Emory University is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools
1866 Southern Lane, Decatur, Georgia 30033-4097

Emory University School of Medicine is accredited by the Liaison Committee on Medical Education of the American Medical Association and the Association of American Medical Colleges.

Emory University SOM Physician Assistant Program is accredited by the Accreditation Review Commission on Education for the Physician Assistant, Inc.

All information in this handbook is accurate at the time of publication (7.26.21). The PA Program reserves the right to make changes at any time. Students will be notified of changes.
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INTRODUCTION AND PURPOSE

This handbook is a reference for physician assistant students and others seeking information concerning the formal administrative policies, rules and regulations of Emory University and the School of Medicine. In addition, this Student Handbook contains procedural policies for areas such as admissions, academic and professional standards, progress and promotion, financial aid, student organizations, student health and disability insurance, academic and personal counseling, and student health. Nothing in this document constitutes a contract or creates a contractual obligation on the part of Emory University. The University reserves the right to interpret and apply its policies and procedures, and to deviate from these guidelines, as appropriate in the particular circumstances and in accordance with the mission and goals of the University. The University further reserves the right to alter or modify any statement contained in this document without prior notice. Every student enrolled in the School of Medicine is accountable for reading, understanding, and abiding by the regulations listed in this handbook as well as the Rules and Regulations of the University and the School of Medicine as set forth in detail on the School of Medicine Connections Canvas site.

It is the responsibility of each student enrolled in the Emory University School of Medicine PA Program to understand and abide by the regulations and policies within this handbook and within Emory University Publications.

Emory University is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award associate, baccalaureate, master, education specialist, doctorate and professional degrees. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097 or call 404-679-4500 for questions about the accreditation of Emory.

THE EMORY UNIVERSITY SCHOOL OF MEDICINE MISSION STATEMENT

The Emory University School of Medicine is a leading institution with the highest standards in education, biomedical research, and patient care.

We are committed to recruiting and developing a diverse group of students and innovative leaders in biomedical science, public health, medical education, and clinical care.

We foster a culture that integrates leading edge basic, translational, and clinical research to further the ability to deliver quality health care, to predict illness and treat the sick, and to promote health of our patients and community.

Our mission encompasses the following objectives:

- Provide outstanding educational programs for medical and graduate students, and for training health care professionals.
- Develop outstanding clinicians and investigators who are lifelong learners, who will provide the highest quality compassionate care, and who will serve the needs of their community and the world in the best traditions of our profession.
- Conduct innovative and collaborative research and integrate this knowledge into the practice of medicine.
- Advance the early detection, treatment, and prevention of disease.
- Ensure the highest ethical and professional standards in all of our endeavors.

THE EMORY PA PROGRAM MISSION AND VALUES STATEMENTS

PA Program Mission

The Emory Physician Assistant Program recruits, educates, and mentors a diverse group of students to become highly regarded physician assistants providing compassionate health care of the highest quality.

Values

The Program values the highest standards of professionalism and team-based medicine with a commitment to the medically underserved. Graduates are prepared to practice evidence-based primary care and preventive medicine and engage in lifelong learning.
PHYSICIAN ASSISTANT OBJECTIVES AND COMPETENCIES

Preamble
Between 2003-2004, the National Commission on Certification of Physician Assistants (NCCPA) led an effort with three other national PA organizations (Accreditation Review Commission on Education for the Physician Assistant (ARC-PA), American Academy of Physician Assistants (AAPA), and Physician Assistant Education Association (PAEA) -- formerly Association of Physician Assistant Programs (APAP)) to define PA competencies in response to similar efforts being conducted within other health care professions and the growing demand for accountability and assessment in clinical practice.

The resultant document, Competencies for the Physician Assistant Profession, provided a foundation from which PA organizations, other PA organizations and individual PAs could chart a course for advancing the competencies of the PA profession.

In 2011, representatives from the same four national PA organizations convened to review and revise the document. The revised manuscript was then reviewed and approved by the leadership of the four organizations in 2012.

Introduction
This document serves as a map for the individual PA, the physician-PA team, and organizations committed to promoting the development and maintenance of professional competencies among PAs. While some competencies are acquired during formal PA education, others will be developed and mastered as PAs progress through their careers. The PA profession defines the specific knowledge, skills, attitudes, and educational experiences requisite for PAs to acquire and demonstrate these competencies.

The clinical role of PAs includes primary and specialty care in medical and surgical practice settings. Professional competencies for PAs include the effective and appropriate application of medical knowledge, interpersonal and communication skills, patient care, professionalism, practice-based learning and improvement and systems-based practice.

Patient-centered, PA practice reflects a number of overarching themes. These include an unwavering commitment to patient safety, cultural competence, quality health care, lifelong learning, and professional growth. Furthermore, the profession’s dedication to the physician-PA team benefits patients and the larger community.

Competencies for the Physician Assistant Profession

Medical Knowledge
Medical knowledge includes the synthesis of pathophysiology, patient presentation, differential diagnosis, patient management, surgical principles, health promotion, and disease prevention. PAs must demonstrate core knowledge about established and evolving biomedical and clinical sciences and the application of this knowledge to patient care in their area of practice. In addition, PAs are expected to demonstrate an investigative and analytic thinking approach to clinical situations. PAs are expected to understand, evaluate, and apply the following to clinical scenarios:

- evidence-based medicine
- scientific principles related to patient care
- etiologies, risk factors, underlying pathologic process, and epidemiology for medical conditions
- signs and symptoms of medical and surgical conditions
- appropriate diagnostic studies
- Management of general medical and surgical conditions to include pharmacologic and other treatment modalities
- interventions for prevention of disease and health promotion/maintenance
- screening methods to detect conditions in an asymptomatic individual
- history and physical findings and diagnostic studies to formulate differential diagnosis

Interpersonal & Communication Skills
Interpersonal and communication skills encompass verbal, nonverbal, written, and electronic exchange of information. PAs must demonstrate interpersonal and communication skills that result in effective information exchange with patients, patients’ families, physicians, professional associates, and other individuals within the health care system. PAs are
expected to:

- create and sustain a therapeutic and ethically sound relationship with patients
- use effective communication skills to elicit and provide information
- adapt communication style and messages to the context of the interaction
- work effectively with physicians and other health care professionals as a member or leader of a health care team or other professional group
- demonstrate emotional resilience and stability, adaptability, flexibility, and tolerance of ambiguity and anxiety
- accurately and adequately document information regarding care for medical, legal, quality, and financial purposes

**Patient Care**

Patient care includes patient- and setting-specific assessment, evaluation, and management. PAs must demonstrate care that is effective, safe, high quality, and equitable. PAs are expected to:

- work effectively with physicians and other health care professionals to provide patient-centered care
- demonstrate compassionate and respectful behaviors when interacting with patients and their families
- obtain essential and accurate information about their patients
- make decisions about diagnostic and therapeutic interventions based on patient information and preferences, current scientific evidence, and informed clinical judgment
- develop and implement patient management plans
- counsel and educate patients and their families
- perform medical and surgical procedures essential to their area of practice
- provide health care services and education aimed at disease prevention and health maintenance
- use information technology to support patient care decisions and patient education

**Professionalism**

Professionalism is the expression of positive values and ideals as care is delivered. Foremost, it involves prioritizing the interests of those being served above one’s own. PAs must acknowledge their professional and personal limitations. Professionalism also requires that PAs practice without impairment from substance abuse, cognitive deficiency or mental illness. PAs must demonstrate a high level of responsibility, ethical practice, sensitivity to a diverse patient population, and adherence to legal and regulatory requirements. PAs are expected to demonstrate:

- understanding of legal and regulatory requirements, as well as the appropriate role of the PA
- professional relationships with physician supervisors and other health care providers
- respect, compassion, and integrity
- accountability to patients, society, and the profession
- commitment to excellence and on-going professional development
- commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices
- sensitivity and responsiveness to patients’ culture, age, gender, and abilities
- self-reflection, critical curiosity, and initiative
- healthy behaviors and life balance
- commitment to the education of students and other health care professionals

**Practice-Based Learning and Improvement**

Practice-based learning and improvement includes the processes through which PAs engage in critical analysis of their own practice experience, the medical literature, and other information resources for the purposes of self- and practice-improvement. PAs must be able to assess, evaluate, and improve their patient care practices. PAs are expected to:

- analyze practice experience and perform practice-based improvement activities using a systematic methodology in concert with other members of the health care delivery team
- locate, appraise, and integrate evidence from scientific studies related to their patients’ health
- apply knowledge of study designs and statistical methods to the appraisal of clinical literature and other information on diagnostic and therapeutic effectiveness
- utilize information technology to manage information, access medical information, and support their own education
• recognize and appropriately address personal biases, gaps in medical knowledge, and physical limitations in themselves and others

Systems-Based Practice
Systems-based practice encompasses the societal, organizational, and economic environments in which health care is delivered. PAs must demonstrate an awareness of and responsiveness to the larger system of health care to provide patient care that balances quality and cost, while maintaining the primacy of the individual patient. PAs should work to improve the health care system of which their practices are a part. PAs are expected to:

• effectively interact with different types of medical practice and delivery systems
• understand the funding sources and payment systems that provide coverage for patient care and use the systems effectively
• practice cost-effective health care and resource allocation that does not compromise quality of care
• advocate for quality patient care and assist patients in dealing with system complexities
• partner with supervising physicians, health care managers, and other health care providers to assess, coordinate, and improve the delivery and effectiveness of health care and patient outcomes
• accept responsibility for promoting a safe environment for patient care and recognizing and correcting systems-based factors that negatively impact patient care
• apply medical information and clinical data systems to provide effective, efficient patient care
• recognize and appropriately address system biases that contribute to health care disparities
• apply the concepts of population health to patient care

Program Required Competencies
Physician Assistants must have the knowledge and skill to practice in clinical situations and to render a wide range of care based on the patient’s needs. To complete the PA clinical training, students must exhibit proficiency in their clinical education with regard to the competencies listed below.

<table>
<thead>
<tr>
<th>Clinical and Technical Skills</th>
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<tbody>
<tr>
<td><strong>1</strong> Collect a complete medical history including</td>
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<td>PMH</td>
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<td>Fam Hx</td>
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<td>Soc Hx</td>
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<td>ROS</td>
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<tr>
<td><strong>2</strong> Perform a comprehensive and problem-focused physical exam and differentiate between normal and abnormal findings</td>
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<td><strong>3</strong> Triage patients and prioritize patient complaints as acute, chronic, urgent and emergent</td>
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<td><strong>4</strong> Deliver comprehensive and problem-focused oral presentations</td>
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<td><strong>5</strong> Write comprehensive and problem-focused medical documentation</td>
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<tr>
<td><strong>6</strong> Perform a comprehensive physical exam, including the following special exams</td>
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<tr>
<td><strong>6a</strong> Breast exam</td>
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<tr>
<td><strong>6b</strong> Pelvic exam</td>
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<tr>
<td><strong>6c</strong> Testicular exam</td>
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<tr>
<td><strong>6d</strong> Digital rectal exam</td>
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<tr>
<td><strong>7</strong> Perform the following core duty procedures</td>
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<tr>
<td><strong>7a</strong> Universal precautions</td>
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**Clinical Reasoning and Problem-Solving Abilities**

| 8 | Formulate an appropriate differential diagnosis for a chief complaint |
| 9 | Order laboratory and imaging studies for work up of those differentials |
| 10 | Interpret common laboratory and imaging studies within the work up |
| 11 | Demonstrate critical thinking skills and recognize when there are contraindications to tests, imaging or procedures |

**Interpersonal and Interprofessional Communication Skills**

| 12 | Demonstrate patient-centered communication skills (e.g. empathetic listening) with patients and their families to build meaningful, therapeutic relationships |
| 13 | Provide culturally sensitive patient education on common issues including normal development and aging, health maintenance, disease prevention, screening techniques, immunizations or risks/benefits of various lifestyle choices-all at a level that is meaningful to the patient |
| 14 | Work collaboratively with members of the health care team to coordinate patient care |

**Medical Knowledge**

| 15 | Evaluate, diagnose, treat and manage patients with common complaints |
| 16 | Assess a patient and demonstrate clinical decision-making skills to form an assessment and treatment plan |
| 17 | Apply evidence-based medicine in medical decision making to apply first-line treatment for common complaints |
| 18 | Promote health and disease prevention through patient education about a healthy lifestyle modality |
| 19 | Determine age-appropriate screening to detect asymptomatic conditions in adults (including hypertension, colon cancer, breast cancer, lung cancer, cervical cancer, osteoporosis, HIV, hepatitis C and B or AAA) |

**Professional Behaviors**

<p>| 20 | Articulate a physician assistant’s role and responsibilities to others |
| 21 | Demonstrate a commitment to and recognize all aspects of patient privacy |
| 22 | Recognize personal bias and practice cultural humility |
| 23 | Demonstrate professional behavior through dependability, respect and compassion |</p>
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<tr>
<td><strong>24</strong></td>
<td>Appreciate diversity and understand health disparity</td>
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<tr>
<td><strong>25</strong></td>
<td>Reflect on personal and professional limitations in providing care</td>
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<tr>
<td><strong>26</strong></td>
<td>Demonstrate awareness and sensitivity to social, legal or ethical issues</td>
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<tr>
<td><strong>Community Engaged Learning</strong></td>
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<tr>
<td><strong>27</strong></td>
<td>Participate in clinical rotation with underserved and vulnerable populations</td>
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<tr>
<td><strong>28</strong></td>
<td>Understand social determinants of health</td>
</tr>
<tr>
<td><strong>29</strong></td>
<td>Be aware of and provide community resources</td>
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TECHNICAL, NON-ACADEMIC STANDARDS

Section 1: INTRODUCTION

Overview

Essential Abilities and Characteristics Required for Admission and Completion of the MMSc Degree

Essential abilities and characteristics required for completion of the MMSc degree consist of certain minimum physical and cognitive abilities and sufficient mental and emotional stability to assure that candidates for admission, promotion, and graduation are able to complete the entire course of study and participate fully in all aspects of medical training, with or without reasonable accommodation.

The following abilities and characteristics are defined as technical standards, which, in conjunction with academic standards established by the faculty, are requirements for admission, promotion, and graduation. Delineation of technical standards is required for the accreditation of the Program. Although these standards serve to delineate the necessary physical and mental abilities of all candidates, they are not intended to deter any candidate for whom reasonable accommodation will allow the fulfillment of the complete curriculum. Candidates with questions regarding technical standards are encouraged to contact the Admissions Department immediately to begin to address what types of accommodation may be considered for development to achieve these standards. Admission to the Physician Assistant Program at Emory University is conditional on the candidate’s having the ability to satisfy these technical standards, with or without reasonable accommodation, and results from a process that examines and values all of the skills, attitudes, and attributes of each candidate on a case-by-case basis.

The Program has an ethical responsibility for the safety of patients with whom students and graduates will come in contact. Although students learn and work under the supervision of the faculty, students interact with patients throughout their education. Patient safety and well-being are therefore major factors in establishing requirements involving the physical, cognitive, and emotional abilities of candidates for admission, promotion, and graduation. Candidates must have the physical and emotional stamina and capacity to function in a competent manner in the hospital, classroom, and laboratory settings, including settings that may involve heavy workloads, long hours, and stressful situations. Individuals whose performance is impaired by abuse of alcohol or other substances are not suitable candidates for admission, promotion, or graduation.

Section 2: TECHNICAL STANDARDS

Observation – Candidates must be able to observe demonstrations and participate in experiments of science, including but not limited to such things as dissection of cadavers. Candidates must be able to accurately observe patients and assess findings. They must be able to obtain a medical history and perform a complete physical examination in order to integrate findings based on these observations and to develop an appropriate diagnostic and treatment plan.

Communication – Candidates must be able to communicate effectively and efficiently with patients, their families, and members of the health care team. They must be able to obtain a medical history in a timely fashion, interpret non-verbal aspects of communication, and establish therapeutic relationships with patients. Candidates must be able to record information accurately and clearly and communicate effectively in English with other health care professionals in a variety of patient settings.

Motor Function – Candidates must possess the capacity to perform physical examinations and diagnostic maneuvers. They must be able to respond to emergencies in a timely manner and provide general and emergency care. They must adhere to universal precaution measures and meet safety standards applicable to inpatient and outpatient settings and other clinical activities.

Intellection, Conceptual, Integrative and Quantitative Abilities – Candidates must have sufficient cognitive (mental) abilities and effective learning techniques to assimilate the detailed and complex information presented in the curriculum. They must be able to learn through a variety of modalities including, but not limited to, classroom instruction; small group, team and collaborative activities; individual study; preparation and presentation of reports; and use of computer technology. Candidates must be able to memorize, measure, calculate, reason, analyze, synthesize, and transmit information across modalities. They must recognize and draw conclusions about three-dimensional spatial relationships.
and logical sequential relationships among events. They must be able to formulate and test hypotheses that enable effective and timely problem solving in diagnosis and treatment of patients in a variety of clinical modalities.

**Behavioral and Social Attributes** – Candidates must demonstrate the maturity and emotional stability required for full use of their intellectual abilities. They must accept responsibility for learning, exercising good judgment, and promptly completing all responsibilities attendant to the diagnosis and care of patients. They must understand the legal and ethical aspects of the practice of medicine and function within both the law and ethical standards of the medical profession. Candidates must be able to work effectively, respectfully, and professionally as part of the healthcare team, and to interact with patients, their families, and health care personnel in a courteous, professional, and respectful manner. They must be able to tolerate physically taxing workloads and long work hours, to function effectively under stress, and to display flexibility and adaptability to changing environments. They must be capable of regular, reliable, and punctual attendance at classes and in their clinical responsibilities. Candidates must be able to contribute to collaborative, constructive learning environments; accept constructive feedback from others; and take personal responsibility for making appropriate positive changes. It is expected that minimum accommodation will be requested concerning this set of standards.

**Ethical and Legal Standards** – Candidates must meet the legal standards to be licensed to practice medicine. As such, candidates for admission must acknowledge and provide written explanation of any felony offense or disciplinary action taken against them prior to matriculation in the Program. In addition, should the student be convicted of any felony offense while in the Program, they agree to immediately notify the Program Director as to the nature of the conviction. Failure to disclose prior or new offenses can lead to disciplinary action that may include dismissal.

**Section 3: EQUAL ACCESS TO THE SCHOOL OF MEDICINE’S EDUCATIONAL PROGRAM**
The Emory University Physician Assistant Program intends for its students and graduates to become competent and compassionate clinicians who will meet all requirements for medical licensure.

The Program has an institutional commitment to provide equal educational opportunities for qualified students with disabilities who apply for admission to the program, with a strong commitment to full compliance with state and federal laws and regulations (including the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990). As previously noted, admitted candidates with disabilities are reviewed individually, on a case-by-case basis. An accommodation is not reasonable if it poses a direct threat to the health or safety of self and/or others, if making it requires a substantial modification in an essential element of the curriculum, if it lowers academic standards, or poses an undue administrative or financial burden.

**Section 4: PROCESS**
As stated above, admission and promotion at the School of Medicine is conditional on the candidate’s having the willingness and ability to satisfy the technical standards, with or without reasonable accommodation.

Admitted candidates who have a disability and need accommodations should initiate discussions with the Office of Accessibility Services (OAS) as soon as the offer of admission is received and accepted. It is the responsibility of a candidate with a disability to provide sufficiently current information documenting the general nature and extent of his/her disability, and the functional limitations proposed to be accommodated.

Should a candidate have or develop a condition that would place patients, the candidate, or others at risk or that may affect his/her need for accommodation, that student should receive an evaluation. As in initial assessments, a complete and careful reconsideration of all the skills, attitudes, and attributes of each candidate will be performed.
PROFESSIONAL CONDUCT

Section 1: EXPECTATIONS

Overview

Emory University is an institution dedicated to providing educational opportunities for its students, transmitting and advancing knowledge, and providing a wide range of services to students and to the general community. To accomplish these objectives and responsibilities requires that the University be free from violence, threats and intimidation; protective of free inquiry and dissent; respectful of the rights of others; open to change; supportive of democratic and lawful procedure; and dedicated to intellectual integrity and a rational approach to the resolution of human problems.

The tradition of the university as a sanctuary of academic freedom and center of informed discussion is an honored one, to be guarded vigilantly. The basic significance of that sanctuary lies in the protection of intellectual freedoms: the rights of professors to teach; of scholars to engage in the advancement of knowledge; of students to learn and express their views.

Health professionals are privileged to serve in important and time-honored roles as caregivers for other humans. These roles include physical and emotional dimensions that demand the highest degree of ethical behavior among our professions.

Ethical behavior includes, but is not in any way limited to honesty, trustworthiness, professional demeanor, respect for the rights of others, personal accountability, and concern for the welfare of patients:

Honesty – Being truthful in communication with all others, while in the healthcare arena or in the community at large.

Maintenance of Patient Confidentiality – Restricting discussion of patient care to those areas where conversations cannot be overheard by others outside of the care team; refraining from disclosing patient identity to those not connected to the care of the patient; maintaining appropriate security for all paper and electronic patient records, whether in the patient care or research realms;

Trustworthiness – Being dependable; following through on responsibilities in a timely manner; maintaining the confidentiality of patient information.

Professional Communication and Demeanor – Being thoughtful and kind when interacting with patients, their families, other members of the healthcare team, and all others; refraining from intoxication; abstaining from the illegal use of drugs (both prescription and illicit drugs); maintaining civility in all relationships; striving to maintain composure under pressures of fatigue, professional stress or personal problems; maintaining a neat and clean appearance and dress in attire that is reasonable and accepted as professional to the circumstances.

Respect for the rights of others – Dealing with all others, whether in a professional or non-professional setting, in a considerate manner and with a spirit of cooperation; respecting the rights of patients and their families to be informed and share in patient care decisions; respecting patients’ modesty and privacy.

Personal accountability – Participating responsibly in patient care to the best of one’s ability and with appropriate supervision; undertaking clinical duties and persevering until they are complete; notifying the responsible person if one is unable to perform clinical tasks effectively; complying with University Policies and Procedures in an honest and forthright manner.

Concern for the welfare of patients – Treating patients and their families with respect and dignity both in their presence and in discussions with others; avoiding the use of foul language, offensive gestures or inappropriate remarks with sexual overtones; discerning accurately when supervision or advice is needed and seeking these out before acting; recognizing when one’s ability to function effectively is compromised and asking for relief or help; never administering care, in person or over the phone while under the influence of alcohol or other drugs (prescription or illegal); not engaging in romantic, sexual, or other nonprofessional relationships with a patient, even upon the apparent request of a patient; advocating for the best care of the patient, in context of that patient’s beliefs and desires.
Responsibility to duty—Effectively undertaking duties with alacrity [eagerness, enthusiasm and promptness are synonyms] and persevering until complete, or notifying a responsible more senior person of a problem; being punctual for class, small groups, rounds, conferences and other duties; timely notification of supervisory faculty, residents and Deans of absences or an inability to carry out assigned duties; seeing patients regularly and assuming responsibility for their care with appropriate supervision; identifying emergencies and responding appropriately; and being available to faculty or staff personnel when on duty.

STANDARDS OF DRESS AND APPEARANCE
This section describes standards for dress and appearance necessary to meet the service and safety objectives of placing patient comfort and welfare first, and the educational objectives of preparing the student to assume the role of a professional health care worker.

Patient trust and confidence in the health care provider are essential to excellent acute and chronic care. The message communicated by the caregiver by his/her dress and appearance plays a fundamental role in establishing this trust and confidence. Students should consider the cultural sensitivities of their most socially conservative patients and families. Physicians-in-training should present themselves in a manner that will demonstrate respect, inspire trust, and ensure patient comfort. Body art and body piercing should not be worn or displayed by physician assistant students in professional settings.

The following guidelines help Emory students establish a successful caregiver-patient relationship:
During much of the Foundations Phase and at times during the remaining phases of the curriculum, students may spend time in lectures or other activities that do not involve patients. While in lectures or small group activities that do not involve patient contact, attire should be comfortable but should not detract from the serious educational atmosphere.

When patient contact is part of the educational experience or when students enter a clinical venue, students are expected to dress professionally. This includes actual or standardized patient encounters in the hospital, clinic, lecture hall, or EXCEL suite. Professional dress is described below:

General Standards
For security purposes and for patient comfort in identifying professional personnel, nametags or badges should be worn at all times. Good personal hygiene is to be maintained at all times. This includes regular bathing, use of deodorants/antiperspirants, and regular dental hygiene. Avoid perfumes or colognes, as they may precipitate allergic responses or be sensitizing to patients or colleagues.

Hair Maintenance: Hair should be neat, clean, and of a natural human color. Hair should be styled off the face and out of the eyes. Shoulder length hair should be secured to avoid interference with patients or work duties. Avoid scarves or ribbons (unless culturally appropriate). Beards/mustaches must be neatly trimmed. Unless head coverings are required for religious or cultural reasons, hats should be avoided.

Clothing: Clothing should be clean, professionally styled, and in good repair. Women should wear tailored slacks, dresses, or skirts of medium length. Men should wear slacks, a dress shirt and necktie. Shorts and blue jeans are not appropriate professional dress. All students should wear a clean, white, jacket-length coat over their clothing. Shoes must be closed-toe, comfortable, clean and in good repair.

IMPORTANT NOTES: scrub suits should be worn in specific patient care areas only. They are the property of the hospital and are not to be defaced, altered, or removed from the hospital. Scrubs are NOT to be worn in the School of Medicine Building (including the OSCE suite and ExCEL center) unless otherwise specified. Stained or soiled scrub suits must be changed as soon as possible; they are a source of potential contamination.

Jewelry: Keep jewelry at a minimum, as it may have a potential for cross-infection.
USE OF SOCIAL MEDIA

As described above, behavior of students in the academic setting and beyond must be in keeping with the ideals of the institution and the profession of medicine. The following paragraphs indicate the current standards for behavior that relate to the use of social media.

Each student is responsible for his or her postings on the Internet and in social media. In all communications, students are expected to be courteous, respectful, and considerate of others. Inappropriate postings on the Internet or social media will be considered lapses in the standards of professionalism expected of Emory students. Students responsible for such postings are subject to the conduct code process as for other unprofessional behavior that occurs outside the academic setting and may face disciplinary actions including dismissal from the School of Medicine.

Students within the School of Medicine are urged to consider the following before posting any comments, videos, pictures, or essays to the Internet or a social media site:

1. There is no such thing as an “anonymous” post. Furthermore, any posts or comments submitted for others to read should be posted with full identification. Where your connection to Emory is apparent, make it clear that you are speaking for yourself and not on behalf of Emory. A disclaimer, such as, "The views expressed on this [blog; website] are my own and do not reflect the views of my University or the School of Medicine" are required.
2. Internet activities may be permanently linked to the author, so that all future employment (residency, fellowship and beyond) may be hampered by inappropriate behavior on the Internet.
3. Making postings “private” does not preclude others copying and pasting comments on public websites. “Private” postings that become public are subject to sanctions described in the School of Medicine Conduct Code.
4. Do not share information in violation of any laws or regulations. Disclosing information about patients without written permission of the patient and the School of Medicine, including photographs or potentially identifiable information is strictly prohibited. This rule applies to deceased patients also.
5. For Emory’s protection as well as your own, it is critical that you show proper respect for the laws governing intellectual property, copyright and fair use of copyrighted material owned by others, including Emory’s own copyrights and brands. Curricular materials developed by Emory faculty and staff or faculty/staff of other medical schools or educational institutions should not be used, distributed, or redistributed inappropriately. When in doubt, students should seek guidance regarding appropriate use of such materials.
6. Do not share confidential or proprietary information that may compromise Emory’s research efforts, business practices or security.

Guidelines for Social Networking

Be professional. As medical students and physicians, we should represent our profession well. Adhere to rules of ethical and professional conduct at all times.

Be responsible. Carefully consider content and exercise good judgment as anything you post can have immediate and/or long-term consequences and carry the potential for significant public impact and viral spread of content. Therefore, all statements must be true and not misleading. Make sure that you differentiate opinions from facts.

Maintain separation. Avoid interacting with current or past patients through social media, and avoid requests to give medical advice through social media.

Be transparent/use disclaimers. Disclose yourself and provide an appropriate disclaimer that distinguishes your views from those of the clinic, hospital system and/or University with which you are associated (while at the same time, being careful not to violate any social media policy to which you may be subject by such organizations). Without specific direction from the appropriate personnel, you may not present yourself as an official representative or spokesperson for said organizations. Also, be sure to reveal any conflicts of interest and be honest about your credentials as a medical student or physician (resident or otherwise).

Be respectful. Do not use defamatory, vulgar, libelous and potentially inflammatory language and do not display language or photographs that imply disrespect for any individual or group because of age, race, national origin, gender, sexual
orientation, ethnicity, marital status, genetic information, military status, or any other protected characterization or group.

Follow copyright laws. Comply with copyright laws. Make sure you have the right to use material before publishing.

Protect client/patient information. Do not discuss confidential information and follow standards of patient privacy and confidentiality and regulations outlined in Health Insurance Portability and Accountability Act (HIPAA) and the Family Educational Rights and Privacy Act (FERPA, 20 U.S.C. § 1232g). Remember you could personally face a HIPAA violation if there are enough details in the post for patients to recognize themselves.

Avoid politics. Political endorsements or advocacy positions should generally be avoided.

Comply with all legal restrictions and obligations. Remember use of social networking sites or weblogs can carry legal and professional ramifications. Comments made in an unprofessional manner can be used in legal, professional, or other disciplinary proceedings (i.e., hearings before a State Medical Licensing Board).

Be aware of risks to privacy and security. Read the site’s Terms of Use and Privacy Policy. Be cognizant of continuous changes in these sites and closely monitor the privacy settings of the social network accounts to optimize your privacy and security.

Adapted from the Social Media Guidelines for the American Medical Student Association (AMSA).

Section 2: EMORY UNIVERSITY SCHOOL OF MEDICINE CONDUCT CODE

Given the goals of the University as a place of academic freedom, and the School of Medicine as a site of training for highly ethical health care providers, a system is necessary to provide the proper balance between the academic freedoms allowed a member of the University and his or her responsibility as a citizen of the University community and a future health care professional. For this purpose and in accordance with the By-laws of the University, the President of the University has defined the interests of the University community to be promoted and protected by such a system and has delegated to the Executive Associate Dean for Medical Education and Student Affairs for the School of Medicine the responsibility of designing and maintaining a conduct code for Emory School of Medicine students.

The University community is necessarily pluralistic, and its constituent elements varied and diverse. A system is necessary to provide the proper balance between the academic freedoms allowed a member of the University and his or her responsibility as a citizen of the University community. For this purpose and in accordance with the By-laws of the University, the President of the University has defined the interests of the University community to be promoted and protected by such a system and has delegated to the Executive Associate Dean for Medical Education and Student Affairs for the School of Medicine the responsibility of designing and maintaining a conduct code for medical and academic health students.

This Code may be reviewed annually, and changes require the approval of the Executive Associate Dean for Medical Education and Student Affairs and review and approval by the Senior Vice President and Dean for Campus Life. Provisions of this Code may be revised, supplemented, or amended at any time by action of the appropriate University authorities.

Once a student matriculates as a medical or academic health student into the School of Medicine until the day of completion of his or her degree program and graduation from Emory University he or she is considered a student of the School of Medicine and governed by the principles set forth within this Conduct Code.

The Emory University School of Medicine Conduct Code pertains to misconduct of medical and academic health students enrolled in the School of Medicine outside of an academic setting. Academic and professional discipline of students is not covered by this Code but rather falls within the jurisdiction of either the School of Medicine Honor Code or the Student Progress Committee.

Basic Expectations/Inherent Authority

The primary purpose for the imposition of non-academic discipline in the School of Medicine setting is to protect and preserve the quality of the educational environment in the campus community. This purpose entails several basic expectations:
1. That the School of Medicine and the University at large assumes high standards of courtesy, integrity, and responsibility in all of its members.
2. That each student is responsible for his/her conduct and that continuation as a student is conditional upon compliance with the requirements of student conduct expressed or implied in this Code.

The School of Medicine reserves the right to take necessary and appropriate action to protect the safety and well-being of the campus community. The Executive Associate Dean for Medical Education and Student Affairs is charged with the welfare of all medical and health professions programs students. Accordingly, in emergencies, this individual has full authority to deal with student conduct according to the exigencies of the emergency and for its duration.

The School of Medicine is not designed or equipped to rehabilitate students who do not abide by this Code. It may be necessary to remove those students from the campus and to sever the institution’s relationship with them as provided in this Code.

The Senior Vice President and Dean for Campus Life is delegated responsibility pertaining to all student organizations and student government and, in conjunction with the Executive Associate Dean for Medical Education and Student Affairs, has the responsibility and authority to discipline such organizations whose members are students within the School of Medicine.

Once a student is accepted as a student into the School of Medicine until the day of completion of his or her degree program and graduation from Emory University, he or she is considered a student of the School of Medicine and governed by the principles set forth above.

Confidentiality
Students’ conduct records are confidential and will not be released outside the University without the student’s specific written permission except as provided by applicable law. If a student is found to have violated the Conduct Code, the resulting sanctions can be included in the student’s records which may be shared with future employers or institutions providing further education. Conduct code violations and sanctions may also be reported to other agencies, such as the military, the federal government, licensing boards, and others if requested by the agency and accompanied by a signed release from the student.

Violations of the Law and This Code
Students may be accountable both to civil authorities and to the University for acts that constitute violations of law and of this Code. Those accused of violations of this Code are subject to the disciplinary proceedings outlined in this Code while criminal, civil, or other internal proceedings regarding the same conduct are pending. Accused students may not challenge the disciplinary proceedings outlined in this Code on the grounds that criminal charges, civil actions, or other internal proceedings regarding the same incident are pending, may be initiated, or have been terminated, dismissed, reduced, or not yet adjudicated. The University will refer matters to federal, state, and local authorities for prosecution when appropriate.

Prohibited Conduct
Each student may be subject to this Code whether misconduct occurs on University premises, at University or School of Medicine sponsored activities, or at any location off-campus when such conduct is brought to the attention of the University or the School of Medicine.

It is neither possible nor necessary to specify every instance of misconduct that could result in disciplinary action against a student. Violations of the Standards of Professionalism may also constitute “Prohibited Conduct” that is subject to this Code of Conduct. The following list includes but is not limited to conduct that may subject a student to disciplinary action:

1. Attempting, assisting, or encouraging any conduct as described below.
2. Causing physical harm to any person or causing reasonable apprehension of such harm.
3. Disorderly or indecent behavior including but not limited to destroying or damaging University property or the property of others.
4. Engaging in conduct directed at a specific person or persons that seriously alarms or intimidates such person or persons and that serves no legitimate purpose. Such conduct may include: explicit or implicit threats, including gestures that place a person in reasonable fear of unwelcome physical contact, harm, or death; following a person about in a public place or to or from his or her residence; making remarks in
a public place to a specific person that are by common usage lewd, obscene, expose a person to public hatred, or that can reasonably be expected to have a tendency to cause acts of violence by the person to whom the remark is addressed; or communicating anonymously by voice or graphic means or making a telephone call anonymously whether or not a conversation ensues.

5. Violating the University’s Policy on Sexual Misconduct.
6. Violating the University’s Policy Statement on Discriminatory Harassment.
7. Initiating or causing any false report, warning, or threat of fire, explosion, or other emergency.
8. Misrepresenting information or furnishing false information to the University or its representatives.
9. Forgery, alteration, misrepresentation, counterfeiting, or misuse of any University or other document, instrument of identification, or access device.
10. Providing alcoholic beverages to an individual under 21 years of age or to one, who is noticeably intoxicated, or possession or use of alcoholic beverages by an individual less than 21 years of age.
11. Unauthorized possession of an open container of an alcoholic beverage.
12. Appearing in a public place manifestly under the influence of alcohol or a controlled or other intoxicating substance, particularly when there is danger to self, others, or property or there is unreasonable annoyance to person(s) in the vicinity.
13. Unauthorized distribution, possession, or use of any controlled substance or distribution, possession, or use of any illegal drug.
14. Unauthorized use, possession, or storage of any weapon.
15. Unauthorized use or possession of fireworks of incendiary, dangerous, or noxious devices or materials.
16. Intentionally or recklessly misusing or damaging fire or other safety equipment.
17. Theft or misuse of property or services.
18. Substantially interfering with the freedom of expression of others.
19. Interfering with normal University or School of Medicine functions, University-sponsored activities, or any function or activity on University premises including but not limited to studying, teaching, public speaking, research, University or School of Medicine administration, or fire, police, or emergency services.
20. Disregarding or failing to comply with the directive of a hearing body or University official including a campus police officer acting in the performance of his or her duties.
21. Disregarding or failing to comply with the directive of an officer of the law acting in the performance of his or her duties.
22. Disrupting University or other computer systems; unauthorized alteration, disclosure, gaining or providing unauthorized access; or destruction of University or other computer system or material; improper access to University or other computer files and systems; or violation of copyright or proprietary material restrictions connected with University or other computer systems, programs, or materials.
23. The display or distribution of lewd, offensive, threatening or inappropriate material via paper or electronic means. Such material includes pictures, videos, or written content that portray oneself or others in a manner that brings dishonor to the profession of medicine.
24. Violating any government laws or ordinances, or of any University or School of Medicine rules, regulations, or policies including but not limited to the “Standards of Professionalism” set forth above. Such rules, regulations, or policies shall include but are not to be limited to the regulations and policies contained in the Campus Life Handbook, Information Technology Division (ITD) materials, Policy Statement on Discriminatory Harassment, Sexual Assault Policy Statement, School of Medicine Medical Student Handbook or Allied Health Student Handbook; regulations relating to entry (opening and closing hours) and use of University facilities; traffic and parking regulations; regulations and policies on the sale, consumption or misuse of alcoholic beverages; and on the misuse of identification cards.
25. Information Technology Division (ITD) materials, Policy Statement on Discriminatory Harassment, Sexual Assault Policy Statement, School of Medicine Medical Student Handbook; regulations relating to entry (opening and closing hours) and use of University facilities; traffic and parking regulations; regulations and policies on the sale, consumption or misuse of alcoholic beverages; and on the misuse of identification cards.
26. Failure to report any arrests, criminal charges, positive results of drug tests or Criminal Background Checks (CBCs) that occur from the time of acceptance until graduation.
27. Recording any other person without the consent of the person(s) being recorded.
Conduct Procedures

Anyone wishing to report an alleged incident of misconduct under this Code may make such a report to the Executive Associate Dean for OMESA or to any Assistant or Associate Dean for OMESA. Reports generated by the Emory Police will be forwarded to the Assistant Dean for Campus Life and to the Executive Associate Dean for OMESA. The Executive Associate Dean for OMESA will make a determination as to whether or not an action should be taken in response to a report. If it is determined that further action should be taken, the Executive Associate Dean for OMESA will notify the student in writing that he or she must make an appointment for a preliminary meeting within five days of the date on the notice for the purpose of reviewing the report. Failure to schedule or attend this preliminary meeting will automatically result in formal charges as described below.

Following this preliminary meeting, an investigator (faculty member) will be appointed by the Executive Associate Dean for OMESA to conduct an investigation to determine if the report has merit. The investigator may recommend the matter should proceed to formal charges or be disposed of administratively by agreement of the parties involved on a basis acceptable to the Executive Associate Dean.

If the matter is not so resolved, the Executive Associate Dean for OMESA will then meet again with the student and present the student with a letter stating the formal charges and a copy of all documents relevant to the case.

If a student admits to having violated the Code of Conduct as charged, the student shall have the following options as to how sanctions will be determined:

1. The student may waive his or her right to a hearing and have the Executive Associate Dean for OMESA determine the appropriate sanction.
2. The student may choose a hearing with a Conduct Committee appointed by the Executive Associate Dean for OMESA to determine the appropriate sanctions.

This selection shall be made in writing within five days and be recorded by the Executive Associate Dean.

If the student does not admit to having violated the Code of Conduct as charged, the charges will be referred for a hearing and a copy of all documents relevant to the case will be forwarded to the appropriate hearing body and the student involved. If an accused student fails to respond to any notification in writing concerning the conduct process, his or her case will be automatically referred to a hearing with an ad hoc conduct committee.

The School of Medicine reserves the right to place a 'hold' on the diploma, degree certification, or official transcripts of a student who has been charged with a conduct violation under the Code even though he or she may have completed all academic requirements. The diploma, degree certification, or official transcripts may be withheld until the conduct charges have been resolved and/or sanctions completed.

THE STUDENT CONDUCT HEARING BOARDS

School of Medicine Conduct Committee

The School of Medicine Conduct Committee is an ad hoc committee appointed by the Executive Associate Dean for Medical Education and Student Affairs to hear non-academic medical or health professions programs student conduct cases. The Conduct Committee is composed of:

a. A Chair appointed by the Executive Associate Dean for the Office of Medical Education and Student Affairs (OMESA), who shall be a faculty member but not a voting member of the Council and an alternate
b. Two voting faculty members and one alternate
c. One voting School of Medicine administrator (Dean, Director, Associate or Assistant Director) and one alternate
d. Three voting student members (medical students or allied health students, determined by the school enrollment status of the student accused of misconduct) and one alternate.

The Conduct Committee must have a minimum of five members present in order to convene, two of whom must be faculty.
Hearing Procedures
The Executive Associate Dean for OMESA may require any student, faculty, or staff member of the School of Medicine to attend and/or testify at any hearing or meeting regarding a conduct matter that is covered under this Code.

Whenever a hearing is to be held regarding an alleged incident of misconduct under this Code, the accused student and the complainant, if any, shall be given at least seven (7) calendar days written notice of the charges alleged against the accused student and of the date, time, and place of the hearing.

The ad hoc Conduct Committee shall conduct the hearing. The committee may require witnesses to testify at the hearing who are students, faculty, or staff of the School of Medicine and who are available to attend. Rules of evidence that apply in courts of law shall not apply in such hearings. The hearing shall be closed to everyone except the hearing body, appropriate staff, the accused student, and the complainant, advisors to the accused student and the complainant, and witnesses during the actual time to their testimony.

An advisor of his or her choice may assist the accused student and the complainant. The advisor must be a member of the Emory University School of Medicine faculty or staff or a student currently enrolled in the School of Medicine. The Chair of the Conduct Committee will consider exceptions. The advisor may not be an attorney.

Both parties and/or their advisors are allowed to:
   a. Be present at the hearing until such time as the hearing body retires to deliberate the decision. However, if either the student or the advisor or the complainant fails to appear at the hearing, the hearing may be held in their absence.
   b. Present tangible and documentary evidence and evidence by witness or by signed witness statements of witnesses who do not attend the hearing including the signed written statements of the complainant or the accused. If witnesses fail to appear, the hearing shall be held in their absence.
   c. Question all witnesses who give evidence at the hearing directly or through written questions presented through the Chair.

The Chair of the ad hoc Conduct Committee shall have final decision on what evidence may be presented and the tone of questioning. The Chair may decide to stop questions at any time.

Hearing Decisions
The decisions of the Conduct Committee as to both violation and sanctions are in all cases advisory to the Executive Associate Dean for OMESA. The ad hoc Conduct Committee shall deliberate and decide whether the accused student has violated this Code. The hearing body may decide that the student is in violation of a less serious offense than that originally charged. A determination that a student has violated the School of Medicine Conduct Code requires a simple majority vote. In the case of a tie, the Chair shall cast the deciding vote.

If the finding of a violation is determined, the hearing body shall be provided with the record of previous disciplinary proceedings in which the student was found in violation. On the basis of the hearing and the student's previous record, a decision will be made regarding sanctions by a simple majority vote. In the case of a tie, the Chair shall cast the deciding vote.

A written decision will be issued from the hearing committee to the student within seven [7] days of the date of the hearing. The accused shall receive written notice of the outcome of the hearing which includes: (1) a statement of charges; (2) a summary of the facts in the case; (3) the decision; (4) a brief statement of the hearing body's reasoning; and, if a violation is found, (5) sanction(s). The accused student will also receive information on the rights of appeal. The Executive Associate Dean for OMESA shall review all decisions of the Conduct Committee. The Dean of the School of Medicine shall also review any decision resulting in a sanction of suspension or expulsion. The EAD and the Dean shall make a final decision regarding the recommendations of the Hearing Committee.
Sanctions

The following sanctions, singularly or in combination, may be imposed upon any student found to have violated the School of Medicine Conduct Code:

a. Warning: A notice in writing to the student that the student has violated institutional regulations and must cease and not repeat the inappropriate action.

b. Probation: A written reprimand for violation of specific regulations. Probation is for a designated period of time and includes the probability of more severe disciplinary sanctions if the student is found to be violating any institutional regulation(s) during the probationary period.

c. Restitution: Compensation for loss, damage, or injury. This may take the form of service, monetary compensation, or material replacement.

d. Discretionary Sanctions: Work assignments or service to the School of Medicine, the University or the community.

e. Suspension: Separation of the student from the School of Medicine for a definite period of time, after which the student may be eligible to return. Conditions for readmission may be specified.

f. Expulsion: Permanent separation of the student from the School of Medicine.

Conduct sanctions (e) Suspension and (f) Expulsion shall be entered permanently on a student's record. Sanction (b) Probation shall be entered on a student's record for the term of the probation. Any sanction may include mandatory referral to university-based resources for medical or mental health evaluation and treatment if necessary. An evaluation supporting the student's reentry to medical school may be needed before reentry into course or clerkships.

Appeal

The accused student may appeal decisions rendered by the Conduct Committee to the Dean of the School of Medicine. To initiate an appeal, the accused student must submit a signed, written statement of the specific reason(s) to the Dean within seven (7) days of receipt of the hearing decision.

The Dean will review the process and the decision to determine:

1. Whether or not the hearing was conducted in accordance with the procedures outlined in the Conduct Code
2. Whether or not the interpretation of the code was appropriate
3. Whether or not the sanction(s) imposed were appropriate

After reviewing the documents pertaining to the case, the Dean will issue a written review of the hearing decision with a reasonable period from the receipt of the request for review.

The Dean will either:

1. Affirm the hearing decision
2. Affirm the findings of the hearing decision but recommend a different sanction or
3. Remand the case to the Executive Associate Dean for Medical Education and Student Affairs to assign a new ad hoc School of Medicine Conduct Appeal Board to conduct a new hearing.

School of Medicine Conduct Appeal Board

The Appeal Board will be established at the time the Dean remands a case to the Executive Associate Dean for Medical Education and Student Affairs for conducting a new hearing.

The Board shall be composed of:

1. One voting administrator appointed by the Executive Associate Dean for OMESA
2. Up to three voting faculty members appointed by the Dean
3. One voting medical or allied health student, depending on the status of the accused, appointed by the Dean

The Appeal Board shall follow the same guidelines as the initial hearing, reviewing the case independently, and make a final recommendation to the Dean. The decision of the Dean shall then be final. The Executive Associate Dean for OMESA shall provide the recommendation of the School of Medicine Conduct Appeal Board to the Dean whose decision shall be final.
Notification and Retention of Records

The Executive Associate Dean for OMESA shall forward notification of all final action to the Dean. The Executive Associate Dean shall maintain files on all medical and allied health students' conduct reports, records, and hearing proceedings according to procedures established by that office.
ACADEMIC INTEGRITY

STATEMENT

Academic integrity is defined as a commitment, even in the face of adversity, to six fundamental values: honesty, trust, fairness, respect, responsibility, and courage\(^1\). The Emory University School of Medicine seeks to involve every member of the community in cultivating a culture of academic integrity and promoting communal standards.

Pursuant to this goal, the students, faculty, and administration of the Emory University School of Medicine have created the Honor Code, which presents our standards of academic integrity and outlines the consequences for violations thereof.

This section of the student handbook outlines the School of Medicine Honor Code, along with academic regulations and procedures, promotional guidelines, graduation requirements, and the granting of awards and honors.


EUSOM HONOR CODE

Preamble

The students, faculty, and administration of the Emory University School of Medicine join together in support of this STUDENT HONOR CODE for the purposes of (a) providing an atmosphere of mutual trust, concern, and respect; (b) fostering honorable and ethical behavior; and c) cultivating lifelong professional conduct.

To promote this purpose, matters regarding academic misconduct shall fall under the jurisdiction of the Honor Code, while other aspects of a student’s medical education will be covered by the guidelines stated in the Student Conduct Code. Students who matriculate in the Emory University School of Medicine are obligated to uphold the Honor Code.

Statement of the MD and Health Professions Student Honor Code

Any action indicating lack of integrity or dishonesty in academic matters is considered a violation of academic ethics. Such offenses include, but are not limited to, engaging in, or attempting to engage in cheating, plagiarism, sabotage, falsifying or manipulating data, misrepresenting attendance, or knowingly passing off work of another as one’s own.

Honor Code Violations Definitions and Policies include:

- **Cheating** includes knowingly acquiring, receiving, or passing on information about the content of an examination prior to its authorized release or during its administration; provision or utilization of unauthorized aids; or impermissible collaboration.
- **Plagiarism** is defined as the act of incorporating into one’s own work, the work or expression of another, without appropriately and adequately indicating the source.
- **Sabotage** is defined as intentional and malicious actions that impair another student’s academic performance.
- **Falsifying or manipulating data** is defined as the act of creating, enhancing, or otherwise changing actual results in academic, clinical, or research matters.

Acts observed that appear to be in violation of the Honor Code will be reported to the Honor Council as detailed below. Failure on the part of a student to report such apparent violation will itself be considered a violation of the Honor Code.

Students are expected to abide by the terms of the Honor Code and a lack of knowledge of the actions prohibited by the Honor Code is not a valid defense and does not excuse a violation of the Honor Code.

To uphold this Honor Code and its purpose, an instructor may ask students to sign the following pledge at the end of all final examinations, quizzes, and other important projects:

“On my honor, I have neither given nor received any aid on this (examination, quiz, or paper), nor am I aware of anyone who did.”

The absence of this pledge does not exempt the student or the assignment from the obligations set forth under this
Honor Code.

Each student upon entering the School of Medicine must sign a matriculation pledge stating that he/she has read, understands, and is aware of his/her responsibilities under the Honor Code.

THE STUDENT COUNCIL ON HONOR
The academic health Student Council on Honor, hereafter, referred to as the Honor Council, will have primary jurisdiction over the supervision of the Honor Code as applies to medical students. A separate Academic Health Council on Honor will supervise the Honor Code as applies to academic health students.

The Honor Council will consist of one elected Student Representative from each program, and 2 (two) Faculty Representatives in addition, there will be two (2) alternate Student Representatives from each program, and four (4) Alternate Faculty Representatives. The leadership of the Council will be under the direction of a Chair, Vice Chair, and Secretary who are elected by the student membership from the Student Representatives on the Honor Council.

Student Representatives and Alternates
Elections will be held by November 1 of each academic year. A Student Representative and two Alternate Student Representatives will be elected by each program’s students to serve for a one-year term. The elections will be open to any student, including previous members of the Honor Council. The Dean will approve the list of candidates. Vacancies will be filled by special election of the respective program, when possible. If a program is unable to elect any representatives, alternates from other programs will serve on a rotational basis until a new Student Representative can be elected.

Faculty Representatives and Alternates
To establish a pool of six faculty members, three of whom are replaced each year, the following process will be utilized:

- Programs will submit nominations for faculty membership to the Academic Health Professions Advisory Committee for consideration for appointment. Selected faculty nominees will be forwarded to the Dean.
- In the first year, the Dean will appoint one Faculty Representative and two Alternate Faculty Representatives for a one-year term and one Faculty Representative and two Alternate Faculty Representatives for a two-year term.
- Each November thereafter, the Dean will appoint one Faculty Representative and two Alternate Faculty Representatives for a two-year term.
- Each appointed member can serve no more than two years without reappointment by the Dean.
- Faculty members will be limited to three consecutive terms.
- Vacancies will be filled by appointments by the Dean.

Leadership of the Honor Councils
- Chair and Vice-Chair: The Chair and Vice-Chair will be Student Representatives elected by the student membership of the Honor Council who are presently enrolled in programs of at least two years in length. This election will be held by December 1 of each academic year following the first year of implementation. The Dean must approve these elected officers.
- Secretary: The Secretary will be a Student Representative and will be elected for a one-year term by the entire Council from the pool of Student Representatives whose program length allows fulfillment of the term. The Dean approves this officer.
- All matters reviewed by the Council will be kept strictly confidential.

Procedures for Reporting and Investigating Violations
If an individual believes that a violation of the Honor Code has occurred, that individual must report the violation as soon as possible to any member of the Honor Council. Failure to report the violation will itself constitute a violation of the Honor Code.

1. Once an allegation has been made, the individual making that allegation must draft, sign, and submit to the Honor Council Secretary a brief statement for Honor Council documentation.
2. Upon notification of a possible violation of the Honor Code, the Council Secretary will choose two investigators from available alternate Council members whose responsibility it will be to gather information about the case. The Secretary will then inform the Honor Council Chair that an investigation has been initiated. The Chair shall subsequently inform the Council faculty members and the Executive
Associate Dean of OMESA that an investigation is being conducted, but the name of the student and details of the incident will remain known only to the Chair, the Secretary, the investigators, and any individuals the Chair may deem necessary. The student named in the allegation will be informed of the investigation prior to its onset. Upon notification of the investigation, the student will be provided with a list of available advisors with whom to consult, at the student’s discretion.

3. After information concerning the case has been gathered, this information shall be submitted to the Chair of the Honor Council, who along with the two investigators, will judge whether sufficient evidence exists to warrant a formal hearing. Between the Chair and two investigators, the decision to continue with a formal hearing or cease the investigation will rest upon the concurrent views of at least two of the three participants.

4. If a hearing is deemed warranted, the student will be notified by the Secretary of the Honor Council in writing of the date, time, and place of the Hearing; the nature of the violation with which the student is charged; the evidence of the investigation, including the name of the individual making the initial allegation, and the options available to the student concerning assistance by an advisor.

5. The hearing will take place within a reasonable time (no more than 21 days) after the accusation is reported to the Honor Council. (In rare instances, the Honor Council, based upon the specific circumstances of the case, may determine a different time period.)

6. The student will be permitted to continue academic endeavors until a final decision is made. The student and advisor may review and gather evidence prior to the hearing.

7. For each hearing, the Honor Council consists of eight members: five student members, the Chair (or Vice-Chair) and two faculty members. The five student members are randomly chosen by the Chair and will include a student member from the program of the accused. If any member is unable to serve for any reason, including conflict of interest, then an alternate member will sit on the Honor Council. The alternate members who serve as investigators will present pertinent information but will not be allowed to vote in the proceedings or to be present during deliberations.

8. It will be the responsibility of the Secretary to inform the Honor Council members of the alleged violation (date, person involved, and nature of the accusation). The Chair (or Vice-Chair) will preside over the hearing and participate in discussion and deliberation of the case but will not have a vote.

THE HEARING

Rules of law do not apply to any hearings or proceedings regarding the Honor Code.

Order of Proceedings

1. Call to order
3. Statement of the alleged Honor Code violation
4. Presentation of evidence: The Investigators and the accused may present testimony and other evidence as appropriate and relevant to the case. The Chair and members of the Honor Council, the accused, and the advisor to the accused may ask questions of witnesses, but the Chair shall have the right to determine whether such questions are appropriate.
5. Discussion and deliberation by the Council are held in a private executive session.

Rules Governing Proceedings

1. All hearings will be conducted in closed-door session and will remain confidential.
2. Participants in the hearing will be limited to the following:
   a. Chair (or Vice-Chair) of the Honor Council
   b. Members of the Honor Council to include the Secretary or, if needed, a temporary secretary appointed by the permanent Secretary.
   c. Student accused of violation
   d. Two Alternate Council Members who served as investigators for the case.
   e. Relevant witnesses who may be present only while testifying
   f. Advisor for the accused.
3. The Secretary or his/her appointee will take notes during the hearing and make them available to the Honor Council.
4. The accused has the option of selecting an individual from the School of Medicine, but not a member of the Honor Council, to assist in an advisory capacity prior to the hearing and to be present at the hearing.
individual will not be permitted to testify or to make statements of any nature other than asking questions.

**Decisions and Penalties**

1. For a student to be found guilty of an Honor Code violation, the unanimous vote of the seven voting members of the Honor Council will be required. [The Chair (or Vice-Chair) will not be eligible to vote].

2. The penalty recommended for an Honor Code violation will be by a plurality vote of the seven voting members of the Honor Council. In case of a tie, the Chair (or Vice-Chair) will cast a vote.

3. The Dean will be informed promptly following the decision of the Honor Council.

4. Recommendation for penalties regarding violations of the Statement of the Honor Code:
   1. The standard penalty for violation of the Honor Code is (a) mandatory leave of absence from Emory University School of Medicine for at least one academic term (semester); and b) a grade of “Incomplete” for all courses in which the student is enrolled at the time of the infraction.
   2. The Honor Council may recommend to the Dean a penalty more severe than a mandatory leave of absence (e.g., permanent expulsion) or may recommend a less severe penalty (e.g., disciplinary probation for Honor Code violation), dependent upon the circumstances of the case.
   3. Upon receipt of a mandatory leave of absence, the student cannot advance to the next term until he/she has completed the term in which the “Incomplete” grades were given.
   4. At the discretion of the Program Director, the student may be required to enroll as a student in special standing for purposes of review prior to re-enrollment as a full-time student.

**Decision of the Dean of the School of Medicine**

The final decision rests with the Dean. The decision of the Dean will be effective immediately unless there is an appeal. The appeal, including the basis for the appeal, must be submitted by the student in writing to the Dean within one week after the decision of the Dean. If an appeal is requested, the Dean will appoint an ad hoc committee consisting of three faculty members from the School of Medicine. The committee will review the data and render its recommendation to the Dean for upholding or repealing the decision, following which the Dean will issue the final decision in the matter.

**Amendments to the Honor Code**

Amendments to the Honor Code may be proposed by the Honor Council at any point in the academic year; proposed amendments must be approved by the Dean before becoming effective. If an amendment is approved while a case is under active review that amendment will not apply to that case. Any new amendment, once approved, will become effective as soon as all allied health students have been notified of the change via mail or email.
PHYSICIAN ASSISTANT PROGRAM POLICIES

The Emory University School of Medicine takes great pride in the development and accomplishments of its physician assistant students and of the medical providers it graduates. A combination of academic success and professional development provides the cornerstone of a competent PA.

To that end, various safeguards are in place to monitor and access the progress, performance and promotion of physician assistant students. This chapter outlines the components that address this growth and progression. All policies from the University and the School of Medicine are expected to be upheld by the students in the Physician Assistant Program.

The Student Progress Committee monitors academic and professional development or inadequacies throughout a student’s career at Emory and will make recommendations for remediation or other actions. The School of Medicine Honor Code addresses student misconduct of an academic nature. The School of Medicine Conduct Code addresses student misconduct outside of the academic setting. Ultimately, continued enrollment in the Emory University School of Medicine is subject to the decision of the Program’s Student Progress Committees, the Program Director, the Executive Associate Dean, and the Dean who must be assured that academic grades and overall performance are satisfactory, that the student is complying with the rules and regulations of the University and the School of Medicine, and that the best interests of the School and of the other students are being served through the student’s continued enrollment.

The PA Program is divided into three components:
- Foundations Phase: Fall-year 1 semester
- Didactic Module Phase: Spring-year 1, Summer-year 1 and Fall-year 2 semesters
- Clinical Rotations Phase: Fall-year 2, Spring-year 2, Summer-year 2 and Fall-year 3 semesters

Section 1: FOUNDATIONS AND DIDACTIC MODULE PHASE ATTENDANCE, ABSENCES AND TIMELINESS

Attendance, on time arrival, and participation is the expectation for every student. This includes all classes, examinations, labs, small group sessions, society meetings, preceptorships, patient encounters and patient presentations.

Classes and exams will begin on time. Students who need to miss a class must contact the course or module director in advance of the absence. Students with multiple absences may be referred to the Student Progress Committee for professionalism issues. Absences that require more than five (5) consecutive class days are addressed under Leave of Absence policy.

Students who arrive after an examination has begun will not be given extra time and may be refused admission to the exam, thus potentially jeopardizing their exam and course grade.

Section 2: CLINICAL ROTATION PHASE ATTENDANCE, ABSENCES AND TIMELINESS

Attendance at clinical rotation on the scheduled dates and time is mandatory and monitored carefully. The rotation hours, including weekends, holidays, nights and evening shifts, call schedule, etc. are determined by the clinical service. Students on a clinical rotation will be on call and work weekends as scheduled by the preceptor. Under no circumstances may a student leave a clinical rotation without prior approval from the program director or a clinical educator of the PA program unless there is physical danger. Any other departure will be treated as abandonment of the rotation and is subject to sanctions by the Student Progress Committee, including possible dismissal from the program. All students will do Emory arranged and approved out-of-town rotations. Please be prepared for these rotations by ensuring adequate child and pet care. All students must accept the rotation schedule assigned to them.

Students may take three (3) planned personal days during the clinical year. These must be approved no later than 2 weeks prior to the absence. No more than one personal day may be taken in any single rotation. A personal day may not be taken on an End-of-Rotation day. The program will provide written notification of approved personal day
absences to the individual preceptor. Students may not miss an EOR Day for admission interviews. Absences from the clinical site for CME activities are not permitted for students. Absences other than those for illness, emergency, attendance at a conference or to participate in PA Program activities or a pre-approved personal day are not permitted and will result in reduction of the final rotation grade by one grade for each missed day. To schedule an absence for attendance at AAPA and GAPPA conferences, and/or participation in admissions interviews or other PA Program activities, students must request permission from the clinical team in advance. Missed clinical time for these approved activities will not count as a personal day.

Clinical year student absences for illness or emergency must be reported as soon as possible but within 24 hours to one of the Clinical Educators and to the individual preceptor. The student must provide the program with the name of rotation and preceptor, reason for absence, expected return date, and a telephone number where the student can be reached. When absence due to illness extends beyond 48 hours, a signed provider report may be required (from the University Student Health Service or from the student’s personal provider). This protects the student against any accusation of neglect or indifference, as well as ensures that students have sought proper health care when appropriate.

Arriving late or leaving early from a rotation without approval from the preceptor or clinical faculty is considered an unexcused absence for the entire day.

Section 3: POLICY STATEMENT ON RELIGIOUS OBSERVANCES
The Emory School of Medicine recognizes and respects the importance of individual religious beliefs and practices. While the School of Medicine calendar includes only religious observances recognized as U.S. federal holidays, the school seeks to accommodate student religious needs reasonably and within the requirements of the academic schedule. There shall be no adverse or prejudicial effect resulting to any student requesting excused absences for religious observances. Students assigned to patient care educational activities may request assignments that allow the student to meet their religious needs; on occasion, students may be asked to attend patient care activities that cannot be reasonably rescheduled, such as on-call time with a care team. Required academic work missed as part of an excused absence must be made up to the satisfaction of the supervising faculty member.

Section 4: LEAVE OF ABSENCE
A Leave of Absence (LOA) is defined as a planned or unplanned absence from PA Program activities of five (5) consecutive school days or longer and requires approval of the PA Program Director. In making the determination regarding the request, both the reason for the LOA as well as the academic standing of the student at the time of the request will be considered.

Any LOA may not extend beyond 12 months. If the LOA extends beyond 12 months, the student must reapply to and be accepted back into the PA program and may require restarting with the first semester of the program.

Procedures for requesting a LOA for Students in Good Academic Standing:
1. Request the LOA in writing using the Emory PA program LOA form specifying the reason for the LOA, the LOA start date, and the anticipated date of return to the program,
2. Meet with the PA Program Director, faculty and/or community advisor
3. Have the PA Program Director sign the form approving the leave prior to the departure if at all possible.
4. Provide appropriate documentation for a return to the Program if medical issues were the underlying cause of the LOA.

Students Not in Good Academic Standing:
Students not in good academic standing need to request the LOA using the same procedure as above. However, these will be granted at the discretion of the PA Program Director.

Military Leave of Absence:
A military deployment is addressed according to Federal Law.
Section 5: STUDENT ASSESSMENT, GRADING AND REMEDIATION FOR THE FOUNDATIONS AND DIDACTIC MODULE PHASE

Satisfactory Academic Progress Policy

Students must maintain a semester and overall cumulative GPA of 2.8. Failure to maintain the minimum GPA for two consecutive semesters may result in disqualification from receiving financial aid. Any student who fails for two consecutive semesters to pass two-thirds of the hours, i.e., maintain a 66.66% completion rate, may also be disqualified from receiving financial aid at the discretion of the financial aid office.

Definitions

For all classes and modules in the Foundations and Didactic Module Phases, the following guidelines for grading will be used:

- A 90.0 – 100%
- B 80.0 – 89.99%
- C 70.0 – 79.99%
- D 65.0 to 69.99%
- F 64.99% and below

Grades will not be rounded up or down.

**Academic Warning** is defined as an official warning given by the Student Progress Committee to a student whose performance is of concern. A student on Academic Warning is Not in Good Academic Standing. Students given an Academic Warning receive written notice of their status from the Program Director noting the specific concern(s). A copy of the letter is placed in the student’s file and made available to subsequent Student Progress Committee meetings during the student's course of study. The designation of Academic Warning may result in the loss of financial aid.

**Academic Probation** is defined as a conditional status that may be designated by the Student Progress Committee when a student’s performance is unsatisfactory. A student on Academic Probation is Not in Good Academic Standing. Students placed on Academic Probation receive written notice of their status from the Program Director noting the specific concern(s). The letter is placed in the student’s file and made available to subsequent Student Progress Committee Meetings. Academic Probation is a serious reprobation and is indicated on the student’s transcript. The designation of Academic Probation may result in the loss of financial aid.

Promotional Guidelines for Foundations and Didactic Module Phase

For every semester of the program, a student must demonstrate professionalism and academic success, as defined below and evaluated by the Student Progress Committee.

**Guidelines for Foundations and Didactic Module Phase Professionalism:**

Professionalism may be part of any course’s evaluation and grade. Independent of the final grade, unprofessional behavior may be the sole criterion for which a student may be recommended for Academic Warning, Academic Probation, dismissal, or other appropriate sanctions.

**Guidelines for Foundations and Didactic Module Phase Academic Performance:**

Students who score less than 65% on all exams (oral or written) in a course/module (regardless of the overall grade) will need to repeat the entire course (offered only once per year) assuming they meet GPA requirements to remain in the PA Program.

**In the Foundations Phase (Fall semester-year 1):**

- Students must complete the Foundations Phase with a semester GPA ≥2.80 to proceed to the Didactic Module Phase.
- Students finishing the Foundations Phase with a GPA <2.80 will be dismissed from the Program.

**In a single Didactic Module Phase semester (Spring-year 1, Summer-year 1, Fall-year 2):**

- A student with a semester GPA ≥2.80 is considered in Good Academic Standing.
- A student with a semester GPA between 2.51 - 2.80 is Not in Good Academic Standing and will be placed on Academic Warning. Remediation or repetition of courses may be required.
A student with a semester GPA between 2.20 - 2.50 is Not in Good Academic Standing and will be placed on Academic Probation. Remediation or repetition of courses may be required.

A student with a semester GPA <2.20 is Not in Good Academic Standing and may be considered for dismissal from the program by the Student Progress Committee.

A student who earns an F in a course will be placed on Academic Probation and may be considered for dismissal. Remediation or repetition of the failed courses will be required if the student remains in the program.

Students Not in Good Academic Standing for multiple semesters (including non-consecutive) in the Didactic Module Phase (Spring-year 1, Summer-year 1, Fall-year 2):

A student with a GPA below 2.80 for two semesters will be placed on Academic Probation. Remediation or repetition of courses may be required.

A student with a GPA of 2.50 or below for two semesters may be considered for dismissal from the program by the Student Progress Committee.

A student with a GPA of 2.80 or below for three semesters may be considered for dismissal from the program by the Student Progress Committee.

Remediation for the Foundations and Didactic Module Phase
In order to ensure that all students in the program have achieved academic proficiency before advancing to the next level, deficient course material will be remediated. Remediation is the process used to improve student performance and ensure that all students achieve minimal threshold of content mastery before moving on to the Didactic Module Phase or the Clinical Rotations Phase of the curriculum.

Remediation Process

- The module director will notify students of their need to remediate an exam, assignment of activity in a course or module.
- The student must contact the course or module director within two days of the notification. It is the responsibility of the student to schedule the remediation process with the course or module director.
- Students requiring remediation of an exam, assignment of activity must meet with the director for remediation. The process for remediation, as determined by the module director, will be tailored to the individual student’s specific areas of deficiency. Remediation options may include retaking the failed exam, assignment or activity or completing an activity deemed of equal weight. Retaking a module exam is only appropriate if the student’s performance in all major content areas is unsatisfactory.
- The course or module director documents the remediation process for each student. This record outlines the format of the remediation, the dates on which this occurred, and whether the student successfully remediated. If the student was unsuccessful, and make recommendations for further educational support for the student. This will be part of the student’s record.
- If there is evidence of consistent deficiencies of knowledge or critical skills despite module, course and program remediation efforts, this will result in referral to the Student Progress Committee for review. SPC recommendations may include further individual, personal and/or educational support, up to and including withdrawal and dismissal.
- If the student identifies non-academic contributor to their poor performance (i.e., a medical or social issue), this should be brought to the attention of the course or module director. If appropriate, the student may be encouraged to seek university or community resources for additional support.

To more readily identify students in academic difficulty and offer them additional support services in a timely fashion, students who need to remediate more than one exam, assignment or module will be referred for a learning assessment, which may trigger further recommendations that may help the student succeed in further modules.

Guidelines for Evaluation of the Pre-Clinical Summative Examination
All PA students are required to successfully complete all aspects of the pre-clinical summative evaluation scheduled at the end of the didactic phase in order to progress to the clinical phase. This evaluation process is designed to ensure that every student has the requisite knowledge and skills to progress to the clinical year. The evaluation is comprised of three components.
A. Preceptor assessment: Preceptors assess students’ performance in the final encounter in the Didactic Experiential Learning Program (DELP) using a standardized assessment form. This comprehensive examination is worth 25% of the pre-clinical summative exam.

B. Objective Structured Clinical Examination (OSCE): Students will complete a multi-station objective examination covering basic clinical skills. This skills examination is worth 25% of the pre-clinical summative exam.

C. Multiple Choice Examination (PACKRAT): This is a 225-question examination, administered via computer over approximately 3 hours and 45 minutes. Exam questions are based on the NCCPA blueprint and follow in topic weight the PANCE exam. A satisfactory score is defined as > 1 standard deviation above the national mean. For purposes of the pre-clinical summative examination, this examination counts for 50% of the grade.

An unsatisfactory outcome requires remediation and retesting and is defined as a:

- score of less than 70% in the preceptor assessment
- score of less than 70% on the OSCE
- score of less than one standard deviation below the national mean for the multiple-choice examination

Any student earning unsatisfactory scores in two or more components of the pre-clinical summative examination will not be allowed to progress to clinical rotations and will be required to complete faculty directed remediation for a minimum of 5 weeks prior to retesting. Any student earning unsatisfactory scores in the PACRAT portion of the pre-clinical summative examination will proceed to the first rotation but will be required to do CORE Success Program during the time of the second rotation. Rotations missed for CORE Success Program will be made up as a Graduate in Residence after graduation.

A failing grade on a retest will result in inability to progress to the clinical year until evaluated by the Student Progress Committee for decisions on further procedure.

Section 6: STUDENT ASSESSMENT, GRADING AND REMEDIATION FOR THE CLINICAL ROTATION PHASE

Guidelines for Performance in the Clinical Rotation Phase

Performance during the clinical year requires assessment of knowledge, attitudes, skills and behavior. The following guidelines do not preclude the Student Progress Committee (SPC) from recommending repetition of courses, enrollment in the CORE Success Program, assignment of Academic Warning or Academic Probation, or dismissal based on the Committee’s assessment of student performance, regardless of specific grades.

Independent of the final course grade, unprofessional behavior may be the sole criterion for which a student may be recommended for Academic Warning, Academic Probation, dismissal, or other appropriate sanctions.

Definitions

For all courses in the Clinical Rotation Phase, the following guidelines for grading will be used:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>90.0 – 100%</td>
</tr>
<tr>
<td>B</td>
<td>80.0 – 89.99%</td>
</tr>
<tr>
<td>C</td>
<td>70.0 – 79.99%</td>
</tr>
<tr>
<td>D</td>
<td>60.0 to 69.99%</td>
</tr>
<tr>
<td>F</td>
<td>59.99% and below</td>
</tr>
</tbody>
</table>

No grades will be rounded up or down.
<table>
<thead>
<tr>
<th>Clinical Rotation Phase Issue</th>
<th>Current Academic Status</th>
<th>New Academic Status</th>
<th>Intervention/Corrective Actions</th>
<th>Return to Good Academic Standing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rotation grade of 'C' (first time)</td>
<td>Good standing</td>
<td>Academic Warning</td>
<td>Additional sanctions are at the discretion of SPC</td>
<td>After 2 rotations with a passing EOR exam and final course grade of 'A' or 'B'</td>
</tr>
<tr>
<td>Rotation grade of 'C' (first time)</td>
<td>Academic Warning</td>
<td>Academic Warning</td>
<td>Additional sanctions are at the discretion of SPC</td>
<td>After 2 rotations with a passing EOR exam and final course grade of 'A' or 'B'</td>
</tr>
<tr>
<td>Rotation grade of 'C' (first time)</td>
<td>Academic Warning</td>
<td>Possible Dismissal</td>
<td>Student dismissal at discretion of SPC. If not dismissed, the student will repeat a core rotation requirement and may be enrolled in the CORE Success Program</td>
<td>After 2 rotations with a passing EOR exam and final course grade of 'A' or 'B'</td>
</tr>
<tr>
<td>Rotation grade of 'D' or 'F' (first time)</td>
<td>Good standing</td>
<td>Academic Probation</td>
<td>Remediation and taking Version 2 of EOR exam and repetition of rotation. If the student is not successful passing the Version 2 of the EOR exam, they may be enrolled in the CORE Success Program</td>
<td>After 2 rotations with a passing EOR exam and final course grade of 'A' or 'B'</td>
</tr>
<tr>
<td>Rotation grade of 'D' (first time)</td>
<td>Academic Warning or Academic Probation</td>
<td>Possible Dismissal</td>
<td>Student dismissal at discretion of SPC. If not dismissed, the student will repeat a core rotation requirement as chosen by the SPC as an additional rotation and may be enrolled in the CORE Success Program</td>
<td>After 2 rotations with a passing EOR exam and final course grade of 'A' or 'B'</td>
</tr>
<tr>
<td>Rotation grade of 'C' (second time)</td>
<td>Academic Warning</td>
<td>Academic Probation</td>
<td>Repetition of rotation as an additional rotation or CORE Success Program as determined by the SPC</td>
<td>After 3 rotations with a passing EOR exam and final course grade of 'A' or 'B'</td>
</tr>
<tr>
<td>Rotation grade of 'D' (second time)</td>
<td>Academic Probation</td>
<td>Possible Dismissal</td>
<td>Student dismissal at discretion of SPC. If not dismissed, the student will repeat a core rotation requirement as chosen by the SPC as an additional rotation and may be enrolled in the CORE Success Program</td>
<td>After 2 rotations with a passing EOR exam and final course grade of 'A' or 'B'</td>
</tr>
<tr>
<td>Rotation grade of 'C' (third time)</td>
<td>Academic Probation</td>
<td>Possible Dismissal</td>
<td>Discretion of SPC to dismiss student. If not dismissed, the student will repeat the rotation and may be enrolled in the CORE Success Program</td>
<td>After 3 rotations with a passing EOR exam and final course grade of 'A' or 'B'</td>
</tr>
<tr>
<td>Rotation grade of 'F'</td>
<td>Any</td>
<td>Possible Dismissal</td>
<td>Discretion of SPC to dismiss student. If not dismissed, the student will repeat the rotation and may be enrolled in the CORE Success Program</td>
<td>After 2 rotations with a passing EOR exam and final course grade of 'A' or 'B'</td>
</tr>
<tr>
<td>PAEA EOR exam score 0.5-0.99 SD below national mean</td>
<td>Good standing</td>
<td>Good Standing</td>
<td>Remediate the PAEA EOR exam but will not retake Version 2 of the exam</td>
<td>After 2 rotations with a passing EOR exam and final course grade of 'A' or 'B'</td>
</tr>
<tr>
<td>PAEA EOR exam score &lt;1 SD below national mean (first time)</td>
<td>Good standing</td>
<td>Academic Warning</td>
<td>Remediation of EOR exam and then take Version 2 of the EOR exam. If Version 2 of the EOR exam is not passed successfully, the student may be enrolled in CORE Success Program.</td>
<td>After 3 rotations with a passing EOR exam and final course grade of 'A' or 'B'</td>
</tr>
<tr>
<td>PAEA EOR exam score &lt;1 SD below national mean (first time)</td>
<td>Academic Warning</td>
<td>Academic Probation</td>
<td>Enrollment in CORE Success Program. If not successful, student is referred to the SPC for possible dismissal.</td>
<td>After 3 rotations with a passing EOR exam and final course grade of 'A' or 'B'</td>
</tr>
<tr>
<td>PAEA EOR exam score &lt;1 SD below national mean (first time)</td>
<td>Academic Probation</td>
<td>Possible Dismissal</td>
<td>Student dismissal at discretion of SPC. If not dismissed, the student will repeat the rotation and/or may be enrolled in the CORE Success Program.</td>
<td>After 3 rotations with a passing EOR exam and final course grade of 'A' or 'B'</td>
</tr>
<tr>
<td>PAEA EOR exam score &lt;1 SD below national mean (second time)</td>
<td>Academic Warning</td>
<td>Academic Probation</td>
<td>Enrollment in CORE Success Program. If not successful, the student will repeat a core rotation requirement as chosen by the SPC as an additional rotation.</td>
<td>After 3 rotations with a passing EOR exam and final course grade of 'A' or 'B'</td>
</tr>
<tr>
<td>PAEA EOR exam score &lt;1 SD below the national mean (third time)</td>
<td>Academic Probation</td>
<td>Possible Dismissal</td>
<td>Student dismissal at discretion of SPC. If not dismissed, the student will repeat the rotation and may be enrolled in the CORE Success Program.</td>
<td>After 3 rotations with a passing EOR exam and final course grade of 'A' or 'B'</td>
</tr>
<tr>
<td>Removal of student by preceptor from the rotation</td>
<td>Good standing</td>
<td>Possible Dismissal</td>
<td>Referral to SPC</td>
<td>After 2 rotations with a passing EOR exam and final course grade of 'A' or 'B'</td>
</tr>
</tbody>
</table>
Definitions of Intervention/Corrective actions:

Repeating a Rotation
If a student has to repeat a rotation, the following applies:
1. The original rotation grade will not be changed
2. The PAEA EOR exam will not be repeated unless the student fails the exam
3. The Portfolio Assignment will not be repeated
4. Typhon reporting during the repeated rotation is required
5. The student must earn a B or above from their preceptor in the repeated rotation

Remediation of PAEA EOR Exams
Remediation of PAEA EOR exams will occur in the next two business days after the EOR exam. Students will receive a list of deficient content areas immediately after the exam. The student must prepare documentation focusing on these areas and will review this documentation with their advisor or clinical team faculty during these two days. At the end of day two, the student will take Version 2 of the PAEA EOR exam. If the student passes Version 2 of the exam, the student progresses to their next rotation. If the student does not pass Version 2 of the exam, the student will repeat this rotation in place of an elective rotation.

The CORE Success Program
The CORE Success Program is a 5-week formal program of remediation which will delay the next rotation and completion of the PA Program. During the CORE Success Program, the student will work closely with faculty to remediate medical knowledge. The student will take practice tests to test their knowledge and evaluate their test taking strategies. Two exams are given during the CORE Success Program and students must attain an average of 75% between both exams to be successful. If the student is successful, they will advance to the next clinical rotation but need to complete the rotation missed during CORE Success Program in January as Graduate in Residence. If they are not successful and this is their first time in the CORE Success Program, they will repeat CORE Success Program. If successful, they will continue in the program and be required to complete the two missed rotations beginning in January as a Graduate in Residence. If this is their second time in the CORE Success Program and they do not successfully pass the exam, they will be referred to the Student Progress Committee for dismissal from the PA Program.

Section 7: RIGHT OF APPEAL
Students are encouraged to discuss evaluations and final grades with the course director, preceptor, academic and clinical coordinators as appropriate. If a student wishes to appeal a final course grade or summative evaluation, this should be presented in writing to the Program Director (PD) within 30 days of receiving the grade. The appeal may be based on the process that leads to the final grade/evaluation and/or questions of factual content of the evaluation process. The PD will then review the basis for the appeal of the final evaluation and/or grade. The PD may review the final grade or evaluation in terms of 1) the process that led to the final grade/evaluation, and/or 2) questions of factual content that led to the final grade/evaluation.

Upon review, the PD may find that there is no basis, based on process or factual content, for a change of final grade or evaluation. Alternatively, the PD may recommend that the course/module director or clinical coordinator consider any of the following: 1) recommend that the course/module director or clinical coordinator submit the questions and answers to a group of faculty in the field for review; 2) suggest additional assessment of student performance and subsequent reconsideration of the grade/evaluation; or 3) suggest a change of grade/evaluation. The course/module director will then consider the recommendation made by the PD and submit a written response to the PD and a re-considered final grade/evaluation. All grade appeals along with responses by the course/module director, clinical coordinator and the PD will be forwarded to the Chair of the Progress and Promotion Committee.

After review by the PD and submission of the re-considered grade/evaluation, the student may appeal any decision to the Executive Associate Dean whose decision shall be final.

In all cases, involving academic or non-academic disciplinary decisions, whether the problem is academic, psychiatric, or conduct-related, the student has the right to request a rehearing and/or to appeal to the Executive Associate Dean of the School of Medicine.
Section 8: CLINICAL ROTATION PHASE EXPECTATIONS

Clinical Rotation Phase information, including specific requirements for each clinical rotation sites, can be found on the CANVAS site. Emory PA students are required to comply with SOM policies in a timely manner including clinical site ID badge procurements, releasing information to the clinical site, maintaining annual immunizations such as the flu shot and PPD within the mandated time and the sharing of this information with the PA Program. Students are expected to respond to all requests from the clinical team in a timely manner. Non-compliance is a matter of professionalism and will be referred to the Student Progress Committee.

Criminal Background Check

Each student initiated a criminal background check (CBC) prior to entering the PA program. A second CBC must be completed prior to the start of the clinical year. The CBC includes the following:

1. Criminal Background Check-each state and county of residency for the previous 7 years
2. National Sexual Offender Registry Search
3. Social Security Verification
4. Residency History
5. National Healthcare Fraud and Abuse Scan
6. US Patriot Act

Conduct at Clinical Rotations

Students are guests at each rotation site. They are not considered employees and are not covered by hospital/clinic Worker’s Compensation regulations, nor can they receive free medical care. Students must comply with all hospital policies pertaining to students at their facilities. Students are covered by Emory’s liability insurance when they are on PA Program approved rotations.

Students will wear their white jackets and student ID badge while on rotations identifying them as physician assistant students from Emory University.

Each student is assigned to a preceptor and may only interview, examine, test, diagnose, treat or counsel patients with the preceptor present in the hospital or clinic and with the consent of both the preceptor and the patient or patient’s guardian. Students cannot substitute in any way for clinical or administrative staff during a rotation. Students must always sign patient encounter documentation with their name followed by PA-S to designate their student status. Students shall never take pre-signed blank prescriptions from a provider.

New Clinical Rotation Site Development

Students are not required to provide or solicit clinical sites or preceptors. However, if a student wishes to identify a clinical rotation site that is not currently affiliated with the Emory PA program, it must meet certain requirements. The Program always welcomes students’ suggestions and referrals to clinical sites. However, the student must first discuss a new site with the Clinical Educators to ensure the site is appropriate. The PA Program will contact and evaluate the site and obtain the affiliation agreement with the new site. The program does not guarantee that site information provided by a student will result in a rotation opportunity. The Program’s decision to allow a student to do a rotation outside of the rotation network will depend on the Program’s need, as well as the student’s academic performance and professional behavior.

The program will consider a new clinical rotation site with the following guidelines:

1. The clinical rotation is an elective or a needed new rotation site.
2. The clinical rotation must be in an ambulatory setting without a hospital affiliation.
3. The clinical rotation cannot be with a family member or significant other.
4. The primary goal of the clinical rotation must be teaching rather than hiring a student.

If the new clinical rotation site is approved, the following apply:

1. If the clinical rotation site is out of town, all expenses incurred by the student are their responsibility.
2. Regardless of distance, students must return for EOR Days from all clinical rotation sites.
3. The student may not change the dates of attendance or select a different rotation.

*International Rotations*

Students wishing to complete an international rotation must submit their request to the faculty for evaluation. Only students in good standing will be considered. To apply, students will complete the document “Emory SOM International Rotation Requirements for Credit” found on CANVAS. If approved by the clinical faculty, students must comply with all immunization requirements, complete the online modules on the Office of Global Strategy and Initiatives website, purchase airfare through one of Emory’s approved travel companies, and sign a liability waiver.

**Section 9: REQUIREMENTS FOR THE MASTER OF MEDICAL SCIENCE DEGREE (PA DEGREE)**

*To be eligible to receive the degree of Master of Medical Science Physician Assistant from Emory University School of Medicine, students must:*

I. Have a satisfactory standing in all courses required for the degree
II. Have credit for the full 29 months of study undertaken at the Emory University School of Medicine, PA Program
III. Have completed all academic requirements within no more than three (3) academic years and six (6) months from the time of admission
IV. Satisfactorily pass the summative evaluation of PA competencies during the final semester
THE DUAL DEGREE PROGRAM - PA/MPH
(Master of Medical Science/Master of Public Health)

This dual degree option offers students the opportunity to earn an MPH degree in conjunction with training in the Emory University School of Medicine Physician Assistant Program. The PA Program, within the Department of Family and Preventive Medicine, recruits, educates and mentors a diverse group of students to become physician assistants providing quality health care.

The PA Program emphasizes primary health care and preventive medicine and seeks to interest students in working in medically underserved areas. The program uses didactic and clinical training, promotes physician/PA team care, fosters an appreciation for research, leadership and the need to be flexible in meeting the changing needs of the health care climate, and empowers faculty and students to become advocates for the physician assistant profession and for the delivery of primary health care. Students may apply their combined PA/PH skills in such areas as population or clinical research, health administration leadership and community health promotion.

Students must apply to and be accepted by both the PA and the MPH program through their independent admissions process. Students apply to a specific department in the School of Public Health. Students enroll in the school of public health for one calendar year (fall, spring, summer) and complete 32 semester hours of course work. They include the required MPH core courses, required departmental courses and, in most instances, a thesis. Students must also complete a practicum, a structured field experience of relevance to public health.

Students who complete the MPH degree requirements prior to entering the PA course of study may wish to combine their MPH thesis with the required scholarly project for the PA program. Consultation with the Director of Dual Degree Students is necessary to assure that the project meets both schools' requirements. Students may engage in a four-week public health-related practicum during the time they are enrolled in clinical or advanced didactic phase of the PA program. The MMSc degree is awarded when the student successfully completes the degree requirements of the PA Program.

As 10 semester hours of PA courses count towards the MPH degree (i.e., students must complete 32 rather than 42 semester hours), the MPH degree is awarded when the requirements for the PA Program and MPH program are completed.

The PA Program requires 29 months of training including courses and clinical rotations. During enrollment in the MPH program, the student will be charged the rate of tuition established by the School of Public Health. When enrolled in the PA Program, the student will be charged the rate of tuition approved by the School of Medicine for the PA Program.
UNIVERSITY and EMORY UNIVERSITY SCHOOL OF MEDICINE POLICIES

All of School of Medicine policies and University policies apply to Physician Assistant Program Students. These policies are found on the School of Medicine Connections Canvas site at: https://canvas.emory.edu/courses/81619 and include:

University Policies
- Equal Opportunity and Discriminatory Harassment
- Faculty, Staff and Student External Volunteer Guidelines
- Child Abuse Reporting
- Anti-Hazing
- Student Organization Recognition, Advising, Activity Fee and Website
- Missing Student Notification
- Respect for Open Expression
- Sex and Gender-Based Harassment
- Alcohol and Drug Abuse
- Student Vehicle Use
- Student Complaints
- Travel and Expenses Policy
- Travel

EUSOM Policies
- Clinical Supervision of Medical Students
- Confidentiality of Student Evaluations
- Consensual Teacher-Student Relationships
- Gross Anatomy Laboratory
- Inclement Weather
- Industry Relations
- Involuntary Withdrawal of Student from EUSOM
- Personal Recordings
- Research Studies Involving School of Medicine Students as Subjects
- Separation of Roles
- Students as Chaperones
- Students as Interpreters
- Student Employment During the Program
- Student Mistreatment
- Use of School of Medicine Buildings
SCHOOL OF MEDICINE OFFICES AND CONTACTS

The School of Medicine Office of Medical Education and Student Affairs (OMESA) is composed of multiple units, each focused on specialized tasks to help students succeed both academically and personally so that they graduate well-prepared for a career in medicine.

Office of Medical Education and Student Affairs
100 Woodruff Circle
P384
Atlanta, GA 30322

Please see details on the School of Medicine Connections Canvas site at: https://canvas.emory.edu/courses/81619, that includes information on the following topics:

- Accommodations
- Counseling and Psychological Services (CAPS)
- Financial Aid
- Human Simulation Education Center (HSEC)
- Office of Multicultural Affairs (OMA)
- OMESA Contacts
- Registrar
- Simulation
- SOM IT
- SOM Leadership and
- Student Affairs

FINANCIAL AID OFFICE

The goal of the Financial Aid Office is to help students find the necessary resources to cover their medical education expenses and provide counseling to minimize and manage personal expenses while enrolled. It reviews applications for financial assistance to determine eligibility for federal and University funds and certifies loan applications. In addition, the Financial Aid Office offers education loan indebtedness counseling for allied health students.

Emory University Office of Financial Aid - Detailed instructions and information regarding the financial aid application process: www.studentaid.emory.edu

Emory University Student Financial Services – This is the student accounts office. They send bills, accept payment for tuition and fees, and process refunds: www.studentfinancials.emory.edu

Free Application for Federal Student Aid (FAFSA) - www.fafsa.ed.gov

Tuition and Fees

Tuition covers a normal program of study for the Master of Medical Science degree. In addition, students must pay the following mandatory fees each semester: Activity Fee, Athletic Fee, Immunization and Disability Insurance Fee, Mental Health/Counseling Fee, Clinical Administration Fee, Technology Fee and Housing Fee. Tuition payments cover three semesters of study (fall, spring and summer). Tuition rates are subject to change and will affect all students unless otherwise specified.

Emergency Loans

Students in need of emergency loans should contact the Associate Director of Financial Aid and Scholarships. Short-term, interest-free loans are available to students in certain situations. All emergency loans will be future dated and posted to the student’s account when issued. On the date the emergency loan is due, this amount will become a current charge and will appear on the student’s bill in the next billing cycle. Finance charges will accrue on the account if payment is not made by the end of the month. Any amounts due on emergency loans will automatically be deducted from the student’s refunds at the time of registration.

Policy Statement on Refunds

Physician Assistant students who choose to withdraw from the curriculum for any reason may qualify for a tuition refund...
Financial Aid and Academic Probation
An underlying requirement for all federal, state, and institutional financial aid is the need for student to meet the minimum academic standards. Students who do not meet these standards may lose their eligibility for financial aid (including loans) even if they meet all other requirements of the aid programs. Some students could lose their eligibility for financial aid even if their program allows them to continue with their studies. These minimum academic standards are part of the Financial Aid Satisfactory Academic Progress Policy. Please note that this policy is distinct from the Satisfactory Academic Progress Policy that governs progress and promotions.

REGISTRAR'S OFFICE
The Registrar’s Office manages and maintains the academic records of all active and former Doctor of Medicine students. The Registrar is responsible for the registration of all students, management of all student records, verification and processing of attendance, satisfactory progress, transcript requests and degree candidate information. The School of Medicine Registrar’s Office works closely with the University Registrar’s Office. Official transcripts are only available through the University Registrar’s Office.

Registration, Cancellation, and Withdrawal
Every student is required to be registered prior to each academic year. Those who have not followed standard procedures in any way must present their plan of study for the entire medical course to the dean or the dean’s designate for approval.

Registration for any term is not complete until the student is in compliance with all published procedures and until tuition and other financial responsibilities to the University have been met. Registration information may be obtained from the Office of Medical Education & Student Affairs (OMESA) or any of the program offices. After the last date for changing courses, registration may only be permitted by joint consent of the Executive Associate Dean or their designee, the director, the registrar, and the faculty of the desired courses. Registration is not permitted after eight calendar days following the date on which classes began. Tuition or housing fees are due and payable at registration each semester. Registration is not complete until the student has complied with all procedures and has met all tuition and other financial obligations.

An applicant’s registration and attendance of classes is considered as agreement to comply with the rules and regulations of the University as published in the catalogs and other official publications of the school and as amended or revised during the student’s continued enrollment.

Registration may be cancelled during the first week of classes as stated in the academic calendar with the precise date each semester. Cancellation of registration means that no deficiencies will be noted on the student’s transcript. A student who wishes to leave the University after the first week must officially withdraw; honorable dismissal requires that this procedure be followed. Withdrawal forms may be obtained at OMESA.

Tuition refunds are partial. A student may cancel registration during the first week of the semester in which case only the deposit is forfeited (or twenty-five dollars if no deposit was required). After the first week of class, a student may voluntarily withdraw, and the tuition forfeiture increases progressively. Please contact OMESA or the Bursar for a forfeiture percentage schedule. No refund is given if students drop only part of their coursework after the last day specified for approved schedule changes. No refund is given to a student who is dismissed.

Refunds for first-time Emory University students who are federal aid recipients (Title IV) will be prorated in accordance with the Higher Education Amendments of 1992 and any related regulations.

Readmission of students following withdrawal for medical reasons requires medical clearance by designated University health officials.

A student who withdraws may not continue to live in University housing or participate in student activities and is ineligible for University health services.
Student Records
The official record of each Emory University School of Medicine student is maintained in the School of Medicine. These records include information that assists in evaluating the progress of students in obtaining their medical education. Student records are kept secure and are not available to anyone other than faculty members and administrators of the School who have an appropriate need to review a student’s attendance or progress.

IMMUNIZATION REQUIREMENTS 2021-2022
Documentation of the following immunizations and tests is required prior to matriculation for all entering students:

Tetanus/Diphtheria/Pertussis – primary series of DTP or DTap, in addition to at least one adult dose of Tdap followed by a Tdap or Td every 10 years.

Measles/Mumps/Rubella (MMR) – 2 doses of a combined MMR -OR- two (2) doses of Measles, two (2) doses of Mumps, and one (1) dose of Rubella –OR- laboratory evidence of immunity to each disease.

Varicella (Chickenpox) – positive Varicella antibody titer -OR- 2 doses of the Varicella vaccine given at least 1 month apart.

Hepatitis B – 2 or 3 dose series, followed by a post-vaccine quantitative antibody titer.

COVID-19 Vaccine – mandatory. Student Health Services will maintain a list of acceptable COVID-19 vaccines on its website.

Tuberculosis Screening – one PPD/Mantoux skin test must be completed within 6 months and at least 2 weeks prior to matriculation. Upon matriculation, incoming students will be required to obtain a SECOND PPD, to be administered during the first semester of medical school and at the expense of the School of Medicine. Thereafter, students will receive a TB exposure questionnaire to determine if additional PPD testing is required. Students whose PPDs convert from negative to positive (reading of > 10 mm induration) while enrolled full-time in the School of Medicine will be referred for care by a physician affiliated with Emory University Student Health Services and will receive their treatment at the expense of the School of Medicine.

NOTE: Entering students with a positive PPD are required to have a negative chest x-ray. Students who have received BCG vaccination in the past and have a positive PPD reaction, should have both a chest x-ray and a blood test (QuantiFERON Gold or T-spot) performed to complete the evaluation for latent TB.

For clarification of this policy please contact Student Health Services at 404-727-7551 or immunizations-shs@emory.edu
STUDENT RESOURCES

SAFETY AND SECURITY
Emory University School of Medicine is enriched by the legacy and energy of Atlanta, while subject to possible urban crime and violence.

Every effort is made to provide a safe and secure environment for our students on all campuses. Emory maintains its own police department that manages law enforcement, fire safety and emergency medical services.

The School of Medicine facility provides 24-hour study space for SOM students with a Security Guard on duty after hours. The entire SOM building is card-access only after hours. The Security Guard checks student ID cards to limit the afterhours use to registered School of Medicine students.

Students in need of escorts to and from parking decks or for motorist assistance on the Emory Campus are instructed to dial (404) 727-8005. The Emory Police Department can be reached by dialing (404) 727-6111. DeKalb County Police may be reached through the emergency 911 number. Students on the Grady Campus dial 5-4025 or (404) 616-4025 to reach Grady Security.

Emergency "blue light" phones located throughout campus link callers directly to the department in order to report emergencies and request security escorts.

The Office of Critical Event Preparedness and Response coordinates campus-wide activities related to unusual events. CEPAR uses www.emory.edu website bulletins, cell phone text messages, emails and other means to notify community members about precautions and plans.

The Emory University-affiliated hospitals have public safety departments with officers on duty twenty-four hours each day. Students are encouraged to notify the Public Safety Department at 404.712.5598 (Emory University Hospital), 404.686.2597 (Crawford Long Hospital), or 404.616.4024 (Grady Hospital) concerning any activity that may compromise the student’s safety and/or the safety of other students, physicians, residents, hospital employees, patients, and visitors.

STUDENT HEALTH

General
The health and wellbeing of Emory allied health students is a top priority and essential to student success. While we encourage self-care, health promotion and prevention, allied health students are not exempt from having physical and/or mental illness. All students are expected to take responsibility for maintaining personal wellness by utilizing the multiple resources at Emory outlined below and notifying the dean’s office when personal health becomes a concern.

Student Health and Counseling Services
The mission of Emory University Student Health and Counseling Services is to empower students to take responsibility for their health and to complement the academic mission of the university by providing unified medical, counseling and health promotion services that result in a healthy campus culture. Student Health and Counseling Services is committed to providing caring professional clinical services to a diverse student body and to reducing the stigma associated with seeking mental health services. Emory University Student Health and Counseling Services is very proud to be fully accredited by the Accreditation Association for Ambulatory Health Care, Inc. (AAAHC). The Emory University Counseling and Psychological Services’ Psychologist Training Program is fully accredited by the American Psychological Association (APA).

Student Health Services
Emory University Student Health Services is located in the 1525 Clifton Road Building on the Emory Campus and provides comprehensive outpatient medical care for enrolled students. Students’ spouses, qualified domestic partners and dependents over the age of 18 on the Emory Aetna Student Insurance Plan can also be seen at Student Health Services on a fee-for-service basis. Services available are outpatient primary medical care, physical examinations, confidential HIV testing, STI testing, post-blood borne pathogen exposure follow-up care, dermatology, contraception, IUD insertion and colposcopy, mental health and counseling, preventive medicine, sports medicine, allergy injections, immunizations, PPD
tuberculin skin tests, referrals to specialists, health education, international travel information and immunizations, nutrition counseling, and alcohol, tobacco, and substance abuse counseling.

Services available are outpatient primary medical care, physical examinations, confidential HIV testing, STI testing, post-blood borne pathogen exposure follow-up care, dermatology, contraception, IUD insertion and colposcopy, mental health and counseling, preventive medicine, sports medicine, allergy injections, immunizations, PPD tuberculin skin tests, referrals to specialists, health education, international travel information and immunizations, nutrition counseling, and alcohol, tobacco and substance abuse counseling.

A Student Health physician is available for telephone consultation when the office is closed and can be contacted by calling the EUSHS paging operator at 404-727-7551, option 0.

Professional fees for primary care visits to Emory Student Health Services and Counseling Services during regular hours are covered by Emory tuition. Other services, such as laboratory tests, x-rays, immunizations and allergy injections are not covered by tuition and must be paid for by the student or their insurance. Charges incurred at EUSHCS are covered 100% by the Aetna Student Health Insurance Policy. The Emory Student Health and Counseling Services (EUSHCS) is now a member of 42 national PPO networks, including most major insurance carriers with the exception of Blue Cross/Blue Shield (BC/BS). Students on BC/BS are considered out-of-network at EUSHCS and will be responsible for any charges incurred at the time of the visit. The EUSHCS will provide the necessary paperwork to submit for reimbursement. Most other insurance carriers will be billed directly. Students will be responsible for any outstanding charges that are not covered by insurance. Payment by cash, check, Visa, and MasterCard are accepted.

Students’ spouses, qualified domestic partners, and dependents (over age 18) on the Emory/Aetna Student Health Insurance Plan can be seen at EUSHS on a fee-for-service basis.

The Student Health “Your Patient Portal” is a 24-hour Internet communication tool for Emory students. Students can access Your Patient Portal at https://www.shspnc.emory.edu/login_directory.aspx. By using this system, Emory students are able to communicate online with Student Health Services in a private, confidential, and secure manner that meets federal HIPAA privacy standards. Your Patient Portal can be used to schedule appointments, request prescription refills, view recent billing statements and request medical records releases.

**Appointments**

The Emory University Student Health Services (EUSHS) operates on an APPOINTMENT ONLY system. Appointments are scheduled by calling (404) 727-7551 (press 1) during office hours, or you can schedule your own appointment through the on line appointment system (Your Patient Portal). You will be scheduled as follows:

For routine care, appointments are scheduled up to two weeks in advance.

For urgent conditions, an appointment or urgent consultation can be arranged for the same day.

For most acute, but not urgent needs, you may get an appointment in 24-48 hours. The only patient visits that will be handled on a work-in basis will be urgent care. If you cannot keep your appointment, please call and cancel at least two (2) hours before the scheduled appointment time or 24 hours in advance before specialty clinics. Charges do apply for not showing up (No Show) for a scheduled appointment.

Emory University Student Health Services: 404-727-7551
Student Health Immunization Nurse: 404-727-0392
www.studenthealth.emory.edu

**Student Counseling and Psychological Services (CAPS)**

The Emory University Student Counseling & Psychological Services (CAPS) is located in 1462 Clifton Road Building, Suite 235. CAPS provides free, confidential individual, group, and couples counseling for enrolled undergraduate, graduate and professional students at Emory University. CAPS staff also provides consultations to students and faculty or staff who is concerned about an Emory student. Finally, CAPS provides outreach and educational workshops on a variety of topics.
Services are provided by competent, caring psychologists, social workers, and psychology and social work trainees. Services at CAPS are covered by the Mental Health & Counseling Fee. CAPS also provides referrals to other agencies on campus, low-cost services in the community, or private practitioners in the community when necessary and/or requested.

An Emory student interested in arranging an appointment can call (404) 727-7450 or come to the Counseling Center between 8:30 a.m. and 5:00 P.M., Monday through Friday. Psychiatric services are available at Student Health Services at 1525 Clifton Road, phone (404) 727-7551. Counselors are on call in case of emergency. For more information about CAPS services, visit: http://studenthealth.emory.edu/cs/

Other after-hours resources include:
Dekalb County Mental Health Support Line: 404-892-464
In case of an emergency the Police should be called by dialing 911.

Faculty Members that Assist Students in Obtaining Psychiatric Evaluation
These individuals are designated by the Chairperson of the Department of Psychiatry and Behavioral Science and may assist students in obtaining appropriate psychiatric assistance. They will serve as triage and may be able to help identify the most appropriate person either within the Emory Department of Psychiatry or among private practice psychiatrists in the community.

Students on the Emory/Aetna student health insurance plan (offered by Aetna Student Health in 2014-2015) should be aware that a referral by a Student Health or Counseling Center clinician is required before seeking psychiatric and/or counseling care either at The Emory Clinic or in the community.

For a list of Emory Core providers, go to www.aetnastudenthealth.com or call the Student Health and Counseling Services Insurance Office at 404-727-7560

Department of Psychiatry Outpatient Psychotherapy Training Program
Please contact Jennice Vilhauer in the Dept of Psychiatry - jvilhau@emory.edu

This program is a confidential service staffed by senior residents with faculty supervision. Charges are on a sliding scale basis. The program has proven to be helpful to selected students, but referrals must be made by one of the triage faculty members in the Department of Psychiatry or by the Emory University Student Health Services psychiatrist. Although it is one of the lowest cost arrangements available, students should be aware that the clinic does not bill insurance, including the Emory student health insurance plan.

Additional Psychiatrists or Clinical Psychologists
The Office of Medical Education & Student Affairs has compiled a list of therapists who have been of assistance to Emory University School of Medicine students in the past. Some are full-time or volunteer faculty members; others are not. This is only a limited list of practitioners and in no way attempts to be all-inclusive. There are many other psychiatric and counseling care options in the community for students, and students can consult counselors/psychiatrists at Emory Student Health and Counseling Services for recommended off campus options. Once again, students on the Emory/Aetna student health insurance plan (offered by Aetna Student Health in 2011-2012) should be aware that a referral by a Student Health or Counseling Center clinician is required before seeking psychiatric and/or counseling care either at The Emory Clinic or in the community.

The Respect Program
The Emory University Respect Program’s mission is to engage the Emory community to prevent and respond to sexual assault and relationship violence. To learn more about the program please contact Lauren Bernstein, the Assistant Director for the Respect Program at lauren.bernstein@emory.edu or visit: http://studenthealth.emory.edu/hp/programs/respect_program/.
EMORY CARES 4 U
Emory Cares 4 U provides culturally relevant awareness and support that fosters an integrated community of caring and enhanced well-being in order to reduce stigma and prevent suicide at Emory University.
http://www.emorycaresforyou.emory.edu/emory_cares_4_u/index.html

Crisis Numbers
404-727-6111 Emory Police or 911 off campus
1-800-273-8255 National Suicide Prevention Lifeline
1-800-715-4225 Georgia Crisis and Access Line
404-727-7450 Emory Counseling Center (M-F 8:30am-5:00pm)
404-727-7551 Psychiatry at Emory Student Health Services or
404-778-5000 Emory Psychiatrist on Call after hours
404-712-7100 Emory Hospital University Emergency Department

INFECTION CONTROL PROTOCOLS
Needlesticks and Other Blood/Body Fluid Exposures
1. Always observe Standard Precautions (Universal Precautions).
2. If you have an exposure to blood or other body fluids (e.g., needle stick, cut), immediately clean the wound with soap and water.
3. Exposed oral and nasal mucosa should be decontaminated by vigorously flushing with water. Exposed eyes should be irrigated with clean water or sterile saline. Eyewash facilities can be accessed quickly in the emergency department for each hospital.
4. Follow the protocol of the hospital in which the incident occurred to the fullest including all follow-up (through the hospital’s Employee Health Service). It is especially important that you report your exposure to the hospital’s Employee Health Service as soon as possible so that a timely evaluation can be performed. Additionally, your exposure may guide future preventive efforts (e.g., education, training, selection of devices). If prophylactic medications are indicated, it is recommended they be initiated as soon as possible after the exposure, ideally within two hours.
5. If you are uncertain of the procedures for reporting and obtaining care at the facility where your exposure occurred, call the Woodruff Health Sciences (WHSC) Needlestick Hotline for assistance at 404-727-4736.
6. Acute serology should be drawn to establish one’s baseline antibody titers to hepatitis B virus (if you have not previously been determined to be HBsAb positive [immune to Hepatitis B]) and, if indicated, to HIV and/or Hepatitis C Virus [HCV] (if the source patient is HIV-positive or HCV-positive).
7. Depending on the results of one’s serology and the baseline serology of the patient (from which the incident occurred), you may need follow-up serologies as per the hospital protocol where the injury occurred.
8. If the source patient is HIV-infected, the administration of post-exposure prophylaxis (PEP or “prophylactic” antiretroviral medications) to decrease the risk of patient-to-health care worker transmission should be strongly considered. Medications may be initiated pending results of HIV serology on the source patient. If used, these medications should be taken as soon as possible after the needlestick injury. The hospitals have protocols and will counsel you and give advice as needed. PEP regimens are complicated; therefore, be sure that the individual who manages your exposure consults with the Hospital Epidemiologist (see list below). Again, call the WHSC Needlestick Hotline 404-727-4736 if you have any questions about management of the needlestick or other occupational exposure.
9. The following list of specific areas and/or individuals should be contacted at the facility in which the exposure occurs:

Grady Memorial Hospital and Affiliated Sites
Daytime hours, Monday thru Friday:
Employee Health Service call 404-616-7849 (STIX) or 404-616-4600

After hours and on weekends:
Occupational Health Services - Call 404-616-7849 (STIX) to leave a voicemail with exposure retails. You will be instructed to contact the On-Call Health System Administrator at 404-319-7367.
Dr. Susan Ray, Hospital Epidemiologist, Division of Infectious Diseases
If you are unable to reach any of the above individuals, call the WHSC Needlestick Hotline 404-727-4736.

VA Medical Center
Daytime hours, Monday thru Friday: Occupational Health, CLC Room 2C
Joyce Thompson RN: 404-321-6111, Ext. 6472

After hours and on weekends: Emergency Room 404-321-6111, Ext. 6640
Dr. Robert Gaynes, Division of Infectious Diseases
Office: 404-321-6111, ext. 7508; Pager: Pager 404-485-7918

If you are unable to reach any of the above individuals, call the WHSC Needlestick Hotline 404-727-4736.

Emory University Hospital - Midtown
Daytime hours, Monday thru Friday (7am to 4pm):
Employee Health Service 404-686-2352

After hours, and on weekends:
Page Administrative Nursing Supervisor (PIC#11917)
Dr. Jesse Jacob, Division of Infectious Diseases
Office: 404-686-1564; Pager: 404-686-5500, ID# 16623; Home: 404-876-4717

If you are unable to reach any of the above individuals, call the WHSC Needlestick Hotline 404-727-4736.

Emory University Hospital
Daytime hours, Monday thru Friday (7am to 4pm):
Employee Health/Occupational Injury Management Office - 1364 Clifton Road, Room D219

Occupational Injury Management (Worker's Compensation) 404-686-8587
Employee Health Services 404-686-8589

After hours and on weekends:
Page Administrative Nursing Supervisor (PIC#13087)
Emergency Room 404-712-7100
Dr. Bruce Ribner, Hospital Epidemiologist, Emory University Hospital and Emory Division of Infectious Diseases Office: 404-727-1580; Pager: 404-686-5500, PIC# 15326; Home: 404-417 0225

If you are unable to reach any of the above individuals, call the WHSC Needlestick Hotline 404-727-4736.

Children’s Healthcare of Atlanta (Egleston or Scottish Rite)
Daytime hours, Monday thru Friday:
Employee Health, Digital Pager 1-800-682-4549 or Needlestick Hotline (ext. 4444 at Egleston and ext. 824444 at Scottish Rite)

After hours and on weekends: same as above.
Dr. Harry Keyserling, Pediatric Infectious Diseases

If you are unable to contact any of the above individuals, call the WHSC Needlestick Hotline 404-727-4736.

Any of the following physicians may be contacted for assistance and additional advice, but the injury should first be reported as outlined in #9, above, for immediate help.

Henry M. Blumberg, MD  Grady Memorial Hospital  404-727-5096
Harry Keyserling, MD  Egleston Hospital  404-727-5642
Susan M. Ray, MD  Grady Memorial Hospital  404-251-8712
The cost of the follow-up and necessary medications may be borne by Emory University Affiliated Hospitals or may need to be submitted through the student’s health insurance. Any uncovered costs will be covered through the Office of Medical Education & Student Affairs if the following procedures are followed below.

IMPORTANT: For medical students and students in the health professions, initial evaluation of the exposure should be as above. Following this initial evaluation, all incidents and follow-up for exposures occurring at a hospital should be reported within 4 days to Mary Kaye Garcia or her designee in the Office of Medical Education and Student Affairs at Emory University (404-727-5655 or mkgarc@emory.edu), i.e., incident report and follow-up plans.

Conversions
PPD tuberculin skin tests will be performed every year (at a minimum) or at the time of exposure for students. Those with PPD conversions will be referred to an appropriate physician in the University Health Services for follow-up. Expense of drugs, x-rays, and laboratory testing will be covered as long as protocol is followed.

Students Infected with HIV, Hepatitis B, Hepatitis C
Emory University School of Medicine requires any student who is infected with Human Immune Deficiency Virus (HIV), Hepatitis B virus “e” antigen positive, or Hepatitis C virus to notify the Executive Associate Dean for Medical Education and Student Affairs of his/her positive status so that the School may help to define any limitations necessary on clinical rotations and make such accommodations as may be reasonable to permit the student’s continued matriculation.

The Executive Associate Dean for Medical Education and Student Affairs, or his/her designee, will make recommendations on a case-by-case basis, utilizing the best currently available scientific knowledge and any established recommendations from the U.S. Centers for Disease Control and Prevention and other applicable governmental guidelines regarding what, if any, limitations need to be applied to clinical activity. In conducting this evaluation and making such recommendations, the Executive Associate Dean will consult with the student, the student’s personal physician and others, including faculty of the School of Medicine, as determined appropriate to assist in this individualized judgment. Within the parameters of existing law, the student’s confidentiality will be maintained during this process.

Reasonable efforts to assist the student in completing the requirements for an M.D. degree will be made by the School of Medicine. In addition, the student will be offered counseling concerning the options for the future selection of a career pathway in the profession of medicine.

More Specific Guidelines on Students Infected with Blood-Borne Pathogens
Students should be allowed to complete the M.D. degree if at all possible, with an effort by all to maintain confidentiality to the degree that it is possible.

In such instances, the clinical Department Chairs need not be notified of the name of an individual student involved or the type of blood-borne pathogen involved. However, the Clerkship Director for the Departments of Surgery, Obstetrics/Gynecology, Emergency Medicine and any other Clerkship Directors (if indicated) will be informed of the name of the individual student so that any special assignments can be made if indicated. If the student is Hepatitis B “e”-antigen positive, the Clerkship Director will be given that data. Students will be carefully counseled concerning their potential risk to patients and their risk to themselves. They will be instructed to be punctilious in the use of universal precautions and up-to-date hospital infection control techniques. They will be referred to appropriate physician caregivers for optimal follow-up and therapy. The student will also be counseled carefully about future career plans based on current medical and legal data.

Invasive procedures considered as potential risks for Health Care Workers-to-Patient transmission by the Centers for Disease Control and Prevention will be strictly avoided by students who are Hepatitis B “e”- antigen positive. Students
with other known blood-borne pathogens will be advised on a case-by-case basis. In general, because of their lack of experience, students with HIV or HCV infections will be advised like HBV-infected students. Recommended practices include double gloving and not performing any procedures that have been previously identified as associated with a risk of provider-to-patient HBV transmission. The student will be allowed to withdraw without penalty from any clinical setting that the student feels might present a risk for infectivity.

HIV-positive students should undergo screening for Tuberculosis every six to twelve months and receive pneumococcal vaccine, annual influenza vaccine, and other appropriate preventive immunizations.

The student’s condition will be re-evaluated at least annually by the Dean to determine if any additional limitations are indicated. The student’s viral load, CD4 count and clinical status as well as the regimen of anti-retroviral therapy that is being employed can be useful in assisting in any decision making by the medical school if the student will allow the Executive Associate Dean to discuss the results with his/her health care provider.

Students who fail to show a response to Hepatitis B vaccination by serologic means will be counseled to see a physician to determine their Hepatitis B antigen status and to see if they are Hepatitis B “e”-antigen positive. If they are “e”-antigen positive, they will be encouraged to report this finding to the Office of the Executive Associate Dean, Medical Education & Student Affairs and then to be followed as per protocol.

STUDENT INSURANCE

Disability

All students enrolled full-time in the Emory University School of Medicine are provided with group long-term disability insurance coverage. A summary of the plan and an electronic copy of the benefit booklet is distributed to students annually. Additional information concerning the plan is available by calling the plan administrator, Ms. Susan Gelber of InsMed Insurance Agency, Inc., 1-800-214-7039. Seniors will be given 30 days after graduation to extend the policy if desired. Ms. Gelber, is also available by phone to discuss the options available to graduating seniors.

Liability

Students are covered by professional medical liability insurance while they are observing or assisting in the provision of care under the supervision of Emory faculty, or under the supervision of faculty at other institutions as part of an Emory approved elective at other institutions.

This would include a) activities that are an official component of the curriculum, including required and elective courses, b) clinical activities that students may participate in, but are not required, at the invitation of faculty, as part of the faculty members SOM clinical duties, and c) volunteer clinical activities supervised by Emory faculty (i.e. volunteer service at the Open-Door Clinic). At all times, students must be under supervision of faculty in performing clinical service, and the performance of such services must be within the scope of their education/training.

Students who volunteer their time providing medical services outside of the School of Medicine curriculum and/or with non-Emory faculty physicians are NOT covered by University liability and therefore are advised not to engage in such activities unless other liability coverage is provided.

Health

Student Health insurance coverage for sickness, accidents and hospitalization is required of all Emory students. Coverage must be continuous from the date of enrollment until the date of graduation. An overview of the Emory/Aetna Student Health Insurance Policy is available at http://studenthealth.emory.edu/hs/insurance_fees/aetna/index.html.

Students are automatically enrolled and charged for the Emory/Aetna Student Health Insurance Plan. There is no dependent coverage for domestic students; however, coverage is available to dependents of international students to satisfy visa requirements.

Students who have health insurance coverage through another carrier must complete an online waiver at www.opus.emory.edu confirming that they have health insurance coverage that is comparable and meets Emory University waiver criteria. The Health Insurance Waiver site opens every spring prior to matriculation. After the online
waiver has been completed, the charge for the Emory/Aetna Student Health Insurance Policy will reverse on the student’s university account.

Incoming MD (including MD/PhD students starting in July) must complete the waiver by the August date only, as those students start in the fall term. Beginning with students’ second year, the waiver process must be completed annually for EACH year they are enrolled at Emory. The fall waiver site opens late May, and the deadline is late August.

Maintaining health insurance coverage is a requirement for continued enrollment. Students are responsible for informing themselves of the current policy.

As a result of national healthcare reform, students may be eligible to remain on a parent’s insurance plan until age 26. Contact your insurance carrier if you have questions about current federal or state law.

ACADEMIC COUNSELING
In general, students are expected to maintain “satisfactory” grades in all courses. If a student is having academic difficulty, academic counseling or tutoring may be recommended. It is always advisable for students to seek academic assistance from instructors/course directors as a given course proceeds rather than to wait until examination time. In spite of the expected degree of self-discipline and good study habits that students developed before entering into PA school, there are instances in which students may need assistance. In addition, some degree of guidance is necessary when making up work missed because of illness (or any other unforeseen event). Students are requested to make an appointment with their advisor for counsel and advice concerning academic problems unresolved by discussions with instructors/course directors.

WOODRUFF HEALTH SCIENCES CENTER LIBRARY
The Woodruff Health Sciences Center Library (WHSC Library) offers a broad range of services and resources that support medical education, biomedical research and clinical care. Comprehensive print and electronic collections of books and journals are accessible via web services and discoverE, the university online library catalog. All major works can be found in permanent and course reserves, housed at the Information Desk. Library services include assistance with information and knowledge management, project management, use of multiple information sources for problem solving, biomedical imaging, and access to data sets.

Woodruff Health Sciences Library, 1462 Clifton Road – Atlanta, GA 30322

health.library.emory.edu

- Monday thru Thursday: 8:00 AM - Midnight (Summer Hours until 10:00 PM)
- Friday: 8:00 AM - 7:00 PM
- Saturday: 10:00 AM - 7:00 PM
- Sunday: 12:00 PM - Midnight (Summer Hours until 10:00 PM)

Contact Information:
- Ask A Librarian - http://health.library.emory.edu/ask-librarian/
- Information Desk - 404.727.8727

Informatics Center, School of Medicine Building, Room 329
- Monday through Friday: 9:00 - 5:30
- Instructional Design & Technologies Informationist: 9:00 am - 5:30 pm
- Medical Education & Technologies Informationist: 8:30 am-12:30 pm or by appointment

Contact Information:
- Informatics Center Informationist: 404-712-9936

Emory University Hospital Branch Library, 1364 Clifton Road - Atlanta, GA 30322, Emory University Hospital, Room H-140
- 24/7 card access available to students on rotations with activated ID card
- To have your ID programmed, take your schedule to Public Safety, room HB43

Contact Information:
- EUH Branch Clinical Informationist: 404-727-3090

Emory University Hospital Midtown Branch Library, 550 Peachtree St. NE - Atlanta, GA 30308, 5th Floor Medical Office Tower, EIMS
- 24/7 card access available to students on rotations with activated ID card
- To have your ID programmed, take your schedule to take your schedule to Security Services, Orr Building
Contact Information:
• EUH Midtown Branch Clinical Informationist: 404-686-1978
Grady Branch Library, 69 Jessie Hill, Jr. Drive - Atlanta, GA 30303
• Monday thru Friday: 8:00 AM - 5:00 PM
Contact Information:
• Grady Branch Desk: 404-251-8777
To Access Resources and Services, always start at Woodruff Health Sciences Center Library:
health.library.emory.edu/
To Connect to Library Resources from Any Off-Campus Location
• Start at the library’s website
• Identify yourself with your network ID and password when prompted
• As an alternative, install software from vpn.emory.edu
To Research Questions & Topics, Download Literature, or Analyze Data, Start Here
• Clinical Decision Support - Cochrane Library, DynaMed
• Databases - PubMed, EMBASE, CINAHL, Web of Science, Ovid
eJournals - Searchable A-Z List of Emory’s Electronic Journals
eBooks - AccessMedicine, AccessEmergency Medicine, Books@Ovid, and more
eTools - EndNote, SPSS
To Obtain Journal Articles from Database Search Results
• Click on the Find it@Emory button to view full-text availability and other options
• If there is no full-text, click the discoverE-GO- button to check for print availability
• If there is no full-text or print available, click the ILLiad-GO- button to request the article
To Make Online Requests, go to the Library’s Services page under Using the Library
• Get an article delivered from another institution if not available at Emory
• Schedule a consultation
• Have an Informationist complete a literature search for you
To Contact Your Library or Service Point
• Ask a Librarian - http://health.library.emory.edu/ask-librarian/
• WHSC Library Information Desk - 404.727.8727
• Informatics Center, SOM 329 - 404.712.9936
• Emory University Hospital Branch Library - 404.727.3090
• Emory University Hospital Midtown Branch Library - 404-686-1978
• Grady Branch Library - 404.251.8777
To Visit Your Library or Service Point
• WHSC Library - 1462 Clifton Road (across the pedestrian bridge)
• Informatics Center - School of Medicine Bldg., Room 329
• Emory University Hospital Branch Library - Emory University Hospital, Room H-140
• Emory University Hospital Midtown Branch Library – 550 Peachtree St. NE, 5th Floor MOT, EIMS
• Grady Branch Library - 69 Jesse Hill Jr., Drive, Glenn Bldg. 1st Floor

PARKING AND TRANSPORTATION
Vehicle Registration
All students operating automobiles at Emory must register with Transportation and Parking Services, 1945 Starvine Way (in the Clairmont Campus Parking Deck), immediately after arrival on campus or as soon as the vehicle is acquired.

University regulations, strictly enforced on campus, are specified in a regulation booklet furnished at the time of parking registration. Persons with vehicles on campus are expected to know and abide by these regulations. Failure to do so may result in fines and/or removal of vehicles from campus and disciplinary action as described in the code of conduct. For more information, contact Transportation and Parking Services, 404.727.PARK.

Emory University issues parking hang tags, which provide greater flexibility to those who register for University parking privileges. One tag is issued to each registered driver, and registered drivers may transfer hangtags from one vehicle to
another. This parking permit carries the philosophy that the University registers drivers rather than vehicles. All registered drivers share a responsibility to maintain safety and to follow the University Traffic and Parking Rules and Regulations. All traffic and parking rules and regulations are managed by and available from the University Parking Office located at the Starvine Parking Deck on the Clairmont Campus (404-727-PARK or 404-727-7275). For transportation questions please visit http://transportation.emory.edu. For student parking registration please visit https://transportation.emory.edu/student-parking

Please note, cars are not to be parked in the loading dock areas unless a special tag is given and are subject to towing and fines.

Parking at Affiliated Hospitals
As students begin their clinical clerkships in their Applications Phase, instructions regarding parking at affiliated hospitals, hospital regulations, and other matters pertaining to clerkship duties are given to the students by the Office of the Dean for Clinical Education at Grady. You can reach the Grady Office by calling 404-778-1372.

Emory Midtown – Barbara Bingham will arrange. No charge for parking.
CHOA – Emory students use Emory parking office arrangements; visiting students arrange parking through CHOA security office.
VAMC – Students should park in the back of the hospital. No sticker/pass or charge for parking.
Grady – Students purchase through Grady parking office. They do not prorate the parking pass fee. Students must have a Grady ID badge prior to arranging for parking.

Shuttle Services
Emory Transportation Services offer shuttles on campus, for commuters, between major affiliated hospitals and other routes such as Georgia Tech, Oxford, and shopping facilities. In addition, late-night service and SafeRide are available.

Cliff routes & schedules can be found on the Emory Website.
https://transportation.emory.edu/shuttles

Contact Information: Contact a Transportation Services representative or visit the Transportation Services Offices in the Clairmont Campus Parking Deck (1945 Starvine Way, Atlanta, 30322). Office Hours: Mon-Fri, 7:30 am - 4:30 pm
Phone: 404-727-1829
Fax: 404-712-9219
Email: shuttles@emory.edu

SUPPLIES
Medical Equipment
Equipment for the PA Program is purchased as a required package as you enter the program. The complete package must be purchased. Additional details are provided prior to orientation.

Books
The Emory University Medical Bookstore, located on Oxford Road on the Emory Campus, offers books and supplies at reasonable prices to students, faculty, and staff. Please note, many textbooks are available online through the Woodruff Health Science Center Library.

EMPLOYMENT OF STUDENTS
The schedule of studies and clinical activities of the PA Program requires full-time engagement of each student. Employment during any part of the educational program may interfere with studies and clinical work and seriously jeopardize a student's ability to complete the program. While employment is discouraged by the PA program, any student contemplating employment for any reason should discuss the matter with the Program Director before undertaking employment. Any student who is considering (or engages in) employment must be in good academic standing. If at any time there is evidence that the student’s academic performance is placing the student at risk for failing, the student’s employment status will be reviewed with the student. This could result in being asked to terminate employment.

Students are not required to work for the PA program. PA students must not substitute for or function as instructional
The president should be available to listen to the concerns of fellow students and faculty or clinical or administrative staff.

STUDENT ORGANIZATIONS

University Senate
The elective membership of the University Senate includes nine student members, elected for one-year terms, with eligibility for no more than two successive terms. The members are chosen from full-time students in good standing. The Schools of Nursing, Law, Theology, and Business Administration each have a student representative on the University Senate every other year, so that there are three students from these schools each year. The Office of Student Affairs regularly appoints one representative to the University Senate from the sophomore class for the medical student body.

Student Government Association (SGA)
The governing body for student activities at Emory University is the Student Government Association (SGA). Student legislative power is vested in the student legislature of the SGA, to which the student body of each school elects members according to a formula based on enrollment. The formula calls for election of one legislator for each 200 full-time students enrolled and for an additional legislator for any fraction thereof over one-half. The SGA constitution states that it is the responsibility of all students of Emory University to obey the honor/conduct code of their respective schools and of the University. All University student organizations must apply to SGA for charter.

Pi Alpha Honor Society (PiA)
PiA is the only national physician assistant honor society and has an active chapter at Emory. Election to PiA is a distinction that accompanies a physician assistant throughout his/her career. Members can be elected as students, alumni, or faculty of an affiliated institution or on an honorary basis because of distinguished achievement in any field. Chapter members elect undergraduate students who are in the senior year of school. Criteria for election include scholastic excellence (top 50% of the class), integrity, and capacity for leadership, compassion, and fairness in dealing with one’s colleagues. The number elected may not exceed one-sixth of those expected to graduate.

Admissions Committee
Physician assistant students are invited to volunteer for service on committees interviewing applicants. Students may serve in various roles during this process. All assignments are made through the PA Program’s Office of Admissions.

Good Samaritan Health Clinic
The Good Samaritan Health Clinic, founded in 1998 by Dr. Bill Warren, operates on a sliding fee scale model, with only 20% of its expenses paid through patient fees. Up to 80% of its operating expenses are through private donations and volunteer work by physicians, PAs, NPs, dentists, and other volunteers. In 2004 a monthly, extended-hours clinic on Saturdays using the skills of PA faculty and students opened its doors. These Saturday sessions are staffed by a variety of volunteers, and students see patients under the supervision of physicians and physician assistants and provide an opportunity to learn medicine, cultural sensitivity, and social responsibility.

Student Academy of the American Academy of Physician Assistant (SAAAPA)
The AAPA is the professional society for Physician Assistants in the US and functions to represent the best interests of its members in different means. In addition to receiving a subscription to JAAPA, membership as a student in this organization allows participation in national legislative decisions through state and national conferences. Emory’s chapter also works to benefit the school and the community through sponsorship of annual benefits for various causes.

Class Officers
Listed below are class office positions and a brief description of their responsibilities. Most offices are only loosely defined. This is because the success of student government depends primarily on the creativity and enthusiasm of the class officers. Student government helps students to cooperate in making the Emory Campus a vibrant, encouraging place to study.

a. President: The president must promote, coordinate, and assist in the efforts of other officers. The president will in one capacity or another oversee most physician assistant student activities. Most importantly, the president serves as a representative. The president should be available to listen to the concerns of fellow students and convey them to other medical school classes, the administration, the faculty, and other university organizations.
When members of the Emory University community wish to communicate with a class, they will usually do so through the class president.

b. Vice President: The Vice President has a critical role of finding creative solutions to class issues. The primary duties of the Vice President are to conduct fundraising activities for the class, arrange community service projects, or provide students with extra clinical experience. The Vice President also joins the President in attending Advisory Committee meetings and Student Government Association meetings.

c. Treasurer: Each class in the School of Medicine has its own account in which it keeps money received from SGA, as well as money generated by fundraising efforts. The treasurer is responsible for issuing checks for this account to pay for class activities. In addition, the treasurer prepares and submits a budget to SGA in order to receive funds for next year.

d. Secretary: The secretary takes care of class business that requires signup sheets, rosters, announcements, or elections. This role is essential in keeping student government organized and effective.
THE PHYSICIAN ASSISTANT DIVISION

1462 Clifton Rd, NE Suite 280, Atlanta, GA 30322
Main Office Number 404-727-7825
Admissions Office 404-727-3027

LEADERSHIP
William Eley, MD, MPH, Executive Associate Dean for Medical Education and Student Affairs
Theodore Johnson, MD, Chair, Department of Family and Preventive Medicine
Maha Lund, DHSc, PA-C, Program Director
Jodie Guest, PhD, MPH, Associate Program Director
Alex Kendall, MMSc, PA-C, Associate Program Director
Susana A. Alfonso, MD, MHCM, FAAFP, Medical Director
Antonio A. Graham, DO, Associate Medical Director

FACULTY DIRECTORY

<table>
<thead>
<tr>
<th>Name</th>
<th>Title/Role</th>
<th>Phone Numbers</th>
<th>Email Addresses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Susana A. Alfonso, MD, MHCM, FAAFP</td>
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</tr>
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<td><a href="mailto:wbryson@emory.edu">wbryson@emory.edu</a></td>
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<td><a href="mailto:amber.m.davis@emoryhealthcare.org">amber.m.davis@emoryhealthcare.org</a></td>
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<tr>
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<tr>
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<tr>
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<tr>
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</tr>
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<td><a href="mailto:aplatt@emory.edu">aplatt@emory.edu</a></td>
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<tr>
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<tr>
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<td>404-727-2581</td>
<td><a href="mailto:lvaldes@emory.edu">lvaldes@emory.edu</a></td>
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</tr>
<tr>
<td></td>
<td></td>
<td>407-433-1060</td>
<td>(preferred)</td>
</tr>
</tbody>
</table>

**STAFF DIRECTORY**

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Phone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tabitha Curtis</td>
<td>Administrative Assistant</td>
<td>404-727-7841</td>
<td><a href="mailto:tcurtis@emory.edu">tcurtis@emory.edu</a></td>
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<tr>
<td>Corey Smith</td>
<td>Student Academic Services Admin</td>
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</tr>
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<td>Senior Business Manager</td>
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<tr>
<td>Javar White</td>
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<td><a href="mailto:james.white2@emory.edu">james.white2@emory.edu</a></td>
</tr>
<tr>
<td>Erica-Michelle Williams</td>
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<td><a href="mailto:erica.m.williams@emory.edu">erica.m.williams@emory.edu</a></td>
</tr>
</tbody>
</table>