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 (AMS) which do not correspond to Liaison Committee on Medical Education (LCME) Standards but are central to the management and operation of AMS. The policies contained in this policy document relate to the following:

- Clinical Elective Policy on Absences
- Clinical Elective Supervision of AMS Students in Other Nations
- Timeliness of Course Evaluations
- Narrative Component Evaluations
- Academic Scholars Program Clinical Component
- Passing Determination of NBME Shelf Exam
- Repeat sub-Internship for Credit
- Release of Evaluations
- Exam Tardiness
- International Courses
- Course and Clerkship Grades and Data
- Medical Student Performance Evaluation (MSPE)
- Withdrawal/Dismissal from AMS

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

2.0 To Whom the Policy Applies

All AMS community members.
3.0 Policy Statement

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

The AMS 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 AMS 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 AMS faculty member or by a faculty member whose institution has an appropriate association (Memorandum of Understanding [MOU]) with AMS. 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 AMS, then:

1. When treating patients, the student will be directly supervised by an AMS faculty member in a similar manner to what is expected at AMS 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 AMS 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 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 **Repeat Sub-Internship for Credit (Policy No. 13-08)**

Year 3 and 4 students may repeat a sub-internship one time and receive credit for both rotations. This is effective for the 2020-21 academic year only and will need to be re-approved by the Medical Curriculum Committee for subsequent academic years. [Note: In effect for AY 2021-2022.]

3.9 **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 (Assistant Deans for Medical Education – Years 1 and 2, Associate Dean for Medical Education – Year 3). 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 and wait for one of the curriculum directors to make a decision 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 Office of Medical Education on a make-up date for the exam, to be taken at the discretion of OME.

3.10 **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 **Course and Clerkship Grades and Data (Policy No. 13-11)**

The Director(s) of the Year 1, Year 2, and Years 3 and 4 Curriculum along with the course leader(s), the Clerkship Director(s), the Sub-internship Directors, or the Clinical Elective Directors are responsible for determining how students are evaluated and how grades are assigned. Students who believe that an assigned grade or evaluation is not an accurate reflection of their performance should discuss this with the Director(s) of the Curriculum for the appropriate year and the Course Leader(s), Clerkship Director(s), Sub-internship Directors, or Clinical Elective Directors as a first discussion. If students wish to appeal their grade or evaluation beyond this first step, they may submit their appeal to the “Grades and Records Appeal Committee”, a sub-committee of the Medical Committee on Academic Standing and Professionalism. This committee will hear a student’s appeal and offer final judgement on whether a grade or evaluation change is warranted. The decision of this committee is final.

3.12 **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. This evaluation is compiled by the Assistant Dean for Student Affairs or a faculty member from the Council of Specialty Career Advisors on behalf of the Medical School, and is aligned as closely as possible with the guidelines laid out by the AAMC. In preparation for compiling the MSPE, it is expected that the Assistant Dean or the faculty member will meet with the student to discuss the student's background, academic record, interests, activities, and professional goals. In addition to gathering information during meetings, the compiler of the MSPE is expected to review a student's academic record (to which appropriate access will be provided by the medical school) and CV. Narrative comments from clerkship, elective, and sub-internship evaluations are included without editing except for grammatical corrections, and in some cases, for length. [If a student believes that these comments are not an accurate reflection of their performance, the student should discuss this with the Director of the Year 3 and 4 Curriculum and the Clerkship Director(s), Sub-internship Directors, or Clinical Elective Directors as a first step. If students wish to appeal their MSPE comments beyond this discussion, they may submit their appeal to the “Grades and Records Appeal Committee,” a sub-committee of the Medical Committee on Academic Standing and Professionalism. This committee will hear a student’s appeal and offer final judgement on whether a change to the comments is warranted and would thus be reflected in the MSPE]

3.13 **Withdrawal/Dismissal from AMS (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.

4.0 Definitions

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

4.1 AAMC  Association of American Medical Colleges. This non-profit organization dedicated to advancing medical education.

4.2 AMS  The Warren Alpert Medical School of Brown University

4.3 APC  Administrative Policy Committee formulates and implements new policies relevant to AMS and its community members.

4.4 ASP  Academic Scholars Program, wherein students take a leave of absence from studies to pursue a scholarly research project.

4.5 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.

4.6 LCME  Liaison Committee on Medical Education. The accrediting body of medical education programs leading to the MD degree in the US and Canada.

4.7 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.
4.8 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.

4.9 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.

4.10 OME Office of Medical Education

4.11 OSA Office of Student Affairs

4.12 OSCE Objective Structured Clinical Examinations

4.13 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).

4.14 USMLE United States Medical Licensing Examination is a three-step examination for medical licensure in the United States.

4.14 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: Administrative Policy Committee and/or Medical Curriculum Committee (as appropriate, see below).

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8.3 Subject Matter Contact: Administrative Policy Committee (Drs. Roxanne Vrees and/or Sarita Warrier), Co-chair of Medical Curriculum Committee

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)

9.2 Policy Last Reviewed: See below.

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

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