

 <p>THE WARREN ALPERT Medical School</p> <p>BROWN UNIVERSITY</p>	<p>Non-LCME Standard Policies Relating to the General Operation of The Warren Alpert Medical School of Brown University</p>	<p>POLICY NO.: 13-00, includes:</p> <p>Policy No.: 13-00 Policy No.: 13-01 Policy No.: 13-02 Policy No.: 13-03 Policy No.: 13-04 Policy No.: 13-05 Policy No.: 13-06 Policy No.: 13-07 Policy No.: 13-09 Policy No.: 13-10 Policy No.: 13-12 Policy No.: 13-13 Policy No.: 13-15</p> <p>Effective Date: July 1, 2019</p>
--	--	---

1.0 Policy Purpose

The purpose of this policy is to govern other policies in place of The Warren Alpert Medical School of Brown University (“The Warren Alpert Medical School” or “Medical School”) which do not correspond to Liaison Committee on Medical Education (LCME) Standards but are central to the management and operation of the Medical School. The policies contained in this policy document relate to the following:

- Clinical Elective Policy on Absences
- Clinical Elective Supervision of The Warren Alpert Medical School Students in Other Nations
- Timeliness of Course Evaluations
- Narrative Component Evaluations
- Academic Scholars Program Clinical Component
- Release of Evaluations
- Passing Determination of NBME Shelf Exam
- Exam Tardiness
- International Courses
- Medical Student Performance Evaluation (MSPE)
- Withdrawal/Dismissal from The Warren Alpert Medical School
- Add/Drop Policy

Such policies are in place to ensure proper policies are in place to provide guidance and procedures for specific issues relating to Medical School community members. These policies do not directly correspond to LCME Standards.

2.0 To Whom the Policy Applies

All community members of The Warren Alpert Medical School.

3.0 Policy Statement

3.1 Clinical Elective Policy on Absences (Policy No. 13-01)

The Medical School policy for absences during clinical electives is that the student must request any excused absences for residency interviews or major life events (such as death in the family, birth in the family, wedding of immediate relative, personal illness, and mandatory jury duty) from the course leader. Although electives vary in duration, no more than 20% of the elective can be excused (for example, the equivalent of four (4) days over a typical four-week elective). If additional time off is requested, the course leader should work with the student to develop a revised educational plan for the elective. At the discretion of the course leader, any missed days are able to be made up on the course leader's schedule.

At the discretion of the course leader, missed days can be made up on a schedule as determined by the course leader or, if that is not possible, the student may receive reduced credit for the elective. If a student does not complete the plan for missed days by the time grades are due, the student will receive a grade of Incomplete (I). This can be changed after the student completes the make-up work designated by the course leader. If the student does not complete the plan for missed days within one (1) year or by April 1st of the graduating year for Year 4 students, the student will receive no credit (NC) for that elective.

If the elective does not allow time off for residency interviews, this should be stated in the course description. A student should discuss future excusable absences with the course leader as soon as the student is aware of their need for excused time. The student should contact the Office of Medical Education and/or Office of Student Affairs for guidance in planning the student's schedule to minimize the chance of these issues arising during an elective.

3.2 Clinical Elective Supervision of The Warren Alpert Medical School Students in Other Nations (Policy No. 13-02)

When a medical student wishes to take an away clinical elective in another nation, it is imperative that the student be supervised and mentored by Medical School faculty member or by a faculty member whose institution has an appropriate association (Memorandum of Understanding [MOU]) with Medical School. If the clinical elective is at a hospital or medical school in another nation that does not have a current and ongoing relationship (MOU) with Medical School, then:

1. When treating patients, the student will be directly supervised by an Medical School faculty member in a similar manner to what is expected at Medical School and other accredited US medical schools.
2. Students participating in preexisting clinical electives in other nations that are offered through another accredited US medical school will be directly supervised by that US medical school's faculty in a similar manner to what is expected at Medical School and other accredited US medical schools.
3. A Brown medical student will not be displacing a native medical student from that clinical rotation or using resources not available to the native medical student.

3.3 Timeliness of Course Evaluations (Policy No. 13-03)

Students who do not complete their course evaluations on time (after receiving a warning one week prior to the due date) will receive a professionalism form. Students who receive a professionalism

form for this reason will not be able to complete their course evaluations, but will be able to view their own evaluations/grades.

3.4 Narrative Component Evaluations (Policy No. 13-04)

In all courses in which student-teacher interactions permit (i.e. all clinical courses, including Doctoring, clerkships and clinical electives; basic science courses with at least five (5) small groups), a narrative component for student performance will be submitted as part of a final evaluation in addition to quantitative ratings.

3.5 Academic Scholars Program Clinical Component (Policy No. 13-05)

Students who are enrolled in the Academic Scholars Program (ASP), regardless of their year, are required to complete a clinical component as part of the program. This clinical component should be discussed with the student's ASP mentor, the Associate Dean for Student Affairs, or the Associate Dean for Medical Education. No additional tuition charge will be assessed, and no additional clinical credit will be given.

3.6 Release of Evaluations to Faculty (Policy No. 13-06)

To preserve medical student anonymity, any faculty or course evaluation submitted by students will be withheld from release within OASIS until three (3) or more evaluations of the same form have been submitted. If more than three (3) evaluations of the same form are submitted within the same academic year, these evaluations will be available **upon request by the faculty member**. Otherwise, evaluations will only be released once three (3) evaluations of the same form have been submitted across academic years or after a period of five (5) years. Reports will be provided to the Brown Medical School Faculty Administration (BMFA) or individual departments upon request, noting that if less than three (3) evaluations have been submitted, these are not to be released to the faculty member.

3.7 Passing Determination of NBME Shelf Exam (Policy No. 13-07)

The passing determination for an NBME subject "shelf" exam is based on the criteria used in the academic year the student completed the exam, *regardless of when the clerkship rotation was completed*. Passing criteria is defined as scoring at or above the equated percent correct score for the fifth percentile (5%), based on the most recent available academic year's norms. Norms are derived from examinees from LCME-accredited medical schools who completed the exam for the first time during that year.

3.8 Exam Tardiness (Policy No. 13-09)

If a student arrives at the exam room (including OSCE) after the official start of the exam, a professionalism form will be issued, unless there is an extenuating circumstance communicated in advance to the appropriate curriculum director. If a student is more than 10 minutes late, the student may not be allowed to sit for the exam. Students will be asked to go to the Office of Medical Education (OME) and wait for one of the curriculum directors to decide about beginning the exam. This policy applies to all examinations including remediation exams, make-up exams, exams taken with standard timing, and exams taken with approved accommodations.

Note: Students who do not take the exam as scheduled will then work with the OME on a make-up date for the exam, to be taken at the discretion of OME.

3.9 International Courses (Policy No. 13-10)

Any international course must be enrolled at least three (3) months beforehand. Each course is by permission only. When the Student Records Coordinator or Visiting Student Program Coordinator enrolls a student in one of these courses, they will let the student know they have one week to register their travel with the University. If the student fails to do so, they will be unenrolled from the course.

3.11 Medical Student Performance Evaluation (MSPE) (Policy No. 13-12)

The Medical Student Performance Evaluation (MSPE) is a composite evaluation from the medical school for medical students applying to postgraduate (residency) training programs and is aligned as closely as possible with the guidelines laid out by the AAMC. The content for the MSPE is drafted by a member of the Medical School Assessment and Evaluation team. Each MSPE draft is reviewed in its entirety by the Associate Dean for Student Affairs, who also composes the summary paragraph and works with each student to compose the noteworthy characteristics. Narrative comments from clerkship, elective, and sub-internship evaluations are edited for length, grammar, and redundancy, but not for content; any changes to content must be approved by the appropriate course director. If a student prefers that a different member of the administrative team compose their MSPE, they have the option to request that the Associate Dean for Diversity and Multicultural Affairs do so. Students are permitted to review the MSPE for accuracy prior to its submission for their residency application. If a student believes that these comments are not an accurate reflection of their performance, they may discuss it with the Associate Dean for Student Affairs.

3.12 Withdrawal/Dismissal from The Warren Alpert Medical School (Policy No. 13-13)

Withdrawal. A student may withdraw from the medical school at any point prior to a decision by the Dean of Medicine and Biological Sciences about a student's dismissal (see below, Appeal of Decision to Dismiss). Once a decision by the Dean has been issued, no withdrawal option will be available.

Withdrawal from the medical school requires a written request by the medical student to be approved by the MCASP. In certain circumstances (for example, in instances of unprofessional behavior), the MCASP may vote to not allow withdrawal and the dismissal process will proceed.

Appeal of Decision to Dismiss. The student may initiate an appeal of an MCASP decision to dismiss by filing a letter, within 72 hours of receiving written notification of the Committee's decision, to the Dean of Medicine and Biological Sciences, requesting reconsideration of the decision. [Note: MCASP decisions to place students on Academic Warning or Academic Probation, or receipt of a Professionalism Warning or Professionalism Citation may not be appealed]. The letter should include a statement of the basis for the request and any documents in support of the student's request. The Dean may, at their discretion, meet with the student regarding the appeal, and either (1) reconsider the matter, (2) convene an ad hoc committee of at least three members to review the appeal and issue (this committee will be comprised of individuals who did not hear the original dismissal case), or (3) sustain the decision of the MCASP.

If the matter is referred to an ad hoc committee, the committee will review the appeal and transmit its recommendations to the Dean. The Dean will, either through reconsideration or through reconsideration and recommendation by the ad hoc committee, review the appeal in a manner they determine is appropriate under the circumstances. Upon appeal, the Dean may then sustain, modify, or reverse the original MCASP decision. The decision of the Dean is final.

3.14 Add/Drop Policy (Policy No. 13-15)

Students may request for a waiver to the 30-day add/drop policy. This applies to course electives including Independent Study electives. The request should be made to the Associate Dean for Students Affairs. Late add or drop requests are considered for the following reasons:

1. Documented late notice of an away elective (a forwarded email from the away elective must be provided, and the email must be dated within the 30-day add/drop period).
2. Illness or major life event (such as a death in immediate family, or other major illness).
3. Consideration of a change in specialty career choice during fourth year (e.g. switching from Internal Medicine to Pediatrics).
4. Recommendation from the Medical School's career development team, Mary B. Arnold mentor, or Dean to continue studying for licensing examination (requires submission of NBME practice exam report).

If documentation for No. 1 is provided and approval is obtained from the Associate Dean for Student Affairs, the Medical School's Office of Records and Registration office will notify the elective course leader, and the student will be allowed to withdraw from an elective within the 30-day window. For Nos. 2, No. 3 and No. 4, decisions around adding or dropping a course within the restricted 30-day window will be approved by the Associate Dean for Student Affairs in consultation with the Student Support Committee (comprised of representation from the Offices of Medical Education; Student Affairs; and Belonging, Equity, Diversity, and Inclusion), as necessary.

If a student meets any of the above four (4) criteria, receives formal approval from the Associate Dean for Student Affairs, and there is an available opening in the course, the student will be allowed to add an elective (including Independent Study) within the 30-day window pending permission of the course leader. The Medical School's Office of Records and Registration will notify the course leaders regarding dropping an elective, and request the addition of an elective at the course leader's discretion.

Some clinical rotations have a longer restricted add/drop period (e.g. 60 days). Students should review this information in OASIS prior to signing up for the course but at least prior to submitting an add/drop request.

4.0 Definitions

For the purpose of this policy, the terms below have the following definitions:

- | | |
|---------------------|---|
| 4.1 AAMC | Association of American Medical Colleges, a non-profit organization dedicated to advancing medical education. |
| 4.2 APC | Administrative Policy Committee formulates and implements new policies relevant to Medical School and its community members. |
| 4.3 ASP | Academic Scholars Program, wherein students take a leave of absence from studies to pursue a scholarly research project. |
| 4.4 Citation | Professionalism citation that is issued when egregious behavior is not corrected, or remediation plan is determined to be insufficient to MCASP. Follows a Warning. |

- 4.5 LCME** Liaison Committee on Medical Education. The accrediting body of medical education programs leading to the MD degree in the US and Canada.
- 4.6 MCASP** Medical Committee on Academic Standing and Professionalism: this committee monitors students' progress, and approves students' promotion from one phase of the curriculum to the next, including cases of academic deficiency and ethical misconduct (both academic and professional). It recommends action, including warnings, probation, return to good academic standing, and dismissing students from the Medical School.
- 4.7 MCC** Medical Curriculum Committee oversees the review of curricular content and integration, and evaluation of the medical education program to ensure continuous oversight of such program. (Formerly "MDCC.")
- 4.8 Medical School** The Warren Alpert Medical School of Brown University
- 4.9 NBME** National Board of Medical Examiners: an organization that creates assessment tools to assist medical school educators in measuring student knowledge and providing actionable feedback.
- 4.10 OASIS** Registration and evaluation system designed specifically for medical student information into which student evaluations and grades are submitted electronically. It is also used for student, resident, and faculty attestations.
- 4.11 OME** Office of Medical Education
- 4.12 OSA** Office of Student Affairs
- 4.13 OSCE** Objective Structured Clinical Examinations
- 4.14 Shelf Exam** NBME-designed, subject-based, standardized exams that evaluate student's knowledge in the core clerkships: internal medicine, family medicine, surgery, pediatrics, obstetrics and gynecology, CNS (psychiatry and neurology).
- 4.15 The Warren Alpert Medical School:** The Warren Alpert Medical School of Brown University
- 4.16 USMLE** United States Medical Licensing Examination is a three-step examination for medical licensure in the United States.
- 4.17 Warning:** Issued if a student demonstrates lapse(s), repeated, and/or pervasive behavior in professional conduct. Precedes Citation.

5.0 Responsibilities

All individuals to whom this policy applies are responsible for becoming familiar with and following this policy. University supervisors are responsible for promoting the understanding of this policy and for taking appropriate steps to help ensure compliance with it.

6.0 Consequences for Violating this Policy

Failure to comply with this and related policies is subject to disciplinary action, up to and including suspension without pay, or termination of employment or association with the University, in accordance with applicable (e.g., staff, faculty, student) disciplinary procedures.

Brown's Ethics and Compliance Reporting System allows anonymous and confidential reporting on matters of concern, including privacy issues, through the EthicsPoint platform.

Failure to comply with this policy will be referred to either the COLE executive committee or the Medical Curriculum Committee.

7.0 Related Information

The following information complements and supplements this document. The information is intended to help explain this policy and is not an all-inclusive list of policies, procedures, laws and requirements.

7.1 Related Forms:

n/a

7.2 Other Related information:

n/a

8.0 Policy Owner and Contact(s)

8.1 Policy Owners: Administrative Policy Committee, Medical Curriculum Committee (as appropriate, see 8.2).

8.2 Policy Approved by: See below for the dates of when the Administrative Policy Committee and/or Medical Curriculum Committee last approved the policy.

13-01	January 20, 2016 (MCC)		13-10	June 23, 2021 (MCC)
13-02	January 18, 2017 (MCC)		13-11	October 7, 2024 (APC) October 16, 2024 (MCC)
13-03	April 10, 2019 (MCC)		13-12	November 10, 2021 (MCC)
13-04	April 10, 2019 (MCC)		13-13	June 23, 2021 (MCC)
13-05	April 15, 2020 (MCC)		13-14	August 11, 2021 (MCC)
13-06	June 17, 2020 (MCC)		13-15	August 17, 2022 (MCC)
13-07	February 17, 2021 (MCC)		13-16	November 10, 2021 (MCC)
13-08	February 17, 2021 (MCC)		13-17	September 22, 2021 (MCC)
13-09	June 23, 2021 (MCC)		13-18	October 19, 2022 (MCC)

8.3 Subject Matter Contact: Office of Medical Education, Office of Student Affairs

9.0 Policy History

9.1 Policy Effective Date: April 10, 2019 (Policy No. 09-05); July 1, 2019 (for Policy No. 09-01, Policy No. 09-02, Policy No. 09-03, Policy No. 09-07); May 2020 (Policy No. 13-13); August 2021 (Policy No. 13-14); July 1, 2021 (Policy No. 13-18); August 17, 2022 (Policy No. 13-15). All other policies are effective July 1, 2019.

9.2 Policy Last Reviewed: See below.

13-01	January 20, 2016 (MCC)		13-10	June 23, 2021 (MCC)
13-02	January 18, 2017 (MCC)		13-11	October 16, 2024 (MCC)
13-03	April 10, 2019 (MCC)		13-12	November 10, 2021 (MCC)
13-04	April 10, 2019 (MCC)		13-13	June 23, 2021 (MCC)
13-05	April 15, 2020 (MCC)		13-14	August 11, 2021 (MCC)
13-06	June 17, 2020 (MCC)		13-15	August 17, 2022 (MCC) July 1, 2024 (Office of Registration)
13-07	February 17, 2021 (MCC)		13-16	<i>Removed and placed in Student Handbook as it is more procedural than policy.</i>
13-08	INACTIVE (APC: June 8, 2022; MCC: June 15, 2022)		13-17	September 22, 2021 (MCC)
13-09	June 23, 2021 (MCC)		13-18	October 3, 2022 (APC) October 19, 2022 (MCC)

9.3 Policy Update/Review Summary: Formatted to comply with new University Policy template. Newly approved policies will be added as needed.

- 13-11: October 2021 revision: Language added to existing policy re: timeline to appeal grade is one month. Added 'evaluation' after grade. Standing policy remains unchanged. Updated October 2024: changed title of policy, updated policy language throughout, added evaluation component to policy.
- 13-12: October 2021 revision: Revised policy to align with current procedure. Removed appeal process. Added language that a student may review MSPE for accuracy and may discuss with Associate Dean Student Affairs.
- 13-08: Repeat Sub-I for Credit: Policy made INACTIVE (effective AY 22-23) by APC and MCC (June 2022). This was a COVID-related policy.
- 13-15: August 2022: added restriction language to policy.
- 13-18: October 2022: Added request for consideration paragraph; scholarly project criteria.
- 13-11: July 2024: pulled paragraph from Policy No. 11-05 regarding grade appeal and added it to this policy for consistency.
- 13-15: July 2024: Office of Records and Registration reviewed the policy and made minor wordsmithing edits.
- 13-16: July 2024: this policy was revised and approved by APC and MCC in June 2024. During the revising period for the Student Handbook, APC determined to pull this policy out and put it in the Student Handbook as it is more procedural than a policy.
- Removed Policy Nos. 13-11 (Grade and Evaluation Appeal) and 13-18 (Master of Medical Science Degree) from this template as it was converted to the new policy template to comply with the Comprehensive Policy Review.
- Removed Policy Nos. 13-14 (Educational Objectives and Guidelines for Approving a Sub-internship) and 13-17 (Policy for Surgery Elective Credit) from this document as they are guidelines and not policies.

Key Words: exam, evaluation, elective, sub-internship, clinical