for any specific allegations of inappropriate behavior, general issues should be able to be discussed freely among peers, faculty, and administration. Concerns requiring confidentiality should be discussed with the Dean of Medical Education, Dean of the Graduate School, individual faculty advisors, or through the School's Ombudsman Program.

Family Education Rights and Privacy Act

The Family Educational Rights and Privacy Act (FERPA) of 1974 and its subsequent amendments afford students certain rights with respect to their educational records. As detailed below, students have the right to:

- Inspect and review their education records
- Seek amendment of their education records if they believe them to be inaccurate, misleading, or otherwise in violation of their privacy rights
- Consent to certain disclosures of personally identifiable information contained in their education records
- File complaints with the Department of Education concerning any alleged failure to comply with FERPA's requirements

Student Access Rights

All currently registered and former students of the Icahn School of Medicine at Mount Sinai have the right to review and inspect their official education records at the School (including, for example, admissions and academic records prepared and maintained by the Office of the Registrar) in accordance with these rules. Students who wish to review their records should make an appointment with the Office of the Registrar. Access will be granted within 45 days from the receipt of the written request to inspect records.

Students have a right to a response to a reasonable request for explanations and interpretations of the student's educational records. Students seeking explanations or interpretations of their educational record may make an appointment with the Associate Dean of the Graduate School or Senior Associate Dean for Student Affairs in Medical Education, as appropriate based on the student's program. If the Associate Dean is unable to provide a satisfactory explanation, the student will be referred to the Dean for Graduate Education or Dean for Medical Education, as appropriate.

Students may not copy records unless the failure to produce copies would prevent the student from exercising his/her right to inspect and review records. A copying fee will be charged.

Limitation on Access

1. The Act limits a student's right to access information contained in his/her education records. Accordingly, the School need not permit students to view:
 - a. Financial records, including information regarding the student's parent(s), such as parental tax forms and other parental records submitted in support of a student's financial aid application or claim of New York residence.
 - b. Confidential statements and letters of recommendation placed in a student's file prior to January 1, 1975, provided that they are used for the purpose for which they were specifically intended.
 - c. Confidential letters of recommendation placed in the student's file after January 1, 1975, if:
 - i. The student has waived in a signed writing his/her right to inspect and review those letters (see below); and
 - ii. The letters are related to the student's (i) admission to an educational institution; (ii) application for employment; or (iii) receipt of an honor or honorary recognition.
2. Records of instructional, administrative and supervisory staff which are in the sole possession of such personnel.

3. Records of professional and paraprofessional personnel which are created, maintained and used solely for the purpose of treatment and are disclosed only to individuals providing the treatment. The student has the right, however, to have such records reviewed by an appropriate professional of his/her choice.
4. The Icahn School of Medicine at Mount Sinai does not require students to waive their right of access to educational records as a condition for admission to the School, for receipt of financial aid or other services or benefits from the School, or for any other purpose. Under certain circumstances, however, a student may wish to waive his/her right of access to confidential letters of recommendation. A student may do so by signing a waiver form. In this event, the student will be notified upon request of the names of persons making such recommendations and the recommendations will be used solely for the purpose for which they are intended. A waiver may be revoked in writing with respect to actions occurring after the revocation. Waiver forms are available in the Registrar's Office.

Amendments and Hearing Rights

If a student believes that his/her education records contain information that is inaccurate, misleading, or in violation of the student's rights of privacy, he or she may ask the School to amend the record. Requests for amendments shall be directed to the Office of the Registrar, which will respond to the request within a reasonable time. If the request is denied, the student will be notified of his/her right to appeal that decision as specified below.

When the request for an amendment is denied, the student may request a hearing to challenge the content of the record on the grounds that the information contained in the record is inaccurate, misleading, or in violation of the student's privacy rights. Requests for a hearing must be submitted in writing to the Associate Dean for Graduate Education or the Senior Associate Dean for Student Affairs in Medical Education (as appropriate) within 10 days of receiving the Registrar's response denying a request for amendment as discussed above.

- The hearing will be held before the Dean for Graduate Education or the Dean for Medical Education, as appropriate.
- A hearing will be held within a reasonable time after receipt of the request for hearing. The student will be given notice of the date, time, and place of the hearing.
- The student shall have a full and fair opportunity to present evidence relevant to show that the information at issue is inaccurate, misleading, or violates the student's privacy rights. The student may be assisted or represented by an individual of his/her choice, including an attorney. The role of attorneys, however, may be limited at the discretion of the Dean hearing the case.
- The decision, which shall include a summary of the evidence presented at the hearing and reasons for the decision, shall be rendered in writing within 15 business days after the conclusion of the hearing. This hearing will relate only to whether the student's record is inaccurate, misleading, or otherwise in violation of the privacy of the student, with the decision based solely on evidence presented at this hearing. The hearing cannot determine whether a higher grade should have been assigned.

If it is determined after a hearing that the record in question should be amended, the Registrar will take appropriate steps to amend the record and will notify the student in writing. If it is determined that the record is not inaccurate, misleading, or otherwise in violation of the student's privacy rights, the student shall be informed of his/her right to place a statement in the record commenting on the contested information in the record or stating why the student disagrees with the School's decision not to amend the record. This statement will be maintained as part of the record and will be disclosed whenever the part of the record to which the statement relates is disclosed.

All students have the right to file complaints to the Associate Dean for Enrollment Services concerning alleged failures by the School to comply with the requirements of the Act.

Release of Personally Identifiable Information

Disclosures with consent

- 1) The student shall provide a signed and dated written consent form before the School will disclose personally identifiable information from the student's educational record. The consent must (i) specify the records that may be disclosed; (ii) state the purpose of the disclosure; and (iii) identify the party or class of parties to whom disclosure may be made.
- 2) When a disclosure with consent is made, the School will, upon the student's request, give him/her a copy of the records disclosed.

Disclosures without consent

- 1) The Act permits the School to disclose personally identifiable information from the student's education records without the student's consent under any one of the following circumstances:
 - a. To an official or duly constituted committee of Icahn School of Medicine at Mount Sinai that requires access in connection with legitimate educational interests, including, but not limited to matters of financial aid, promotion, or consideration for election to the Lambda Chapter, Alpha Omega Alpha or other honors.
 - b. To officials of another school where the student seeks or intends to enroll. Copies of records will be made available upon request.
 - c. Disclosures in connection with financial aid for which the student has applied or which the student has received, if the information is necessary for such purposes as (i) to determine eligibility or conditions for the aid; (ii) to determine the amount of the aid; or (iii) to enforce terms and conditions of federal, state, or private regulations governing such aid.
 - d. Pursuant to a judicial order or valid subpoena. In certain cases specified by law, the School will make a reasonable effort to notify the student of the order or subpoena in advance of the compliance therewith.
 - e. In connection with certain types of litigation between the School and the student.
 - f. To parents of a dependent child as defined by the Internal Revenue Code.
 - g. In a health or safety emergency, where disclosure is necessary to protect the health or safety of the student or other individuals or as otherwise provided by FERPA.
 - h. In a directory, as set forth below.
 - i. To an alleged victim of a crime of violence, where the information disclosed is the final results of School disciplinary proceedings with respect to the crime or offense.
 - j. Disclosure in connection with certain disciplinary proceedings.
 - k. Certain disclosures to parents of a student regarding the student's violation of any federal, state or local law, or any rule or School policy governing use or possession of alcohol or controlled substances.
 - l. To authorized federal, state, or local officials and to accrediting bodies of the School.
- 2) The School will maintain a record of each request for access and each disclosure of personally identifiable information from educational records as required by FERPA regulations.
- 3) The School will make a reasonable attempt to notify the student of disclosures made pursuant to Section 1(a) and 1(c-l) above. Upon request, the School will give the student a copy of the record disclosed. A student has a right to a hearing to challenge certain disclosures consistent with the procedures outlined above.

Directory Information

The Icahn School of Medicine at Mount Sinai has designated the following information from a student's education record as "directory information," which may be disclosed under FERPA without the student's permission:

- Name

- Student Address
- Student Phone Number
- Degree Program(s) & Major Field of Study
- Degree(s) Earned and Date(s)
- Dates of Attendance
- Full-/Part-Time Enrollment Status
- Parent's Names
- Parent's Address
- Parent's Phone Number
- Academic Awards and Honors
- Icahn School of Medicine email address
- Prior Postsecondary Institution(s) Attended
- Photograph/Digitized Image
- Participation in officially recognized Icahn School of Medicine activities

Students' contact information is included in the student directory and published through Blackboard.

Preventing Disclosure of Directory Information

The Icahn School of Medicine at Mount Sinai and the Office of the Registrar will exercise discretion in the release of all directory information. In addition, the Icahn School of Medicine at Mount Sinai does not release or sell directory information to any outside entity for commercial, marketing, or solicitation purposes.

Records Kept by the Institution

Content of student files are as follows:

1. Admissions Files

- Application form
- Supplemental form
- Undergraduate & Graduate Transcripts from previous institutions
- Acceptance Letters
- Medical College Admission Test Scores

2. Academic Files (Registrar)

- Admissions File, including application, previous institution transcripts, accept letter, and test scores (once student has matriculated)
- Transcript of grades at the Icahn School of Medicine
- Final Course, clerkship, narratives, elective grades, and other evaluations
- Qualifying Exam Outcome
- Thesis or Dissertation Documentation and Outcome
- National Board Scores
- Shelf Scores
- MSPE/Dean's Letter
- Correspondence and internal communications pertaining to academic matters and actions, official changes in student status, eg. LOA, and MARC advising notes

3. Financial Aid Records

- Institutional Application
- FAFSA Forms
- CSS Profile & Need Access Forms
- Student and Parent(s) Income Tax asset Information
- Proof of Citizenship - only if flagged by Department of Education
- Selective Service Status - only if flagged by Department of Education

- Student Award Letters per academic year
- Loan Master Promissory Notes
- Miscellaneous verification documents (Non-custodial parental appeals, legal documentation of student emancipation, ward of court, etc.)
- Financial Aid Appeals forms

4. Bursar Records

- Record of Receipt of all Loans and Scholarships
- Record of cash paid and date paid

Academic Records are only those that pertain to official files kept in perpetuity in the Office of the Registrar.

Academic records that are maintained by the Office of the Registrar may include but are not limited to:

- Paper documents
- Electronic documents*
- Microfiche/Microfilm
- Film, Photographs

*The Empower Student Information System, is the current repository for the student record. It is the centralized, official school system that ensures the integrity of the student and School data. It serves as a repository for basic student information, i.e. name, family address, mailing address, school address, school email, personal email, DOB, previous schools, national test scores, program of study, credentials, courses, grades, student status and degree(s) earned.

Information Sharing and Confidentiality

The Icahn School of Medicine recognizes that confidentiality is very important to students. It is a basic right and privilege and we believe that the issue of confidentiality is part of the trust that we expect and value among students, teachers, and administrative personnel. The following clarifies the protection of information related to students:

Health Information

- All student health information is protected information. There should be no sharing of information except as provided by HIPAA for the care of the student as patient. Teachers, administrative personnel, and deans may not receive health information from students' health care providers except as provided by HIPAA.
- There is certain information that hospitals and health care facilities require as a condition of employment. That information includes PPD, immunizations, and in some cases, evidence of toxicology results. Students will be informed that that information is being shared as obtained by Student Health as composite data (we only know who does not comply with completing this information and then would deny clinical privileges but do not know the exact results).
- Toxicology screening is an institutional requirement. Any positive result will be reviewed by senior administrative representatives of the Deans (Graduate School and Medical Education). The School may require a toxicology screen from any student at any time without need for a stated reason. Failure to comply with toxicology testing in the timeframe required will result in dismissal from school.
- There are times when the Administration may ask a student to comply with an Administrative Psychiatric evaluation. When it is decided that such an evaluation is necessary, the student will be informed and will be apprised of the list of questions that will be sent to an administrative evaluator (usually a psychiatrist). Students do not have the option to decline such an evaluation when required and would be dismissed from school if they fail to comply. The information referred back to the School will be discussed with the student and will remain in the student's file which can only be opened by a Dean, the Dean's official representative, or if requested as a legal document.

Academic Information

Academic information is maintained by the School Registrar.

- A. Students have access to their academic file for review but will not be given copies of their file.
- B. The Registrar will not permit dissemination of the file information without the signed consent of a student unless required by law in accordance with FERPA Policy.
- C. Any student wishing to review their file may do so in the presence of the Registrar or Dean's Designee coordinated through the Office of the Registrar.
- D. If a student seeks counsel from a director, dean, teacher, or ombudsman, that information should remain confidential between the student and that individual.
- E. Access to a student's academic information is determined by FERPA. Only those persons (school officials) with a "legitimate educational interest" have access to all or parts of a student's academic record.
- F. Course directors, Instructors, and clerkship directors do not have access to the student file, only school officials, including, but not limited to Deans, Student Affairs personnel in the School of Medicine may access the file.
- G. School officials are defined as individuals who require access to a student's education record in order to fulfill their professional responsibility.
- H. The Empower SIS is a web based system, in which only those individuals, who have been identified with a legitimate educational interest, have access to view the student's academic information.
- I. The Office of the Registrar determines legitimate educational interest and provisions school officials within the Empower SIS, limiting access, based on their respective role
- J. Any plan to discuss information (e.g., Office of Student Affairs Representative or Program Director with one of the Dean's) should be with the student's knowledge and consent.
- K. Exceptions to this confidentiality include concerns about the safety of the student, someone related to the student, or the student's dependent. Safety concerns include suicidal ideation, homicidal ideation, harming another individual, substance dependency, behavioral or health concerns that may affect the student or others.

Medical Students as Research Participants

Any request to include Icahn School of Medicine at Mount Sinai students as potential research participants must be reviewed and approved by the Office of Assessment & Evaluation (OAE) and, following that, be approved by the ISMMS Student Council. All submissions are reviewed for:

- Relevance to the curriculum, program and/or student population
- Comparability to other research and/or scholarship requests
- Timing related to school programming and other surveys/projects
- Burden of the ask
- How participation is compensated (if applicable)
- How study participants will be selected, as described in the research proposal
- How results will be reported, as described in the research proposal (e.g., individual vs. aggregate, school identification)

In order to protect medical students and their privacy, individual student names and contact information will not be provided to investigators.

All requests should be made no later than 6 weeks prior to the planned start of the project. Full details of the project, including research proposal and official IRB documentation of approval, can be submitted here:

https://mountsinai.formstack.com/forms/request_to_survey_md_students

Questions may be addressed to Dr. Robert Fallar, Associate Dean for Assessment & Evaluation at robert.fallar@mssm.edu

Teaching and Evaluation by the School of Medicine Administration Policy

RELEVANT LCME STANDARDS:

11.1 Academic Advising

PURPOSE AND SCOPE:

To ensure that medical students can obtain academic counseling from individuals who have no role in making assessment or promotion decisions about them.

POLICY:

Members of the medical school administration are:

- Allowed to teach and evaluate students in the context of large group sessions such as lectures or large group discussions that involve the entire class
- Allowed to teach and evaluate students in electives/selective experiences
- Allowed to teach and evaluate students in small group sessions or activities only after students have had the chance to opt out of a small group that has as its preceptor a member of the medical school administration.

Members of the School of Medicine administration include, but are not limited to, the Dean for Medical Education, the Senior Associate Dean for Admissions, the Senior Associate Dean for Curricular Affairs, the Senior Associate Dean for Student Affairs, the Associate Dean for Diversity & Inclusion in Biomedical Education, the Associate Dean for Medical Student Wellness and Student Affairs, the Associate Dean for Undergraduate Medical Education Affairs, the Faculty Advisors, the Director of Student Affairs, Chair of the Promotions Committee.

PROCEDURE:

Students are informed of the faculty member's participation by the Office of Curriculum Support or the Clerkship Coordinator in advance of the course/clerkship and are given the opportunity to "opt out" of that faculty member's small group.

ACCOUNTABLE DEAN OR DIRECTOR: Senior Associate Dean for Student Affairs

APPROVED DATE: August 7, 2020

Non-Involvement of Providers of Student Health Services in Student Assessment Policy

RELEVANT LCME STANDARDS:

12.5 Non-Involvement of Providers of Student Health Services in Student Assessment/Location of Student Health Records

PURPOSE AND SCOPE:

To ensure that a provider of health and/or psychiatric/psychological services to a medical student has no current or future involvement in the academic assessment of, or in decisions about, the promotion of that student. This policy applies to all medical students, faculty, residents, fellows, other clinical staff, and current or prior clinical or familial/intimate relationship with that faculty, who provide clinical care to medical students and who also are involved with teaching or assessing medical students.

POLICY:

A provider of health and/or psychiatric/psychological services to a medical student can have no current or future involvement in the academic assessment of, or in decisions about, the promotion of that student.

Educators who are involved in student assessment and evaluation are required to certify that they have not provided healthcare to the students they are evaluating.

Additionally, faculty members who serve on a Promotions Committee must certify that they have not, and will not, provide healthcare to the students who will be reviewed by the committee.

Providers in Student Health and Student/Trainee Mental Health

The Director and providers of Student Health and the Director and physicians of Student/Trainee Mental Health Services are:

1. Allowed to teach students in the context of large group sessions such as lectures or large group discussions that involve the entire class
2. Allowed to teach students in electives/selective experiences
3. Not allowed to supervise students during any clinical rotations
4. Not allowed to teach students in any small group sessions or activities
5. Not allowed to participate in the assessment or evaluation of student performance
6. Not allowed to serve on the Promotions Committee

All other faculty

A student assigned to a course, clerkship, elective or other educational activity with a treating healthcare provider may request and will be granted an alternative assignment.

PROCEDURE:

Year 1 and 2 Course Small Group Preceptors

In advance of each course in year 1 and year 2, the Office of Curriculum Support (OCS) notifies students of the roster of faculty who may assess students in a small group in year 1 and 2 and who may also have a clinical role. Students have the opportunity to opt out of that faculty member's small group if they have a potential conflict of interest in being in that faculty member's small group. A conflict is defined as when a faculty member that is evaluating a student has a close relationship to the student, such as being a family member or having served as a current/prior physician.

Year 3 and 4 Clinical Rotations

Medical students in clinical rotations are made aware of their faculty supervisor(s) assignments four weeks prior to the start of the module by the clerkship coordinator. . Students will be provided with a roster of all educators who will teach in the clerkship for the academic year. If a student realizes they have been assigned a role with an individual faculty member that is prohibited by a current or prior clinical or familial/intimate relationship with that faculty member, it is the responsibility of the student to notify the course or clerkship director and ask to be reassigned. and report the COI via a google form The reason given for the reassignment is duality of interest; the nature of the specific duality of

interest situation need not be identified. Clerkship coordinators will inform the Department of Medical Education about any reported COI.

Faculty and residents are made aware of all clerkship students and notified four weeks prior to the start of the module by the clerkship coordinator.. Faculty will be provided with a student composite. If an individual faculty or resident is prohibited by a current or prior clinical or familial/intimate relationship with that student they must notify the clerkship director and clerkship coordinator via a COI google form who will ensure the student is not assigned to that individual faculty or resident.

All clerkship evaluation forms have an item that asks the evaluator if a potential conflict of interest may exist, again as defined above. If the evaluator checks “yes” then the clerkship director will nullify the evaluation and it will not be included in any assessment or grade.

Promotions Committee Members

Students who are required to appear before the Promotions Committee are given a roster of the members of the committee and are asked to identify any members who may present a conflict of interest. In that event, the Senior Associate Dean for Student Affairs will ask the member to recuse themselves.

Emergency Department

The Psychiatric Emergency Room and the Emergency Department have explicit [policies](#) about when medical students are evaluated clinically. The policy stipulates that any resident, fellow, or attending who have teaching or supervising responsibilities for the Student/Trainee in question will not be permitted to evaluate or otherwise provide care to him/her.

ACCOUNTABLE DEAN OR DIRECTOR: Senior Associate Dean for Student Affairs

APPROVED DATE: May 17, 2019

Guidelines for Interactions between the Icahn School of Medicine at Mount Sinai and Industry

(Pharmaceutical, Biotech, Medical Device, and Hospital and Research Equipment and Supplies Industries)

Purpose:

These guidelines are meant to protect the integrity of medical education and the care of future patients. They highlight the types of decisions with which medical students will be confronted, implicitly or explicitly, for the remainder of their professional careers. As such, the guidelines encourage critical thought about the interactions between physicians in training and industry.

Scope:

The students of the Icahn School of Medicine at Mount Sinai, while on campus, at affiliated hospitals and clinics, and during any meeting in which medical information is being transferred.

- I. Gifts and Compensation
- II. Provision of Scholarships and Other Educational Funds
- III. Support for Educational Programs
- IV. Disclosure of Relationships with Industry
- V. Training of Students Regarding Potential Conflict of Interest

- VI. Site Access by Sales and Marketing Representatives
- VII. Gifts and Compensation

A. Meals—Meals or other types of food *directly* funded by industry should not be provided at the Icahn School of Medicine at Mount Sinai. Students are encouraged to critically evaluate their acceptance of food and the circumstances under which it is proffered by industry representatives during clinical training at The Mount Sinai Hospital, Mount Sinai clinics, affiliates, and off-campus training and gathering sites.

B. Promotional Items—Promotional items such as pens, note pads, brochures, and other “reminder” items, should not be distributed at the Icahn School of Medicine at Mount Sinai. Students are discouraged from bringing such items into the School of Medicine, so as to maintain a learning environment free of industry influence. Brochures and other industry-sponsored educational material should not be used for educational purposes.

Students are asked to refer to applicable policies such as the [AMA Statement on Gifts to Physicians from Industry](#), and the Accrediting Council for Continuing Medical Education Standards [for Commercial Support](#).

C. Gifts—Medical students are discouraged from accepting gifts above and beyond aforementioned promotional items (e.g. textbooks, tickets, entertainment, etc.), or monetary compensation of any value, from industry representatives both on and off the Icahn School of Medicine at Mount Sinai campus, related or unrelated to a student’s participation in events sponsored by industry.

D. Sample Medications—Sample medications should not be distributed on the campus of the Icahn School of Medicine at Mount Sinai. Students are encouraged to critically assess the circumstances under which sample medications are used on and off-campus: who receives them, and why. Students should not accept sample medication for personal use. Sample medication is never to be sold.

II. Provision of Scholarships and Other Educational Funds

- A. A. The Icahn School of Medicine at Mount Sinai physicians and teaching staff should ensure that support of Icahn School of Medicine medical students by industry through funding mechanisms such as scholarships, reimbursement of travel expenses, or other non-research funding in support of scholarship or training, is free of any actual or perceived conflict of interest.
- B. B. Industry support must comply with all of the following:
 - a. The School of Medicine department, program, or division selects the student.
 - b. The funds are given directly to the department, program, or division and not to the student.
 - c. The department, program, or division has determined that the conference or training in question has educational merit.
 - d. The student-recipient of funds is not subjected to any implicit or explicit expectation of providing something in return for any support given.
- C. This provision may not apply to national or regional merit-based awards, which are considered on a case-by-case basis

III. Support for Educational Programs

The Icahn School of Medicine medical students should be familiar with the Standards for Commercial Support established by the Accreditation Council for Continuing Medical Education. These standards offer useful means by which to assess all forms of industry interactions, both on and off campus, and including both Icahn School of Medicine-sponsored events and other events. The standards can be found on the [ACCME website](#).

- A. On Icahn School of Medicine at Mount Sinai Campus—All educational events sponsored by industry on the Icahn School of Medicine at Mount Sinai campus must comply fully with ACCME guidelines irrespective of whether or not formal CME credit is awarded.

- B. Guidelines must include the following if CME credit is to be awarded, and are provided likewise to illustrate to students some of the decisions that affect the sponsorship and provision of information more generally:
- a. All decisions concerning educational needs, objectives, content, methods, evaluation, and speaker are made without commercial interest. (ACCME Standard 1.1)
 - b. A commercial interest is not assuming the role of a non-accredited partner in a joint sponsorship. (ACCME Standard 1.2)
 - c. All persons in a position to control the content of an educational activity have disclosed all relevant financial relationships to the provider of the CME. A relevant financial relationship is defined as one in which an individual (or spouse or partner) has a commercial interest that benefits the individual in any financial amount that has occurred within the past 12 months; and the opportunity to affect that content of CME about the products or services of the commercial interest. Failure to disclose these relationships will result in disqualification of the individual from participation in the CME activity or its planning or evaluation. (ACCME Standard 1.1, 1.2)
 - d. The lecturer explicitly describes all their related financial relationships to the audience at the beginning of the educational activity. If an individual has no relevant financial relationship, the learners should be informed that no relevant financial relationship exists. (ACCME Standard 6.1, 6.2)
 - e. All conflicts of interest should be *identified and resolved* prior to the educational activity being delivered to learners. (ACCME Standard 2.3)
 - f. Written policies and procedures that govern honoraria and reimbursement of out of pocket expenses for planners, teachers, and authors are in place. (ACCME Standard 3.7)
 - g. Product-promotion material or product-specific advertisements of any type is prohibited in or during CME activities. The juxtaposition of editorial and advertising material on the same products or subjects must be avoided. Live (staffed exhibits, presentation) or enduring (printed or electronic advertisements) promotional activities must be kept separate from CME. (ACCME Standard 4.2)
 - h. A commercial interest is not used as the agent providing a CME activity to learners, e.g., distribution of self-study CME activities or arranging for electronic access to CME activities. (ACCME Standard 4.5)
 - i. The content of format of a CME activity or its related materials must promote improvements or quality in health care and not a specific proprietary business interest of a commercial interest. (ACCME Standard 5.1)
 - j. Attendees in the audience are not compensated or otherwise materially rewarded for attendance, e.g., through payment of travel expenses, lodging, honoraria, or personal expenses. (ACCME Standard 3.12)
 - k. In addition to the aforementioned ACCME Standards, should the Icahn School of Medicine at Mount Sinai host an educational event sponsored by industry on the Icahn School of Medicine campus, the funds meant to pay for the specific educational activity should be provided to a department, program, or section and not to individual faculty.
- C. Off the Icahn School of Medicine at Mount Sinai Campus—Clinical and scientific meetings sponsored by professional societies often derive a portion of their support from industry. Such support may result in inappropriate influence by industry on the content of the meeting or on its attendees. Industry sponsorship usually adopts one of two possible forms, with different standards applying to each:
- a. Partial sponsorship of a meeting otherwise run by a professional society—Icahn School of Medicine medical students are encouraged to participate in the meetings of professional societies for educational purposes, and as an opportunity to showcase their own research. Nonetheless, students should be aware of the potential conflicts of interest at work in such meetings, and should be scrupulous in determining whether and how to attend and participate.
 - b. Full sponsorship of a meeting run by industry (including commercial education services)—Students are encouraged to pay particularly heightened attention to the content and organization of such meetings and lectures.
 - c. Students are encouraged to assess the following points when determining the academic value of any conference, lecture, or meeting:
 - i. Is financial support by industry is fully disclosed at the meeting by the sponsor, and what is the extent of that support?

- ii. Is the meeting or lecture content, including slides and written materials, determined by the speaker(s) alone?
- iii. Does each speaker provide a balanced assessment of therapeutic options, and promote objective scientific and educational activities and discourse?
- iv. Are attendees in the audience being compensated or otherwise materially rewarded for attendance through payment of travel expenses or the provision of food or gifts?
- v. Are gifts of any type being distributed to attendees before, during, or after the meeting or lecture?
- vi. Has each lecturer explicitly described their conflicts of interest, and have they been resolved?

IV. Disclosure of Relationships with Industry

- A. All Icahn School of Medicine faculty and lecturers must fully disclose any relevant past, present, or future relationships with industry at the beginning of each lecture to students.
- B. Faculty with supervisory responsibilities for students should take great care to ensure that the faculty member's actual or potential conflicts of interest do not affect or appear to affect the supervision and education of the student.

V. Training of Students Regarding Conflicts of Interest

All students will receive training regarding actual and potential conflicts of interest in interactions with industry at all levels of education and professional practice.

VI. Site Access by Sales and Marketing Representatives

- A. Sales and marketing representatives are not allowed anywhere that education or clinical care are delivered on the Icahn School of Medicine at Mount Sinai campus unless they are providing in-service training on devices and other equipment, and then only by appointment. This includes commercial educational services such as publishers and board review programs.
- B. Appointments may be made on a per visit basis at the discretion of a faculty member, their division or department, or designated medical school personnel issuing the invitation and with the approval of medical school administration.
- C. Sales and marketing representatives will be provided with a copy of these guidelines before their presentation, and will sign a statement to the effect that he or she has received and understands these guidelines. The representative will then receive a badge clearly identifying him or her.
- D. Marketing tools and other "reminder" materials will be removed entirely from any space used by sales and marketing representatives after their appointment on campus.
- E. Industry representatives will not approach medical students unsolicited at any point during their stay on the Icahn School of Medicine at Mount Sinai campus.

Due to patient confidentiality concerns, while on campus and off, medical students are not permitted to answer questions related to their patients or patient care, or facilitate access to any portion of medical records.

Acquired Immune Deficiency

The School of Medicine in concert with the other medical schools in the state has formally stated its commitment to accept as its most fundamental responsibility the care of all patients seen in its facilities, including those who are positive for the human immune deficiency virus (HIV). This commitment extends to all faculty, residents, and students. The School is equally committed to the education and counseling of all health care professionals including medical students, to eliminate misperceptions concerning the risks of caring for AIDS as well as the appropriate precautions to be taken for prevention of transmission of HIV, Hepatitis-B virus, and other blood-borne infections.

Alcohol and Drugs Policy

The following statement describes the Mount Sinai Health System's policy regarding substance abuse for all employees, which include faculty, administration, house staff, students, graduate students, fellows, bargaining, and non-bargaining unit employees. The Icahn School of Medicine has a significant interest in ensuring that the work environment is free from the hazards to patients, employees, and visitors that are created due to the unauthorized use of alcohol, drugs, or controlled substances.

The illegal sale, manufacture, distribution, or unauthorized use of drugs or controlled substances off-duty whether on or off the School of Medicine's premises, or reporting to classes, clerkships, or laboratory research under the influence of unauthorized drugs or controlled substances may constitute grounds for immediate dismissal.

The unauthorized use or possession of alcoholic beverages on the Icahn School of Medicine's premises or reporting to the School under the influence of alcohol also may constitute grounds for immediate dismissal.

The School of Medicine may in its discretion take appropriate disciplinary action up to and including termination or expulsion against anyone who has violated the above rules. In some cases, the individual in question may be referred to the institutional Inappropriate Use of Psychoactive Substances (IUPS) Committee to make recommendations for counseling, treatment and/or monitoring through Student/Trainee Mental Health or another agency. The School is under no obligation to refer an employee or student who has violated the above rules to Student/Trainee Mental Health or to a rehabilitation program. Additional information about the IUPS and processes for students who have been found to abuse substances can be found in this institutional policy:

<http://policies.mountsinai.org/web/human-resources/policies/-/policy-management/viewPolicy/83488>

Any employee or student who is suspected of being under the influence of any alcoholic beverage or drug while on duty and who refuses to be medically evaluated or to release the results of such evaluation to the School of Medicine (as employer) or appropriate administrative officer of the School will be relieved from duty and will be subject to disciplinary action up to and including dismissal.

The Drug-Free Workplace Act of 1988 requires Mount Sinai, as a Federal grant recipient and contractor, to certify that it will provide a drug-free workplace. This is accomplished by 1) providing to each employee or student engaged in a federal grant or contracts a copy of The Health System's Drug-Free Workplace policy and statement, and 2) requiring that as a condition of employment under such a grant or contract the employee will:

- Abide by the terms of this Statement; and
- Notify the Director of Human Resources and Labor Relations or his/her designee of any criminal drug statute conviction for a violation occurring in the workplace no later than five (5) days after such conviction.

A Drug-Free Awareness Program has been established to inform all employees about the dangers of drug abuse in the workplace, The Health System's policy of maintaining a drug-free workplace, the availability of drug counseling, rehabilitation and Student/Trainee Mental Health services, and the potential penalties for drug abuse violations.

Drug Testing

All incoming students are required to undergo drug/alcohol screening. Subsequently, drug/alcohol testing may be requested of any student, at any time, including:

- When concerns about substance use issues arise, or concerns about behaviors that prompt concern for substance abuse
- When an administrative evaluation is requested (see Administrative Evaluation Section below)
- When any student returns from a leave of any kind
- When a student self-reports a problem
- As part of a monitoring program for students with previous substance abuse or positive drug tests

Failure to undergo testing as requested will result in dismissal from the School.

Alcohol Policy – Levinson Student Center

The policy of the School of Medicine regarding alcoholic beverages in the Patricia and Robert Levinson Student Center is to maximize student utilization of the Center while assuring that clear policies are in place. Alcohol is permitted in the Student Center at events sponsored by student organizations or Departments within Icahn School of Medicine under the following circumstances:

- A student-run organization that is recognized by Student Council or a medical school department is sponsoring the event.
- No student or guest under the age of 21 will be served or permitted to consume any alcoholic beverage.
- Alcoholic beverages are not sold at the event.
- Alcohol must not be taken out of the Student Center into other areas of Mount Sinai.
- Alcohol should only be served by hired vendors with active liquor licenses or a student group/department that has obtained a temporary liquor license from the New York State Liquor Authority
- Serving alcoholic beverages should always be in the context of serving food and non-alcoholic beverages.
- A specific student group or department must be identified as responsible for the event.
- The responsible party will monitor the event so that anyone who is clearly intoxicated is not served any more alcohol.
- If a person has become intoxicated, steps should be taken to try and help the individual sober up prior to leaving the party.
- The responsible party monitoring the event must make certain that any person that has become intoxicated will not be allowed to drive. Cab fare should be provided, if necessary, or an escort should be provided to ensure that the person gets home safely.
- The Department of Medical Education cannot reimburse students or student groups for alcohol purchases.

Please contact Student Affairs for questions or concerns (student.affairs@mssm.edu).

Administrative Psychiatric Evaluation

The School of Medicine reserves the right to request an administrative psychiatric evaluation at any time for any reason. The evaluation request will be discussed with the student. Specific questions will be sent to the Director of Student Mental Health for assessment. The Office for Student Affairs (Medical School) or Program Director (Graduate School) will receive a written response from the psychiatrist regarding the student. The response is password protected in the student's file. The purpose of the evaluation always stems from concern for the student and a request for information to help in academic counseling. The evaluator may make specific recommendations to the School administration, which can then impose certain requirements on the student. Examples (not all inclusive) might include required intervals for psychotherapy, mandated drug testing, or repeat administrative evaluations. Refusal to comply with an administrative evaluation or with recommendations stemming from an administrative evaluation is grounds for dismissal. These evaluations are never included in the MSPE or shared with outside entities unless legally subpoenaed.

Harassment Policy

I. Statement of Purpose

Harassment has become an increasingly prominent national concern in the workplace and in academic institutions. The Icahn School of Medicine at Mount Sinai regards any behavior that is harassing, discriminatory, or abusive as a violation of the standards of conduct required of all persons associated with the academic mission of the institution. The ideal of American medical, graduate and postgraduate education is to create an environment that nurtures respect and collegiality between educator and student. In the teacher-student relationship, each party has certain legitimate expectations of the other. For example, the learner can expect that the teacher will provide instruction, guidance, inspiration, and leadership in learning. The teacher expects the learner to make an appropriate professional investment of energy and intellect to acquire the knowledge and skills necessary to become an effective physician or scientist. The social relationships required in the achievement of this academic ideal—mentor, peer, professional, staff—require the active trust of partnership, not the dependence of authoritarian dominance and submission.

Icahn School of Medicine at Mount Sinai is responsible for providing a work and academic environment free of sexual and other forms of harassment. The institution may pursue any complaint of harassment known to it in order to achieve this goal. A Grievance Committee (the “Committee”) was established in 1992 to serve as an educational resource to the medical school community on issues relevant to harassment and to address complaints of sexual harassment and other forms of harassment and abuse as defined below. Complaints about implementation of school policies concerning appointment, promotion, and distribution of resources, including notification requirements associated with these policies, will not be addressed by this Committee unless they involve, in addition to those complaints, an allegation of harassment or abuse as defined below. The Committee (and an appointed Investigative and Hearing Board (the “Board”) under Paragraph IV.C.2. below, if any) may only consider complaints of harassment and abuse brought by any faculty member, medical or graduate student, house staff or postdoctoral fellow against any other such member of the School community. Complaints by and against other employees of Icahn School of Medicine at Mount Sinai will be handled by other appropriate existing grievance mechanisms (e.g., those available through Human Resources). The Committee may act (at the Committee’s discretion) before or after other action(s) an individual may take to exercise his/her rights both within and outside the Institution.

The Committee will attempt, whenever possible, to emphasize mediation and conciliation. It will rely on discreet inquiry and trust in dealing with complaints that are brought for its consideration. Confidentiality will be maintained to the maximum extent possible consistent with the need to investigate complaints and with the requirements of the law. Full cooperation with the Committee and an appointed Board, if any, is required of all members of the community.

To ensure an environment in which education, work, research, and discussion are not corrupted by abuse, discrimination and harassment, the following statement has been created to educate members of the academic community about what constitutes harassment and about the mechanism for the receipt, consideration, and resolution of complaints.

II. Definitions of Unacceptable Behavior

Certain behaviors are inherently destructive to the relationships that are required in a community organized to provide medical and graduate education. Behaviors such as violence, sexual and other harassment, abuses of power and discrimination (age, race, color, language, religion, sex, sexual orientation, gender identity or expression, genetic disposition, ethnicity, culture, creed, national origin, citizenship physical or mental disability, socioeconomic status, veteran status, military status, marital status, being the victim of spousal abuse, or based on any other characteristic protected by law) will not be tolerated.

A. Sexual Harassment is defined as unwelcome sexual advances, requests for sexual favors, and/or other verbal or physical conduct of a sexual nature when:

1. Submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment or academic success.
2. Submission to or rejection of such conduct by an individual is used as a basis for employment or academic decisions affecting such an individual.
3. Such conduct has the purpose or effect of unreasonably interfering with an individual's work or academic performance or creating an intimidating, hostile, or offensive work or academic environment. Sexual harassment is a violation of institutional policy and of city, state and federal laws. Sexual harassment need not be intentional to violate this policy.

Examples of sexual harassment include, but are not limited to:

- [Sexual misconduct](#)
- Inappropriate sexual advances, propositions, or demands
- Unwelcome physical contact
- Inappropriate persistent public statements or displays of sexually explicit or offensive material which is not legitimately related to employment duties, course content, or research
- Threats or insinuations, which lead the victim to believe that acceptance or refusal of sexual favors, will affect his/her reputation, education, employment or advancement
- Derogatory comments relating to sex, gender, and gender identity and expression or sexual orientation

In general, though not always, sexual harassment occurs in circumstances where the harasser has some form of power or authority over the life of the harassed. As such, sexual harassment does not fall within the range of personal private relationships. Although a variety of consensual sexual relationships are possible between medical supervisors and trainees, such relationships raise ethical concerns because of inherent inequalities in the status and power that supervisors wield in relation to trainees. Despite the consensual nature of the relationship, the potential for sexual exploitation exists. Even if no professional relationship currently exists between a supervisor and a trainee, entering into such a relationship could become problematic in light of the future possibility that the supervisor may unexpectedly assume a position of responsibility for the trainee.

B. Discrimination is defined as actions on the part of an individual, group or institution that treat another individual or group differently because of race, color, national origin, gender, sexual orientation, religion, veteran status, age, disability, citizenship, marital status, genetic predisposition, or any other characteristic protected by law. Discrimination or harassment on the basis of these characteristics violates federal, state, and city laws and is prohibited and covered by this policy.

C. Abuse is defined, for purposes of this policy, as behavior that is viewed by society and by the academic community as exploitative or punishing without appropriate cause. It is particularly objectionable when it involves the abuse of authority.

Examples of behavior which may be abusive include, but are not limited to:

- Habitual conduct or speech that creates an intimidating, demeaning, degrading, hostile, or otherwise seriously offensive working or educational environment
- Physical punishment
- Repeated episodes of verbal punishment (e.g. public humiliation, threats and intimidation)
- Removal of privileges without appropriate cause
- Grading or evaluations used to punish rather than to evaluate objective performance
- Assigning tasks solely for punishment rather than educational purposes
- Repeated demands to perform *personal* services outside job description
- Intentional neglect or intentional lack of communication
- Requirements of individuals to perform unpleasant tasks that are entirely irrelevant to their education and employment that others are not also asked to perform

Constructive criticism, as part of the learning process, does not constitute harassment. To be most effective, negative feedback should be delivered in a private setting that fosters free discussion and behavioral change.

III. Grievance Committee

A. Purview

The Committee is charged with addressing any complaint of harassment or abuse brought by any member of the faculty, medical or graduate student, house staff officer, or postdoctoral research fellow against any other such member of the school community.

B. Composition of the Committee

The Committee will consist of at least 22 members. Among these will be two with counseling experience, two medical students, two graduate students, two house staff, two faculty with administrative appointments, and two research postdoctoral fellows. Faculty members of the Committee will be representative of both basic science and clinical, junior, and senior faculty. Every effort will be made to have the Committee reflect the full diversity of the medical school population. The Chairperson of the Committee (the "Chairperson") shall be a faculty member with experience in counseling and who does not have an administrative appointment. All members of the Committee, including the Chairperson, will be appointed by the Dean after consultation with relevant groups in the School. Faculty will serve staggered three-year renewable terms; students, postdoctoral fellows and house officers will serve renewable one-year terms.

IV. Grievance Procedures

- A. Any member of the faculty, any medical or graduate student, house officer or postdoctoral research fellow who believes that he or she has been harassed or abused by any other such member of the School community may contact any member of the Committee or the Chairperson to seek advice, or may submit a written complaint to the Committee. The Committee member contacted can discuss the matter with the complainant, advise the complainant of his/her alternatives in pursuing the complaint, including, if the complainant agrees, (and where permitted by law), helping the complainant to resolve the complaint informally without revealing the complainant's name. Such help may include, but is not limited to, assisting the complainant in drafting a letter to the alleged offender asking that he/she stops the behavior, or coaching the complainant in preparation for a conversation with the alleged offender. The complainant may ask the Committee member to meet directly with the person accused to seek a resolution. If the complaint includes an alleged violation of law, the Committee member initially contacted *must* bring the complaint to the full Committee, the complaint must be fully documented and investigated, and a report made to the Dean.
- B. Upon request of the complainant to the Committee member originally contacted, or upon receipt of written complaints to the Committee, or when required by law, the complaint, with the names of the complainant, respondent and department withheld, will be discussed by the Committee at its next regular meeting.
- C. Following discussion of the complaint, the Committee has two options:
 - a. It can decide that even if the allegation is true, it does not constitute harassment or abuse. The complainant will be notified of the finding and can be offered guidance and/or assistance in resolving the matter, or be referred to another, more appropriate venue, such as Human Resources, the Faculty Relations Committee or a Tenure Review Committee to pursue the complaint.
 - b. It can decide that the allegation is sufficiently serious to warrant further investigation. Unless previously submitted, the complainant will be requested to submit a full written account of the complaint. Upon receipt of the written complaint, the Chairperson will appoint a five-member Board and two alternates.

The Chairperson will serve as chair of the Board (or, in case of conflict of interest or other inability to serve, appoint another Committee member) and will appoint at least four additional individuals and at least two alternates to consider the complaint. Students, postdoctoral fellows, and house staff members are to be excluded from the Board in cases involving a faculty member alleging harassment by another faculty member. In cases involving a student, postdoctoral

fellow, or house staff (either as an accuser or accused), at least one of the members of the Board will be from the same group. Each Board will have at least one member with experience in counseling, and at least three faculty.

D. Upon selection of the Board, the complainant will be notified of the names of Board members, and will have 48 hours from receipt of such notification to challenge, in writing, any member for cause. The respondent will be notified that a complaint has been brought against him/her, the name of the complainant, the nature of the complaint and the names of the members of the Board. The respondent shall also have 48 hours from receipt of notification to challenge, in writing, any member of the Board for cause. In the event of a challenge, the Chairperson will decide on the merits and replace Board members if necessary. In the event that the Chairperson is unable to appoint a sufficient number of members not disqualified for cause, the Dean will appoint additional members.

E. Investigative and Hearing Board Procedures

The preliminary stages of the investigation may consist of meetings of one or more members of the Board with the complainant, respondent and other members of the community who might have relevant information. In the event that preliminary meetings have been held, all information obtained in these meetings will be shared with the entire Board. In all meetings, confidentiality will be stressed.

The respondent will receive the full written complaint with the supporting documentation provided by the complainant to the Board and will be afforded two weeks to provide a written response. This response will be distributed to the Board and provided to the complainant.

The Board will then hold one or more hearings, which the complainant and respondent will attend, either individually or together, along with any other witnesses the Board deems relevant to the complaint. At the hearing, each of the parties may be accompanied by an advisor, who is a member of the Mount Sinai community, but who is *not a lawyer*, and who will not function as an advocate during the hearing.

At the close of the hearing(s), the Board will deliberate the findings without the presence of either the complainant or the respondent.

Upon concluding its deliberations, the Board will vote on whether or not there has been a violation of this policy based on a majority vote. Recommendations for remedial actions will be discussed. A full report will be drafted, including the findings, vote and recommendations of the majority. It will then be submitted to the Dean.

The Board's written report will include:

1. A determination that a violation of this policy did or did not take place
2. A listing of its findings of fact
3. A summary of the written submissions of the parties
4. A summary of testimony at the hearing
5. A summary of evidence gathered during the investigation
6. The conclusions it has drawn from this material
7. Its recommendations for action to be taken by the Dean.
8. The Board may recommend sanctions based on the severity of the offense.
9. Sanctions may include, but are not limited to, verbal reprimand, written reprimand, change in job responsibilities, suspension, discharge, and expulsion.

The Board and/or the Committee may, at their discretion, modify the Grievance Procedures depending on the nature of a particular complaint.

F. Dean's Review

The Dean may accept or reject conclusions and/or recommendations of the Board. However, in the event the Dean does not accept either the Board's conclusions or its recommendations, he/she will meet with the Board to discuss the reasons for the rejection before recording a final decision on the matter.

The Dean will convey his/her decision in writing to the complainant, respondent and the Board.

V. Protection from Retaliation

All individuals involved in registering a complaint, serving as representatives for the complainant or respondent, as witnesses, or on the Committee will be free from any and all retaliation or reprisal or threats thereof. This principle applies with equal force after a complaint has been adjudicated. Upon submission of a complaint or threat of retaliation, the Committee will review the facts and recommend appropriate action.

VI. Reevaluation of Procedures

The Committee will review the grievance procedures periodically. Proposed changes, approved by a majority of the Committee, must be reviewed and approved by the Office of the General Counsel before being implemented.

Sexual Misconduct Policy

For further information regarding the Sexual Misconduct Policy, please visit the School's [Student Handbook and Policies web page](#).

Student Mistreatment Policy

This policy is meant to clarify expectations for educator actions and behaviors and to specify how learners can report mistreatment as well as how the relevant overseeing party in Medical Education analyzes and acts upon reports.

The Icahn School of Medicine at Mount Sinai (ISMMS) is dedicated to providing its students, postdocs, residents, faculty, staff and patients with an environment of respect, dignity, inclusion, trust, support, and protection of civil and professional discourse, free of mistreatment, abuse, or coercion, and without fear of retaliation.

Educators (defined broadly to include anyone in a teaching or mentoring role, including faculty, postdocs, residents, fellows, nurses, staff, and students) bear significant responsibility in creating and maintaining this environment. As role models and evaluators, educators must practice appropriate professional behavior toward, and in the presence of, students and trainees, who are in a particularly vulnerable position due to the formative and dependent nature of their status.

These guidelines supplement the institutional policies on harassment, grievances and sexual misconduct; will assist in developing and maintaining optimal learning environments; and encourage educators, students and trainees alike to accept their responsibilities as representatives of the ISMMS in their interactions with their colleagues, patients, and staff.

Mistreatment interferes with the learning environment, adversely impacts well-being and the trainee-mentor relationship, and has the potential for negatively impacting patient care and research. Inappropriate and unacceptable behaviors promote an atmosphere in which mistreatment is accepted and perpetuated in medical and graduate education.

Everyone at the ISMMS deserves to experience a professional learning and working environment. This policy focuses on the mistreatment of students and trainees.

While individuals might perceive behaviors differently, examples of mistreatment include, but are not limited to being:

- Publicly embarrassed or humiliated
- Threatened with physical harm or physically harmed
- Required to perform personal services
- Subjected to offensive remarks related to gender, sexual orientation, nationality, race or ethnicity
- Denied opportunities for training or rewards based upon gender, sexual orientation, nationality, race or ethnicity
- Subjected to lower evaluations or grades solely because of gender, sexual orientation, nationality, race or ethnicity
- Subjected to unwanted sexual advances
- Asked to exchange sexual favors for grades or other rewards
- Subjected to the threat of revoking visa status for foreign nationals

ISMMS has a zero tolerance policy towards mistreatment. Zero tolerance means that all reported incidents are scrutinized and result in an action plan. Although egregious or persistent mistreatment may require disciplinary action, we recognize in episodes of mistreatment an opportunity to develop, improve, and remediate unprofessional behaviors that detract from a learning and working environment we can all be proud of.

This mistreatment policy is closely aligned with our institution's Cultural Transformation efforts, the medical school's Racism and Bias Initiative, and related policies.

Reporting mechanisms

There are several ways for learners to report mistreatment. Options include real-time mechanisms (either through the Student Mistreatment Resource Panel or the Compliance Hotline) and mechanisms for periodic review (like course evaluations or periodic surveys.) All reports, regardless by real-time or periodic review will be reviewed by respective office that oversees the learner (except those received by the Ombuds Office, which are strictly confidential) Reports of mistreatment that are egregious or part of a worrisome trend will be reported to the Mistreatment Committee immediately for adjudication. All other reports will be reviewed by the Mistreatment Committee quarterly. The person submitting a real-time report can also designate whether they want to have their concern addressed immediately or delay the review until a reasonable period of time has passed.

Reporting for aggregate review:

- Course evaluations: course evaluations provide an opportunity for students to anonymously report incidents of mistreatment. Students may also choose to speak to Course Directors directly about concerns related to mistreatment. Course Directors can offer recommendations or refer as appropriate.
- Clerkship evaluations: Students evaluate faculty and residents with whom they have worked through end-of clerkship evaluations. The reporting mechanism reminds students that their report is anonymous, asks who the individuals involved were, the type of mistreatment, additional details, and if the student reported the incident during their rotation. The Senior Associate Deans of Student Affairs and Curricular Affairs review these data quarterly. They aggregate and share the data with each clerkship director. Additionally, the Mistreatment Resource Panel reviews these data at each meeting. Clerkship evaluations are anonymous for the complainant and the data will be aggregated and de-identified when reviewed.

Real-time reporting:

- Clerkship Director(s): Medical students in Year 3 or Year 4 are encouraged to speak with their Clerkship Directors directly. Clerkship Directors will investigate as appropriate and submit a report to the Senior Associate Deans for Undergraduate Medical Education on a regular basis summarizing cases and outcomes. When possible, student identity will be withheld in such reports to ensure anonymity of students submitting a complaint.
- Faculty Advisors and Deans: Students can report concerns to any of their instructors, Faculty Advisors, mentors or Deans. Each serves as a student advocate and will provide recommendations or refer as appropriate.

- Mistreatment Resource Panel: Students may report mistreatment directly to the Mistreatment Resource Panel by emailing studentmistreatmentpanel@mssm.edu or contacting their mistreatment class representative directly
- Office of the Ombuds (<https://icahn.mssm.edu/about/ombuds-office>, ombudsoffice@mssm.edu): The Ombuds Office provides neutral, confidential, and informal assistance in conflict resolution. The Ombuds Office follows best standards of practice that are necessary to promote fair and equitable outcomes.
- Office of Human Resources
- Compliance Hotline and real-time reporting: students have the option to call the hotline or fill out an online form: <https://icahn.mssm.edu/education/students/compliance/online> Reports are then aggregated and reviewed by the Mistreatment Committee quarterly.
- Title IX Officer: for mistreatment that includes possible sexual misconduct.

Triage

A Mistreatment Committee overseeing medical school, graduate school, GME, and post-doctoral mistreatment will meet quarterly. The committee membership includes the Dean for GME, Dean for Medical Education, Dean of the Graduate School of Biomedical Sciences, Dean for Diversity Affairs, CWO, Dean for Gender Equity in Science and Medicine, Chair of the Physician's Wellness Committee, MSH Chief Medical Officer, representative from Human Resources, student mistreatment reps, postdoctoral fellow reps, and housestaff reps.

This committee will review all reports of mistreatment and cross-reference them across historical reports from the Graduate School, UME, GME, and ISMMS HR.

An ad hoc sub-committee will meet to review any report of mistreatment that is felt to be egregious and may require an immediate response. This ad hoc committee will also undertake formal investigation of the mistreatment when appropriate, and report its findings to the full committee.

The committee's determinations will fall into one of three categories:

- Not mistreatment: no response needed, internal file in relevant area of education for future reference
- Mistreatment: Graded response below
- Egregious mistreatment potentially requiring discipline: formal investigation

If the mistreating party is not named, the report will be forwarded to the Chair of the relevant department and the Dean. The Chair will collaborate with the Dean for UME and/or Dean of the Graduate School and/or Dean for GME on improvements to the learning environment (may include special grand rounds, consultation with the CWO, Physician Wellness Committee, Employee Health Service, leadership of ODI, Dean for Women's Equity)

Graded Response Policy

Mistreatment can range from a single, first-time episode that is not egregious, to persistent low-grade mistreating behavior, to single incidents so egregious that they require disciplinary action. Below is the range of possible responses, each of which will be tailored to the circumstances of the mistreatment.

- Monitoring the behavior of the person accused of mistreatment
- Mandatory meeting with a member of the Mistreatment Committee
- Formal letter to Chair and Dean of the School of Medicine, mandatory meeting with the Chair
- Formal letter to Chair and Dean of the School of Medicine, mandatory meeting with the Chair as well as the Dean for UME and/or Dean of the Graduate School and/or Dean for GME, and/or the CMO. May or may not require referral to the Physician Wellness Committee, Employee Health Service, or Student-Trainee Mental Health
- Egregious mistreatment or a pattern of mistreatment despite remediation may result in disciplinary action, up to and including dismissal.

Closing the loop

Quarterly reports sent to students, residents, postdoctoral fellows, the Dean, all chairs, CMOs, and hospital presidents, head of Nursing, head of Social Work.

ACGME and GQ data shared with students, residents, postdoctoral fellows, the Dean, all chairs, CMOs, and hospital presidents, head of Nursing, head of Social Work.

Complainant report-back meeting with a representative of the Mistreatment Committee if the complainant's identity is known.

Protection from Retaliation

Retaliation (including but not limited to adverse effects on student evaluation) against individuals who bring forward complaints of mistreatment or participate in investigations of complaints of mistreatment is strictly prohibited and will not be tolerated. Concerns about retaliation should be reported to the 'mistreatment committee' for investigation

Affirmative Action Policy

It is the policy of the Icahn School of Medicine at Mount Sinai that all decisions regarding educational and employment opportunities and performance are made on the basis of merit and without discrimination because of age, race, color, language, religion, sex, sexual orientation, gender identity or expression, genetic disposition, ethnicity, culture, creed, national origin, citizenship physical or mental disability, socioeconomic status, veteran status, military status, marital status, being the victim of spousal abuse, or based on any other characteristic protected by law.

In keeping with our continuing efforts to achieve a broadening of the representation of women and minority groups throughout the medical school, we have:

- A. Developed an Affirmative Action Program which details actions designed to realize the School's commitment to equal educational and employment opportunities.
- B. Insured our compliance with Federal, State, and Local laws and regulations implementing equal opportunity objectives by meeting the spirit as well as the letter of the law and contractual requirements.

We cannot overemphasize our commitment to the realization of these goals. Every decision affecting faculty, house staff, fellows, graduate students, employees, medical students, and other members of the medical school community rests solely on demonstrably valid criteria of merit, competence and experience.

Additional information concerning the Icahn School of Medicine at Mount Sinai's Affirmative Action Program can be found through the Human Resources Department of the Mount Sinai Health System.

Reporting Racism and Bias via the Medical Student Compliance Hotline

Everyone is required to come forward with any information regarding an actual or possible violation of the Code of Conduct or institutional policy, and cooperate fully in the investigation of any alleged violation.

Reports should be made either in person, by telephone or in writing to any of the following:

- Your clerkship director
- Your Site Director

- The Senior Associate Deans of Curricular Affairs and Student Affairs
- The Medical Student Compliance Hotline 1-800-853-9212 available 24 hours a day, 7 days (including holidays to discuss concerns about possible violations of the law or institutional policy. Callers can remain anonymous and there shall be no reprisals for good faith reporting or possible violations of the Code.

Upon reporting, your concerns will be reviewed and assessed by the appropriate individual(s). If you would like to obtain further information regarding the status of your concern(s) please contact the Compliance office directly.

Mount Sinai Health System Social Media Guideline

Social media are internet-based applications which support and promote the exchange of user-developed content. Some current examples include Facebook, Wikipedia, and YouTube. Posting personal images, experiences and information on these kinds of public sites poses a set of unique challenges for all members of the Mount Sinai community, including employees, faculty, house staff, fellows, volunteers, and students (collectively “Personnel”). All personnel have responsibility to the Institution regardless of where or when they post something that may reflect poorly on Mount Sinai. Mount Sinai is committed to supporting your right to interact knowledgeably and socially; however these electronic interactions have a potential impact on patients, colleagues, Mount Sinai, and future employers’ opinions of you. The principal aim of this Guideline is to identify your responsibilities to Mount Sinai in relation to social media and to help you represent yourself and Mount Sinai in a responsible and professional manner.

Guideline

The following Guideline outlines appropriate standards of conduct related to all electronic information (text, image or auditory) that is created or posted externally on social media sites by Personnel affiliated with Mount Sinai. Examples include, but are not limited to: text messages, media messaging service (MMS), Twitter®, Facebook®, Linked-In®, YouTube®, and all other social networks, personal and organizational websites, blogs, wikis, and similar entities. This Guideline applies to future media with similar implications. It also applies whether Personnel are posting to: Mount Sinai-hosted sites; social media in which one’s affiliation is known, identified, or presumed; or a self-hosted site, where the views and opinions expressed are not intended to represent the official views of Mount Sinai.

Reference to Other Policies

All existing policies of the Mount Sinai Health System apply to Personnel in connection with their social media activities. A list of relevant policies is included at the end of this Guideline.

Best Practices

Everyone who participates in social media activities should understand and follow these simple but important Best Practices:

Take Responsibility and Use Good Judgment. You are responsible for the material you post on personal blogs or other social media. Be courteous, respectful, and thoughtful about how other Personnel may perceive or be affected by postings. Incomplete, inaccurate, inappropriate, threatening, harassing or poorly worded postings may be harmful to others. They may damage relationships, undermine Mount Sinai’s brand or reputation, discourage teamwork, and negatively impact the institution’s commitment to patient care, education, research, and community service.

Think Before You Post. Anything you post is highly likely to be permanently connected to you and your reputation through Internet and email archives. Future employers can often have access to this information and may use it to evaluate you. Take great care and be thoughtful before placing your identifiable comments in the public domain.

Protect Patient Privacy. Disclosing information about patients without written permission, including photographs or potentially identifiable information, is strictly prohibited. These rules also apply to

deceased patients and to posts in the secure section of your Facebook page that is accessible by approved friends only.

Protect Your Own Privacy. Make sure you understand how the privacy policies and security features work on the sites where you are posting material.

Respect Work Commitments. Ensure that your blogging, social networking, and other external media activities do not interfere with your work commitments.

Identify Yourself. If you communicate in social media about Mount Sinai, disclose your connection with Mount Sinai and your role at the Health System. Use good judgment and strive for accuracy in your communications. False and unsubstantiated claims, and inaccurate or inflammatory postings may create liability for you.

Use a Disclaimer. Where your connection to Mount Sinai is apparent, make it clear that you are speaking for yourself and not on behalf of Mount Sinai. A disclaimer, such as, "The views expressed on this [blog; website] are my own and do not reflect the views of my employer," may be appropriate.

Respect Copyright and Fair Use Laws. For Mount Sinai's protection as well as your own, it is critical that you show proper respect for the laws governing copyright and fair use of copyrighted material owned by others, including Mount Sinai's own copyrights and brands.

Protect Proprietary Information. Do not share confidential or proprietary information that may compromise Mount Sinai's business practices or security. Similarly, do not share information in violation of any laws or regulations.

Seek Expert Guidance. Consult with the Marketing & Communications Department if you have any questions about the appropriateness of materials you plan to publish or if you require clarification on whether specific information has been publicly disclosed before you disclose it publicly. Social media may generate interest from the press. If you are contacted by a member of the media about a Mount Sinai-related blog posting or Health System information of any kind, contact the Press Office, a division of the Marketing & Communications Department, at 212-241-9200 or newsmedia@mssm.edu

Failure to abide by Mount Sinai policies may lead to disciplinary action, up to and including termination or expulsion.

Applicable Policies:

These policies include, but are not limited to: Use or Disclosure of Protected Health Information (PHI) or Confidential Mount Sinai Materials; Computer Use Policy; Use of Mount Sinai's Trademarks and Proprietary Information; Electronic Communications; Confidentiality of the Medical Record; Camera and Video Recorder Use; Portable Electronic Devices; Human Resources Policies 13.5 (Electronic Mail/Email) and 13.6 (Internet Use); and all professionalism policies and codes of conduct. Policies not listed above that are in the Human Resources Manual, the Faculty Handbook, the House Staff Manual, the Student Handbook and the Bylaws of the Hospital Staff also apply.

The following are fictional use-case examples of social media and blogging activities and an explanation of their appropriateness as per the Mount Sinai Health System Social Media Guideline:

1. **A patient attempts to "friend" an attending physician on Facebook.** This is almost always inappropriate, unless the doctor-patient relationship has ended. Even after the doctor-patient relationship has ended, it would be inappropriate to discuss health-related information. (Best Practice 3)
2. **A patient comments on a Mount Sinai physician's blog and discloses protected health information with the expectation that the Mount Sinai physician will continue the discussion.** Any health-related discussions by email with patients require a written consent. Similarly, social media discussion with a patient should not directly address health concerns of individual patients. (Best Practice 3)
3. **A medical student "tweets" that he just finished rounds with the residents on a patient and describes the clinical findings of that patient.** It is difficult to be certain that information disclosed in the Twitter® post is not

identifiable to that particular patient. The best type of posting would include very general information. Other posts by the same student could indicate his/her medical school and current rotation, leading to circumstances that indirectly identify the patient, such as by naming a very rare disease. (Best Practice 3)

4. **A medical student writes in her blog, naming an attending physician who did minimal teaching on rounds and recommending that other students not take clinical electives with that physician.** Legitimate critique of an educational activity is appropriate, so long as professionalism is maintained. There are more effective and less public mechanisms for relaying this type of information, and the student may be counseled accordingly. (Best Practices 1, 2)
5. **A graduate student posts to his “wall” on Facebook that half of the class was sleeping during Dr. X’s lecture on biostatistics.** This is very similar to the use case above. (Best Practices 1, 2)
6. **A pediatric resident posts (on her Facebook wall) a picture of a baby who was just discharged from her service, expressing joy, best wishes to the family, and congratulating everyone involved in this excellent patient outcome.** Without written patient/representative consent, this is a clear violation of patient confidentiality, even if the patient is not named. (Best Practice 3)
7. **A laboratory technician blogs that the laboratory equipment he is using should have been replaced years ago and is unreliable.** The public disclosure of such information increases the liability for the Health System and is clearly unprofessional. There are legitimate and confidential mechanisms for improving quality at the Health System. (Best Practices 1, 2)
8. **A graduate student wearing a Mount Sinai t-shirt is tagged in a photo taken at a local bar and posted on a friend’s Facebook page. The graduate student is clearly inebriated.** The two issues are that: (1) the Mount Sinai logo identifies the affiliation to the institution; and (2) the unprofessional behavior of the student is available for all to see, including future employers and potential patients of Mount Sinai. The graduate student did not post the photo, but should do everything possible to have the photo removed and remove the tagging link to the student’s own Facebook page. (Best Practices 2, 4)
9. **A postdoctoral fellow blogs that her laboratory technician wears too much cologne, has terrible taste in clothes, and takes overly long lunch breaks.** This is an inappropriate forum and set of comments and demonstrates unprofessional behavior by the post-doctoral fellow. There are legitimate and confidential mechanisms for addressing valid concerns in the workplace. (Best Practices 1, 2)
10. **An oncology nurse practitioner uses an alias and blogs that Mount Sinai has the lowest bone marrow transplantation complication rate in the world.** This may be a violation of Federal Trade Commission regulations that prohibit false or unsubstantiated claims, and does not disclose the employee’s material relationship to Mount Sinai. (Best Practice 6)
11. **An applicant to the School of Medicine is given access to an Icahn School of Medicine blog to comment on the experience. The applicant writes that another medical school in NYC is obviously more prestigious and has better housing.** Mount Sinai has no recourse against non-affiliated individuals. The administrator of the blog should have established policies and procedures for editorial procedures. If the blog posting meets these editorial guidelines, then the blog posting should remain. It is likely that others will debate the original comment and place Icahn School of Medicine’s reputation and housing status in context.
12. **A medical student creates a social media website to discuss medical knowledge (e.g., "Cardiology Interest Group" on Facebook®)** This is a learning community environment, in which medical knowledge is exchanged, shared and discussed. While the goal is laudable, there are still risks. A disclaimer is necessary, since postings may be incorrect, taken out of context, or improperly referenced. The moderator should take precautions to prevent the posting of information potentially identifiable to a particular patient. (Best Practices 1, 3, 6, 7)

Medical School Addendum to the Social Media Policy

As stated in the Institutional policy, posting personal images, experiences and information on public websites poses a set of unique challenges for all members of the Mount Sinai community. We have developed additional guidelines below to assist the navigation online relationships, sharing of information and the challenges that come with an online presence.

1. **Student, Faculty and Staff Interaction.** Students, Faculty and Staff should be respectful when requesting or contacting each other on social media. It is important to consider that the person being contacted may have professional/personal boundaries and may not consider relationships on social media to be appropriate.
2. **Posting on social media.** When posting on social media or viewing/sharing/liking on these platforms, keep in mind that anyone may be able to view these materials (including those you are friends with and potential future employers). Refer to the Institutional Policy above for more information.
3. **Interaction on social media.** By connecting on social media, you acknowledge that you are engaging with each other outside the professional boundaries of the educational environment. It is important to consider that individuals have differing viewpoints, and you should engage in respectful and professional conversations.
4. **Contacting patients or their family members.** Students, Faculty and Staff should never contact patients or their family members on social media. For more case scenarios about patient interaction on social media and HIPAA guidelines, please see the Institutional Policy above.

Infection Control

All students are held to The Mount Sinai Health System's Infection Control Policies and Procedures. During orientation, students will be introduced to these policies and procedures (further training is coordinated by each degree program).

Students who experience needle stick accidents and accidental blood/body fluid in the School of Medicine will be supported (an exposure may be a percutaneous injury, such as a needle stick, cut with a sharp object or bite, contact of mucous membranes, contact of tissue, contact of skin when the exposed skin is chapped, abraded, or afflicted with dermatitis, or the contact is prolonged or involving an extensive area with blood or tissue or body fluids.). It is expected that students follow the published protocols immediately as anti-retroviral therapy for HIV exposure, if recommended, should commence immediately. Exposure to hepatitis B or C may require therapy or further follow-up. Care, evaluation, and expert advice must be available to students regarding relative risks, options for therapy, and follow-up.

Coordination of affiliate sites has been accomplished so that students have a clear idea of the protocol to follow and students receive state-of-the-art care. Students must attend annual seminars conducted by infection control experts and documentation of attendance will become a permanent part of the student's file. Students must follow protocol after a needle stick or other blood/body fluid exposure.

All policies for Infection Control at the affiliates maintain standards which are reviewed regularly by the infection control experts at the Icahn School of Medicine at Mount Sinai and the Division of Infectious Diseases of the Department of Medicine.

All exposures should be reported to Student Health.

Learning Resources

Programs and Resources for Academic Excellence

The Office of Student Affairs works with medical students around adjustment to medical school, study strategies and effective ways to make the most out of courses, clerkships and study resources.

The Director of Programs and Resources for Academic Excellence has available office hours on MARC, or can be reached by email or phone: Lauren Linkowski, Ed.D, lauren.linkowski@mssm.edu, 212-241-1425.

Senior Tutors

The Senior Peer Tutoring program aims to provide more intensive support to students who need assistance beyond a single course or who require remediation in course work. The program also serves students who need help with clinical skills or clinical reasoning. The faculty advisor arranges for referrals to senior tutors, who are fourth-year medical students who have had intensive training in recognizing and addressing learning barriers and in helping students develop the tools to improve their performance.

USMLE Step Preparation

USMLE Step 1 Preparation

Resources: In an ongoing effort to make the most useful Board resources accessible to all students, every second year student will be given a 6-month subscription to the UWorld question bank beginning in January and a 12-month subscription to Pathoma. Students will also receive a voucher for a free NBME CBSSA practice exam to use when starting dedicated study.

NBME Customized Assessments: To support students with board-style questions and resources, first and second-year students will have the option to take NBME Customized Assessments several times each year. NBME Customized Assessments are exams created by course directors from an NBME bank of basic science questions. These assessments are not used in the grading process; students can use their results to assess and proactively address their strengths and challenges with content and test taking. The Department of Medical Education monitors students' needs and may add to or change these resources accordingly

USMLE Step 1 Review Course: Each May, at the start of the dedicated study period for Step 1, a board-review course is offered to all students free of charge. An external test preparation and tutoring company delivers the course. Sessions review question strategy, high-yield content in a variety of subjects, and advice on how to study in dedicated. Students may attend in person, or watch recordings online.

USMLE Step 2 Preparation

Resources: Every third-year student will be given a 12-month subscription to the UWorld question bank, considered one of the most useful tools for success on NBME Shelf exams and Step 2 CK.

USMLE Step 2 CK Review Course: Each July, at the end of third year, a board-review course for Step 2 CK is available to students for elective credit, free of charge. The course is delivered by an external test preparation and tutoring company and reviews high yield topics in each discipline on the exam, as well as test-taking strategy. All students may access course materials and recordings online.

Major Life Events and Personal Circumstances

Medical school is challenging, both mentally and physically, and students may face situations where they have to balance the demands of the curriculum with major life events or personal circumstances that also require attention, care and energy. These situations include the birth or adoption of a child, a major personal illness, or an illness of a loved one. How to balance personal demands and academics requires careful consideration and planning. At times, the best option for a student may be to take a leave of absence until the student can more fully engage in the curriculum (see section “Leave of Absence.”) Other times it may be better to remain enrolled in school with modified attendance expectations and with additional support services in place. The Department of Medical Education is committed to engaging with students to create viable approaches to situations as needs arise. It is essential that students be open and proactive in these discussions, and the Department of Medical Education will likewise strive to be fair and transparent.

Any modified educational plans must involve discussion with and approval from the Senior Associate Dean for Student Affairs. Plans may require input from Enrollment Services and Financial Aid, as well as from course and clerkship directors when relevant.

Leave of Absence

Overview

Life circumstances may require students to take time away from courses or rotations. When the need for time off is limited (see below), students may remain enrolled and will be permitted excused absences (see excused absence policies). If the time away is extensive or indeterminate, a leave of absence (LOA) may be considered. A LOA is a period of temporary non-enrollment. A LOA constitutes a mutual agreement between the School and a student with regard to utilization of time during the leave, as well as the requirements that must be met prior to reentering the curriculum. All requests for a LOA are made directly to and granted at the discretion of the Office for Student Affairs. Note, a year off focused on research falls under a Scholarly Year and is referenced in a separate section.

Year 1 and 2 courses are only offered once per year and have prerequisites, and all requirements in the first semester must be completed before moving on to the second semester. Because of the schedule and volume of material, having to spend significant time away from studying and mandatory sessions may place a student at risk of poor academic performance. In Years 1 and 2, the Office for Student Affairs typically grants up to two (2) weeks of excused absences for students who require time off to attend to personal circumstances, followed by a return to all coursework thereafter. Any need for time off beyond two (2) weeks may prompt the consideration of a LOA. In the event of a LOA, the student would return to courses the next academic year where the student had left off.

In Year 3 or Year 4, excused absences longer than two days will require students to make up the missed parts of a rotation. A student who requires more time off may have up to eight (8) weeks, schedule permitting. In that event, clerkships may need to be rescheduled but students may remain enrolled. Anything longer than eight weeks may affect the student's ability to graduate on time and may require a LOA, which may be granted for up to one year. Based on when the leave is taken, the student may be required to make up parts or all of the rotation missed. The length of the leave may affect when a student is able to graduate.

LOAs may be Medical, Personal, or Administrative. See below for details.

Medical LOA

Either the student or Student Affairs may initiate a medical LOA. A medical LOA may require a physician's endorsement and/or an administrative psychiatric or medical evaluation. The term of the leave is up to one year. The leave may be extended for a second and final year at the discretion of the Office for Student Affairs upon recommendation of a

physician. All students on medical LOA are required to have health insurance and are eligible to continue with the School's student health insurance plan.

<https://icahn.mssm.edu/education/students/registrar/medical-forms>

Personal LOA

A personal LOA enables a student to take time off to address issues of a personal nature, including those related to the health and well-being of a family member or partner. A LOA may also be granted for issues related to childbirth, adoption, or other parental responsibilities.

A personal LOA will not be granted for non-health or non-family related circumstances (for example to pursue a time-limited opportunity in athletics or other interests) until after the completion of the first semester of Year 1. Personal leaves for such non-extenuating circumstances may not be taken at any time when the student is not in good academic standing, as defined in the Academic Standing Policy, or in Serious Academic Status, as defined in the Academic Status Section.

Ordinarily, personal leaves may not exceed one year; however, requests to extend a personal leave into a second and final year will be considered under exceptional circumstances.

<https://icahn.mssm.edu/education/students/registrar/medical-forms>

Administrative LOA

A LOA can also be administrative. An Administrative LOA is mandated by the Department of Medical Education and is usually as the result of a student not complying with school's administrative or academic requirements.

<https://icahn.mssm.edu/education/students/registrar/medical-forms>

Documentation of LOAs

The dates for all LOAs will be noted on the Transcript and the MSPE. The reason for the LOA will not be included in these documents, with the exception of an Administrative LOA, which will be designated as such on the transcript and MSPE.

Financial Implications of LOA

To be eligible to receive federal and institutional student aid, the student must meet and maintain the School's standards of satisfactory academic progress. (Please refer to the section entitled "Satisfactory Academic Progress" under the "Academic Difficulty" heading in this handbook.)

A Leave of Absence status greater than 180 days will move students out of their loan deferment period. The last date of attendance before the LOA is the "Out of School" date. After 180 days, the grace period ends and all educational federal loans will go into repayment. Students are expected to meet with the Office of Student Financial Services before a LOA is finalized in order to fully understand the consequences of the LOA on loan repayment.

Housing Information

A student who resides in student housing is required to vacate student housing while on LOA, based on the nature and anticipated length of the LOA. Students may petition to the Housing Committee to remain in housing if the LOA is anticipated to be brief. Students on LOA may not participate in any school sponsored activities or educational opportunities at the Icahn School of Medicine.

Clearance to Begin Leaves of Absence, Withdraw, Transfer, or Otherwise Leave the School

Students who go on a LOA must obtain clearance beforehand from the Office for Student Affairs. Students are required to meet with their Faculty Advisor and/or Senior Associate Dean for Student Affairs before filling out the appropriate forms. The student will receive a letter of leave and individualized conditions will apply. All students must meet the criteria and confirm agreement with the terms of the leave in writing. In addition, students must complete a sign-out form (see link below) requiring the signatures of the requisite offices indicating that there are no outstanding debts or

other encumbrances to the student's record and that all medical school property has been returned. When all the signatures are obtained, the student must return the form to the Office of the Registrar.

Leave of absence sign out and return forms can be found on the Medical School Forms [webpage](#).

Return from LOA

The Office of Student Affairs approves students for return from a LOA. The point person for the return process is the Assistant Director of Student Affairs. Students should refer to the individualized terms of their leave letter and must complete all required evaluations or testing prior to return. In general return from a medical leave of absence requires a physician's note that the student is cleared to return to school. At the end of a specified period of LOA, if the student does not notify the Assistant Director of Student Affairs of their intentions, it will be assumed the student no longer wishes to be considered enrolled and will be dismissed. If a student wishes to apply for reinstatement at a later date, a new application for admission must be completed.

Extended Scholarly Status

Students who choose to enhance their medical training by pursuing an additional academic degree at ISMMS or another institution will be considered on Extended Scholarly Status (ESS). In this status, students are not enrolled in medical school courses or clerkships. The School is obligated to report all matriculated students and their active or inactive status at ISMMS to the U.S. Department of Education. As an inactive student at ISMMS, the student is not eligible for federal loans from ISMMS during this period. This policy does not apply to students enrolled in an additional degree (like a PhD, or Masters) from the Icahn School of Medicine at Mount Sinai.

It is highly recommended that students considering pursuing a second degree do so between Year 3 and Year 4 of medical school; however, exceptions may be made for students in other years.

Clearance to Begin ESS

Students considering pursuing a second degree must be in good academic standing and should discuss their interests with their Faculty Advisor and the Senior Associate Dean for Student Affairs. These discussions allow for a review of the student's interests and career goals, application planning and timeline. Requests to complete a second degree are approved by the Senior Associate Dean for Student Affairs.

Once a student has been accepted to a degree program and have had a discussion of their interests, they should fill out the Request for Degree form listed on the Registrar's website with information about the program, length of degree, letter of acceptance and source of funding (such as financial aid package letter):

<https://icahn.mssm.edu/education/students/registrar/medical-forms>. This form must be completed by June 1 in the year they intend to begin their degree program.

The following are additional factors and requirements for students in this status:

Loans: as mentioned above students will not be eligible for federal or school originated loans while on Extended Scholarly Status through the ISMMS Financial Aid Office. Students who are citizens/permanent residents are eligible to apply for federal student loans at the institution where they are getting the additional degree. As long as students are enrolled here or elsewhere previous loans will not be in repayment status. Students who received federal or institutional loans, and are no longer enrolled in their additional degree institution or considered not enrolled at ISMMS, will go into student loan repayment. Loan repayment usually starts six months after the last day of enrollment is reported by the additional degree institution or ISMMS. For further information about federal loans, please go to the National Student Loan Database at www.nslds.ed.gov to view loan servicer information and loan balances.

Housing: students who are pursuing an additional degree at an institution within New York City are eligible to retain their ISMMS housing. They will be responsible for rent and must show proof of income to cover rent for the duration of the additional degree.

Health insurance: students must have health insurance during this status. They can be on the ISMMS plan, a plan from the other institution, or another plan of students' choosing.

Patient care: Students are not covered by malpractice insurance by ISMMS (including those obtaining a second degree within the Graduate School for Biomedical Sciences) for the length of their ESS, but may continue to volunteer at EHHOP in non-patient facing roles.

Library services: All library items associated with the user's library account must be returned in good condition and all fines and fees paid, regardless of the date that the fine or fee was originally issued, prior to starting on Extended Scholarly Status. If payment is required, the library can make arrangements for payment over the phone with a valid credit card.

MSPE and Transcript: Students' MSPEs and transcript will read: "Student pursued a (name of degree, i.e., MPH, MBA) at (name of institution) for academic year(s) _____." The dates of degree start and end will also be noted.

Transcript: Face of transcript reads: [Start Date] – [End Date]: Extended Scholarly Status – Degree type, Name of institution."

Degree length and timing: Students who take an additional degree must review the start and stop dates of that program with their Faculty Advisor and, if needed, the Office of the Registrar to ensure that they can meet the requirements for the medical degree in time for the projected date for graduation from medical school.

Return from ESS

Students must complete the Return from Degree Form by March 15 of the year they intend to return. This form alerts the Office of Enrollment Services, including Financial Aid and Bursar; compliance team; Student Affairs; and the Registrar. The form is available on the Registrar's website:

<https://icahn.mssm.edu/education/students/registrar/medical-forms>.

Failure to notify the school of intent to return or wish to extend time away by March 15 will be put on Administrative Leave of Absence for the following academic year. This impacts student privileges, including eligibility for housing and access to campus resources.

Students are considered on leave from the MD program for the length of the academic year and may not return early from their Extended Scholarly Status (i.e in May or June) to complete requirements towards their next academic year.

Decelerated Year

The purpose of a decelerated curriculum is to allow a student to complete one academic year's required coursework over two years. Students must maintain half time enrollment in order to continue to receive both financial aid and loan deferment status. Students may decelerate one of the four years of medical school in order to maintain satisfactory academic progress. Consideration for deceleration of a second year is at the discretion of the Promotions Committee. Reasons for deceleration include for academic reasons or for personal ones like a student's health or life circumstances.

Students who wish to decelerate must contact their Student Affairs Faculty Advisor to discuss the possible advantages and disadvantages of a decelerated year. If the student wishes to decelerate after consultation with their Faculty

Advisor, the request should be submitted to the Senior Associate Dean for Student Affairs who will then make a referral to Promotions Committee and a subcommittee will make the decision about deceleration. Alternatively, deceleration may be mandated by the Promotions Committee to allow a student to complete an academic plan. Once approved, Student Affairs will reach out to the Registrar's office to coordinate an academic plan. Each plan is individualized per the student's needs, with the academic plan structured so that students will complete the requirements for the respective year by the end of the second decelerated year. (Note: Students must be registered in every academic term in order to maintain their decelerated student status.) The decelerated plan must comply with the School's Satisfactory Academic Progress requirements for graduation and financial aid. Students who are approved should meet with the Office for Student Financial Services (SFS) to review the impact of a decelerated curriculum on their finances.

1. Student Affairs contacts the Registrar once a student is planning to take deceleration, and a plan is outlined by the Registrar's Office for the student to meet curricular requirements over the span of two academic years.
2. Once approved for a decelerated curriculum by the Registrar's Office, the Office of Student Financial Services (SFS) will adjust student billing and award as $\frac{1}{4}$ of tuition and financial aid (for each term), spread out over two years. Scholarships and loans will be adjusted accordingly. Students will need to apply for financial aid each year. It is not a guarantee the student will receive the same amount of financial aid they received previous years as student/parent income and institutional awarding/funding policies change. Tuition will be posted at the rate charged for that academic year. There will be no proration of tuition or discount.
 - a. With this set up, students can still receive financial aid and in-school loan deferment because they will be considered half-time status. Students who are unable to follow the deceleration schedule will be required to take a Leave of Absence (LOA). Students who are unable to follow the deceleration schedule and take an LOA will be subject to all LOA policies regarding Financial Aid and Housing (see LOA section of handbook). They would return from LOA at the start date of the appropriate curriculum year.
3. Students must meet the pace at the end of their decelerated two years.
 - a. Year 1 & 2 curricular requirements - must complete approved Registrar plan over two decelerated years to complete either Year 1 or 2 basic science courses.
 - b. Year 3 curricular requirements – must complete approved Registrar plan over two decelerated years to complete all year 3 clerkships and at least 10 weeks of elective credit.
 - c. Year 4 curricular requirements – must complete approved Registrar plan over two decelerated years to complete all year 4 clerkships and the remaining weeks of elective credit (28 weeks total over years 3 and 4).
4. After completing the decelerated curriculum plan, students will return as full time students on a regular track and pace.

The following processes are in place for students who are decelerated in year 3:

1. Shelf scores: students will be compared to the passing score on the nomogram based on the order in which they take the clerkship. For example, a clerkship that occurs in the first of the 4 decelerated semesters will be compared to the quarter 1 nomogram, a clerkship that occurs in the 3rd decelerated semester will be compared to the quarter 3 nomogram, etc.
2. Gold Humanism Honor Society: GHHS selection is determined primarily by peer nomination. Students on a decelerated year 3 curriculum will be included in the voting for both of the academic years that they are in year 3 and are eligible to be inducted at the end of their second decelerated year.
3. Timing of Step 2 CK: Students may take Step 2 CK once they have completed all year 3 core clerkships
4. Students are required to stay up to date on their yearly compliance requirements and should reach out to compliance@mssm.edu with any questions.

Flexibility of Year 1 and 2

While the limit for excused absences in Year 1 and 2 is two (2) contiguous weeks, students may watch the recordings of lectures at their convenience and only need to report to school for required patient presentations, small groups and laboratory experiences. This allows for significant time when a student is not required to be present at school.

Medical Student Compliance Protocol and Requirements

In order to be able to participate in clinical educational activities (e.g. Art and Science of Medicine, clerkships, electives, shadowing and other clinical activities) all medical students must meet the compliance requirements of the School of Medicine, affiliated hospitals and clinical sites. To ensure that all students are in compliance and able to participate in clinical educational activities, the Medical Education office monitors compliance and notifies students when they need to update their status.

In order to provide adequate time and opportunity for students to update their status and maintain compliance, the Medical Education office has adopted a prospective process to inform students of requirements and status.

List of Requirements and Frequency of Renewal*

These are subject to change due to COVID-19 Infection Prevention Protocols.

Compliance Requirements	Frequency
MEDICAL EDUCATION	
HIPAA-Privacy and Security	Annually
IT Security Quiz	Annually
Infection Prevention and Control/ Bloodborne Pathogen Course 2020	Annually
PPE Donning and Doffing Contact+ Airborne Precautions	Annually
PPE Guidelines/Practices Attestation	
Radiation Safety in Fluoroscopy for Non-Operators	Annually
NYS Infection Control training	Every 4 years
Basic Life Support (BLS) certification	Every 2 years
Respirator Fit testing (N-95 Particulate Respirator mask)	Annually
Epic training	Twice
Psychiatry Clerkship Requirements: Code of Conduct for Custodians of People with Special Needs Statewide Central Register Child Abuse Check	Once, prior to start of Year 3
STUDENT HEALTH	
Annual Health Assessment form	Every 2 years before start of Year 2 and Year 4
Physical Exam	Every 2 years before Years 1 and 3
Annual TB Screening	Annually
Vaccinations and Titers (Hepatitis B, MMR, Varicella, Tdap)	Once, before/upon admission
Toxicology Screening (10 panel urinalysis: Amphetamines, Barbituates, Benzodiazepines, Cocaine metabolites, Marijuana metabolites, Methadone, Methaqualone, Opiates, Phencyclidine, Propoxyphene)	Once, before/upon admission
TRAINING SITES	
Elmhurst Registration Record assigned training modules	Annually
Bronx VA Mandatory Training & Trainee Registration form, PCR testing	Annually (for those assigned)
PRISM Training	Once, prior to start of Year 3
Other training site requirements	Once, prior to start of clinical sites (for those assigned)

Please Note: The above are subject to change based on the requirements of our affiliate sites.

Compliance Timelines

During the following mandatory events, trainings will be scheduled for the compliance requirements listed above which occur onsite. Instructions will be sent to students in advance of these events on how to complete the requirements that are delivered online.

Class	Event
Year 1	Orientation (August)
Year 2	Orientation (August)
Year 2 (to prepare for Year 3): Scholarly Year; MD/PhD	COMPASS 1 (April)
Year 3 (to prepare for Year 4)	InFocus 7 (March)

If you have any questions regarding the compliance program, please email compliance@mssm.edu.

Milestones

We have developed a learning roadmap for Icahn School of Medicine students to support their achievement of outcomes related to scholarly work, career planning, skill development in areas critical for science and practice in the twenty-first century, and compliance expectations. Using the milestones for each year, students can direct their planning and scheduling, track their sequential achievement of milestones, and obtain guidance and mentorship as they progress through the academic program.

The Milestones Map on each class year's Milestone organization on the Blackboard website provides detailed descriptions for each milestone, including event dates, deadlines, and the exact steps necessary to complete and receive credit for the milestone. Depending on specific paths that students may choose to enter, some assigned milestones may change as the academic year progresses. Information may also be updated on the Milestone Map as a deadline approaches. For this reason, weekly Update and Reminder emails will be sent out each Friday with the most current Milestone information for upcoming tasks.

The completion of Milestones is also tracked via the class year's Milestone organization. Students are responsible for tracking their own completion of some Milestones, while the Milestones coordinator will upload and track the completion of other Milestones. All of this is described in a detailed manner on the Milestones Map.

Missing a Milestone deadline has professional consequences, such as falling behind on the required Scholarly Product, not receiving funding for Summer Research Projects, etc. If a Milestone Deadline passes without completion, the student may receive an Incident Report.

Policy on Due Process and Promotion

Students may appear before the Icahn School of Medicine at Mount Sinai Promotions Committee if any of the following occurs:

- A student is in Serious Academic Status (see section on Academic Status).
- A student is in Serious Academic Status and fails another course or clerkship while being monitored.
- A student receives one Incident Report that demonstrates egregious behavior or more than one Incident Report that demonstrates a pattern of concerning behavior.
- Any student whose conduct may warrant disciplinary action (see section on Disciplinary Action) for violation of the Student Honor Code, Student Code of Conduct or relevant school or institutional policies.
- A student who switches from the physician-scientist program to the regular MD program or a student who requests scholarly leave or leave of absence for more than two continuous years.
- A student who requests a course of study that is different than the established tracks. (For example, a non-MSTP student who wishes a leave to pursue a PhD after Year 3).
- A student who appeals a grade (appeal is to a subcommittee).
- A student who requests a second decelerated year (request is to a subcommittee).

Students have the opportunity to appeal a decision by the Promotions Committee to the Dean of the School of Medicine. See Committee Decision and Appeals section below.

Promotions Committee

The Promotions Committee is the guarantor of excellence in the School of Medicine graduates and its main constituency is the future patients of our graduate physicians. The Promotions Committee is charged with:

- Reviewing medical students not meeting set standards of academic performance and/or professional behavior.
- Recommending to the Dean that the degree of Doctor of Medicine be awarded to those students who have satisfactorily completed the requirements of medical school education in accordance with the requirements of the Board of Regents of the State of New York and the faculty of Icahn School of Medicine, and satisfactorily fulfilled the ethical and moral responsibilities inherent in the practice of medicine.
- Recommending advancement of the students who have satisfactorily completed each year's requirements to the next academic year.
- Convening an ad hoc sub-committee for grade appeals.
- Convening an ad hoc sub-committee to examine charges of student misconduct and/or unprofessional behavior.
- Convening an ad hoc sub-committee to review student requests for decelerating an academic year.
-

Actions of the Committee may include but are not limited to:

- Approval, modification or rejection of proposed academic plans
- Remediation plans
- Disciplinary actions, including: Warning, Probation, Suspension, or Dismissal
- Decisions about grade appeals
- Decision about academic plans for student seeking to decelerate a second year of the curriculum.

See the section on Disciplinary Action for descriptions of warning, probation, suspension, and dismissal.

Promotion Committee Membership and Voting Composition

This Committee will consist of the following voting members:

- A Chairperson
- Fifteen faculty members-at-large
- Two fourth-year medical students (not on leave)
- A resident, fellow, or junior faculty member who is a recent graduate of the Icahn School of Medicine

The following will serve as ex officio, non-voting members of this committee:

- The Dean of Medical Education
- The Senior Associate Dean for Student Affairs
- The Senior Associate Dean for Curricular Affairs
- The Senior Associate Dean for Admissions
- The Dean for Diversity Programs and Policy
- The Associate Dean for Undergraduate Medical Education Affairs
- The Assistant Director for Student Affairs
- Six course and/or clerkship directors (three from Year 1 or 2 courses, three from clinical clerkships or courses)

Additionally, when available, the Faculty Advisor for the student being presented will attend the meeting as a non-voting member and act as a student advocate.

Appointment to the Promotions Committee is as follows:

- Faculty -- On an annual basis, the Executive Committee of the Faculty Council will issue a call to all Mount Sinai Health system faculty seeking applications for service on the Promotions Committee. Faculty may be self or peer-nominated. The Executive Committee of the Faculty Council will oversee the review of all applicants and nominate candidates for appointment by the Dean. The term of appointment will be three years.
- The Committee Chair -- Will be nominated by the Senior Associate Dean for Student Affairs from among the pool of at-large members and appointed by the Dean for a term of three years.
- Students -- Will be selected by the Student Body and will serve a term of one year.
- Alumni Representative -- A recent Mount Sinai graduate will be nominated by the Senior Associate Dean for Student Affairs and appointed by the Dean. This representative will serve a term of one year, which is renewable as long as the individual remains a resident, fellow or junior faculty member.
- Course and clerkship directors -- Shall serve a term of three years. If no longer serving as course or clerkship director, the individual will be removed from the Committee but may be nominated as a faculty member at large.

Following review by the Senior Associate Dean for Student Affairs, the Dean may extend the tenure of the Chair or other Committee members by no more than two additional terms.

Procedures

The Promotions Committee or an Ad Hoc Subcommittee may consider the student's entire school profile as it relates to overall school performance in academics and professionalism in reaching its decision.

Students presented before the Promotions Committee are permitted to make a statement to the Committee explaining their perspective on the issue(s) before the Committee. Students are also permitted to bring another individual to the

meeting to provide them support. The student may not be represented by an attorney and the accompanying individual may not speak during the meeting.

Decisions of the Promotions Committee shall be made by a majority vote. A quorum is defined as nine voting members present. A quorum is required for any vote.

Any committee member (faculty/course director, faculty at large, or a peer) must, at any time, recuse themselves from a meeting if the member has a potential conflict of interest. A conflict is defined as when the committee member has a close relationship to the student, such as being a family member, close friend or having served as a current/prior physician, or if they have a relationship with a student which may interfere with their making an impartial decision regarding the case. Likewise, a student appearing before the committee must also request that a faculty member or peer recuse themselves if they see a conflict of interest.

The Chair may appoint an *ad hoc* Subcommittee to investigate and evaluate the circumstances which brought the student to the Committee's attention and to propose remedial, disciplinary, or other action to the full Committee. The *ad hoc* Committee may meet prior to a full Committee meeting or after the student is initially considered by the Committee. The Subcommittee will consist of a minimum of three Committee members, two of whom must be faculty. One faculty member will serve as Chair of the Subcommittee.

Before the *ad hoc* Subcommittee review, the student shall be accorded an opportunity to challenge any member of the Subcommittee for "cause" where, in the student's view, the Subcommittee member would not be able to render an impartial decision. It shall be in the *ad hoc* Subcommittee Chair's sole discretion (or the Promotions Committee Chair, if the challenge is to the Chair of the Subcommittee) whether to excuse such member.

The student shall be permitted to meet with the *ad hoc* Subcommittee and prior to that meeting shall have the right to know the reason for the Subcommittee investigation. The Student shall be permitted to attend the meeting of the *ad hoc* Subcommittee with an adviser of his/her choice and to present relevant evidence and witnesses on his/her own behalf to the *ad hoc* Subcommittee. The student may not be represented by an attorney. The *ad hoc* Subcommittee may, at its discretion, further define, expand or limit the role of any such representative and may make such additional rules in its discretion to assure fair and expeditious handling of the matter, provided such rules are consistent with these procedures.

The Subcommittee shall present to the Promotions Committee its findings and recommendations. The Promotions Committee will discuss and vote on a decision and notify the student in writing of that decision and the basis for it. The Promotions Committee decision shall be made by a majority of the full Committee.

Ad-hoc subcommittees for grade appeals and second decelerated years should include a minimum of the Committee Members and will make decisions by majority vote. The decisions will be final.

Committee Decisions and Appeals

Committee decisions will be rendered verbally to the student by the Committee Chair and will be confirmed in writing. If in agreement with the outcome and letter, students are required to return a signed copy of the letter within two (2) weeks.

If a student chooses to appeal the decision of the Promotions Committee, he or she must submit a written request stating the reason for the appeal to the Dean of the School of Medicine within two (2) weeks of receipt of decision letter. The Dean's review will determine whether procedures outlined in the Student Handbook were substantially followed and that the decision was reasonable, or the Dean may make an alternate recommendation. The Dean may, at their discretion, form an advisory committee to assist in reviewing the appeal. The advisory committee should not include any voting or non-voting members of the Promotions Committee. If no appeal is taken as provided above, the decision shall become final.

If a student's appeal is successful, the Promotions Committee may reconvene to determine any further plan or monitoring necessary.

These rules are intended to establish fair and reasonable guidelines for disciplinary action. Breaches of these rules shall not be grounds for a new proceeding unless in the opinion of the Dean the breach is of such a material nature that the validity and the truthfulness of the result are prejudiced.

The decision of the Dean of the School of Medicine shall be final.

Residency Application Process

The Office of Student Affairs assists students with all aspects of the residency application process (RAP). The main part of RAP begins in the second half of third-year and continues until Match Day in March of fourth-year.

The RAP includes elements of Career Planning Services (CPS) which runs all 4 years through the InFocus weeks and has several additional sessions in Year 4, including ones on how the match works, interviewing for residency, and constructing a match list.

Details on clinical specialties, the Medical Student Performance Evaluation, and other aspects of the residency application, as well as the very comprehensive Guide to the Fourth Year can be found on the CPS app: <http://medinfo.mssm.edu/CPS>. Additionally information can be found on Blackboard (go to Student Resources, then Career Planning Services.)

Registrar

The Icahn School of Medicine at Mount Sinai Registrar's Office supports teaching and learning by maintaining the integrity of academic policies and the student information system. The Registrar's Office is the steward of student records from application to degree conferral in perpetuity. The Registrar's key functions in carrying out this mission focus on guarding the integrity and security of all student records in accordance with ethical and legal standards, maintaining accurate and timely records of academic progress in order to provide definitive student status, and providing students with enrollment services necessary to pursue their educational goals.

To that end, below please find information pertaining to the policies and procedures under the purview of the Registrar's Office. For additional information about services and academic policies, please contact the Registrar staff in Annenberg 12-80, 212-241-6691.

Academic Standing

Students may be terminated from a degree program at any time if, in the judgment of the Graduate School or the School of Medicine, a student fails to make satisfactory progress towards the completion of the degree (regardless of grades). The definition of satisfactory progress toward completion of the degree program may differ among degree offering units. Students should further familiarize themselves with the specific expectations of their degree program(s). Examples of unsatisfactory progress may include, but are not limited to, inadequate grade point average (GPA), inadequate research and/or research skills, failure to obtain satisfactory grades in required courses, clerkships, or electives, or failing the candidacy, comprehensive, or final oral examination and may also relate to the amount of time to complete the required milestones of the curriculum.

Status of probation, suspension, and dismissal are accurately and permanently reflected on a student's transcript. Further detail regarding specifics of academic standing in the MD program, including academic difficulty, student conduct, and operation of the promotions committee, can be found in the Academic Difficulty and Student Conduct sections of this handbook.

Good Standing

A student will be considered in Good Standing if they are not in Serious Academic Status (see section on Academic Status), they are otherwise meeting the academic expectations of their degree program, and remain free of any academic or administrative "holds."

Probation

Students in poor academic standing may be placed on probation by the Dean for Medical Education or the Dean for the Graduate School, or their appointed representatives: Academic/Student Affairs Associate Deans in each school, the Promotions Committees, or Graduate School Program Directors. Once a student is placed on academic probation, scholarly progress must be made within a specific time period. Students on probation are considered enrolled.

Suspension

Academic suspension may occur when the School withdraws the student for failing to maintain "Good Standing" or to meet standard educational goals of the degree program. Students who are suspended from the School are required to spend a defined period of time away from the School. During this period, the student may be required to successfully complete activities defined by the School's Dean, Promotions Committee, or Program Director (in lieu of a Promotions Committee) if they are to be considered for readmission to the Icahn School of Medicine at Mount Sinai. Students on suspension are not considered enrolled. See specific sections related to Disciplinary processes in each specific program's section of the handbook.

Withdrawal and Readmission

Voluntary Withdrawal

A student may voluntarily withdraw from school at any time, upon application to the Senior Associate Dean for Student Affairs (MD students) or the Senior Associate Dean for Graduate Education (PhD and Master's students) or the Senior Associate Dean of Education (MD/PhD). A student who voluntarily withdraws may apply for readmission at a later time. Future reinstatement may be denied either at the time of the withdrawal or at the time of application for reinstatement for reasons deemed sufficient to the Admissions Committee. The Office for Student Affairs may require an Administrative Evaluation prior to acceptance of a withdrawal. Failure to comply would result in dismissal. For further information on withdrawing for a specific program, refer to the degree program section of this handbook.

Administrative Withdrawal

In certain circumstances, a student may be administratively withdrawn from the school. Examples may include, but are not limited to: a student who has exceeded two years on medical or personal leave or a student who fails to meet the technical standards required for medical education; a graduate student repeatedly failing to show up for lab or whose performance in the lab is below acceptable standards; an MD student failing Step 1 and Step 2 three times, who will be considered to have administratively withdrawn; any student failing to pay tuition, fees, medical insurance, or housing bills by the required dates.

Clearance

Clearance to withdraw is required. Students must complete the Request for Withdrawal paperwork found online: <http://icahn.mssm.edu/education/students/registrar/medical-forms>

Readmission

MD and MD/PhD students seeking readmission after voluntary withdrawal must complete the AAMC/Icahn School of Medicine admission process. No guarantee of readmission is made to any student.

Holds

The Icahn School of Medicine at Mount Sinai utilizes a system of holds when students fail to meet standard educational obligations. A "hold":

1. Prevents the release of a student's academic transcript or any school documentation, eg enrollment verification letter
2. Freezes a student's registration status so that they may not register for elective courses until the hold is resolved
3. Freezes a student's registration status so that they may not be registered for M1, M2 courses until the hold is resolved
4. Freezes a student's registration status so that they may not continue on to the next term until the hold is appropriately addressed by the student.

All financial obligations must be satisfied before a student can register for another term and continue their studies and/or research. Students with holds will not be eligible for financial aid refunds until the hold is appropriately addressed by the student.

Types of ISMMS holds: Admissions, Academic, Administrative, Student Health, Housing, Financial, and Registrar.

Transcripts

Official hardcopy and electronic copies of your Icahn School of Medicine at Mount Sinai transcript are available to students upon request. Requests for official transcripts require the verification of the identity of the student/alumnus requesting the transcript. Document request forms can be found on the [Medical School Forms web page](#). Transcripts and/or the MSPE cannot be sent out for students who are not in "Good Standing." This includes but is not limited to academic, financial, housing, library, and health holds. To be considered "official" a transcript must:

- Bear the Registrar's signature
- Be physically or electronically stamped with the Icahn School of Medicine at Mount Sinai Seal
- Be sent directly from the Registrar's Office or the electronic transcript system to a designated person or institution
- Be on official transcript paper

Students may request an unofficial copy of their transcript for their personal records. This will be stamped "Student Copy" and may not be used for official purposes.

Students can also view and print an unofficial transcript from the Empower student web portal.

Research Opportunities

A long-term goal of medical research is to improve diagnosis and therapy. For this to be possible it is usually necessary to understand the mechanism underlying disease onset or progression. The Icahn School of Medicine at Mount Sinai is home to investigators involved in cutting-edge research. Many enjoy serving as mentors to medical students and training them to carry out a research project. What is learned in the classroom, or on clinical rotations, must be considered as just a beginning. There is so much not yet understood that any number of opportunities exist to ask "Why?" or "How?"

Medical Student Research Office

The Icahn School of Medicine at Mount Sinai aims to produce physicians who provide the highest quality medical care to patients and develop intellectually as future physician-scholars and leaders.

The Medical Student Research Office (MSRO) supports students, regardless of research experience. The mission of the office is to:

- Help develop critical thinking skills, creativity, and intellectual independence
- Teach practical skills in basic clinical research methodology
- Promote awareness of short or long term research programs
- Assist in identifying research mentors and research projects
- Help identify research funding opportunities.

Students can participate in research throughout their training. The majority elect to participate during the summer break between the Year 1 and 2. Students can also take tailor made research electives in Year 3 and 4. About a quarter of the class further choose to obtain a more intensive research experience by taking a Scholarly Year.

For details on potential mentors, funding and project opportunities visit us on Blackboard under the MSRO page at this link, click [here](#), stop by the office in Annenberg Building, 12th Floor, Room 12-18, or schedule an appointment with the MSRO Director.

SCHOLaR (Scholarship and Research) Program

The Scholarship and Research (SCHOLaR) program is designed to provide medical students with fundamental understanding of the research process and mentored scholarly training. The goal is to help develop (enhance) an understanding of scientific clinical methods in medicine, evaluate existing medical literature, encourage creativity, and support their dedication to advancing science and improving patient care.

SCHOLaR connects and provides longitudinal mentorship that enables students to carry out rigorous scholarly project(s). The primary learning objective is to learn how to ask a research question, obtain and analyze data with the purpose of answering that question. Although not required, nearly 90% of students participate in a research experience during the summer between first and second year. This is the longest available block of time during medical school. Students who work on a summer project with ISMMS faculty are eligible to receive a stipend to cover their living costs. All funded students present their work at the Karen Zier Medical Student Research Day which takes place in March each year and fulfills the scholarly product requirement. The SCHOLaR milestones help students stay on track towards fulfilling the scholarly product requirement.

SCHOLaR consists of:

- Classroom, multimedia materials, and small group discussions on study design, statistics, and evaluation of a research manuscript,
- Guided navigation from finding a mentor to developing and conducting a study, and

- Presentation of research findings.

The first three blocks of course work in years 1 & 2 focuses on the principles underlying rigorous research. The final didactic block will focus on Evidence-Based Medicine, providing a bridge from the pre-clinical coursework to clerkships by focusing on the application of research to patient care.

Oversight of scholarly progress is provided by the faculty advisor, and mentors. Students are also assigned a track advisor who will help navigate the process and milestones; offer feedback on their study; and follow their progress.

The scholarly product that fulfills the graduation requirement will be based on research begun and carried out after entering medical school. Most projects will involve proposing a specific hypothesis or asking a question, obtaining and analyzing data, and synthesizing the results to demonstrate how the results help answer the research question. However, this model may not pertain to projects in the Medical Humanities, Global Health, or Quantitative Biomedicine tracks. Students working in one of these tracks consult the Track Advisor for additional guidance. For summer projects with an external mentor, students should share these guidelines so that the mentor is aware of the expectations and timelines.

MSRO strongly urges students to join an existing project and work with the mentor to carve out a focused question for which the student can take ownership and produce a mentored first author abstract for Medical Student Research Day. Eight weeks, the period of the summer research program, is not a long time and is far too short to start an entirely new project. Joining an existing project will allow students to avoid start-up delays. Because of past problems obtaining timely approvals from the IRB for human subjects research or from IACUC for animal research, **students will not be eligible to receive a summer stipend from the Medical Student Research Office (MSRO) to work on a research study that does not already have these approvals in place by the March deadline.** Students in the Global Health program should consult their track advisor for modified deadlines. Students working with external mentors are not eligible for a summer stipend from the MSRO, but are encouraged to follow this timeline in order to avoid delays.

The Scholarly product is evaluated on:

- Overall clarity
- Rationale for the study, clear goals
- Demonstration that the objectives of the project relate to the problem
- Well explained methodology
- Results that address the study question
- Acknowledgement of study limitations
- Conclusion, including the significance of the findings and implications.

When to Carry Out the Scholarly Project

As part of the graduation requirements, students must present their scholarly work at Medical Student Research Day as a poster or an oral talk. Final abstracts are due in early January and Research Day is held in March. Exact dates can be found in the class Milestones Map.

Most students begin their required scholarly project during the summer between Year 1 and Year 2 and present their work in Year 2. To support students who do not fulfill their graduation requirement during Year 2, students must schedule an appointment with the MSRO Director as early as possible to discuss an alternative plan and timeline.

Summer Student Investigator Program

Medical students who participate in summer research at Icahn School of Medicine at Mount Sinai (ISMMS) may receive a stipend. To be eligible the mentor must be a faculty member in Mount Sinai affiliated hospitals & Health Care Systems

faculty and the student must complete the appropriate SCHOLaR milestones. Note: Global Health students should refer to their program for further instructions about their specific applications and guidelines for funding.

The Summer Student Investigator Program takes place during the summer between MS1 and MS2, and provides an ideal time to have a short-term, focused eight-week research experience.

Karen Zier, PhD Medical Student Research Day

The Karen Zier, PhD Medical Student Research Day, held in mid-March is a forum for students to share the results of their research and projects with the Icahn School of Medicine community. Participants receive training on how to write an abstract and prepare & present a poster, and give an oral talk. More advanced students may use the opportunity to hone their presentation skills in anticipation of giving a presentation at a national meeting. Research Day is open to medical students, regardless of where the research was done, or what year in their training it was done. Abstracts are published in the Research Day Abstract Book and posted on the School's website and Blackboard. Visit the [Medical Student Research Day](#) website for more information.

Scholarly Year

A [Scholarly Year](#) is a year devoted to research free from clinical training. It allows students a more intense and focused research experience to develop and carry out a mentored project in an area of their choice. The project must investigate a question of scientific and medical value and be feasible to complete within the time frame available. Studies must be strongly mentored and approved by the MSRO Director. Most students pursue a scholarly year following their third year to take advantage of the clinical perspective offered by the clerkships. The two top issues for students to consider is how the year will be funded and who their mentor will be.

For more information consult the [Blackboard MSRO Scholarly Year](#) sections:

- Directory of internal and external funding opportunities
- Detailed guidelines about the approval process
- Guidelines for mentors of students

Applying for a Scholarly Year:

Students considering a Scholarly Year must meet with the MSRO Director 6-12 months before the desired starting period to discuss potential mentors, studies, and funding. The majority of students start in mid-July to August as it is an 11-month commitment. A final scholarly product must be submitted upon return. Students may stay in housing and may remain on the school-sponsored health insurance. Students going on a Scholarly Year are eligible to apply for financial aid loans to cover living expenses. Consult with the Office of Student Financial Services to discuss loan options.

The Request for Scholarly Year form can be found on the [Medical School Forms page](#) and must be submitted by the May deadline. If pursuing a second degree or a consulting fellowship consult with the Office of Student Affairs and not MSRO.

Students who plan on a SY are expected to take Step 2 CK before the SY experience starts and take Step 2 CS by early September of the academic year in which the SY occurs.

Return from Scholarly Year:

Students must obtain clearance to return from a Scholarly Year. The form can be found on the Medical School Forms webpage. The return form is available on the [Medical School Forms page](#) and must be submitted by the March

deadline. The scholarly product is due to MSRO by May 1, as is the Student Clearance Checklist, which addresses all compliance requirements for return to the clinical realm and school.

If the necessary requirements are not completed, it is presumed the student no longer wishes to be considered in good standing and will be placed on administrative leave. To apply for reinstatement at a later date, students will need to complete a new application for admissions.

Students considering a less than an 11-month commitment must receive the MSRO Director's approval. Requests should be submitted no less than two months before the original start or end date, and will require a non-credited elective to make up for that time.

Before taking a required sub internship in medicine or pediatrics, students are required to take a clinical refresher upon returning from scholarly leave into the fourth year. The clinical refresher must be a rigorous experience such as Emergency Medicine or a hospitalist elective. Experiences other than Emergency Medicine must be approved by the Faculty Advisor.

Travel Grant Award

The Medical Student Research Office (MSRO) provides Travel Grant Awards to MD, MD/MPH, MD/MSCR, and MD/PhD for their presentation at scientific conferences of up to \$500 for one trip per academic year. The student's mentor must match 50 percent of the MSRO award up to a maximum of \$500. If the mentor is unable to match, the mentor should state this in the student's letter of support. In this case, students may still qualify to receive 50% support for eligible expenses from the MSRO, up to a maximum of \$500. Only projects begun in medical school are eligible for funding. MD/PhD students are eligible for support to present work completed during their MD years if the project is unrelated to their PhD research. In some cases, students may be able to obtain travel funding from a conference, CMCA, the Global Health Institute, or Student Council. Funding for Scholarly Year students also may be available from national programs and mentors often support travel for their Scholarly Year students.

In order to qualify for a travel award, the student must fulfill all of the following:

- Be first author on the abstract accepted for an oral or poster presentation
- The work presented must be original work
- Must not have been funded by the MSRO to present the same project at a different conference
- Submit a letter or email from the faculty mentor stating his/her agreement to match the support of travel, and provide the mentor's fund number. This document should be attached (as a pdf) with the online application
- Must obtain permission to be away prior to travel if it coincides with a mandatory course session or part of a clerkship. Send an email to medstudentabsence@mssm.edu and copy the Course/Clerkship Director. The response email should be attached to the travel request form, as well.
- Be in good standing
- Submit travel requests a minimum of **TWO weeks in advance** of travel and before booking any travel, lodging or conference registration.

Further information is on Blackboard under the MSRO page at this link, click [here](#)

PORTAL (Patient-Oriented Research, Training, and Leadership)

PORTAL is a five-year, 38-credit, multidisciplinary combined degree (MD-Masters in Clinical Research [MSCR]) program for medical students interested in careers as clinical investigators. ISMMS medical students are eligible to apply to the PORTAL program during their first year of medical school. This intensely mentored program offers a multidisciplinary

approach to clinical investigation to introduce medical students to the field of clinical/translational research and how it drives the practice of clinical medicine.

Program participants learn to design and carry out original research studies leading to new approaches to the prevention, diagnosis, prognosis, and treatment of disease. This comprehensive dual degree program prepares students for a future as lifelong learners as well as for careers in academia, research institutes, industry, or regulatory agencies. The curriculum focuses on building critical thinking skills and offers a solid foundation for conducting independent patient-oriented research studies. For thesis research, students pursue original scholarly research on a subject of their choice, guided by a faculty mentor and the program directors. This entails the formulation of a research question, design and conduct of a research plan, analysis of resulting data, and presentation of the findings.

The program MSCR coursework is taken during Year 2 and during the Scholarly Year (between medical school Year 3 and Year 4). Most of the thesis work is performed during the Scholarly Year and successful students are awarded the MSCR degree.

Students selected for the PORTAL program receive full tuition scholarship to cover the MSCR degree. There is no medical school tuition during the Scholarly Year. PORTAL participants receive a stipend during their Scholarly Year to cover living expenses, including health insurance. An information session on PORTAL is held for medical school Year 1 students in the fall.

Complete information on the program, including the curriculum, can be found on the [MD/MSCR PORTAL Program web page](#) and on Blackboard under the [MSRO page](#).

Additional Support of Research Activities

The MSRO [Blackboard](#) page contains additional helpful information including how to:

- Write an abstract
- Prepare a research proposal
- Give an oral talk
- Make a poster
- Obtain IRB approval
- Access biostatistical support when planning a project or analyzing resulting data
- Research specific How to videos.

Security and Safety

The Security Office is located at the main entrance of the Medical Center (1468 Madison Avenue). Security Guard stations are located at the entrance to all buildings on the campus. Security measures at the Icahn School of Medicine are reviewed continuously to provide a secure environment for all who use its facilities. The policy requiring all students, faculty, and employees to wear Mount Sinai identification within the complex is implemented for protection and is enforced. The ID card must be displayed and worn upon entering all buildings and while on the premises. A student's personal security is of paramount importance. For this reason Security will, upon request, provide escorts within the Icahn School of Medicine and to on-campus residences. Call ext. 46068 or 46069 (from on-campus phones), or 212-241-6068 / 212-241-6069, approximately 10 to 15 minutes prior to departure.

Security is a function that requires the cooperation of everyone associated with the Icahn School of Medicine. Students are requested to dial "60" on any in-house phone in the event of any emergency or when suspicious activities are observed. At other times, when the assistance of the Security Department is needed, dial ext. 46068 or 46069.

The Housing and Security Subcommittee of the Student Council serves on the ISMMS Advisory Committee on Campus Safety. The Advisory Committee is composed of students, faculty and administrators and meets on a regular basis to discuss community safety and security issues..

Cleary Act

Copies of Crime Statistics for the Icahn School of Medicine area are available in the Security Office and the Office of Admissions, in Annenberg 13-90. In addition, information concerning the regulations and Icahn School of Medicine at Mount Sinai crime statistic information is available through the [U.S. Department of Education website for campus crime statistics](#) or on the ISMMS website at: <http://icahn.mssm.edu/education/students/consumer-information>.

ID Badges

ID Badges are issued by the Security Department on the MC level of Annenberg and must be worn on Mount Sinai Health System grounds. Lost cards may be replaced at the student's expense. The replacement fee is \$15.00, paid at the Main Cashier. The receipt is presented to Security Administration for replacement.

Emergency Alert System

In order to allow for a more coordinated and rapid response to emergency or disaster situations at Mount Sinai, the Medical Center has a messaging system for faculty and students. The Emergency Alert System has the capability of informing students of and delivering instructions regarding city-wide, hospital, or student specific (e.g. student housing intruder) emergencies requiring immediate attention.

Signing up for this system is mandatory for all medical students, as medical students are considered First Responders in the state of New York and are expected to aid in an emergency. During the account creation and activation process upon matriculation, students are expected to provide their mobile device as the primary contact, but have the option of including a sequence of secondary contacts (e.g. home phone, email, etc.).

Fire Safety

It is critical to student safety as well as patients' well-being that students know what to do in the event of a fire. There is a session during orientation on fire safety. CODE RED is the mnemonic used to alert the Mount Sinai Community to enact the "RACE" protocol for fire emergencies.

R = Rescue
A = Alarm
C = Confine
E = Extinguish/evacuate

To use a fire extinguisher, the mnemonic is "PASS":

P = Pull
A = Aim
S = Squeeze
S = Sweep (at the base of the fire)

The number to call in event of a fire is "4-FIRE" (43473) and for other emergencies students should dial "60" from an in-house phone. On Blackboard, under Student Services is a section on emergency preparedness. This includes the fire bell codes for the twelfth and thirteenth floors of the Annenberg building.

The [Mount Sinai Intranet](#) has a fire safety video that all students should review.

Student and Faculty Conduct

The administration, faculty, and students of the Icahn School of Medicine at Mount Sinai are committed to maintaining a respectful and productive learning environment, and are committed to high standards of excellence and personal responsibility. To that end, the following code of conduct has been implemented at the School.

The Icahn School of Medicine at Mount Sinai Medical Student Code of Conduct

As a student of the Icahn School of Medicine, I accept the responsibility and privilege of studying medicine, helping care for patients, interacting with peers, faculty, staff, and colleagues, serving the community, society and the profession, learning from my teachers, and teaching others. I commit myself to upholding the highest standards of ethics and integrity and to act with compassion towards others. I will always strive to maintain the highest level of professionalism. I will adhere to the following standards, which I will apply to my academic studies, scholarly activities, and clinical encounters.

- I will be truthful with patients, families, peers, faculty, staff, and members of the patient care team.
- I will treat patients, families, peers, faculty, staff, and members of the patient care team with respect and dignity.
- I will not tolerate discrimination in patient care or the educational environment.
- I will treat as private patient information received as part of any educational experience.
- If I believe that a patient may be receiving inappropriate care, I will discuss my concerns with a superior or report the incident through established mechanisms.
- I will conduct research in an unbiased manner and will truthfully report results.
- I will adhere to the Honor Code for Exams and Quizzes.
- If I have knowledge of a peer giving or receiving help inappropriately, I will bring the issue to the attention of the faculty, the administration, or the ombudsperson.
- I will complete clinical, academic and administrative tasks in a timely fashion.
- My demeanor, behavior, use of language, and personal appearance in the presence of patients, in the classroom, and in health care settings will be appropriate to the setting.
- I will recognize my limitations, admitting when I do not know something, and will seek help when I need it.
- I have an obligation to maintain my mental and physical well-being in order to be effective as a physician, including not using alcohol in any way that could interfere with my clinical responsibilities and not using illicit drugs.
- I will assume an obligation to encourage impaired colleagues to seek professional help and discuss with a supervisor, the administration or ombudsperson as necessary.
- I will not use my position to engage in romantic or sexual relationships with patients or members of their families.
- I will adhere to the above Standards of Conduct when representing the Icahn School of Medicine at Mount Sinai.

Student Oath

Each year, the entering class of students composes an oath that demonstrates their commitment to upholding the values of integrity and compassion in all aspects of the medical profession. Once complete, the students recite their oath at their class's White Coat Ceremony in front of faculty, staff, family and friends. Student oaths are posted on the twelfth and thirteenth floors in Annenberg.

Faculty Oath

Faculty read the following oath at each year's White Coat Ceremony to demonstrate their commitment to excellence in teaching and mentoring:

The mission of the Icahn School of Medicine at Mount Sinai is to produce physicians and scientists who are prepared to enter society as informed advocates and activists who are able to advance clinical care and science and promote change.

We, the faculty, seek to embody this mission and so pledge the following to you, our students, in our effort to help you to become the best possible physicians and your best possible selves:

- To serve as models for caring, competent, and unbiased care of our patients.
- To engage you in the joy and privilege of practicing the art and science of medicine and the rewards of learning for life.
- To uphold the highest standards in scientific and medical research.
- To inspire you to respect the art and science of medicine, but also to question the status quo.
- To recognize that our opportunity to teach is also our opportunity to learn.
- To not just teach, but also nurture.
- To share of both our craft and ourselves.
- To demonstrate that self-examination means as much as examinations.
- To be kind in evaluating you and ourselves.
- To never lose sight of our wellness and the wellness of all of those around us.
- To have the courage to stand up for the oppressed and vulnerable and against prejudice and racism in all that we do.
- To be aware of our own biases and those around us and strive to eliminate them.
- To meet you where you are and get you where you want to be.
- And, finally, to never forget as physicians, scientists, and educators what we know as human beings.

Office of Ombuds

<https://icahn.mssm.edu/about/ombuds-office>

The Ombuds Office for the Icahn School of Medicine at Mount Sinai is a confidential, informal, neutral, and independent resource where medical students can freely discuss any issue of concern. They are dedicated to promoting fair and equitable conflict resolutions for individuals and groups who have identified problems in their workplace or studies.

Professionalism

Professionalism encompasses a broad set of aptitudes, attitudes, and behaviors. Being a professional can mean many things, including internalizing a set of shared values, behaving according to standards of medical practice or scientific investigation, and being accountable for one's actions. Students have a responsibility to act at all times in accordance with the highest standards of integrity. The same standards of behavior are expected in the classroom, laboratory, clinic, hospital or elsewhere on campus, including housing, or whenever a student is representing the School. Students are expected to adhere to the same professional codes of behavior generally accepted for physicians and scientists.

Misconduct and Lapses of Professionalism

Student misconduct includes, but is not limited to: cheating, plagiarism, breaches of confidentiality, falsification, unprofessional behavior toward patients and colleagues, use and abuse of illicit drugs, abuse or inappropriate use of alcohol, dishonesty, and failure to complete administrative, medical, and financial responsibilities. Administrative responsibilities include course evaluations, student health clearances, HIPAA training, immunizations, infection control training, respirator mask fitting, and BLS certification.

Incident Reports and Commendations

Incident reports document specific circumstances when students do not adhere to the Student Code of Conduct or demonstrate unprofessionalism. Incident reports may be completed by course or clerkship leadership or Medical Education faculty and/or administration. The initiator of an incident report will share the report with the student. The student must sign the form and has the opportunity to respond and comment on the form. The initiator will then share and discuss the report with Student Affairs. If the event is non-recurrent and limited to one episode, then the incident report will not become part of the Medical Student Performance Evaluation (MSPE) or the student's permanent record. A pattern of concerning behavior may warrant referral to the Promotions Committee for consideration of disciplinary action and documentation in the Academic Progress section of the MSPE. A single egregious incident report could prompt a review by Promotions and may be documented in the MSPE. Examples of egregious events include but are not limited to: abandonment of patient care responsibility, lack of accountability in clinical settings, dishonesty, and disrespectful actions or behaviors involving patients, families, staff, colleagues, or supervisors.

Commendations document exemplary actions or behaviors by students. The initiator of a commendation will discuss it with the student and will share it with Student Affairs. Commendations will be summarized in the Academic Progress section of the MSPE.

Honor Code for ISMMS Exams and Quizzes

Before taking all exams or quizzes, students must review and agree to abide by the following rules of conduct:

1. I will take this exam or quiz by myself, not in a group.
2. Unless a particular information source or a calculator is explicitly permitted by the Course Director, I will not use any material to assist me during this exam or quiz, including texts, online/web sources/sites, auditory information, study notes, or any other material. I may use a calculator for calculations but not to store equations.
3. I have not received feedback about the exam or quiz from students who have taken it earlier.
4. While I take my exam or quiz, I will not communicate to anyone about the exam or quiz content or questions. If I become aware of a problem with the exam or quiz while I am taking it, I may notify the Course Director immediately. Once I have completed the exam or quiz, I will not discuss exam or quiz questions or content with, or in the presence of, any student who has not completed the exam or quiz.
5. I will not copy, record, photograph or retain any lasting record of any of the questions from this exam or quiz. I will not provide information about this exam or quiz to any current or future ISMMS student.
6. The online examination process allows students who encounter technical difficulty during an exam or quiz to open a second attempt within one hour of being logged out of a first attempt. Logging in for a second attempt is not permitted for any reason other than technical difficulty. A second attempt at an exam or quiz falls under the same Honor Code rules as a first attempt. Before logging in for a second attempt, I will email

ASCIT@mssm.edu and the course director to notify them of the reason for logging in a second time. I understand that logging in a second time for any reason other than technical difficulty and failing to send the required email before logging in to a second attempt constitute breaches of the Honor Code.

7. The ethical code of the medical profession requires that physicians report breaches in ethical conduct by their colleagues. If I witness any student violating any of the terms of this Honor Code, I am responsible for reporting the incident to the Course Director within 48 hours.
8. I agree that a breach of the Honor Code is a serious ethical violation, and I understand that a student found not to be in compliance with the Honor Code will suffer serious consequences, including, but not limited to, inclusion of Professional Development Form in the student's file, suspension, or dismissal.

Plagiarism Policy

Preface

The Icahn School of Medicine at Mount Sinai faculty and students are committed to high standards of excellence and personal responsibility as stated in our Standards of Conduct. To that end, faculty and students are expected to assume responsibility for their behavior and work.

Definition

According to the AMA Manual of Style: A Guide for Authors and Editors (10th edition)¹, plagiarism is when an author documents or reports ideas, words, data, or graphics, whether published or unpublished, of another as their own and without giving appropriate credit. Plagiarism of published work violates standards of honesty and collegial trust and may also violate copyright law (if the violation is shown to be legally actionable).¹

The AMA Manual of Style defines four common kinds of plagiarism:

1. Direct plagiarism: Verbatim lifting of passages without enclosing the borrowed material in quotation marks and crediting the original author.
2. Mosaic: Borrowing the ideas and opinions from an original source and a few verbatim words or phrases without crediting the original author. In this case, the plagiarist intertwines their own ideas and opinions with those of the original author, creating a "confused, plagiarized mass."
3. Paraphrase: Restating a phrase or passage, providing the same meaning but in a different form without attribution to the original author.
4. Insufficient acknowledgment: Noting the original source of only part of what is borrowed or failing to cite the source material in a way that allows the reader to know what is original and what is borrowed.

Potential Venues

In the medical school environment, there are numerous situations that students must be cognizant of when representing their work accurately and honestly. These include, but are not limited to:

- Scholarly work including scientific papers, proposals, presentations, and posters
- The electronic medical record in the context of appropriating another's documentation into one's own without clear attribution
- Written examinations or assignments whether formative or summative
- Essays and personal statements on applications for training, awards, or any other reason

Consequences

All concerns regarding plagiarism will be reviewed by the Senior Associate Dean for Student Affairs and the Senior Associate Dean for Curricular Affairs. Based upon their findings, a student may be referred to the Promotions Committee and be subject to its decisions which can include, but are not limited to, warning, probation, suspension, or dismissal.

Reference:

1. American Medical Association (AMA). (2009). *AMA Manual of Style: A Guide for Authors and Editors* (10th ed.). Chicago: JAMA/Archives Journals; Oxford University Press. Retrieved December 11, 2012, from <http://www.amamanualofstyle.com//oso/public/index.htm>

Disciplinary Action

Disciplinary action may include the following:

- **Warning:** An official notice in writing which describes consequences contingent on a student's future actions or behaviors.
- **Probation:** An official notice in writing that specifies a time period that must pass without incident or conditions that a student must meet to avoid further consequences, including but not limited to disciplinary action.
- **Suspension of enrollment:** A removal of the student from educational activities or patient care settings. Immediate suspensions may be made in circumstances where the student poses a risk to patient care, other members of the School community, the School, or the learning environment.
- **Dismissal:** Expulsion of a student from the School.

Assault, sexual assault, theft, lying, cheating, or any intentionally dishonest behavior, including falsification of documents or other dishonest behavior during exams will result in dismissal from the School of Medicine absent exceptional circumstances. A student who is arrested or charged with a crime is required to inform Student Affairs. Failure to do so will result in dismissal. A dismissal decision cannot be changed to a voluntary withdrawal absent exceptional circumstances. All types of disciplinary action will be given in writing. Students are required to return a signed copy of the letter within 14 days of receipt.

Disciplinary action may be imposed by the Dean for Medical Education, the Senior Associate Dean for Student Affairs, the Senior Associate Dean for Curricular Affairs or the Promotions Committee.

The appeals process for disciplinary action is identical to the process for appealing the decisions of the Promotions Committee. (See section on "Committee Decisions and Appeals.") Any disciplinary action will appear in the MSPE in the Academic History section and also in the Academic Progress section of the MSPE (for more information about the MSPE, see the CPS app: <http://medinfo.mssm.edu/CPS>.) Disciplinary actions will also be permanently recorded on the transcript in the comments section if a student is suspended or dismissed for academic reasons.

Student Feedback of Training Program

Students are offered multiple opportunities to reflect on the quality of their medical education program throughout the curriculum.

- **Course and Clerkship Evaluations:** All courses and clerkships are evaluated, as well as all faculty and preceptors who teach at the Icahn School of Medicine. These mandatory evaluations occur through our anonymous evaluation system. Your feedback is invaluable as it provides us with data in which to adjust the courses and clerkships and evaluate teaching. See below for how evaluation feedback is used.
- **Course and Clerkship Representatives:** Students also elect representatives who act as intermediaries between class members and course/clerkship directors.
- **Focus Groups:** We routinely convene focus groups to address curriculum, student life, and other topics.
- **AAMC Questionnaires:** The AAMC conducts an anonymous Matriculation Survey Questionnaire (MSQ), an anonymous Year 2 Questionnaire (Y2Q), and an anonymous Graduation Questionnaire (GQ) that all students are requested to complete. The data is compiled by the AAMC and shared with the School including national norms..
- **Graduation Survey:** The School conducts a mandatory survey prior to graduation to obtain students' perceptions of the curriculum and their experiences during medical school. The results are anonymous.

Mandatory Evaluations

Completion of course and clerkship evaluations is mandatory. The following policy has been implemented to ensure timely, professional, and useful responses from students.

If a student has not completed a mandatory course evaluation within two weeks after the last day of the course, the student will receive an Incident report. If a student has not completed a mandatory clerkship evaluation within four weeks after the clerkship ends, the student will receive an Incident report.

Students must complete all evaluations for all courses and clerkships in order to be promoted to the next academic year or to graduate. This includes evaluations of faculty and preceptors in those courses and clerkships.

Evaluation Anonymity

All evaluations are completed online using an outside vendor (One45) and are anonymous. Please know that your feedback is very important to us, is read carefully and taken very seriously. Your identity is tracked only for compliance purposes.

Evaluations include quantitative Likert-scale items as well as free text items regarding aspects such as strengths and suggestions for improvement. These text responses can provide critical information with deeper perspectives than the quantitative items alone. We ask that you thoughtfully complete each of your evaluations. The purpose of students providing feedback can be similar to the ways in which residents and faculty are asked to provide feedback to students:

- Address what can be changed
- Provide facts with examples
- Be constructive, not judgmental

In order to maintain anonymity, no faculty or site-specific data summaries are released unless a minimum of three (3) students have completed the evaluations. Also, faculty do not receive evaluation reports until after the grades for a

course have been released, again to ensure students' anonymity and ability to provide honest and constructive feedback.

Comments that are considered to be unprofessional (i.e., vulgar, , threatening or harassing) will be redacted.

Review of Data Collected

As part of the assessment and evaluation function within the Department of Medical Education, we maintain a continuous review process of the MD program. This review seeks to monitor the implementation of the curriculum, both at the course/clerkship level and overall at the phase and program level. Such a process includes information from multiple sources, including student feedback.

Through the Office of Assessment & Evaluation all course and clerkship directors receive a summary of the student evaluation data for their respective program each year, which they share with their faculty. This information provides useful feedback to the individual course/clerkship directors, as well as to the administration and leadership of the Department of Medical Education. The course and clerkship directors work with Medical Education each year to build upon strengths and target areas for improvement.

The quality improvement process in Medical Education builds upon the data provided to course/clerkship directors. These data are reviewed by the Curriculum and Policy Subcommittee (CapS) that continuously reviews and revises our educational processes where necessary. Data is also shared with the Course Directors Subcommittee (CDS) and the Clinical Curriculum Subcommittee (CCS), where course and clerkship directors as well as educational leaders share information and lessons learned.

Finally, the data is presented to the oversight body for the medical school program, the Executive Oversight Committee (EOC). Each course or clerkship is reviewed and approved by the EOC and feedback and recommendations for changes are directly provided to the course/clerkship director(s) and to the CaPS in order to ensure that the appropriate changes are implemented. The deans in the Department of Medical Education attend the EOC meetings so they are constantly aware of our successes and of areas in which a need for improvement has been identified.

Yearly Requirements to Progress and Graduation Requirements

Students at the Icahn School of Medicine at Mount Sinai have been carefully selected to meet the demands of medical studies. At the time of graduation, the Icahn School of Medicine verifies that every student is adequately trained to function in a constantly changing professional milieu, and that the public can be assured of our students' competence to practice. If a student encounters difficulties, while at Icahn School of Medicine at Mount Sinai, we are prepared to deal systematically with the issue in an environment of support and supervision. We use mentoring and remediation whenever possible. The School's academic requirements are designed to ensure the success of all our graduates.

We do not allow any student to advance to the next year without completing all requirements for the preceding year.

Year 1 Requirements

Year 1: Fall Semester

- Art and Science of Medicine Year 1
- Structures
- InFocus Week 1
- Molecular, Cellular, and Genomic Foundations

Year 1: Spring Semester

- Art and Science of Medicine Year 1
- Immunology
- General Pathology
- InFocus Week 2
- Physiology
- Medical Microbiology

Other Requirements

- All first-year courses must be passed prior to the start of the fall semester of Year 2.
- In addition, students must complete all required Year 1 milestones by the end of the spring semester of Year 1.
- Students must complete all evaluations for all courses in order to be promoted to the next academic year

For full description of courses requirements, go here: <https://icahn.mssm.edu/education/medical/program/year-one>

Year 2 Requirements

Year 2: Fall Semester

- Art and Science of Medicine Year 2
- Brain and Behavior
- InFocus Week 3
- Cardiovascular Pathophysiology
- Pulmonary Pathophysiology

Year 2: Spring Semester

- Art and Science of Medicine Year 2
- Hematology Pathophysiology
- Gastrointestinal-Liver Pathophysiology
- Musculoskeletal Pathophysiology
- InFocus Week 4
- Endocrine Pathophysiology
- Sexual and Reproductive Health
- Renal Pathophysiology

Other Requirements

- All second-year courses must be passed by the end of the Spring Semester of Year 2 and prior to taking USMLE Step 1.
- Students must complete all required Year 2 milestones by the end of the spring semester of Year 2.
- Students must complete all evaluations for all courses in order to be promoted to the next academic year

For a full description of courses, go here: <https://icahn.mssm.edu/education/medical/program/year-two>.

Year 3 Requirements

Year 3 Required Core Clerkships and Courses

- Medicine
- Ambulatory Care-Geriatrics
- Pediatrics
- Surgery-Anesthesiology
- Online Radiology Course (ORC)
- Obstetrics-Gynecology
- Neurology
- Psychiatry
- InFocus Weeks 5, 6, and 7

Other Requirements

- All required Year 3 clerkships and courses must be passed. before taking Year 4 clerkships.
- Students in the Classes of 2021 and 2022 must successfully complete a total of 14 weeks of elective credit in order to graduate. For those students in the InterACT Program, a total of 10 weeks is required due to longer clerkship weeks required for the program.
- Students in the Classes of 2023 and 2024 must successfully complete a total of 28 weeks of elective credit in order to graduate. For those students in the InterACT Program, a total of 22 weeks is required due to longer clerkship weeks required for the program.
- Students must complete all required Year 3 milestones by the end of the spring semester of Year 3.
- Students must complete all evaluations for all courses in order to be promoted to the next academic year.

There will be no elective credit for repeating clinical portions of failed clerkships.

For full description of clerkships and courses, go here: <https://icahn.mssm.edu/education/medical/program/year-three>.

To learn about how Year 3 and 4 Electives, go here: <https://icahn.mssm.edu/education/students/registrar/electives>

Year 4 Requirements

Year 4 Required Core Clerkships and Courses

- Introduction to Internship
- Emergency Medicine
- InFocus Week 8
- One Sub Internship (either Medicine, Obstetrics-Gynecology, Surgery or Pediatrics)

Other Requirements

- All required clerkships must be passed in order to graduate.
- Students in the Classes of 2021 and 2022 must successfully complete a total of 14 weeks of elective credit in order to graduate. For those students in the InterACT Program, a total of 10 weeks is required due to longer clerkship weeks required for the program.
- Students in the Classes of 2023 and 2024 must successfully complete a total of 28 weeks of elective credit in order to graduate. For those students in the InterACT Program, a total of 22 weeks is required due to longer clerkship weeks required for the program.
- Students must complete all the graduation requirements listed below.

For full description of course requirements, go here: <https://icahn.mssm.edu/education/medical/program/year-four>.

To learn about how Year 3 and 4 Electives, go here: <https://icahn.mssm.edu/education/students/registrar/electives>

Graduation Requirements

Academic Requirements

- Students must complete the above required courses and clerkships.
- Students in the Classes of 2021 and 2022 must successfully complete a total of 14 weeks of elective credit in order to graduate. For those students in the InterACT Program, a total of 10 weeks is required due to longer clerkship weeks required for the program.
- Students in the Classes of 2023 and 2024 must successfully complete a total of 28 weeks of elective credit in order to graduate. For those students in the InterACT Program, a total of 22 weeks is required due to longer clerkship weeks required for the program.
- Students must take and pass USMLE Step 1 and Step 2 CK by dates determined.

Scholarly Requirement

- Students are required to complete a scholarly product in order to graduate. Students will participate in a curriculum that includes a research requirement to be completed by graduation. Students can fulfill the requirement by submitting a first-author abstract approved by a mentor and a track advisor to Medical Student Research Day and presenting that project as a poster or an oral talk in any of their training or scholarly years.

Evaluations

- Students must complete all evaluations for all courses and clerkships in order to graduate. This includes evaluations of faculty and preceptors in those courses and clerkships.

Required Procedures

- Students must complete the required core procedures for graduation.

Other Requirements

- Complete the ISMMS Internal Graduation Survey

- Complete the Graduation Checklist

NOTE: In order to participate in patient care activities, all students must have current certifications in HIPAA, BLS, and Infection Control.

Year 1 and 2 Policies and Procedures

Student Work Hours Policy and Flextime in Years 1 and 2

The Icahn School of Medicine at Mount Sinai limits the total amount of time allotted for required instructional time in the preclinical years to ensure that the volume of material is appropriate and to allow medical students sufficient time for independent study and reflection. The maximum number of instructional time per week is 27 hours during Year 1 and Year 2.

- In Year 1, courses start at 10 am and end at 4 pm with an hour of protected lunch time each day. The exception to this rule is the Structures course which may start at 9 am.
- In Year 2, courses start at 9 am and end at 4 pm, with an hour of protected lunch time each day.
- During Years 1 and 2, there are no course sessions scheduled on Tuesday afternoons from 1 pm to 4 pm which is protected Flex Time. During the two InFocus weeks in Year 1 and Year 2 Flex Time is not observed.
- Required assignments outside of scheduled course sessions are monitored by the Curriculum Co-Directors and Curriculum Manager.

Curriculum Co-Directors disseminate the work hours policy to Course Directors on an annual basis and during each course's yearly preparatory meeting. The policy also guides the course calendar development. The policy is also presented to students during fall and spring orientations. Anonymous course evaluations allow students to share their experiences related to work hours and to report any violations. These course evaluation data are reviewed at the end of each course by the Curriculum Steering Committee.

Nexus Learning and Experiences

First- and second-year students will not take courses or pursue activities for elective credit, but rather for their own professional development and learning.

Nexus Learning

Nexus Learning comprises a diverse range of courses geared towards first- and second-year medical students; the offerings build on the required curriculum and allow students to gain new insights, knowledge, and skills to enhance their practice of medicine. Students can explore topics in the humanities as well as courses in the sciences. While Nexus Learning courses are not for credit, students are strongly encouraged to take at least one of these courses. Nexus Learning is an opportunity to deepen knowledge in particular areas of interest or discover an entirely new discipline, as well as to engage with faculty and students with these shared interests.

Selecting and Registering for a Nexus Learning Course:

- From the online elective catalog review the available [Nexus Learning Courses](#), select the course you wish to take
- Enroll in the course through EMPOWER and the course coordinator will contact you with more information

Students who have met the minimum requirements of the Nexus Learning course, which are set by the individual course directors, should track their participation in their student portfolio. The Nexus Learning courses are not formally graded but rather a voluntary experience in keeping with the Icahn School of Medicine's philosophy.

Experiences

Students in Years 1 and 2 are encouraged to pursue the following types of activities and experiences outside of coursework: research, teaching/education, service, extra-curricular and school leadership positions, clinical shadowing, ethics and humanities, and global health. We encourage students to craft, pursue and then track these types of experiences on their own. This can be done via the student activity portfolio in the student information system. Students are encouraged to track their experiences throughout medical school by title, position, dates, and time spent and to keep them updated each semester. The student activity portfolio allows students export their information which can be used to prepare a student's CV and to prepare their residency application in Year 4.

Every student is encouraged to become involved in a community service project of their choosing. This is not a formally graded requirement but rather a voluntary experience in keeping with Icahn School of Medicine's philosophy.

Year 3 and 4 Policies and Procedures

Prior to beginning Year 3

- Students must be in compliance with all Student Health, institutional and training site requirements before beginning clerkships.
- Students may plan their schedule to incorporate elective time during their third year (see guidelines for away electives listed below as well as the section on Year 3 and 4 Electives).
- There will be no elective credit for studying for the boards after a failure on USMLE Step 1.
- There will be no elective credit for repeating clinical portions of failed clerkships.

Year 3 Lottery

Scheduling of the year 3 clerkships is done through a lottery process. In the spring of the second year of medical school, the 3rd year clerkship directors present to the students with all of the required clerkship clinical site options and advantages of working at each site. Students are then introduced to the lottery process by the Office of the Registrar, which is the way in which the students can rank their selections by the site they prefer and the order in which they prefer to take the clerkships in 3rd year.

Immediately following this informational meeting, in the spring of year 2, the students have one week to complete their preferences before the Office of the Registrar runs the lottery and fills in the maximum spaces allowed by each site for each rotation. Once the results of the lottery are posted to the students, they have a 10 day one-to-one switch period, in which they can work with another student to switch schedules or clinical sites without the knowledge of the clerkship directors. The one-to-one switches are managed through the Office of the Registrar's office. Once the 10 days are over, the Office of the Registrar publishes the final schedules and any requests for changes must go through the Clerkship Change Form process, which involves getting the clerkship director's approval.

Year 4 Lottery

Scheduling of the year 4 clerkships is done through a lottery process, similar to that of year 3. Students must submit their preferences to the Office of the Registrar in the spring of year 3 to obtain a schedule of their required clerkships and requirements.

Student Assignment to Learning Experiences Policy

RELEVANT LCME STANDARDS:

10.9: Student Assignment

5.10: Transfer/Visiting Students

PURPOSE AND SCOPE:

To outline responsibility for and the process of assignment of students to learning experiences and responding to requests for change.

POLICY:

Clerkship and Clerkship Site Assignments

1. Clerkship and Clerkship Site Assignments are made through the Year 3 and Year 4 Lottery processes are organized and overseen by the Registrar.
2. Students rank their selections in the order in which they prefer to take the clerkships, and by the site they prefer, in Year 3 and Year 4.
3. Students have the opportunity to do one-to-one switches with other students 10 days after the lottery.
4. Final assignments for the training site are made by the Office of the Registrar, who references the number of allowed students per site, as provided by the clerkship directors.
5. Students who require a schedule to accommodate a major life event must fill out a Special Schedule Request Form during the lottery process, which allows them to determine the order of their schedule based on their needs. Requests are sent to the Office of Student Affairs who reviews and approves the request. The Office of the Registrar lets the student know of the decision and provides any special instructions for the lottery process.

Clerkship and Clerkship Site Changes

1. Students are notified about the Clinical Clerkship Change process during the Year 3 and 4 Lottery meetings and during each clerkship orientation.
2. Changes are allowed, on a first-come first-serve basis, up to 4 weeks before the start date, if there is room in the clerkship.
3. Availability is determined by the clerkship director(s).
4. The [Clinical Clerkship Change Form](#) (signed by the Clerkship Director(s) when approved) must be submitted to the Office of the Registrar no less than 4 weeks prior to the start of the clerkship.
5. Failure to abide by this deadline can result in the change request not being processed and delay EMR access.
6. The criteria considered in evaluating the requests are availability within each clerkship and clinical site. These criteria are reviewed and approved by the clerkship director, registrar, and compliance team. Once approved, the student's schedule is updated in the Student Information System.
7. CLERKSHIP SITE COMPLIANCE REQUIREMENTS: If a student is switching to a clerkship that is scheduled at MS Beth Israel, Brooklyn Hospital Center, MS Morningside, MS West, BronxCare, the Bronx VA, or Elmhurst, students are responsible for ensuring they have met the compliance requirements of that site.

Visiting Students

1. ISMMS students get priority in enrolling in electives across the health system prior to visiting student enrollment in these electives. Electives are not available for scheduling for visiting students until both ISMMS Year 3 and 4 students have been allowed a chance to register.
2. ISMMS students are given priority over visiting students should there be an unexpected change in schedules during electives.

PROCEDURE:

1. Students are introduced by the Office of the Registrar to the 3rd year lottery process in February of Year 2 and to the 4th year lottery in January of Year 3.
2. Students rank their selections by the order in which they prefer to take the clerkships in 3rd year, and the site they prefer. Students have one week to complete their preferences before the Office of the Registrar runs the lottery and fills in the maximum spaces allowed by each site for each rotation.
3. Students who wish to request a Special Schedule Request must submit the Special Schedule Request Form by the due date during the Year 3 or Year 4 Lottery in order for it to be considered.

4. Students have a 10 day one-to-one switch period, in which they can work with another student to switch schedules or clinical sites to allow ease of switching without the knowledge of the clerkship directors. The one-to-one switches are managed through the Office of the Registrar.
5. Once the 10 day one-to-one switch period is over, the Office of the Registrar publishes the final schedule (in March of Year 2).
6. Students are notified about the Clinical Clerkship Change process during the Year 3 and 4 Lottery meetings and during each clerkship orientation.
7. Any changes subsequent to this must go through the [Clinical Clerkship Change Form](#) process, as described above.

ACCOUNTABLE DEAN OR DIRECTOR: Senior Associate Dean for Student Affairs and Senior Associate Dean for Curricular Affairs

DATE APPROVED: May 17, 2019

Flextime in Years 3 and 4

Flextime in year 3 is ½ a day off per 4 weeks of required clerkship time. Flextime in year 4 is the one week after Match Day where no required clerkships will run. Students can see in advance what the Flextime days are in each clerkship by looking at the Clerkship Information Sheet in the clerkship's Blackboard course or their class organization under Resources for Years 3 and 4.

Supervision Policy

RELEVANT LCME STANDARDS:

9.1 Preparation of Resident and Non-Faculty Instructors

9.3 Clinical Supervision of Medical Students

PURPOSE AND SCOPE:

This policy applies to individuals who supervise medical students across all courses and clerkships at all training sites. The purpose of this policy is to ensure that the school adheres to expectations that protect patients and ensure student safety, and to describe the mandatory training, teaching, and assessment skills required to be a medical student supervisor.

Appropriate supervision ensures that medical students are provided with opportunities to learn that are progressive and commensurate with the student's level of training and in accordance with the supervisor's level of training and specialization.

Supervisors in the Clinical Setting

A supervisor has the capacity to allow a learner to receive progressive responsibility for patient care. Examples of possible supervisors include:

- Attending Physician of The Mount Sinai Health System and/or its affiliate training sites
- Teaching Physician in the outpatient environment of The Mount Sinai Health System and/or its affiliate training sites
- Resident Physician, Intern, or Fellow in a Graduate Medical Education (GME) program of The Mount Sinai Health System and /or its affiliate training sites

- Allied health professionals, such as Nurses, Physician Assistants, Nurse Practitioners, Social Workers, etc. of The Mount Sinai Health System and/or its affiliate training sites

Levels of Supervision – Direct vs. Indirect

1. Perform Under Direct Supervision - The student performs a task with the supervisor physically present in the same location as the student; able to provide direct instruction/feedback to the student; able to take over patient care duties if and when necessary
2. Perform Under Indirect, but Immediately Available Supervision - The supervisor may not be physically present with the student; however, they are on-duty, immediately available, and can be called to the physical location of the student if and when necessary

The limitations for the requirements of proximity and timing of supervision, as well as the specific tasks that a student may perform without direct supervision depends on various factors, including:

- the level of training (i.e. year in medical school);
- the skill and experience of the student within the scope of the clinical care situation;
- the familiarity of the supervisor with the student's skills;
- the acuity of the situation and the degree of risk to the patient.

Clinical Supervision – General Guidelines

- In the clinical setting (in-patient or out-patient), Year 1 and 2 medical students are under both direct and indirect supervision and are engaged in low acuity situations (for example, conducting a history on a patient), while medical students in Years 3 and 4 are primarily under indirect supervision. It should be noted that in any instance, the supervisor should always be available.
- The course/clerkship/site director will determine who can supervise the medical student, such as fellows, residents, and/or appropriately credentialed allied healthcare providers.
- All medical students, during the course of their educational curriculum, may conduct medical interviews and perform physical examinations on patients with their consent.
- The supervisor will review all of the medical student's documentation in a patient's medical record and provide correction to the record and feedback to the student for educational purposes.
- Clinical decisions and orders are never formulated or enacted by medical students without a supervisor's input. Student documentation of the components of evaluation and management within a patient's record must be verified by the supervisor before they are considered a part of the patient's record.

The above guidelines are applicable to all clinical experiences where medical students participate.

Procedure Supervision - General Guidelines

- Medical students may be assigned to provide patient care services for medical procedures, under direct supervision.
- It is required that a medical student be appropriately directly supervised during all clinical procedures in which they are involved; including, but not limited to bedside, emergency department, and/or operating room procedures.
- The degree of supervision needed will take into account: the complexity of the procedure, the stability of the patient, potential for adverse effects, and the demonstrated competence, and responsibility of each student in order to ensure the safety and comfort of the patient and the student.
- In all cases, the supervisor must have privilege or authorization to perform the procedure in which they are supervising.

How ISMMS Monitors Supervision

Any students with concerns about the adequacy and availability of supervision they are receiving are encouraged to address their concerns as soon as possible.

Students report on the adequacy and availability of supervision during mid-clerkship check-in meetings and via end of course/clerkship evaluations and questionnaires. Students are instructed to contact their Site and/or Course or Clerkship Director regarding any immediate concerns with supervision. Additionally, reports can be made to the Medical Student Confidential Compliance Hotline, as well as to the UME Clinical Coordinator for Clinical Sites, within the Department of Medical Education.

Course and Clerkship Directors review student feedback in evaluations, as well as during mid-clerkship feedback, and provide prompt follow-up to address any supervision concerns that may arise.

The Clinical Curriculum Subcommittee reviews data on an ongoing basis to identify any ongoing trends of supervision concerns being reported.

PROCEDURE:

1. Students report on the adequacy and availability of supervision during mid-clerkship check-in meetings and via end of course/clerkship evaluations and questionnaires. Students are instructed to contact their Site and/or Course or Clerkship Director regarding any immediate concerns with supervision. Additionally, reports can be made to the Medical Student Confidential Compliance Hotline, as well as to the UME Clinical Coordinator for Clinical Sites, within the Department of Medical Education.
2. Course and Clerkship Directors review student feedback in evaluations, as well as during mid-clerkship feedback, and provide prompt follow-up to address any supervision concerns that may arise.
3. The Clinical Curriculum Subcommittee reviews data on an ongoing basis to identify any ongoing trends of supervision concerns being reported.

ACCOUNTABLE DEAN OR DIRECTOR: Co-Directors of the Curriculum and Senior Associate Dean for Curricular Affairs

DATE APPROVED: August 7, 2020

Student Work Hours Policy

RELEVANT LCME STANDARDS:

8.8 Monitoring Student Time

PURPOSE AND SCOPE:

ISMMS is committed to and responsible for promoting patient safety and student well-being and to providing a supportive educational environment. This policy is to clarify the requirements and protection to medical students regarding the hours they are required to work during their clinical and elective rotations. The work hours policy outlines expectations for students' workload in clerkships in order to ensure that students can learn and participate while also attending to their need for rest, study and personal time.

GUIDING PRINCIPLES:

- Student work hours in Years 3 and 4 are defined as all clinical and educational activities which include direct patient care and their attendant administrative duties and scheduled academic activities such as conferences.
- Students' work hours during clinical rotations should enable them to participate and learn while also providing time for rest.

- Accomplishment of the Required Clinical Experiences should be feasible within the designated time frame of the clerkship.
- Didactic and clinical education have priority in the allotment of students' time and energy.
- The student work hour policy should be flexible to address site variation and the difference in roles between students and residents, and to achieve the best possible balance between learning opportunities and student well-being.

POLICY:

Work Hours:

- Work hours in Years 3 and 4 related to clinical and educational activities must be limited to 80 hours per week averaged over the clerkship period, inclusive of all in-house call activities.
- Guidelines for calculating work hours during a typical week:
 - Include: all clinical and educational activities a student is physically present in the hospital or clinic—direct patient care (e.g., rounding, seeing patients) and their attendant administrative duties (e.g., completing medical records, ordering and reviewing lab tests); time spent when a student is on overnight in-house call; time in scheduled academic activities such as conferences; and time in required longitudinal experiences.
 - Exclude: time spent commuting, reading, studying, or preparing academically at home or away from the patient care site (e.g., preparing for presentations or conferences, studying for exams); or on hospital premises for activities that are not scheduled as part of your clerkship.
- Students must have a minimum of 8 hours free of duty between scheduled duty hours/shifts.
- Students are expected to attend to clerkship duties on the day before their Assessment Day. Clerkship duties should end no later than 5:00 pm on that day.
- Students must be provided with a continuous 24 hours off during every seven days of work, free from all clinical and educational responsibilities. In addition, during Year 3, students are given one half day of protected FlexTime for every four weeks of curriculum. During Year 4, students are given one full week of protected FlexTime after Match Week.

In-House Call Activities:

- In-house call is defined as those duty hours beyond the normal work shift when students are required to be immediately available in the assigned patient care site.
- If a student is required to be on overnight in-house call, following regular duty hours/shifts, then the student is required to be off duty by 9:00 am the next morning.
- If no overnight in-house call is required on the clerkship, then the extended day ends at 9:00 pm and the student is expected to return the next morning (no earlier than 5:00 am on any service)
- Students must be scheduled for in-house on call activities no more frequently than every third night.

Night Float Rotation:

- Night float rotation is considered shift work and not an in-house call.
- Night float rotation should not exceed 5 nights in a row; at a minimum, there are 8 hours off between shifts.

PROCEDURE:

1. Clerkship Directors disseminate the work hours policy to clerkship faculty and house staff at Mount Sinai and affiliates.
2. Residents, Faculty and non-educators receive the policy in advance
3. The Office of Curriculum Support disseminates the work hours policy to Clerkship Directors and Site Directors on an annual basis.
4. The policy is also presented to students prior to the start of Year 3 in InFocus Week 5 and during each clerkship's Orientation.
5. Anonymous clerkship evaluations allow students to share their experiences related to work hours and to report any violations.
6. These course evaluation data are reviewed quarterly by the Curriculum and Policy Subcommittee, and Clinical Curriculum Subcommittee
7. Yearly reports on student work hours is made to the Executive Oversight Committee.

DATE APPROVED: November 2020

Required Core Procedures

Students must attain competency in certain required procedures prior to completion of medical school. The attainment of proficiency in skills is crucial to a student’s ability to function as a successful intern. Students must be provided direct supervision of procedures until proficiency can be demonstrated. There are certain procedures that students cannot do without direct supervision.

There are two (2) categories of procedures:

1. **Required Core Procedures:** “Required Procedures” are those for which all students must achieve competency in order to graduate. Students must do each procedure three times under direct supervision and log each time in the web-supported tracking system (One45).
2. **Suggested Procedures:** “Suggested Procedures” are those procedures for which we recommend that students attain proficiency, but are not required for graduation.

Required Core Procedures	Venipuncture IV placement NG tube insertion Urethral Catheterization of male patient Urethral Catheterization of female patient
Suggested Procedures	EKG Intradermal skin testing Removal of urethral catheter from male patient Removal of urethral catheter from female patient Dressing changes Suture removal Throat cultures

Required Clinical Experiences

RELEVANT LCME STANDARDS:

- 9.7: Formative Assessment and Feedback
- 8.6: Completion of Core Experiences

PURPOSE AND SCOPE:

Completion of the Required Clinical Experiences for a clerkship is a joint obligation between the student, the student’s clinical supervisors, and the clerkship/site director. In order to ensure that students have adequate exposure to a variety of specialty-relevant presenting complaints and to comply with LCME guidelines, students are required to log the Required Clinical Experiences into the web-supported tracking system throughout the clerkship. This process is intended to help students meet educational goals of the clerkship.

POLICY:

1. Clerkships establish and publish a list of Required Clinical Experiences that students must complete to meet clerkship goals and requirements. Each clerkship also defines the appropriate clinical settings for these experiences, and the expected levels of medical student responsibility.
2. The Required Clinical Experiences are reviewed annually by the Clinical Curriculum Subcommittee to ensure relevance. The clerkship’s Required Clinical Experiences list can be found in the Clerkship Cards handed out

on the first day of each clerkship and in the MedInfo app, and students should enter their exposures to these diagnoses in an on-going fashion throughout the clinical years.

3. Students are also to enter their level of responsibility for each Required Clinical Experience. The levels of responsibility include:
 - a. Perform Under Direct Supervision
 - b. Perform Under Indirect, but Immediately Available Supervision.
4. Definitions of Levels of Responsibility:
 - a. Perform Under Direct Supervision - The student performs a task with the supervisor physically present in the same location as the student; able to provide direct instruction/feedback to the student; able to take over patient care duties if and when necessary
 - b. Perform Under Indirect, but Immediately Available Supervision - The supervisor may not be physically present with the student; however, they are on-duty, immediately available, and can be called to the physical location of the student if and when necessary
5. Mid-way through each clerkship, students will meet with the Clerkship Director or another supervising physician and should bring a copy of the Required Clinical Experiences Summary Report to review in this meeting.
6. Each clerkship must have a mid-clerkship feedback session with every student. One of the goals of the session is to audit Required Clinical Experiences the student has completed and to check for any outstanding ones. The session allows the Clerkship Director or supervising physician to provide suggestions to the student in order to meet the requirement through patient care experiences. This also allows the Clerkship Director or supervising physician to provide the student a set of Alternative Learning Experiences in the event that the student cannot complete all of the Required Clinical Experiences by the end of the clerkship rotation.

PROCEDURE:

1. Students must log their Required Clinical Experiences in One45 in an ongoing manner throughout the clerkship based on clerkship requirements.
2. Each student should discuss any outstanding Required Clinical Experiences with their Clerkship Director, Site Director or supervising physicians throughout the course of the clerkship. If a student is unlikely to accomplish all of the Required Clinical Experiences through patient care experiences, despite best efforts, the student and site/course director should discuss alternate ways of learning that material.
3. Alternative activities will be scheduled on an individualized basis, based on the likelihood of the student getting the Required Clinical Experiences during their time remaining in the rotation.

ACCOUNTABLE DEAN OR DIRECTOR: Senior Associate Dean for Curricular Affairs

DATE APPROVED: June 2020

Tracking Required Clinical Experiences and Required Core Procedures

Each clerkship has a “Required Clinical Experience” list, which can be found in the Clerkship Cards handed out on the first day of each clerkship. These experiences are selected to ensure that students have adequate exposure to a variety of specialty-specific presenting complaints. In order to monitor compliance and meet LCME guidelines, students are required to log these experiences into our web-supported tracking system (One45) in an on-going fashion throughout the clerkship. This information includes their level of responsibility in the interaction with the patient (i.e., *Perform under direct supervision, Perform under indirect but immediately available supervision*). Mid-way through each clerkship, students will meet with the Clerkship Director and should print a copy of the one45 Summary report to bring to this

meeting. The Clerkship Director or supervising physician will review the report to monitor the students' progress in encountering the diagnoses and can guide the student to additional learning experiences if necessary.

In addition to the Required Clinical Experiences students are expected to attain competency in certain Required Core Procedures prior to graduation from medical school. The attainment of proficiency in these skills is crucial to your ability to function as a successful intern. Each required procedure must be completed under supervision a minimum of three times over years 3 and 4 and you are expected to log these procedures into our web-supported tracking system, One45.

Mid-Clerkship Feedback

RELEVANT LCME STANDARDS:

9.7: Formative Assessment and Feedback

8.6: Completion of Core Experiences

PURPOSE AND SCOPE:

Students benefit from faculty feedback about their performance, both as an external measure of achievement and in informing how they may continue to improve. It is essential to provide feedback while a clerkship is in progress so that students have an opportunity to improve or to remediate deficiencies before the end of the clerkship. This policy applies to clerkship directors, site directors, other supervising faculty physicians and residents, and medical students.

POLICY:

- Students must receive feedback from supervising physicians and residents and/or clerkship or site director midway through the clerkship. This feedback must include review of the electronic log of required clinical experiences as well as an assessment of the student's performance in comparison to clerkship objectives.
- This feedback must include review of the electronic log of required clinical experiences as well as an assessment of the student's performance in comparison to clerkship objectives. See Required Clinical Experiences Policy.
- Clerkship Directors are responsible for ensuring each student receives mid-clerkship feedback.
- Students are able to comment on whether they received mid-clerkship feedback in the Clerkship Evaluation after each clerkship. Aggregate data on compliance with mid-clerkship feedback is distributed twice yearly to the Clinical Curriculum Subcommittee (CCS).

PROCEDURE:

- Mid way through a clerkship, the supervising physicians and residents, and/or clerkship or site director provides feedback to the medical student.
- Each student should discuss any outstanding Required Clinical Experiences with the supervising during the mid-clerkship feedback.
- Students log whether they have received mid-clerkship feedback in the clerkship evaluation form in One45.

ACCOUNTABLE DEAN OR DIRECTOR: Co-Directors of the Curriculum and Senior Associate Dean for Curricular Affairs

DATE APPROVED: May 17, 2019

Standardized Subject Exams from NBME (Shelf Exams)

The Icahn School of Medicine at Mount Sinai uses the NBME Clinical Science examinations to assess student performance on the last day of each clerkship which occurs in the third year. These standardized, objective, and discipline-based exams require medical students to solve scientific and clinical problems. Test scores reflect the learning specific to a student's clerkship experiences, as well as their educational development resulting from the overall medical school experiences. Exams are designed to provide medical schools with an effective evaluation tool and useful examinee performance data that can be compared with a large representative group of examinees at the same stage of training.

Students are required to take the Shelf Exam on the last day of the clerkship as scheduled, and can expect to receive instructions on where to report for this from Blackboard and from the Clerkship Coordinator. The one exception is the Inpatient Medicine Clerkship, which takes the Medicine Shelf Exam in week 11 and the Family Medicine Shelf Exam in week 12 of the 12 week module. The standard Shelf Exam is 2.75 hours in length and online, though students will be required to arrive early to receive instructions.

Policy Regarding the Day before Shelf Exams

Students are expected to participate in clerkship activities the day before the Shelf Exam. However, students should not be assigned call responsibilities that day. All clerkship duties should end by 5 pm.

Clinical Refresher for Students Returning from Scholarly Year

Before taking the required Sub Internship, a clinical refresher is strongly encouraged for those students returning from scholarly leave into Year 4. The student is encouraged to discuss the clinical refresher with the Faculty Advisor or Director of Electives.

Years 3 and 4 - Electives

General Information

Students in the Classes of 2021 and 2022 must successfully complete a total of 14 weeks of elective credit in order to graduate. For those students in the InterACT Program, a total of 10 weeks is required due to longer clerkship weeks required for the program.

Students in the Classes of 2023 and 2024 must successfully complete a total of 28 weeks of elective credit in order to graduate. For those students in the InterACT Program, a total of 22 weeks is required due to longer clerkship weeks required for the program.

Students may take clinical electives during the third and fourth years at the Icahn School of Medicine at Mount Sinai, our affiliates, or at off-campus scholarly institutions. Students may also design clinical or research electives or seek out international experiences via Global Health electives.

The following guidelines apply to all types of electives:

- Forty hours are required to receive one week of elective credit.
- For the 2020-2021 AY, there is no restriction on the number of one-week electives
- You are permitted to take one or more longitudinal electives that are listed in the Icahn School of Medicine electives catalog (Empower). There is no restriction on the number of longitudinal elective you can complete.

- You cannot take an elective concurrently with a required clerkship. Longitudinal electives may be taken concurrently with another non-required rotation (e.g. another elective) as long as the hours do not conflict.
- For the 2020-2021 academic year, there is no restriction on the maximum number of research or non-clinical electives..
- Elective application forms must be submitted to the Office of the Registrar, with all required signatures, no less than two weeks prior to the desired start date of the elective.
- **No retroactive credit will be granted for an elective.**
- If a student wishes to repeat an elective that has already been taken, it is possible to do so, however, elective credit will not be given for the subsequent course(s).
- Preparation for USMLE Step 1 by completing the Step 1 Board Review Course attended remotely or completed asynchronously on-line with attestation, can count as two weeks of elective credit. Empower registration is required.
- Preparation for USMLE Step 2 CK is built into the Year 4 schedule with a Step 2 CK Board Review course that, if attended in its entirety or completed on-line with attestation, counts as two weeks of elective credit. Empower registration is required.
- Work completed for remediation (including remediation for Step 1 and/or Step 2) is not eligible for elective credit.
- Students on a Scholarly year or on the PHD portion of their MD/PhD training cannot receive elective credit.

To receive full credit for an elective you must complete each step of the elective process:

1. Select and register for the elective.
2. Complete the elective.
3. Ensure that your mentor/preceptor has submitted an evaluation of your performance.
4. Complete *your* evaluation of the elective.

Selecting and Registering for an Elective

Icahn School of Medicine Electives

- Browse the [online electives catalog](#).
- Select the elective for which you wish to apply and click the “Register for Electives” button on the detailed view screen
- You will receive three emails generated from the system during the registration process:
 - An email informing you that you have requested the elective and it is PENDING DEPARTMENTAL APPROVAL
 - Next, an email informing you that the department has approved the elective and it is PENDING REGISTRAR APPROVAL
 - A final email informing you that your request to add the elective has been APPROVED BY THE REGISTRAR
 - You must receive the final email to be fully registered for the elective and receive credit; no retroactive credit will be applied.
- Your login is your student email address and your password is your life number. You should change your password once you have successfully logged into the EMS under Account Management.
- You may [access your account anytime online](#)
- If you have any issues with the approval process, contact the Assistant Registrar or the Director of Student Electives.

Clinical Tailor-Made Electives

- Students wishing to design their own clinical elective(s) with a specific Icahn School of Medicine faculty member or a faculty member from an outside institution may do so by submitting the *Elective Registration*:

Clinical Tailor-Made form to the Office of the Registrar. The form can be accessed online via the [Medical School Forms web page](#).

- Once you have completed the form, it needs to be reviewed and approved by the following: Office of the Registrar, Mentor/Preceptor, and the Director of Student Electives.

Tailor-Made Research Electives

- Students wishing to design a research or a non-clinical elective with a specific Icahn School of Medicine faculty member or mentor from an outside institution may do so by submitting the *Elective Registration: Tailor-Made Research Elective* form (MD, MD/PhD, or MD/MPH) to the Office of the Registrar. The form can be accessed via the [Medical School Forms web page](#).
- Once you have completed the form, it needs to be reviewed and approved by the following people: Assistant Registrar, Mentor/Preceptor, and the Director of the Medical Student Research Office.

Electives at Other Schools and Institutions

Note: IN-PERSON VISITING ELECTIVES ARE SUSPENDED FOR ACADEMIC YEAR 2020-2021

In accordance with [AAMC guidance](#) and due to the COVID-19 pandemic, students are not permitted to participate in electives at institutions outside of the Icahn School of Medicine at Mount Sinai. Some schools are offering virtual electives, which are listed in the VLSO catalog or on their school website. Virtual electives are permitted.

Visiting Student Learning Opportunities (VSLO)

- Students are required to use the AAMC's Visiting Student Learning Opportunities (VSLO) to register for electives offered at schools that are VSLO Host Institutions.
- Visit the AAMC website to [view a list of VSLO Host Institutions](#).
- Once registered through VSLO, students will need to complete the form, *Elective Registration: Electives at Other Institutions* (Required for all Away Electives, VSLO, and non-VSLO), which can be found on the [Medical School Forms web page](#).
- For supporting documentation required by the host institution please contact the Assistant Registrar.
- To complete your registration for the elective, submit to the Assistant Registrar the following: a description of the elective, a confirmation of your acceptance from the host institution, and the completed Icahn School of Medicine form, *Elective Registration: Electives at Other Institutions*. (Required for all Away Electives, VSLO, and non-VSLO)

Non-VSLO

- Contact the host institution directly to request the elective.
- Students will need to complete the *Elective Registration: Electives at Other Institutions* (Required for all Away Electives, VSLO, and non-VSLO), which can be found on the [Medical School Forms web page](#).
- For supporting documentation required by the host institution please contact the Office of the Registrar
- To complete your registration for the elective, submit to the Office of the Registrar the following: a description of the elective, a confirmation of your acceptance from the host institution, and the completed Icahn School of Medicine form *Elective Registration: Electives at Other Institutions*. (Required for all Away Electives, VSLO, and non-VSLO)

Tailor-Made Electives at Other Schools

Note: In-person Electives At Other Schools Are Suspended For Academic Year 2020-2021

Virtual Electives Are Permitted

- Students can also request to complete Tailor-Made Electives at other schools, but only in virtual format for 2020-2021 (see above). Students must have a mentor at the site responsible for awarding the grade. The student must complete and submit the appropriate form (*Elective Registration: Clinical Tailor-Made* or

Elective Registration: Tailor-Made Research) to the Office of the Registrar and to the Director of Student Elective or the Director of the Medical Student Research Office at the Icahn School of Medicine for approval. The forms can be found on the

[Medical School Forms web page](#).

Please Note: Medical Schools in different U.S. states may require students to pay for a background check and toxicology screening. As of June 2012, medical schools in Florida and Tennessee require this documentation. Please check with the school to which you are applying to make sure you have met any updated requirements.

Global Health Electives

Note: Global Health Electives Are Suspended For Academic Year 2020-2021

Global Health Electives are available to 3rd and 4th year students and include all electives outside of the United States. Students may only take a Global Health elective if it is offered at a Canadian medical school or if it is listed among the Global Health Elective courses in the [elective management system](#). Funding is not usually available for Global Health electives unless otherwise noted in elective descriptions.

The registration process for Global Health electives is as follows:

- Register for your elective for your requested dates through Empower at least 60 days before your day of departure.
- If applicable, register/apply for the in-country program of your elective externally.
- Complete the Global Health Elective Application form (link available on the [Global Health Blackboard Page](#)) at least 45 days before your day of departure. You will be asked to attach a letter certifying you have been accepted to the program.
- Once you have received academic approval, complete the Travel, Health & Safety Registration form (link available on the [Global Health Blackboard Page](#)) at least 30 days before the day of your departure.

Once you have successfully completed the Travel, Health & Safety Form with all of its requirements, your elective will be approved in Empower. Note that we are unable to offer retroactive credit for electives and we cannot accommodate last minute requests given the complexity of planning and approving Global Health electives.

Year 3 Students and Away Electives

Note: Away electives are suspended for Academic Year 2020-2021 due to the COVID-19 pandemic, in accordance with the AAMC guidance.

In general, the Icahn School of Medicine students wishing to do away electives will do so in the fourth year. From time to time, a student may have a reason to do an away elective during elective time in Year 3. The following should be considered:

- Students must meet the prerequisites set by the institution they are visiting.
- Students should recognize that they may not be as prepared as they would be in Year 4 with the benefit of all or most of the clinical clerkships. In general, assessments done at the away elective is set at a standard for a Year 4 student.
- Students may not know the “system” and logistics at an away location and with a shorter allotment time of elective in Year 3, it may be difficult to acclimate to new systems in time to be able to have an effective elective.
- Any elective done outside of an LCME-approved school must have the approval of an Icahn School of Medicine at Mount Sinai Director of Student Electives and that approval must acknowledge that this mentor approves the elective for the student in Year 3.

- If there are any questions or concerns, students are encouraged to meet with the Director for Student Electives or their Faculty Advisor to discuss.

Ensuring that your Mentor/Preceptor has Submitted an Evaluation

Electives at Icahn School of Medicine

Towards the end of your elective, including away electives, you must deliver to the mentor/preceptor the *Elective: Evaluation/Grade Form*, available on the [Medical School Forms web page](#), which the mentor/preceptor will complete and return to the Registrar's Office at the conclusion of the elective. It is the student's responsibility to ensure that this form is completed and returned to the Office of the Registrar (Email: electives@mssm.edu or Fax: 212-369-6013) at the conclusion of the elective.

Electives at other schools

If you are doing an elective at another institution and they wish to use their own institution's form for evaluation rather than the Icahn School of Medicine form, the mentor/preceptor may complete their institution's form and submit that to the Office of the Registrar. It is the student's responsibility to follow-up with those schools to receive your grade and communicate that to the Office of the Registrar.

How Electives are Graded

All electives are graded Pass, High Pass, Honors or Fail.

Completing an Evaluation of the Elective

Electives at Icahn School of Medicine

All **third- and fourth-**year students are required to evaluate each elective experience AND the preceptor through our evaluation system using their existing login and password. Evaluations assist us in understanding and evaluating the effectiveness of the electives. **Evaluations must be completed no later than four weeks after receiving a notification via email.** If a student does not complete the mandatory evaluation four weeks after receiving notification, the student will receive an Incident report and no credit for the elective. Please refer to the Student Conduct section of the Handbook on Incident reports. If the MSPE has been submitted, it will be amended and re-uploaded to reflect this breach of professionalism. The evaluations must be filled out in order to receive credit for the elective.

Electives Review System

Students are encouraged to ensure that they are on track with meeting their elective requirements for graduation by logging in to their Empower account.

Medical Liability Coverage

The Icahn School of Medicine at Mount Sinai provides medical students with medical liability when providing medical services as a part of approved educational activities. Students are not covered while participating in unapproved activities or rotations. During students' third and fourth years, coverage does not apply for an activity unless the entire registration process has been followed and the activity has been officially listed on your schedule. To assure that you are covered for a specific activity, inquire in the Office of the Registrar' or view your student transcript on the Empower

student information system, at <https://student.mssm.edu>. When rotating outside the School of Medicine, you may be requested to provide a letter from the School showing proof of coverage; that letter may be obtained from the Office of the Registrar- by completing the document request form, found online <https://icahn.mssm.edu/education/students/registrar>