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Introduction

The School of Medicine MD Student Handbook is a reference for medical students and others regarding the administrative policies, rules and regulations of Emory University and the Emory University School of Medicine (EUSOM). In addition, this Student Handbook contains policies and procedures for areas such as admissions, academic and professional standards, progress and promotion, financial aid, student organizations, disability insurance, academic and personal counseling, and student health.

The policies and procedures in place are to maximize student success and help students maintain the high academic and professional standards necessary to be a physician. The School of Medicine abides by and follows all University policies, except where noted. Part of being an excellent physician is always knowing expectations and ensuring those are met. These skills will continue to serve students well as they are required to obtain and maintain licensure, hospital privileges, credentialing, and beyond.

Handbook Disclaimer

The policies and procedures appearing in the MD Student Handbook reflect the most current policies and procedures of the University and School of Medicine, but are subject to amendment and change without prior notice. EUSOM reserves the right to change policies, procedures, and programs. Minor changes will be posted directly to the Student Handbook. When major changes occur, a notification will be sent to all medical students.

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

Part I: General Information

Section 1: Accreditation

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

The Emory University School of Medicine MD Program is fully accredited by the Liaison Committee on Medical Education (LCME). Current accreditation standards and additional information is available at the LCME website.

Section 2: Diversity, Equity, and Inclusion

The Emory University School of Medicine is committed to ensuring a climate of inclusion and organizational equity by leveraging the varied attributes of diversity in our community. Our
commitment is amplified by our Mission to recruit and develop a diverse group of students and innovative leaders in biomedical science, public health, medical education, and clinical care. View our policy.

Section 3: Emergency Preparedness

CEPAR (Center for Emergency Preparedness and Response)

The Office of Critical Event Preparedness and Response (CEPAR) serves as the center for Emory enterprise-wide planning for and coordinated response to catastrophic events affecting Emory and the broader community. Learn more about CEPAR.

Emergency Notification System

The Emory Emergency Notification program is a multi-modal system for alerting students, staff, faculty and visitors of an emergency affecting the Emory community. The wide array of notification options affords Emory the flexibility to convey emergency information in the most appropriate manner and provides redundancy to help ensure the message gets out. Not all emergencies require all of the notification components to be engaged simultaneously.

Students can access the Emergency Alert Information page by logging into OPUS or PeopleSoft. Students should enter their cell phone number and provider information. Students should be sure to update their information if changes to cell phone number or mobile carrier occur.

LiveSafe App

LiveSafe is a personal safety mobile app that Emory University is providing to all students, faculty, and staff to download for free. The app provides a quick, convenient, and discreet way to communicate directly with Emory University safety officials, enhancing your overall safety and allowing Emory University Police to better protect you. We encourage all students to download the LiveSafe App.

Section 4: MD Program

Overview of the MD Student Program

Student Physician Activities (SPAs)

The Emory University School of Medicine Executive Curriculum Committee has stated the outcomes of the MD program in terms of the activities characteristic of a physician that students will learn and do. These “Student Physician Activities” (SPAs) define what students should be able to perform prior to graduation.

The MD curriculum is divided into four phases (view a chart of the 4-year MD Curriculum):
Foundations of Medicine (18 months):

Following a week-long shadowing experience, known as “Week on the Wards,” students begin “Healthy Human”, a 4-month study of healthy human physiology. During this time, students begin their clinical skills training, meeting twice a week with their small group – forming a close relationship with classmates and their faculty mentor early on. Small group discussions about professionalism, ethics, communication, cultural competency, and other “How to be a Doctor” skills add to the “whole person approach” to medical education.

Using those new skills, students begin seeing patients in an outpatient clinic (OPEX – outpatient experience) in the early months of medical school. Reporting for service one afternoon every other week for 12-months, first-year medical students are able to learn from a healthcare team – and their patients – in a longitudinal experience.

Approximately 5 months into the curriculum, students begin studying human disease in organ systems-based blocks for the duration of the Foundations Phase. Anatomy lab also takes place during this time period. Each of 24 dissection tables is equipped with a computer to display cross-sectional imaging, study guides, lecture notes, and other electronic references.

An integral part of the MD student experience is the Community Learning and Social Medicine course. This 4-year structured learning experience combines community service with preparation, action and reflection. Learners work with over 50 community based organizations/partners focused on one of four underserved or disadvantaged populations including elderly, disabled, economically disadvantaged, and immigrant/refugee populations.

Upon completion of the formal courses in Foundations, students are given two months of study time for Step 1 of the United States Medical Licensing Exam.

Grading is Satisfactory/Unsatisfactory for the Foundations phase of the curriculum.

Application of Medical Sciences (12 months):

Providing students with core knowledge of the basic clinical medical and surgical fields, each student will complete required rotations in Surgery, Medicine, Pediatrics, Psychiatry, Neurology, Obstetrics & Gynecology, Radiology, Primary Care, Dermatology, Ophthalmology, Palliative Care, and Anesthesiology.

Students complete these rotations at Emory and Emory-affiliated healthcare facilities throughout the Atlanta area, including:

- Grady Memorial Hospital
- Emory University Hospital
- Emory University Hospital Midtown
- Children’s Healthcare of Atlanta at Egleston
- Children’s Healthcare of Atlanta at Hughes Spalding
During the Application phase, students still regularly meet with their Small Groups to further develop their professional identity and to process and reflect on their clinical experiences.

**Discovery (5 months):**

The Discovery phase is a structured time for students to conduct a hypothesis-driven research project under the direction of a faculty member. While the Discovery project must be a scientific inquiry based in medicine, students are able to combine their interests in other areas, such as creative writing, public health, community development, education, or health policy, into their project. Some students are also able to include an international experience in their Discovery project. This is an opportunity for students to renew their creative energies and explore a new facet of medicine under the tutelage of an Emory faculty member.

Students must carry out a research project that meets the standards established by the Discovery leadership for the MD degree. This project can be part of the student’s second degree program, and may be designed and undertaken as part of that program. The Discovery leadership is responsible for assuring that the project fulfills the requirements for the Discovery phase of the MD curriculum.

During Discovery, medical students work full time on their projects with minimal other academic commitments except occasional seminars or workshops relevant to their research. Many students publish their Discovery work in peer-reviewed scientific journals and all students are required to present their Discovery project at Medical Student Research Day in the fourth year.

**Translation of Medical Sciences (7 months):**

This phase prepares each individual for the transition to physician. Required senior rotations include Emergency Medicine, Critical Care Medicine (ICU), 3 months of electives, and a sub-internship in Surgery, Medicine or Pediatrics; there is sufficient time for away-rotations during this year. The Translation Phase concludes with a required month-long Capstone course that offers carefully designed lectures, workshops, panel discussions, and exercises which equip the soon-to-be graduate with the practical skills and information that will be crucial to their success as residents.

**Section 5: Office of Medical Education and Student Affairs (OMESA)**

The School of Medicine Office of Medical Education and Student Affairs (OMESA) specializes in helping students succeed both academically and personally so that they graduate well-prepared for a career in medicine.

**Executive Associate Dean (EAD) for Medical Education and Student Affairs**
The Executive Associate Dean for Medical Education and Student Affairs is responsible for oversight and coordination of educational programs within the School of Medicine. These programs include Continuing Medical Education (CME), Graduate Medical Education (GME), and Undergraduate Medical Education (UME). The MD program is one of five degree programs in UME.

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Assistant Dean for Medical Education Research
Admissions

The work of Admissions does not end when a new class matriculates into the M1 year. Staff continue to serve students by organizing and directing events including M1 Orientation; White Coat Ceremony; Society picnics; Week on the Wards; class officer elections; Student Organization Fair; coordination of senior student participation in admissions interviews; Housing Weekend; access to the Music Room; and helping enrolled students coordinate a wide variety of student-organized clubs and events.

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Clinical Education

The Office of Clinical Education provides resources to support students during the Application, Discovery, and Translation Phases. Some of the major activities of this office include:

- Plan and implement Orientation to the Clinical Years
- Career counseling and assistance with selecting a clinical advisor
- Determine student schedules during the Application and Translation Phases
• Review clinical student assessments and provide counsel to students in need of remediation
• Organize and implement informational class meetings, including Residency Days, for students in their clinical years
• Write student Medical Student Performance Evaluation (MSPE) letters for residency applications
• Issue tokens to access ERAS and upload documents
• Counsel and assist students with the residency application process - selecting letter writers for letters of recommendation, residency program choices, interviewing, NRMP rank list, etc....
• Counsel unmatched students with the Supplemental Offer and Acceptance Program (SOAP)
• Assign student lockers for storing personal belongings while rotating at Grady
• Set up AAMC Visiting Student Application Service (VSAS) access for Emory students
• Screen and process visiting student applications, and place visiting students into electives
• This office is supported by the Grady Campus Student Affairs staff listed below.

Office of Clinical Education

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TBD
Assistant Dean of Clinical Education

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Human Simulation Education Center (HSEC)

The Human Simulation Education Center (HSEC) is located in the James P. Williams School of Medicine Building on the 3rd floor. The Center is a state-of-the-art educational space designed for simulated participant (SP) encounters.

HSEC is utilized for SP education, clinical skills education, physical examination practice, diagnosis assessment and other educational experiences. It contains four suites, each of which contain a central debrief room with projection capability and four adjacent examination rooms equipped with examination tables and standard clinic equipment. All HSEC rooms have the capacity for direct and remote observation and recording through our simulation software system.

HSEC is a resource for the entire School of Medicine. Currently, many of the school’s educational programs, residencies, fellowships, and faculty programs work with the Center staff to build robust Human Simulation educational experiences.

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Emory Center for Experiential Learning (ExCEL)

The ExCEL Simulation Center is located in the James P. Williams School of Medicine Building and includes state-of-the-art spaces and equipment such as task trainers, high fidelity electronic mannequins, mock clinical spaces such as an operating room and ICU used for immersive simulation scenarios for individual and interdisciplinary team learning, and virtual reality equipment for learning various procedural techniques. All ExCEL rooms have the capacity for direct and remote observation and recording.

ExCEL is a resource for the entire School of Medicine. Currently, many of the school’s educational programs, residencies, fellowships, and faculty programs work with the Center staff to build robust simulation educational experiences.

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Financial Aid

The goal of Financial Aid staff is to help students find the necessary resources to cover their educational and living expenses and provide counseling to minimize and manage personal expenses while enrolled. Financial aid personnel review applications for financial assistance to determine eligibility for federal and University funds and certifies loan applications. In addition, staff offer education loan indebtedness counseling for all students.
Medical Education

The Medical Education unit is responsible for executing the medical education program leading to the MD degree, including curriculum development, program evaluation, and student assessment. It also provides administrative support for education-related faculty committees and schedules space for classes, conferences, and other meetings in the School of Medicine building.

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Office of Multicultural Affairs (OMA)

The Office of Multicultural Affairs (OMA) provides programs to support the development and matriculation of diverse learners, including those enrolled in EUSOM degree and pipeline programs. View up-to-date information about the Office of Multicultural Affairs.

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Registrar

The School of Medicine Registrar works closely with the University Registrar and maintains the permanent records and academic documents of all active and former Doctor of Medicine students.

The Registrar is also responsible for:

- Processing requests from students and alumni to view permanent student records
• Maintaining the School of Medicine course catalog and making the necessary annual updates
• Updating the MD program course descriptions and other pertinent information in Oasis
• Managing the registration of all students in their classes each term
• Verifying the accuracy of student grades in the Emory PeopleSoft/OPUS system
• Providing GPA reports for consideration of induction into AOA (MD program) and final honors for graduation
• Managing student enrollment changes
• Monitoring satisfactory progress and advancement to the next phase of the curriculum for MD students
• Ensuring degree candidates have met all graduation requirements
• Certifying graduates with the University, AAMC, and the NBME
• Submitting graduate list of honors students to the University registrar for notation on transcript
• Data reporting on student demographics, enrollment, and academic progress

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Student Affairs and Enrollment Services

Student Affairs processes student enrollment and class registration and provides resources to support and promote students during their development at Emory School of Medicine. Some of the specific functions of this office include:

• Class registration in the Emory PeopleSoft/OPUS system
• Upload final grades for MD students and process grade changes in OPUS
• Process changes to enrollment status for student leaves, dual degree study, and withdrawals in OPUS
• Support EmoryDOCS, which includes: organize and plan student Career Advising resources, activities, and class meetings, maintain and update the EmoryDOCS website
• Assign space for classrooms, conferences, and other meetings in the School of Medicine building space using 25Live
• Arrange access to the School of Medicine Building after hours for after-hours events and for students with ID prox cards
• Enrollment verification and letters of good standing
• Request exclusion of jury duty during medical school rigors on behalf of students
• Initiate emergency loan requests
• Facilitate, monitor and ensure compliance of students’ annual vaccination and healthcare training requirements (PPD, flu shot, OSHA, HIPAA)
• Generate Intent to Graduate letters
• Degree verifications for state medical board/residency programs
• Notary Public services
• Monitor and facilitate the sign up for USMLE Step 1 board examination
• Assign student lockers in the student lounge, in the anatomy locker rooms, and in the basement for use by bicyclists
• Lost and found for the School of Medicine building
• Provides services to students on all campuses and has staff members on both the main Emory and Grady campuses.

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Part II: Matriculation

Section 1: Criminal Background Checks and Drug Testing

Emory medical students undergo Criminal Background Checks (CBCs) before matriculation as facilitated by the Association of American Medical Colleges (AAMC). Acceptance to Emory School of Medicine is contingent upon the authorization of the CBC, as well as the release of its findings to Emory.

Additionally, all incoming medical students will be required to submit to a drug screening, as facilitated by a contracted vendor. The Admissions Committee will review any findings to determine what, if any, action is required. Students may also be required to undergo additional CBCs and drug screening as required by clinical rotation sites, or if required to do so as an evaluation of their fitness to participate in their medical education.

All positive and multiple negative-dilute drug screenings and any findings from the CBCs, that were not previously disclosed by the applicant prior to acceptance, will be reported to the Executive Associate Dean for Medical Education and Student Affairs, and then referred to a faculty committee for further consideration. After review of the results of the CBC and/or drug screening, the committee may seek additional information from the student, in writing or via interview. In the case of multiple negative-dilute drug screenings, the committee may require the student to submit to a blood-based drug screening.

Given the reports and any follow-up information provided, the committee will provide the Executive Associate Dean for Medical Education and Student Affairs with one of the following recommendations:

1. Revocation of the acceptance to Emory University School of Medicine (for students who have been accepted but not yet enrolled)
2. Referral to a conduct committee for further consideration (for enrolled students)
3. No further action to be taken (for both enrolled and accepted but not yet enrolled students)

The Executive Associate Dean for Medical Education and Student Affairs will consider the report of the faculty committee and relay his decision to the student in writing. Based on the nature of the findings of the CBC report or drug screening, the Executive Associate Dean for Medical Education and Student Affairs reserves the right to immediately suspend a student, pending further investigation. The student may appeal the decision of the Executive Associate Dean for Medical Education and Student Affairs to the Dean of the School of Medicine in writing.
Section 2: Entering Medical Student Health and Immunization Requirements

For the protection of the health of our students and because of the risks of exposure to infectious diseases to which medical students are subjected in the course of clinical work, certain tests and immunizations are required of all students prior to matriculation.

Entering students are required to provide documentation of all required immunizations using the Emory University Student Health and Counseling Services (EUSHS) Immunization Form. This form must be signed by a healthcare provider and returned to EUSHS prior to matriculation.

A physical examination is also required prior to matriculation to the School of Medicine and must be recorded on the School of Medicine Physical Examination Form. This form must also be signed by a healthcare provider and returned to EUSHS prior to matriculation.

Students will not be allowed to register or participate in any clinical activities until both forms are on file with EUSHS. An updated medical history and physical examination are required for re-enrollment after more than one year of attendance lapses. For re-admission after withdrawal for medical reasons, medical clearance by designated University health officials is required.

Registration and attendance at classes are considered as agreement to comply with the Rules and Regulations of the University as published in the Bulletin and MD Handbook and other official publications of the University and as amended or revised during the student’s continued enrollment.

Immunization Requirements 2020-2021

Documentation for 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.
- **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.

TB Screening notes:

- Entering students with a positive PPD (current or previous) 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.

Exceptions

Emory Student Health Services is aware that some students have a strong personal objection to vaccination with one or more of the required vaccines. In the case of a medical contraindication, EUSHS requires the student to submit a letter of explanation, signed by both the student and the student’s healthcare provider, along with other immunization records to EUSHS through the Student Patient Portal. To see more details about medical contraindication or declination processes, please visit our immunization page and scroll to the last section.

View more information regarding immunization requirements.

Section 3: Student Agreements, Consents, and Releases

Student Agreements

All medical students must enter into an agreement with Emory University and the Emory School of Medicine to follow all policies and regulations and to abide by the standards of the Conduct Code and Honor Code. All policies and regulations included in these agreements can be found in the Student Handbook.

Students must also agree to use the systems and software required by the school for evaluation and communication.

All student agreements will be signed upon matriculation and each subsequent year of enrollment.

Student Consents and Releases

Students must release certain information, including specific protected health information (PHI), to the Emory School of Medicine and allow the School of Medicine to provide this information to Emory facilities and to any outside institution that requests verification of immunization status prior to participation in any required, elective or voluntary clinical experience related to medical training at Emory School of Medicine.
Students must allow the Emory School of Medicine to release information to other departments of the University, such as Student Health Services and the Office of Financial Aid, in order to verify or certify services, scholarship eligibility, or other items necessary for the continuation of enrollment and to meet all state and federal health and safety requirements.

Because passing USMLE licensing exams is a requirement for promotion and graduation from EUSOM, students must agree to release their USMLE Step 1, Step 2 Clinical Knowledge and Step 2 Clinical Skills exam scores and results to the Emory School of Medicine.

All students must also give their consent to be photographed and recorded. Many of the clinical and professional skills assessments require that faculty and students view recordings of their assessments together.

If a student should refuse to provide or revoke any of these consents or releases, the student should understand that such action might affect the student’s ability to meet the requirements for the degree and eligibility to graduate and participate in the national residency match.

These consents and releases must be provided by the student upon matriculation and will remain in effect throughout the student’s enrollment or until such time as consent is revoked, in writing, by the student.

Section 4: Technical Requirements for Matriculation

For successful completion of the course of study for the Doctor of Medicine degree at Emory University, students must have certain technical and intellectual skills. In order to maintain an acceptable level of performance, the student must:

Be able to develop the ability to obtain a medical history and perform a thorough physical examination. These activities require that the student:

- Communicate effectively with the patient and the patient's family in order to obtain an adequate medical history.
- Review records that relate to the patient's medical history and be able to develop a medical record for the current episode that will be useful to others who care for the patient.
- Perform the essential functions of the medical school curriculum such as performing a thorough physical examination by using the appropriate instruments and manual techniques required.
- Be able to participate in and demonstrate an understanding of all phases of the educational program, including lectures, laboratory activities, teaching conferences, hospital rounds, and clinical duties.
- Be able to demonstrate characteristics that suggest that the student has the ability to function in complex social, professional, and personal roles.
- Be able to function in delicate interpersonal relationships and manifest honesty, reliability, genuineness, warmth, and empathy.
• Be able to control impulses and maintain good judgment even under physically and emotionally exhausting conditions.

*Developed in compliance with the Rehabilitation Act of 1973.

**Part III: Academic Standards, Policies, and Procedures**

**Section 1: Attendance**

**Overview and Expectations**

Active participation in all aspects of the medical education program is critical to students’ development as physicians. Attendance is expected at all scheduled classes and is mandatory at all small group sessions, preceptorships, and patient presentations. Attendance is also mandatory for all examinations, including written, oral, and observed structured clinical exams (OSCEs). Attendance is likewise mandatory for class meetings. Daily attendance during clinical clerkships is mandatory, except for required days off as outlined below.

**Duty Hours on Clinical Clerkships**

During the clinical clerkships, students must adhere to the duty hour guidelines as outlined by the Accreditation Council of Graduate Medical Education (ACGME), with the exception that students cannot work more than 80 hours in any given week.

Duty hours are defined as all clinical and academic activities related to the program:

- Patient care (both inpatient and outpatient)
- Administrative duties relative to patient care
- The provision for transfer of patient care
- Time spent in-house during call activities
- Scheduled activities, such as conferences

Duty hours do not include reading and preparation time spent away from the duty site.

Students on clinical clerkships are required to report their duty hours on a weekly basis via OASIS. The Executive Curriculum Committee monitors student duty hours and makes any necessary curricular revisions to ensure duty hour compliance.

**Punctuality**

In addition to attendance, punctuality is considered part of professional duty. It is the responsibility of the student to arrive on time for classes, small group sessions, clinical rounds, scheduled examinations, and all other events related to the M.D. program.
Arriving Late for or Missing an Examination

Students who arrive after an examination has begun may be refused admission to the examining room, thus jeopardizing their course or clerkship grade. Unexcused absences from a scheduled exam will result in a grade of “U” (in Foundations) or “F” (in Applications) for that examination. The final grade of a clerkship will account for the failed examination grade as determined by the clerkship director. Unexcused absences from NBME or OSCE exams will result in the student being charged for any additional costs associated with rescheduling of the examination.

Students who are late to an examination or other required sessions as outlined above, are subject to an Unprofessional Conduct Report being submitted to the Progress and Promotions Committee.

Section 2: Absences

Overview

We strongly recommend students to be present for ALL educational activities. And as stated above, for many of the educational sessions attendance is required. These required sessions are described above.

The practice of medicine is collaborative and collegial. Excellent patient care requires good communication and trust among and between colleagues. Medical education requires students to work collaboratively with each other, patients, fellow students, staff, and faculty in a regular and predictable manner.

The nature of our work as caregivers requires that we notify appropriate persons when we must be absent so that patient care is not compromised, and both clinical and educational responsibilities are fairly shared.

As a supportive community that values wellness and well-being, the School of Medicine faculty, staff, and administration realize that various circumstances—emergent or otherwise—will require that members of our community must occasionally be absent from required events. Furthermore, we must work together to support each other during circumstances that take us away from required events. This policy outlines a process by which students can be granted excused absences. Failure to comply with this policy will be considered unprofessional behavior.

Excused absences will be considered for the following reasons:

- Appointments for medical care that cannot reasonably be scheduled outside your MD program responsibilities
- Acute medical illness or family emergency
- To give a scholarly presentation at an academically relevant national meeting
- Running for or holding national office in a relevant professional organization
- Religious observances
- Residency interviews
• Participation in the MD or MD/PhD interview as an invited tour guide related to the admissions process
• Participation in meetings of the EUSOM Executive Curriculum Committee and its subcommittees
• Required student meetings with deans and potential/actual Discovery mentors
• Required MD/PhD meetings, including the annual MD/PhD retreat

Absence Policy

During the Foundations Phase, students should contact Dr. Ira Schwartz to be granted an excused absence.

During the Application, Discovery, and Translation Phases, students should follow the Absence from Clinical Duties Policy and Process (below).

Requests should be made as far in advance as possible. For emergent absences, students should phone the appropriate Dean and clerkship director (for students on clinical rotations). All other requests should be made in person or by email.

During Foundations

If the requested absence is approved, the appropriate Dean will notify the Foundations and course director and the student’s Small Group Advisor.

Any required sessions, academic assignments, etc. that are missed must be fulfilled to the satisfaction of the course and Foundations director and the appropriate Dean. Within reason, course directors will assist students to complete all work missed during excused absences, as deemed necessary by the director of the course. If an excused absence does not allow for the missed work to be made up before the end of the course or phase, the student may be assigned a grade of “Incomplete” until the work is completed. If the student is unable to complete the missed work in a timely manner, as determined by the course director, the grade may be converted to “Withdrawal”. The designation of “Withdrawal” would require the student to repeat the course.

Absence from Clinical Duties

Clinical training is an essential part of medical education and represents a critical phase of the medical student experience. Given this, any absence from clinical duties (ACDs) is considered a serious matter. Clerkship directors understand that circumstances will sometimes require a student to be absent from clinical duties. The following are responsibilities and general guidelines for a medical student considering an ACD:

Terms and Definitions:

Duty hours:

Duty hours are defined as time spent doing all clinical and academic activities related to the program and include patient care, administrative duties related to patient care, and scheduled educational
conferences. Clinical service time may occur outside of business hours but should not exceed 80 hours/week.

Scheduled Days Off/Mandatory Time off

Each clerkship will assign a number of scheduled days off, which includes the minimum mandatory time off from duty hours, as specified by ACGME guidelines. The total number of scheduled days off will be determined by each clerkship according to clinical service needs and schedules.

Absence from Clinical Duties (ACD):

This is an absence that occurs during scheduled duty hours, and does not occur during mandatory time off or on additional scheduled days off from clinical service. An ACD will decrease the total amount of time that a student is able to invest in clinical service activities. A student who has an ACD may be required to make up the time absent, depending on what activities were missed.

Extended ACD:

This is an ACD that is longer than the limit set based on the length of the clerkship, and which will need to be made up. Policies are enforced at the discretion of individual clerkship directors. An extended ACD is defined by the total length of a clerkship/rotation:

- 1-week clerkship/rotation: ≥ 1 day
- 4-week clerkship/rotation: ≥ 2 days
- 6-week clerkship: ≥ 3 days
- 8-week clerkship: ≥ 4 days

Student Responsibilities:

1. Students should attempt to schedule non-clerkship related activities outside of normal duty hours for that clerkship (e.g., late afternoons/evenings and weekends or scheduled time off).
2. Students must communicate all requests with advance notice (as soon as the need is known to the student) to the clerkship director, clerkship coordinator, and Associate Dean for Clinical Education.
3. All communication regarding requests for time off should be done in a professional manner.
4. Students who are ACD are required to collect any didactic materials/notes from lectures that they may have missed during their time away.

Guidelines:

1. Advance communication with the clerkship director, clerkship coordinator, and the Associate Dean for Clinical Affairs is required for any requested activity that could result in an ACD. These types of activities include:
2. Doctors’ Appointments
3. Meetings with Discovery Mentors
4. Meetings or conferences at which the student is presenting (poster or podium)
5. Important personal events (graduations and weddings of close family members)
6. Residency interviews
7. Religious observances
8. Admissions committee interviews/tours
9. Curriculum committee meetings
10. With advance notice, the clerkship directors will work with the student to avoid an ACD. This may include arranging rotations or shifts to accommodate the request or helping the student select the best days/times to attend their activity and limit time away from clinical duties. If accommodations can be made to align the student’s scheduled time off with their activity, the absence will not be considered an ACD. However, clerkship directors may not always be able to accommodate these requests. In this case, if the clerkship director permits the student to attend the activity, this will result in an ACD.

11. Emergency requests for ACD such as student illness, personal injury, or injury/illness/death of a family member should be communicated as soon as possible to the Associate Dean for Clinical Education and the clerkship director and clerkship coordinator.

12. In cases of ACD without prior communication with, or approval by, the Associate Dean for Clinical Education’s office and the clerkship director, a Professionalism Report will be filed by the clerkship director. This includes unauthorized extension of a previously authorized ACD.

Further information about common reasons for missing required educational events:

**Excused Absences for Personal Medical Care**

Medical students are strongly encouraged to maintain their own physical and mental health and well-being. Whenever possible, students should schedule non-emergent healthcare appointments during times that do not conflict with classroom and clinical activities. In the event an appointment must be scheduled during a required educational activity, students must request permission to be excused from the appropriate Dean (see above).

**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 re-scheduled, 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.
Residency Interviews

During clinical clerkships, students MAY be granted one-day excused absences for residency interviews per each two weeks of the clinical rotation. Students should discuss and submit requests for absence from clerkship responsibilities to the Deans Office PRIOR to making travel plans. Regardless of absences for interviews, students must complete the requirements of the rotation by the last day of the rotation. Any deviation from this policy must be approved by the Associate Dean for Clinical Education.

Participation in the MD or MD/PhD Admissions Process or Tour Guide

Students actively participate in the MD and MD/PhD admissions process, serving as interviewers and tour guides. Students will not be allowed to miss mandatory components of any clerkship to serve as an interviewer and tour guide.

Participation in Meetings of the EUSOM Executive Curriculum Committee and its Subcommittees

Students actively participate in the subcommittees of the EUSOM Executive Curriculum Committee. They play an invaluable role in curricular decisions.

Required Student Meetings with Deans and Potential/Actual Discovery Mentors

During the required clerkships, students are required to meet with the Associate or Assistant Dean for Clinical Education. In addition, students need to meet with faculty members in order to select a mentor for their Discovery phase project. If possible, these meetings should be scheduled during a time that minimizes student disruptions in clinical care activities.

View Absence Flow Chart (PDF)

Section 3: Academic Integrity

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.

Emory University School of Medicine Honor Code
Preamble

The students, faculty, and administration of the Emory University School of Medicine join together in support of this MD 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. Matters outside of those that fall within the jurisdiction of the Honor Code, such as violations of the Student Conduct Code, will be handled in accordance with the applicable policy.

Students who matriculate in the Emory University School of Medicine must agree to abide by and uphold the Honor Code.

Statement of the MD Student Honor Code

Any action indicating lack of integrity and/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.** 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 un-authorized aids, or impermissible collaboration.

**Plagiarism.** Plagiarism is the act of incorporating into one’s own work, the work or expression of another without appropriately and adequately indicating the source.

**Sabotage.** Sabotage is defined as intentional and malicious actions that impair another student’s academic performance.

**Falsifying or manipulating data.** Falsifying or manipulating data is 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 must 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 abiding by this Honor Code.

Each student upon entering the School of Medicine must sign a matriculation pledge stating that the student has read, understands, and is aware of the student’s responsibilities under the Honor Code.

The Medical Student Council on Honor

The Medical Student Council on Honor, hereafter, referred to as the Honor Council, will have jurisdiction over the supervision of the Honor Code as applies to medical students.

The Medical Student Honor Council will consist of 5 (five) elected student representatives (1 M1, 1 M2, 1 M3, and a Chair and Vice-Chair both elected from the M4 class), and two faculty members appointed by the EAD. Two alternate members from each class will be elected. In addition, the EAD will appoint two faculty member alternates in basic science and two in clinical education.

Student Representatives and Alternates

In April of each academic year following implementation, the members and alternates of the rising M2, M3, and M4 classes will be elected by their own class members to serve on the Honor Council for a one-year term.

The elections will be open to any student, including previous members of the Honor Council, who wishes to run. In order to be eligible to serve as a Student Representative or Alternate Student Representative, a student must remain in good standing and cannot have previously been found to be in violation of the Honor Code.

M1 students will elect Honor Council members and alternates following the first two months of classes. Vacancies will be filled by special election of the respective student classes.

Faculty Representatives and Alternates

To establish a pool of four faculty members, two of whom are replaced each year, the following process will be utilized:

- The EAD will appoint two faculty members (one from the pre-clinical faculty and the alternate from the clinical faculty) to serve a two-year term, and two faculty members (one clinical, one alternate pre-clinical) to serve a one-year term.
- After one year, two more faculty members (one clinical and one pre-clinical alternate) will be appointed by the EAD for full two-year terms. Members who served during the first year for a one-year term will be eligible for reappointment.
From that time forward, each appointed member could serve no more than two years without reappointment by the EAD.

Faculty members will be limited to three consecutive terms.

Vacancies will be filled by appointments by the EAD.

**Honor Council Liaison**

An Assistant or Associate Dean in the School of Medicine will function as an ad hoc advisor to the Honor Council indefinitely in order to provide guidance and continuity in the day to day operations of the Honor Council. The Honor Council Liaison (hereafter called the HC Liaison) will only be notified that an alleged violation of the Honor Council has occurred if the Honor Council requests assistance to ensure the investigation and hearing are conducted according to policies. The Assistant or Associate Dean will not be directly involved in investigations and/or hearings but will serve primarily in an administrative role facilitating contact between faculty advisors, students, and Honor Council members. The HC Liaison will:

- Work with the AED to ensure Faculty and Student Representatives are selected.
- Coordinate and lead the two training sessions described below.
- Provide guidance, as needed, to the Student Leadership, Investigators, and the Student and Faculty Representatives during the process of an investigation and hearing.
- Be notified that an accusation has been made only if the Student Leadership requests assistance to ensure the investigation and hearing are conducted according to policies.
- The HC Liaison will only be given the name of the student who is alleged to have violated the Honor Code if a hearing is deemed warranted.

**Training**

The HC Liaison will coordinate a formal training session for all new Faculty and Student Representatives in the fall.

The session will be conducted by an official representative of the Office of Undergraduate Education Honor Council.

A second training session will follow to review in detail the investigation and hearing process.

All members of the Honor Council are required to complete the training prior to participating in an investigation or hearing. If an Honor Council member cannot attend either session, they must coordinate with the HC Liaison to find a date in which to make-up the training.

**Leadership of the Honor Council**

The Chair, Vice-Chair and Secretary will be chosen from the Student Representatives of the Honor Council. The HC Liaison will ask if any of the Student Representatives would like to volunteer to fill each position. If there are multiple Student Representatives who volunteer to fill a position, the Honor Council Liaison will coordinate an election where the positions will be voted on by the members of the
Honor Council by majority vote. Any person who volunteers or is elected to fill one of the positions must ultimately be confirmed by a majority vote of the Honor Council.

- Chair: The Chair will be a M4 Council member selected to a one-year term by the rising M4 class.
- Vice-Chair: The Vice-Chair will be a M4 Council member elected to a one-year term by the rising M4 class in the spring.
- Secretary: The Secretary will be a M2 Council member elected to a one-year term by the rising M2 class.
- Rising M2, M3, and M4 class elections for the Honor Council will be held in April, and M1 class elections will be held in August at the beginning of the M1 year. The newly spring-elected Council will be in charge during the summer term.

**Procedures for Reporting and Investigating Honor Code Violations**

1. If an individual believes that a violation of the Honor Code has or may have 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.
2. Once an allegation has been made, the individual making that allegation must draft, sign, and submit a brief statement to the Honor Council Secretary.
3. Upon notification of a possible violation of the Honor Code, the following will occur:
   - The Honor Council Secretary will inform the Honor Council Chair that a possible violation of the Honor Code has been reported.
   - The Council Secretary will then choose two investigators from available student representatives whose responsibility will be to gather information about the case.
   - The Honor Council Chair will inform the Honor Council Faculty Representatives, the HC Liaison, and the EAD that the Honor Council has received a complaint of an alleged violation of the Honor Code and an investigation will be conducted. 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 by HC Secretary and an investigation will proceed.
   - After the investigators finish gathering information concerning the alleged violation, the investigators will submit that information to the Honor Council Chair, who along with the two investigators, will determine whether sufficient evidence exists to warrant a formal hearing by a majority vote.

**Prior to the Hearing**

1. If a hearing is deemed warranted, the accused 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. Upon notification of the hearing, the student will be provided with a list of available faculty by the HC Liaison, with whom to consult, at the student’s
discretion or select a consulting member of the school of medicine themselves with the guidance of the HC Liaison.

2. The hearing will take place no more than 21 days after the determination is made to move forward with a hearing. In rare instances, the Honor Council, at their sole discretion, may extend that time period if the Honor Council feels that the circumstances dictate such an extension.

3. Any student who is alleged to have violated the Honor Code will be permitted to continue academic endeavors until a final decision is made.

4. The student who is alleged to have violated the Honor Code may review the evidence of a violation and gather evidence prior to the hearing.

The Hearing

The Chair (or Vice-Chair) will preside over the hearing and participate in the discussion and deliberation of the case but will not have a vote.

Order of Proceeding

1. Call to order.
4. Presentation of evidence: The Investigators and the student alleged to have violated the Honor Code may present testimony and other evidence as appropriate and relevant to the case. The Chair and members of the Honor Council, and the student alleged to have violated the Honor Code, may ask questions of witnesses.
5. The chair will determine whether the hearing board can properly weigh or take into consideration any evidence offered by a party or witness based upon relevance. Rules of evidence applicable to criminal or civil court proceedings will not apply.
6. Discussion and deliberation by the Council is held in a private executive session.

After all admissible evidence has been reviewed, the hearing panel shall deliberate to decide the case.

Rules Governing Proceedings

All hearings will be conducted in closed-door sessions and will remain confidential. Participants in the hearing will be limited to the following:

- Chair (or Vice-Chair) of the Honor Council.
- The other six members of the Honor Council (2 Faculty, 4 Students, not including the Chair).
- The Secretary or, if needed, a temporary secretary appointed by the permanent secretary.
- The student accused of the Honor Code violation.
- The two investigators assigned to the case.
- Relevant witnesses who may be present only while testifying.
- The faculty advisor selected by the accused. This individual is not permitted to testify, ask questions, or to make statements of any nature.
The Secretary or his/her appointee will take notes during the hearing and make them available to the Honor Council.

**Decision and Penalties**

For a student to be found responsible of an Honor Code violation, the unanimous vote of the six voting members of the Honor Council is required [the Chair (or Vice-Chair) is not eligible to vote]. For all cases, the standard that shall be used to determine whether a violation was committed is “preponderance of the evidence”, i.e., it is more likely than not that a violation of the Honor Code occurred.

If a student is found to have violated the Honor Code, the hearing panel will make a recommendation to the EAD for a sanction. The hearing panel will make the decision on the sanction by majority vote of the voting members of the Honor Council. In case of a tie, the Chair (or Vice-Chair) will cast a vote.

The HC Liaison and EAD will be informed of the decision of the hearing panel and recommendation for sanction, where applicable, promptly following the decision of the hearing panel.

**Recommendation for penalties regarding violations of the Statement of the Honor Code**

The standard sanction for violation of the Honor Code is (a) 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.

The Honor Council may recommend to the EAD 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.

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.

If the student is in the first or second year of medical school, he/she will return from a mandatory leave of absence to the beginning of the uncompleted term. If the student is in the third or fourth year of medical school, he/she will return from a mandatory leave of absence to the beginning of the uncompleted clerkship.

A student on a mandatory leave of absence may enroll on graduate resident status.

**Decision of the Executive Associate Dean (EAD) of the School of Medicine**

The final decision on responsibility and the sanction rests with the EAD. The decision of the EAD will be effective immediately, unless there is an appeal to the dean. The appeal, including the basis for the appeal, must be submitted by the student in writing to the Dean within one week after the student is notified by the EAD of the decision. If a student files an appeal, the EAD will appoint an ad hoc committee consisting of three faculty members from the School of Medicine. The EAD will provide the
committee with the information reviewed by the hearing panel, the minutes of the hearing, and the student’s appeal. The committee will then make a recommendation to the Dean that the decision of the appeal committee be affirmed or remanded to a new hearing panel. The Dean will then review that recommendation and make 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 reviewed by Emory School of Medicine General Counsel and approved by the EAD 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 medical students have been notified of the change via mail or email.

**Section 4: 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.

Other than information covered in the “Consent to Release Information” form, no information is released to external sources without written permission from the student.

While students are enrolled in the School of Medicine, the student record may contain the following:

- Official premedical education transcripts
- Admissions application
- Letter of acceptance
- Georgia residency affidavit
- Consent to Release Information Form
- Verification of TB and mask fit testing
- Verification of annual OSHA and HIPAA training
- Information regarding research or scholarship activities
- Honor Code compliance signature
- MD student Medical Student Performance Evaluation (MSPE)
- Copy of MD student USMLE Exam registration form
- Letters concerning probation, deceleration, leave of absence, failure to be promoted, or disciplinary actions
- Notes concerning health problems are not maintained unless said health problems influence academic or clinical performance.

**Access to Student Records**
Per Emory University policy under the Family Educational Rights and privacy Act (FERPA), each student has a right of access to his or her education records, except confidential letters of recommendation and financial records of the student’s parents. These rights include:

- The right to inspect education records.
- The right to limit disclosures of personally identifiable information contained in educational records, except to the extent that FERPA authorizes disclosures without consent (i.e. directory information, faculty members and administrators of the School who have an appropriate need to review a student’s attendance or progress)
- The right to request correction of the educational record.

Students who wish to review their file must do so in writing to the School of Medicine Registrar by completing a Request to Review Educational Records Form. The School of Medicine complies with a request within a reasonable time, at most within 45 days. Arrangements are made for the student to read his or her academic file in the presence of a staff member.

Without exception, all requests for letters of reference or for completion of forms relating to academic performance and/or personal qualities require written authorization from the student (or graduate) for release of such information. This also applies to requests for information from faculty or administrative officers. Students have the right of access to letters or statements giving such information unless, in the authorization for release, the student waives this right and agrees that the information to be sent is to be held confidential. Confidential references are often requested by agencies or institutions to which students apply for aid or a clinical position.

Without a formal request, School of Medicine students have access to review information about themselves within the educational systems used by their program that contain courses taken, clinical schedules, assessments, and grades received.

View more detailed information about FERPA

Requesting Certified University Transcripts

At the end of each semester, students can log into the OPUS system to obtain their course grades, accumulated hours of credit, and grade point average.

If any discrepancies appear on the transcript, students are encouraged to contact the School of Medicine Registrar immediately so the record can reflect the correct information.

The School of Medicine Registrar does not produce transcripts. Students can request certified transcripts by clicking “Request Emory Transcript” under the Academic Record section of the login page. Certified transcripts are delivered electronically to a specified individual, agency or organization, provided the student’s financial status with the University is clear (no indebtedness except for loans with approved repayment schedules). Emory University utilizes the services of a third party called Parchment, Inc. to process requests. Before initiating the request, students must obtain an email
address of the recipient. The transcript will be transmitted within 30 minutes of the online request. If
the recipient will not accept an electronic transcript, an option to request a paper copy still exists and
can be arranged through the same online process. There is no charge to request an electronic or paper
transcript. If a student requests that expedited shipping of the transcript, a shipping fee will be charged
to the student. All transcripts include the entire academic record at Emory University; the Registrar will
issue no partial statements of record as transcripts. Report of performance in courses before the end of
the academic year may be sent to any agency or institution by one of the School’s administrative
officers on written request by the student.

View further information on official transcripts.

Legal Name Changes

Legal name changes are recorded in a variety of government offices (Social Security card, driver’s
license, passport, birth certificate in some cases). Once you have updated documents, you will be able
to update your legal name on campus. These are Emory systems where you should update your
information:

- **OPUS**
- **HR/Payroll (so any tax documents are correct)**

Please note that:

1. Emory does not update network IDs with legal name changes. Your network ID will remain as
originally issued. Thus, you will continue to use your netID to access email and other campus
systems that utilize your netID/password for authentication.

2. These systems do not “talk” to each other (even though they may all use your net ID to log you
in). In other words, updating your legal name in OPUS does not automatically update your
Human Resources record, or vice versa.

3. The above pertains to updating your legal name in University systems. That process is separate
from the recent Registrar policy that allows students to add a preferred name.
(Registrar website or from the ability to create an email alias)

Prefered Name

Emory University recognizes that students may wish to use a name other than their given names as
recorded on official University documents. When designated by a student, the University will use a
preferred first/middle name except where use of the official name is required by University business or
legal need. [Emory Preferred Student Name Policy](#)

Students may enter a preferred first name through [OPUS](#) regardless of whether or not they have legally
changed their name.

Places Where Preferred First Name Can be Used:
• OPUS Student Self Service
• Class and Grade Roster
• Emory Online Directory (unless directory suppressed)
• Canvas
• Emory Card
• Diploma (due to state medical licensing applications and requirements, there are serious implications for students in the health professions that use a preferred name instead of a legal name on diplomas)

Places Where Legal First Name Must be Used:
• Student Financial Accounts
• Financial Aid
• Responses to enrollment enquiries such as verification requests
• Official transcripts
• Student payroll information
• Emergency responder and enforcement systems (parking, police, etc.)
• Internal systems that require and can only accommodate legal name
• All external communications and reporting

Section 5: Accommodations

Office of Accessibility Services (OAS)

Emory University provides all persons an equal opportunity to participate in and benefit from programs and services afforded to others. Students requiring accommodations are referred to the Office of Accessibility Services (OAS). The OAS office offers a wide variety of services to students with documented disabilities.

As the administrative office responsible for managing access needs, providing ADA accommodations, ensuring compliance with local, state, and federal civil rights regulations pertaining to disability law, and serving as a critical resource for the enterprise, it is OAS’s role to embody Emory's commitment to its mission "in work and deed."

OAS assists eligible students and faculty/staff in obtaining a variety of services (i.e., alternative testing, note taking, interpreting, advocacy, mobility/transportation, etc.) and ensures that all matters of equal access, reasonable accommodation, and compliance are properly addressed.

Eligible students and faculty/staff must register and request services —contact OAS at Emory University or Emory's Oxford College. Confidentiality is honored and maintained.

In compliance with the Americans with Disabilities Act, Emory University School of Medicine is
Students with disabilities who wish to request accommodations under the ADA must follow the University’s procedures for verification of ADA eligibility by submitting supporting documentation to the Office of Accessibility Services (OAS). Once OAS verifies an individual’s ADA eligibility, the student will work with the medical school’s Assistant Director of Medical Education Programs Management, Sherice Allen-Henry, to coordinate their accommodations while matriculating. Further information about documentation requirements and the eligibility process can be found OAS’s website.

Once a student’s ADA eligibility has been verified, there is no need to repeat the registration process unless the student’s situation or needs change. Students must request an updated accommodation letter each term to share with Mrs. Allen-Henry. If an adjustment to an accommodation is needed, it is the student’s responsibility to reach out to OAS. Accommodations are only determined by OAS.

Any confidential records and documentation submitted by the student to OAS to support determination of ADA eligibility will be retained and kept confidential in the OAS office. Once an accommodation letter has been generated, it is the student’s responsibility to share this letter with the Assistant Director. This is an official notice of the individual’s ADA eligibility and guidelines related to reasonable accommodations appropriate for the individual’s needs.

It is the responsibility of the student to request needed accommodations. Once a request is made, the student will meet with Mrs. Allen-Henry to assist in the implementation of necessary accommodations. Unless a request is made, and the student authorizes release of the information regarding the need for accommodations to appropriate others (faculty, staff, etc.), the medical school will not proceed with arranging accommodations. No retroactive consideration will be given to students who fail to request or to complete the approval process.

Notification to faculty and others about a student’s need for accommodations will contain a statement of the student’s ADA eligibility as well as guidelines for necessary accommodations. No information about the student’s diagnosis, condition or history will be available in any way to course instructors or others from whom a student might request an accommodation.

The Assistant Director of Medical Education Programs Management will maintain a folder containing all accommodation letters for each student. Such material will be retained separately from the student’s academic file, and access to such material will be limited and appropriate confidentiality will be maintained. The school will not release details related to accommodations that were provided (for example to residency programs, etc.).

Students will be apprised of ADA eligibility within the timeframe that is established by OAS. If a request for eligibility verification is made at the start of an academic period, accommodations cannot be implemented until the student’s registration is finalized with OAS. Because of the number of verifications being processed at the beginning of the academic period, students are urged to submit
their request for eligibility verification and accommodations as far in advance as possible. Advance preparation will ensure the smoothest availability of needed accommodations.

**Determining Initial Eligibility**

Students new to Emory or the accommodations process must follow these OAS policies and procedures for determining initial eligibility. Returning students will skip this step.

Fill out Emory’s [student registration form](#) and submit it along with the appropriate medical/disability documentation.

An OAS staff member will review the application materials and determine appropriate accommodations specific to the individual's disabilities. Accommodations are developed for students on an individual basis and, depending on the course content and format, may vary by semester or term.

If a student is determined to be eligible for reasonable accommodation, an OAS staff member will meet with the student to discuss approved accommodations. Otherwise, OAS may assist the student in identifying voluntary and readily achievable means for meeting his or her needs.

**Requesting Accommodations**

Students who need accommodations to participate fully in Emory’s programs should file a formal request for accommodations with OAS. The best time to do so is immediately after registering for classes each semester or term, as this allows OAS to adequately coordinate services and provide instructors with reasonable notice.

Students who are already registered with OAS must request accommodation letters each term.

Newly admitted students should apply for accommodations using the same process as current students. Determination of eligibility for OAS services and accommodations is not part of the admission process.

Students who have developed an impairment due to an illness, accident, or surgery may contact the office about potential accommodations for a temporary disability.

*Students have the primary responsibility of advocating for themselves during the accommodation process.* They should not rely on their parents, faculty members, or others to do so for them.

**Implementing Accommodations**

After registering with OAS and receiving approved accommodations, the student will request an accommodation notification letter.

It is the student’s responsibility to contact the Assistant Director of Medical Education Programs Management, Mrs. Sherice Allen-Henry, to provide a copy of the official notification letter and to
schedule a meeting to discuss EUSOM’s policy for the administration of accommodations.

A copy of the official notification letter must also be submitted to individual faculty members, clerkship directors and coordinators responsible for teaching and/or administering an assessment of the student in which an accommodation is requested.

**Accommodations Testing Policy**

Students must contact the Assessment Coordinator, Rachael Connor, MBA, at rachael.connor@emory.edu to make test day arrangements. Tests are proctored Monday through Friday from 8 a.m. until 5 p.m. Arrangements must be requested in advance and receive prior approval if a student needs to take an examination outside of those hours.

**Before Your Exam**

- To utilize approved accommodations, it is the student’s responsibility to contact Sherice Allen-Henry at the beginning of each term they are registered and submit the official accommodation letter from the Office of Accessibility Services.
- Once the School of Medicine receives the letter of notification, students must contact Ms. Connor at the beginning of each course or clerkship to coordinate logistics of administration of any assessments in which accommodations will be used.
- It is also the student’s responsibility to disclose to the director and/or coordinator of each course or clerkship, if they choose to do so.
- Since both the student and their professor will need to complete several steps, it’s important to verify that everything is ready before the date of each exam.
- You will receive an email confirmation to identify which building and room to report to for your exam.
- Review and confirm the exam schedule and details ahead of time.

**Day of Your Exam**

Certain rules and requirements apply to the testing environment. Students must review and become familiar with the rules and procedures listed below.

**Test Day Rules and Procedures**

- You must arrive ten minutes prior to the start of each exam or exam section for check in and to allow for any delays. Late arrival will result in loss of total examination time.
- You are required to adhere to your test day schedule.
- Do not bring any personal/unauthorized items into the secure testing area. Such items include but are not limited to outerwear, hats, food, drinks, purses, briefcases, notebooks, notes, pagers, watches, cell phones, recording devices, wifi enabled earbuds and photographic equipment.
- Show a photo ID to the proctor when signing in. Testing cannot take place without an ID.
• Food and drinks are only allowed if their presence is an approved testing accommodation by the Office of Accessibility Services.
• You are not permitted to access any unauthorized items during the exam administration.
• A scratch pad or paper will be provided to you. You are not allowed to bring your own paper into the secure testing area.
• Do not make notes on your scratch paper prior to starting your exam and/or entering your start up code. Once your exam begins, you are permitted to make calculations or notes ONLY on the erasable note board or scratch paper provided.
• You must turn in all used and unused scratch paper to the proctor at the end of your exam.
• You must adhere to the instructions provided by proctors administering the examination.
• Carefully review and agree to abide by any instructions provided or that appear at the start of the examination session.
• Test proctors are not authorized to answer questions from examinees regarding examination content or scoring during the exam.
• Do not leave the testing site at any time during the administration of your exam unless you inform and obtain permission from the testing proctor or are instructed to do so by test administration staff.
• Failure to follow test day rules and procedures may result in the withholding or cancellation of your scores, and/or a bar from future exams administered by the NBME.
• Earplugs and ear protectors are recommended.
• Exams are closely monitored. Staff enters the testing area often.
• If cheating occurs, the exam will be stopped, the course/clerkship/course director and dean will be notified, and all materials will be held for action.

Breaks

• Your break(s) will be scheduled and timed.
• Return all test materials and personal items to the proctor before you start your break.
• Students may choose to omit/skip breaks, but students may not exceed scheduled break times unless given permission by the proctor.
• Time will not be stopped during any exam unless it is an approved testing accommodation; it is at the student’s discretion to break while time is running.
• Note: EUSOM is not responsible for your personal belongings.

Cancellations

• Tests must be cancelled 48 hours in advance with approval from the student’s assigned dean.
• Students are responsible for rescheduling exams in communication with his/her dean and Ms. Connor.

EUSOM Accommodations Contacts
Section 6: Clinical Placement Reassignment and Schedule Changes

The School of Medicine considers student requests for clinical placement reassignments and schedule changes.

Requests for Clinical Placement Reassignments

During the Application and Translation Phases, clerkship directors and coordinators are responsible for assigning students to specific clinical sites. Clerkship directors may factor student preferences into such assignments, but preferences are never guaranteed.

Should special circumstances arise either before or during when a student is placed, a student may request (in writing) a reassignment. A student’s request for reassignment must provide an appropriate rationale. All requests for reassignment should be sent to the respective clerkship director(s) unless the special circumstance is of a highly personal nature. In such cases, a student should request reassignment from the Associate Dean for Clinical Education.

When a decision to deny a student’s request for reassignment is made by a clerkship director, the student may appeal the decision to the Associate Dean for Clinical Education, who will have the final authoritative decision. If the decision to deny a student’s request is initially made by the Associate Dean for Clinical Education, the student may appeal to the Executive Associate Dean for Medical Education and Student Affairs.

Requests for Schedule Changes in the Application and Translation Phases

During the Application and Translation Phases, student schedules are created by the Office of Medical Education and Student Affairs. Many considerations are factored into student schedules. Should special circumstances arise before, during or after student schedules are finalized, a student may request (in writing) a schedule change. A student’s request for a schedule change must provide an appropriate
rationale (e.g. personal, medical necessity or other unforeseen issues). All requests should be sent to the Associate Dean for Clinical Education, who will make the final decision.

Section 7: Graduation Requirements for the MD Degree

Student Physician Activities (SPAs)

The learning outcomes for the Emory University School of Medicine MD program are stated in terms of the activities that a physician performs, called Student Physician Activities (SPA). This list of 28 SPAs defines what EUSOM students will learn over the course of their medical school career and will be required to demonstrate prior to graduation.

1. Take a patient-centered history (focused and complete)
2. Perform a physical examination (standard and “core and cluster”) and recognize normal and abnormal findings
3. Demonstrate understanding of relevant scientific principles of medicine
4. Prioritize a differential diagnosis based on clinical reasoning
5. Develop a patient care plan
6. Perform technical procedures * (see Graduation Technical Procedures List)
7. Communicate with patients and their support system regarding their care
8. Participate in difficult conversations with patients and their families
9. Document and present patient findings and treatment plans
10. Explain the scientific principles of medicine as applied to differential diagnoses and patient care plans
11. Use electronic medical records
12. Formulate clinical questions and search the literature for evidence that enhances patient care
13. Contribute to generalizable medical knowledge
14. Apply best evidence to the care of individual patients
15. Recognize and address ethical dilemmas
16. Protect patient information
17. Fulfill the unique professional role of a physician in society
18. Manage time
19. Be a leader
20. Use feedback to improve one’s own practices
21. Demonstrate trustworthiness to patients, colleagues, and other healthcare personnel
22. Treat patients while understanding own biases
23. Treat patients without regard to personal advantage
24. Work in interprofessional teams
25. Identify personal limitations and seek assistance as needed
26. Teach peers and team members
27. Serve the community
28. Contribute to healthcare quality and safety initiatives

* Graduation Technical Procedures List
1. Adherence to universal precautions
2. Putting on gloves and gowns using sterile technique
3. Basic life support (as evidence by completion of a BLS course)
4. Use of an automatic external defibrillator
5. Drawing venous blood

**Academic Requirements**

The judgment of the faculty as to the fitness of a student to receive the MD degree is based not only upon scholastic achievement, but also upon demonstration of the attitudes and behaviors expected of a medical professional. Each student must be approved for graduation by the Dean and the School of Medicine Council of Chairs.

To be eligible to receive the degree of Doctor of Medicine from Emory University School of Medicine, students must:

1. have attained satisfactory standing in all courses and clerkships required for the degree;
2. have mastered the 28 EUSOM SPAs and have successfully completed all of the required activities and assessments related to the SPAs;
3. have taken and successfully passed Step 1, Step 2 Clinical Knowledge and Step 2 Clinical Skills of the USMLE;
4. have completed all academic requirements of the MD degree within no more than six academic years from the date of matriculation.

**Financial Obligations for Graduation**

It is a requirement for graduation that all financial obligations to the University shall have been satisfied. Students with an unpaid balance on their student accounts may have a hold placed on their diploma and transcripts until the balance is paid in full.

**Section 8: Honors**

**Academic Honors**

Academic honors are determined by a School of Medicine faculty committee. The designation of students graduating cum laude, magna cum laude, and summa cum laude are made on the basis of a combination of grade point average and other academic accomplishments, inclusive of work done as part of dual degree work or external fellowships.

**Alpha Omega Alpha**

Founded in 1902, Alpha Omega Alpha Honor Medical Society is a professional organization that recognizes and advocates for excellence in scholarship and the highest ideals in the profession of medicine. Students are elected based on their embodiment of the vision and goals of the society:
1. Professionalism: To hold the conviction that professionalism in medicine is a worthy goal.
2. Scholarship: To promote scholarship among medical professionals.
3. Leadership: To set an example worth emulating.
4. Service: To serve the medical profession and the community.

The National AΩA Constitution stipulates that one-sixth of a medical school graduation class may be considered for membership, and up to one-half of the total may be nominated during the junior year. New members are elected by the student members of Alpha Omega Alpha. Elections occur during the spring of junior year and the fall of senior year.

Students who are in the upper quartile (25%) of their class in grade point average and/or clinical performance are eligible for nomination. As outlined above, additional criteria include leadership capabilities, ethical standards, fairness in dealing with colleagues, demonstrated professionalism, and service to the school and community at large.

View additional information on AOA.

Section 9: Leaves/Interruption of Medical Education

Requests for a leave may be granted by the Executive Associate Dean for Medical Education and Student Affairs or his/her designee or when recommended by a faculty committee. A leave may be granted, if deemed appropriate, for health, personal, or family reasons, or for special academic study. A leave is generally granted for a period of one year or less, and readmission is automatic at the time agreed upon when the request is made, provided any issues necessitating the leave have been dealt with appropriately. If for any reason the leave extends beyond one year, the student must apply for readmission, unless a longer period for special study is approved by the Executive Associate Dean for Medical Education and Student Affairs or his/her designee. The leave does not extend the six-year period allowed for completion of the standard MD degree unless the approved leave involves an academic course of study longer than two years to qualify for a degree or certificate. The fact that this leave will take more than two years must be made clear in writing to the Executive Associate Dean when requesting approval for the LOA.

The School of Medicine reports all leaves/interruption of medical education in the Medical Student Performance Evaluation (MSPE).

All students requesting a leave must:

1. Request the leave in a letter specifying both the start and the return to medical school dates
2. Meet with the Executive Associate Dean for Medical Education and Student Affairs or his/her designee
3. Meet with the School of Medicine Registrar and Associate Director of Financial Aid and Scholarships (if the student receives financial aid), and
4. Receive a letter from the Executive Associate Dean for Medical Education and Student Affairs or his/her designee approving the leave.
Discussion about planned absences (e.g. for special academic study, research fellowships, or other Extended Discovery activity) whether involving study at Emory, or away from Emory, should be made as far in advance of the absence as possible, and preferably during the application process for the special academic course of study. Optimally, written requests for such absences should be made at least 3 months in advance.

Section 10: Medical Student Performance Evaluation (MSPE)

The MSPE (“Dean’s Letter”) is prepared for all senior students by the Associate or Assistant Dean for Clinical Education and Student Affairs. The document is a key part of the residency application packet.

If for any reason, a student believes that the Associate or Assistant Dean for Clinical Education and Student Affairs cannot prepare the letter in an unbiased manner, he or she may request that the letter be completed by another member of the Dean’s Office.

The document is a letter of evaluation, NOT a letter of recommendation. That is, it is intended to be a comprehensive summary of the student’s academic record through the first three years of medical school. The MSPE consists of the student’s progress until the MSPE is submitted on or around October 1st as dictated by the National Residency Match Program (NRMP). It is intended to present the student in the best possible light but also to convey accurate information to a residency program director about the student’s qualifications for graduate medical education.

Unique to Emory’s MSPE is inclusion of information written by the student’s Small Group Advisor as well as information on the student’s Discovery project. In regards to MD/PhD students, who are not expected to do Discovery, expansion of their research from their PhD work will be detailed in that section.

The MSPE is specialty-neutral and has been standardized across medical schools to include six sections that include the following:

- Identifying information
- Noteworthy characteristics (total of 3)
  - Written by student and edited by the letter writer (Associate or Assistant Dean)
- Academic history – date of matriculation and leave/interruption of medical education (if applicable)
- Academic progress – which includes student performance on USMLE Step 1 and 2, Foundations and Application phases, the Discovery phase of the curriculum (unique to Emory), and small group advisor comments
  - Of note, a bar graph of the cumulative GPA for the Application phase is included with letter
- Summary
- Medical school information

View additional information on the MSPE.
Process

All graduating medical students should make an appointment to meet with their MSPE writer between April and August of their senior year. Students should provide an up-to-date curriculum vita and complete the MSPE form in Oasis, which is required by the dean’s office prior to the scheduled meeting.

Students have the opportunity to review the MSPE for factual accuracy at two points in the MSPE process (after the first and final drafts). All reviews must be in-person, and done in the Office of the Associate Dean for Clinical Education and Student Affairs. Students who will be out of town during September should notify their MSPE writer as soon as possible. Every effort will be made to have the letter completed before the student departs, so the student can review the content of the letter in person. For those students who are not able to review their MSPE in the office, they are encouraged to arrange a phone call in which the MSPE will be read to them by the Assistant or Associate Dean for Clinical Education and Student Affairs. The MSPE will not be transmitted electronically to students for their review.

All MSPEs are typically transmitted on or around October 1 of each academic year. However, for the 2021 Residency Application cycle, MSPEs will be transmitted on October 21, 2020 due to residency application timeline changes resulting from COVID-19. It should be noted that invitations for residency interviews are sometimes offered before the MSPE is uploaded into ERAS; therefore, it is important that students submit their applications and letters of recommendation in a timely manner.

Section 11: National Standardized Examinations

National Board of Medical Examiners (NBME) Subject Exams

NBME Subject Examinations are an important part of the educational process, evaluating the performance of a large, representative group of examinees at the same stage of training. These exams are used throughout the curriculum as one part of the evaluation process. Students are required to take NBME Subject Examinations at scheduled times and locations. Those students granted accommodations for testing must present them to Ms. Sherice Allen-Henry, Assistant Director of Medical Education Programs Management, a letter from the Office of Disability Services each semester outlining the student’s specific accommodations.

Individual arrangements will be made for the student at each exam in accordance with the specified accommodations.

To prevent additional charges, exam orders must be placed at least 22 days prior to the testing date. Therefore, it is important for the Office of Medical Education and Student Affairs (OMESA) to know well in advance the number of students scheduled to test at every exam. Unexcused absences from NBME exams will result in the student being charged for any additional costs associated with rescheduling of the examination.
For NBME examinations, students MUST test during the exam time (and date) supported by the medical school. A published exam schedule is available through the student portal.

To ensure the security of NBME materials and compliance with testing regulations, all NBME subject exams must be administered by trained proctors in an NBME-approved testing site. The School of Medicine Building is the only approved testing site for Emory medical students.

Arriving Late for an NBME Exam or Missing Examinations

It is considered part of professional behavior and the responsibility of the student to arrive on time for scheduled examinations with their Emory cards.

Emory designates a Chief Proctor for NBME exams. It is the responsibility of the Chief Proctor and his or her designees to assure that NBME exams are given in strict accordance with NBME policy. As per this policy, a student may be admitted to a testing room up to 30 minutes after the exam has started, provided the student’s name is on the check-in roster and the Chief Proctor approves the late start. Students arriving late for an exam will be expected to end the exam at the same time as other examinees; no extra time will be allotted to compensate for their tardiness.

For any student who is more than 30 minutes late for the exam, the NBME must be contacted by the Chief Proctor to seek approval for taking the examination. The Chief Proctor and his or her designees are not required to allow any student to start an exam late if doing so will be excessively disruptive to the other students.

United States Medical Licensing Examinations (USMLE)

The USMLE is an examination series with four complementary steps, the first three of which are graduation requirements for Emory University School of Medicine. Students must successfully pass Step 1, Step 2 Clinical Knowledge, and Step 2 Clinical Skills in order to graduate from Emory University School of Medicine.

USMLE Step 1

In addition to successful performance during the Foundations Phase, students must also earn a passing score, as set by the USMLE, on Step 1 examination of the United States Medical Licensing Examination (USMLE) prior to beginning the Application Phase of the Emory University School of Medicine curriculum. With written permission from the Executive Associate Dean, a student may begin the Applications Phase after having taken the USMLE Step 1 before the test score has been released by the USLME.

USMLE Step 1 must be taken by February 1st following completion of the Foundations phase. Prior to taking USMLE Step 1, all academic requirements of the Foundations Phase, including any necessary remediation, must be completed. For students who do not meet these deadlines, the School cannot guarantee Application, Discovery and Translation schedules that will permit the student to graduate at the expected time. Any delay in taking USMLE Step 1 must be approved in writing by the Executive
Associate Dean for Medical Education and Student Affairs or his/her designee. Students who do not meet these deadlines for completion of academic requirements and for taking and passing USMLE Step 1 may be referred to the Progress and Promotions Committee for action.

The following guidelines have been adopted regarding failure to pass the first administration of Step 1 of the USMLE.

A student whose overall academic record warrants promotion, but whose failing Step 1 score is 15 points or less below the passing level has two options to gain promotion into the clinical years:

- **Option A** - permits re-taking the test at the next available administration. Once the examination has been retaken, the student may begin clinical work. If a passing score is achieved, the student will continue the Application Phase; if a passing score is not achieved, the student will cease Application Phase course work and be allowed to retake the examination a 3rd time. It is highly encouraged that such students engage in an intense review of the basic sciences and consider auditing courses prior to re-taking the examination for the third and final time.

- **Option B** - grants a year’s time during which time the student is encouraged to obtain remedial help and engage in an intense review of the basic sciences, with retake of the examination by February 1st of the following year. If the test is passed at that time, the student then enters the Applications Phase.

A student whose failing score is more than 15 points below the passing level is generally required to take a leave of absence to prepare for retaking the test the following year. Such students may appeal to the Executive Associate Dean for Medical Education and Student Affairs and request an earlier re-take if extenuating circumstances can be shown.

A student who fails USMLE Step 1 on the second administration will be given a third and final opportunity to successfully pass Step 1. A student who has three unsuccessful attempts to pass Step 1 of the USMLE will be considered for dismissal.

**USMLE Step 2 Clinical Knowledge (CK)**

Students are encouraged to take Step 2 CK as soon as feasible after the Application Phase. At the latest however, students must take Step 2 CK by October 31st of their senior year. Passing Step 2 CK is a requirement for graduation. Students will have no more than 3 attempts to pass USMLE Step 2 CK. A student who has three unsuccessful attempts to pass Step 2 CK of the USMLE will be considered for dismissal.

**USMLE Step 2 Clinical Skills (CS)**

Students must take Step 2 CS by July 31st of the senior year (only exception is MD/PhD students – deadline is October 31st). Students must schedule their exam date by the preceding March 31st in order to ensure an exam date by the July 31st deadline. Passing Step 2 CS is a requirement for graduation.
Students will have no more than 3 attempts to pass USMLE Step 2 CS. A student who has three unsuccessful attempts to pass Step 2 CS of the USMLE will be considered for dismissal.

Due to extraordinary circumstances, administration of USMLE Step 2 CS has been suspended temporarily. The EUSOM graduating class of 2021 has been exempted from this requirement. Additional exemptions or changes to this policy may be necessitated by future USMLE/NBME decisions.

Section 12: Progress and Promotions

Promotional Guidelines

A student is considered to be achieving satisfactory academic progress as long as he or she passes the sequence of courses and clerkships established by the Curriculum Committee and meets the performance standards for the 28 SPAs as set by the Executive Curriculum Committee. The assessment of academic progress includes the domains of knowledge, skills, behaviors, and attitudes – as expressed in the form of SPAs. Hence, professionalism is an integral component when considering academic progress.

Independent of the final grade, unprofessional behavior may be the sole criterion for which a student may be recommended for a letter of concern, academic warning, academic probation, suspension, dismissal, or other sanctions as described throughout this document.

Students must be aware that the designation of academic probation or suspension may result in the loss of federal financial aid.

Progress and Promotions Committee

The Progress and Promotions Committee (P & P) monitors the progress of students during the EUSOM curriculum and certifies that students are performing at an acceptable level to successfully complete their present phase and advance to the next phase of the medical curriculum. In the process of these reviews, the P & P Chair will make recommendations to the EAD regarding academic advancement and academic sanctions according to the criteria below. The EAD or his/her designee will make the final decision as whether a student is allowed to advance with or without sanctions or if a student will receive an academic sanction.

Academic Advancement

At the completion of each phase of the EUSOM curriculum, the Registrar will provide the Chair of the P & P with a list of students who are scheduled to advance to the next phase of the academic curriculum. The P & P will then determine if the students meet criteria to advance to the next phase by considering all aspects of a student’s performance, including course grades and adherence to the Emory School of Medicine (SOM) Conduct Code, Honor Code and medical school student policies.
During the academic year, the P & P will regularly review the progress of all students to assess whether they are making adequate progress toward attaining the achievement levels required for promotion to the next phase of the academic curriculum. The P & P members will also determine if students are performing below standards, and may determine that a student should receive an academic sanction according to the criteria outlined below.

The Chair of the P & P will inform the EAD of recommendations regarding individual student’s pending promotion using the following criteria:

1. Adequate Progress: Students with passing grades in all courses/clerkships.
2. Inadequate Progress (these students would not be promoted):
   a. Students with performance below expectations who did not complete the course requirements;
   b. Students placed on academic probation who did not satisfactorily complete the necessary remediation outlined in their probation, or;
   c. Students who are on suspension.

For those students who have two or more incompletes in any phase, this should prompt a review at the level of the EAD (or his/her designee) to create an academic plan for the student that will be shared with the P&P committee at their next meeting.

Academic Sanctions

A letter of concern will be considered when the P & P has concerns about a student’s performance, but feel that the concern is not indicative of a pattern of underperformance, or lapses in professional behavior. The following is a nonexhaustive list of reasons why a student would automatically be recommended by the P and P to receive a letter of concern:

- In the Foundations Phase students will be recommended to receive a letter of concern when they require remediation of two courses.
- In the Foundations, Application, Discovery or Translation phases, students will be recommended to receive a letter of concern when they have a professionalism or performance issue that is significant and the P & P members are concened, but do not feel this behavior represents a pattern of poor performance or professionalism problems.

An academic warning will be considered when a student’s deficiencies are of a more serious nature. The following is a nonexhaustive list of academic difficulties for which a student would automatically be recommended to receive an academic warning:

- In the Foundations Phase, students will be recommended to receive an academic warning when they have been required to remediate three courses and the summed credit hours for the three courses is 6 credit hours or more.
• In the Application or Translation phases, an academic warning will be recommended to be given when a student is noted to have a deficiency in their clinical skills over several clerkships or courses (e.g., difficulty synthesizing clinical information); or, when a student receives a grade of C in two or more clerkships in either the Application or Translation phase.
• In the Discovery Phase, students will be recommended to receive an academic warning if they are late in turning in their materials to start their Discovery project.
• In the Foundations, Application, Discovery and Translation phases, a student will be recommended to receive an academic warning if professionalism problems are recurrent over multiple courses or clerkships or a single professionalism transgression that rises above the level of letter of concern.

The entirety of the student’s academic performance is factored into decisions by the P & P, and an academic warning may also be recommended if a student had difficulties in the Foundations Phase, and continues to struggle academically in the Application Phase. An academic warning is intended to alert the student that, without improvement, they are in danger of more serious academic sanctions such as probation.

**Academic probation** will be considered when the P & P is concerned about a student’s performance and, without improvement, the student is in danger of being suspended or dismissed. The following is a non-exhaustive list of academic difficulties for which a student would automatically be recommended to receive an academic probation:

• In the Foundations Phase, students will be recommended to be placed on academic probation if they are required to remediate four courses and the total credit hours for the four courses is 10 credit hours or more.
• In the Application, Discovery Phase or Translation phases, students will be recommended to be placed on academic probation if they receive a D or F in a clerkship or course. The student will not progress in the phase until they have completed remediation of the clerkship or course. The period of probation will continue until they have successfully completed the phase.
• Any student who repeats a phase will be recommended to be placed on academic probation while they are repeating the phase.
• In any phase, a student will be recommended to be placed on academic probation if the student has a professionalism issues that the P & P members judge to be significant and concerning.

**Academic probation** serves three functions:

a. It is official documentation that the student is deficient in areas related to academic performance;
b. It provides a pathway and defines a timeline that the student must follow in order to regain good standing. This may include, but is not limited to, remediation, maintaining appropriate performance standards and/or adhering to professional expectations;
c. It describes the consequences that will result if a student does not meet stated expectations during the period of academic probation.

Repetition allows the student to repeat a phase of the curriculum. There are two primary reasons for repetition. 1) Students may voluntarily repeat a phase because of specific events (e.g., health, personal or family issues). This voluntary repetition can only be approved by the EAD or the EAD’s designee. In these cases, the student is allowed to repeat the phase without any academic penalties.

2) Repetition of a phase is recommended by the P & P, due to a concern that the student has not mastered the academic skills of that phase. The following is a non-exhaustive list of actions for which the P & P would require a student to repeat a phase or course in the curriculum:

- Required remediation of five or more courses
- Grade of D or F in the Discovery Phase.

Suspension is considered for serious academic issues when the P & P has information regarding the student’s academic performance or professional behavior that would support the student benefitting from a period to manage external distractions or other concerns. The period of suspension is recommended by the P & P and will include the conditions for restarting the medical school curriculum. Students who are on academic suspension cannot proceed to the next phase, and can only re-start their program after the concerns that placed them on suspension have been resolved.

Dismissal is considered for either serious breaches in professional conduct or academic concerns including failure of a course and/or clerkship.

The following is a non-exhaustive list of actions that would automatically lead to dismissal:

- **During required repetition of a phase:**
  - Any student in the Foundations Phase who is required to remediate four courses and the total credit hours for the four courses is 10 credit hours or more.
  - In the Application, Transition or Discovery phases, students who receive a D or an F in any course or course.
- Two F’s, two D’s or a D and an F in the initial grades for clerkships in the Application Phase or the same criteria for courses or clerkships in the Translation Phase.
- The P & P would recommend dismissal for a professionalism violation that the P & P members consider gross negligence which could include negligence that, in the mind of the committee, could have led to the death or serious injury of a patient, or behavior in the clinic setting that is grossly inappropriate by the standards of the profession.

Student Right to Appeal P & P Decisions

Students may appeal any academic sanction. If a student wishes to appeal an academic sanction, this request should be presented in writing to the EAD within 14 calendar days of receiving the academic sanction from the P & P. The appeal may be based on the following grounds:
1. To consider new information, sufficient to alter the decision, or other relevant facts that the person appealing the decision feels the P & P may not have known, but should have taken into account, in considering their academic sanction.

2. To allege a procedural error within the process that led to the P & P decision that may have substantially impacted the fairness of the decision.

For appeals of academic sanctions not involving dismissal, the EAD will make the final decision on the appeal and will notify the student of that decision. For appeals from P & P findings that include dismissal, the EAD will convene an ad-hoc review panel of faculty members to consider the appeal. The review panel, at its discretion, can meet with the student, EAD, faculty or chair of the P & P to get clarification of any issues. The review panel reviews the documentation from the P & P and sends its recommendation to the EAD whether or not to uphold the decision of the P & P. The EAD will ultimately make the final decision on the appeal and will notify the student of that decision. All appeal decisions are final.

It should be noted that any and all appeals should be conducted in a professional manner by the student involved; that is, demonstrating respectful disagreement with the perspective and judgment used by faculty members. Failure to exhibit appropriate professional attitudes may immediately terminate the appeal process and lead to an unprofessional conduct report.

**Length of Time to Complete Degree**

The standard MD program at EUSOM takes four years to complete; however, students may apply to postpone graduation for a year if they:

- a. Want to obtain another degree (e.g., MPH)
- b. Want to spend a year doing a scholarly project (or extended Discovery)
- c. Want to take an additional year of formal coursework

Students who need time off for extenuating medical/personal issues are advised to take a Leave of Absence (LOA) from medical school (Section 9). Students may be eligible to be enrolled at EUSOM for additional periods for purposes of remediation or completion of degree requirements.

Students who plan to obtain the MD degree with no additional degrees or certificates must complete all academic requirements of the MD degree within no more than six academic years from the date of matriculation. Approval for a well-planned fifth year is required. The academic records of students who are approaching the deadline of “Time to Degree” for the MD degree will be reviewed by the Registrar and the Progress and Promotions Committee, with enough notice to enable the student to complete the requirement by the end of “Time to Degree”.

**Section 13: Professional Conduct**

**Expectations**
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.

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

- **SPA 17 & SPA 21 Honesty** – Being truthful in communication with all others, while in the healthcare arena or in the community at large.
- **SPA 11 & SPA 16 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.
- **SPA 18 & SPA 21 Trustworthiness** – Being dependable; following through on responsibilities in a timely manner.
- **SPA 7 & SPA 8 Professional Communication and Demeanor** – Being thoughtful and kind when interacting with patients, their families, other members of the healthcare team, and all others; 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; refraining from intoxication; abstaining from the illegal use of drugs (both prescription and illicit drugs).
- **SPA 15 & SPA 22 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.
- **SPA 20 & SPA 25 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.
• **SPA 22 & SPA 23 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; 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.

• **SPA 18 & SPA 25 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**

Students are expected to convey a professional demeanor, not only in their behavior but also in their dress and appearance. A professional image conveys credibility, trust, respect, and confidence to one’s colleagues and patients. In all educational settings—classroom, laboratory, clinical environment—students are expected to be clean, well groomed, and dressed in a manner appropriate to their responsibilities and the standards of their assigned clinical sites. When patient-student contact is part of the educational experience (including interactions in the clinic, in the hospital, and with standardized patients), students are expected to dress professionally and wear a clean white coat unless otherwise instructed by EUSOM faculty. When patients are invited into the classroom as part of the Foundations curriculum, medical students should wear respectful and professional attire; white coats are not necessary. Medical students are expected to wear their EUSOM identification badges, ideally placed at the collar or top of the shirt/dress or at the breast pocket of a lab coat, at all times in clinical and academic settings. Of note, each healthcare facility in which students rotate may have their own standards which need to be observed, however the EUSOM will default to the most conservative and restrictive standard that may apply.

All students are required to be clean and maintain appropriate personal hygiene with regard to their body, hair, and nails. Hair and nails need to be clean, neat, and of a reasonable length so as to not interfere with the student’s and/or patient’s safety or ability to perform their duties. Cologne and perfume should not be used on days when students are seeing patients.

Patients vary in sensitivity to and in expectations regarding the appearance of their health care providers. A reasonable rule of thumb is to lean towards being conservative – for example, choose attire that most people will find appropriate.

Professional dress for clinical duty is outlined below:
Hair Maintenance

Hair should be neat, clean, and of a natural human color. Unless head coverings are required for religious or cultural reasons, hats or other head coverings should be avoided.

Clothing

Students should wear business attire that is clean and in good repair. In general, clothes should be of a length, fit and style that are appropriate for the clinical environment. Shorts and blue jeans are not appropriate professional dress. Shoes must be closed-toe, comfortable, clean and in good repair.

Scrubs

Scrubs 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 ExCEL) unless otherwise specified. Stained or soiled scrub suits must be changed as soon as possible; they are a source of potential contamination. All Personal Protective Equipment (e.g., masks, hats, booties) must be removed upon leaving OR’s/procedural areas.

Body Piercing and Tattoos

Body art and body piercing, which may be acceptable in some social situations, should not be worn or displayed by students in professional settings.

Nametags/Badges

Students should wear their nametag/badge at all times in the clinical environment. Nametags/badges as previously mentioned, should be above the waist, near eyelevel.

The above provide guidelines that represent minimum standards for dress and appearance to ensure that students present a positive and professional image to patients. You will receive feedback about your grooming and attire from standardized patients, faculty, course directors, and peers when your appearance does not meet expectations for professional and clinical environments. If a faculty member, course or clerkship director or staff member feels that the dress is inappropriate for the setting, they may also ask you to change prior to continuing in that environment.

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 all varieties of 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 School of Medicine students. Students responsible for such postings
are subject to the Conduct Code process in the same manner as for any other unprofessional behavior that occurs outside the academic setting. Students who do not follow these expectations 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:

- 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 of the writer. 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.
- Internet activities may be permanently linked to the author, such that all future employment may be hampered by inappropriate behavior on the Internet.
- Making postings “private” does not preclude others copying and pasting comments on public websites. “Private” postings that become public are still subject to sanctions described in the School of Medicine Conduct Code.
- Do not share information in a way that may violate any laws or regulations (i.e. HIPAA). 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 also applies to deceased patients.
- 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 distributed or redistributed. When in doubt, students should seek guidance regarding appropriate use of such materials.
- Do not share confidential or proprietary information that may compromise Emory’s research efforts, business practices or security.

In addition to the above, the Social Media Guidelines for Medical Students and Physicians, created by the American Medical Student Association, should be followed. These guidelines are included here:

In all situations, including on social media sites, members of the medical profession should always represent him/herself in a manner that reflects values of professionalism, accountability, integrity, honor, acceptance of diversity, and commitment to ethical behavior.

For purposes of these guidelines, “social media” includes Internet and mobile-based applications that are built on user-generated shared content. Social networks including, but not limited to, blogging, microblogging (e.g., Twitter), networking sites (e.g., Facebook, LinkedIn), podcasts and video sites (e.g., Flickr, YouTube) – offer opportunities for communication, information/experience sharing, collaborative learning, professional interactions and outreach.
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. (e.g. replying to a post on social media asking to be diagnosed)

- **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 political endorsements.** Political endorsements of candidates should be avoided outside your own personal social media accounts, even there comments should be carefully considered. Endorsements of any candidates or political parties via AMSA social media channels is strictly prohibited, be aware of where and how AMSA’s name is used.

- **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.
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 healthcare 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 future healthcare 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.

This Code may be reviewed annually and changes require the approval of the Executive Associate Dean for Medical Education and Student Affairs and approval of 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.

From the time an individual accepts an offer of admission to a program of the School of Medicine until the day of completion of that degree program and graduation from Emory University, he or she is considered a student of the School of Medicine and is governed by the principles set forth within this Conduct Code.

The Emory University School of Medicine Conduct Code pertains to misconduct of medical 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 Progress and Promotions 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 and the patients we serve. 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 emergency situations, 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.

Confidentiality

The details of Conduct or Progress and Promotions meetings 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 any performance assessment or letter of recommendation requested by the student or an outside entity. 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 Professional Conduct as described in Section I of this Student Handbook 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 on Equal Opportunity and 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 or 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 limited to the regulations and policies contained in the Campus Life Undergraduate Code of Conduct, 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.

25. 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.

26. Recording any other person without the consent of the person(is) being recorded.

27. Inappropriate use of social media.

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 Medical Education and Student Affairs or to any Assistant or Associate Dean for Medical Education and Student Affairs. Reports generated by the Emory Police will be forwarded to the Dean for Campus Life or his/her designee and to the Executive Associate Dean for Medical Education and Student Affairs. The Executive Associate Dean for Medical Education and Student Affairs 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 Medical Education and Student Affairs 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 of the student 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 Medical Education and Student Affairs 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 for Medical Education and Student Affairs.
If the matter is not so resolved, the Executive Associate Dean for Medical Education and Student Affairs 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 Medical Education and Student Affairs determine the appropriate sanction.
2. The student may choose a hearing with an ad hoc conduct committee appointed by the Executive Associate Dean for Medical Education and Student Affairs to determine the appropriate sanctions.

This selection shall be made in writing within five days of the student’s request for a hearing and be recorded by the Executive Associate Dean for Medical Education and Student Affairs.

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.

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:

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

The ad hoc Conduct Committee must have a minimum of five members present in order to convene, two of who must be faculty.
Hearing Procedures

The Executive Associate Dean for Medical Education and Student Affairs 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.

Witnesses will be present at the hearing only during the actual time of 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 ad hoc Conduct Committee will consider exceptions. The advisor may not be an attorney.

Both parties and/or their advisors are allowed to:

1. 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.
2. 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.
3. It is the responsibility of the accused student and of the complainant to notify any additional witnesses not called by the hearing body. Additional witnesses must have the prior approval of the Chair of the hearing body. All witnesses should be notified of the date, time, and place of the hearing.
4. 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

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The decisions of the ad hoc Conduct Committee as to both violation and sanctions are in all cases advisory to the Executive Associate Dean for Medical Education and Student Affairs. 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 Medical Education and Student Affairs 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 Executive Associate Dean for Medical Education and Student Affairs 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:

1. Warning: A notice in writing to the student that the student has violated institutional regulations and must cease and not repeat the inappropriate action.
2. 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.
3. Restitution: Compensation for loss, damage, or injury. This may take the form of service, monetary compensation, or material replacement.
4. Discretionary Sanctions: Work assignments or service to the School of Medicine, the University or the community.
5. 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.
6. Expulsion: Permanent separation of the student from the School of Medicine.

Conduct sanctions (5) Suspension and (6) Expulsion shall be entered permanently on a student’s record. Sanction (2) 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 any course work or clinical rotations.

Appeal

The accused student may appeal decisions rendered by the ad hoc 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.
4. After reviewing the documents pertaining to the case, the Dean will issue a written review of the hearing decision with a reasonable period of time 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 Medical Education and Student Affairs;
2. Up to three voting faculty members appointed by the Dean.
3. One voting medical or academic 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 Executive Associate Dean for Medical Education and Student Affairs 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 Medical Education and Student Affairs shall forward notification of all final action to the Dean. The Executive Associate Dean for Medical Education and Student Affairs shall maintain files on all medical and academic health students’ conduct reports, records, and hearing proceedings according to procedures established by that office.

Professional Conduct Evaluation Form

The Professional Conduct Evaluation Form can be completed by any course or clerkship director, or a small group advisor. The form is a tool that can be used to document concerns regarding student professional behavior. The form is completed, reviewed with the student, and then forwarded to the Progress and Promotions Committee for review.

Section 14: 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 outstanding financial responsibilities to the University have been met. Registration information may be obtained from the School of Medicine Registrar’s Office. After the last date for changing courses, registration may only be permitted by joint consent of the Executive Associate Dean for Medical Education and Student Affairs or their designee, 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 and fees are due and payable prior to the first day of class each semester.

A student'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 University 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 in the School of Medicine Registrar’s Office.

Section 15: Feedback to Students

In addition to summative feedback, students receive frequent formative feedback throughout medical school to help in their progress in learning. During the Foundations Phase, students have formative feedback opportunities such as practice tests, thought questions, in-class or online quizzes, and practice problem sets. Students receive formative feedback on their clinical skills from their small group
advisor and from simulated participants as part of the Essentials of Patient Care course. Students receive formative feedback during the outpatient experience (OPEX) from their clinical preceptors. During the clinical years, students receive on-going feedback about their progress. This is based on direct-observation of students’ clinical skills. In addition, students receive formative feedback about their progress in medical school with attention to areas such as professionalism and to adjustment to medical school from their small group advisors.

Section 16: Student Assessment, Grading, and Grade Appeals

Overview

Assessments are measurements of student performance conducted using instruments such as written exams or observational checklists. Evaluations are comprehensive summaries of student performance measured against a performance standard.

A wide variety of assessment types are used to measure students’ academic and professional performance in relation to the Emory University School of Medicine Student Physician Activities (SPAs) and are incorporated into grades for courses and clerkships. In addition to written exams and academic papers, instructor observational assessments are often used during small group work, during patient care on clerkships, for elective courses, and in research labs. Objective Structured Clinical Exams (OSCEs) are a regular and vital element of student assessment.

Grading Scales

S/U

- “S” indicates satisfactory work; Pass
- “U” indicates unsatisfactory work
- A grade of “U” carries no academic credit. A student cannot be promoted to the next phase of the curriculum with a grade of “U” on their transcript. Any student who receives a “U” will, at a minimum, have to successfully remediate the course, and may be susceptible to additional actions such as probation or dismissal, as determined by the Progress and Promotions Committee.

A -- F

The letter grades “A” through “F” indicate the quality of a student’s performance as measured by various assessment instruments and processes: modifiers of ‘plus’ or ‘minus’ with letter grades are also used. Letter grades are derived from a comprehensive, summative evaluation of a student’s achievement, both academically and professionally. Grades are assigned based on published criteria.

- “A” indicates exceptional performance
- “B” indicates good performance with no identified weaknesses
- “C” indicates acceptable performance with improvement needed
• “D” indicates unacceptable performance on at least one criterion and no academic credit is awarded
• “F” indicates unacceptable performance on multiple criteria and no academic credit is awarded
• A student cannot be promoted to the next phase of the curriculum with a grade of “D” or “F” on their transcript. Any student who receives a “D” or “F” will, at a minimum, have to repeat the clerkship, and the student will be susceptible to additional actions such as probation or dismissal, as determined by the Progress and Promotions Committee. Any repetition of coursework must be completed as soon as possible after the grade of “D” or “F” has been submitted.

IP and I

• “IP” indicates ‘in-progress’ course work. Final transcripts cannot carry grades of “IP.”
• “I” indicates incomplete course work.
• The grade of “I” will be assigned to students who have been unable to complete the requirements of the course/clerkship due to absences approved by the dean’s office. The grade of “I” is appropriate only when enough work has been completed at an acceptable level of performance such that the student can complete the remaining work without repeating the entire course/clerkship.
• If a student receives a grade of “I,” the remaining work must be completed within a reasonable time, as determined by Associate Dean for Clinical Education, or the grade of “I” will automatically convert to an “F.” The grade of “I” cannot be assigned for unsatisfactory work. The grade of “I” is to be viewed as a non-prejudicial entry on the student’s record.

W

• “W” indicates withdrawal from course or clerkship without penalty “WF” indicates withdrawal failing
• “WU” indicates unsatisfactory withdrawal

Grading in the Foundations Phase

In the Foundations Phase of the curriculum, grades “S” or “U” are assigned to students for each course. Students will receive a grade of Satisfactory in any course during the Foundations phase if they meet either of the following criteria: A student’s total score for the course is greater than 2 standard deviation units below the mean (i.e. \( z > -2.0 \)) OR the student’s total percentage score is greater than 68.2%. When appropriate, students may also be assigned the grades of “I,” “IP,” “W,” “WF,” or “WU.”

Students may not progress to the Application Phase of the curriculum without receiving a final grade of “S” in all Foundations courses. Although Anatomy is not a separately graded course, students must reach a satisfactory standard of performance in the portion of each end-of-course-exam devoted to Anatomy.

Grading in the Application, Discovery, and Translation Phases
In the Application, Discovery, and required clerkship portion of the Translation Phases of the curriculum, grades “A+” through “F” are assigned to students. For electives taken during in the Translation Phase, grades of “S” or “U” are assigned. When appropriate, students may also be assigned the grades of “I,” “IP,” “W,” “WF,” or “WU.”

If a student fails any aspect of a clerkship that is required to pass the clerkship, the student will receive a failing grade (“D” or “F”) for the clerkship and be required to repeat the clerkship in its entirety. The student will be re-enrolled in the clerkship and a second grade will be issued after repetition of the clerkship; however, the “D” or “F” grade earned after completing the clerkship for the first time will remain on the student’s official transcript.

Students must successfully complete all Application clerkships before proceeding to the next phases of the curriculum.

**Completion of Clerkship Requirements**

All clerkship requirements, as defined by the individual clerkship directors, must be completed by 5pm on the final day of the rotation, including but not limited to patient logs in OASIS and direct observation forms. Students who fail to complete clerkship requirements on time will be subjected to penalties outlined by the clerkship directors and may result in a grade deduction or a failing grade for the clerkship.

**Conflicts of Interest in Grading**

Residents and faculty members with a conflict of interest (e.g., professional, personal, or familial relationship to a student, including providing health services or psychiatric/psychological counseling) should not participate in assessing a student in which a conflict exists. The EUSOM Separation of Roles outlines this in further detail.

On the occasion when a student’s Small Group Advisor is also a clerkship director, the department Vice Chair for Education (or designee) will be responsible for assigning grades for those students in which a conflict exists.

**Grade Appeals**

Students are encouraged to discuss their final grades with the course, course, clerkship, or elective director. Although grades are assigned as an accurate and fair representation of a student’s work, students have the right to appeal a grade and to receive an independent review of the grading criteria and their performance.

If a student wishes to appeal a final grade, this should be presented in writing to the Executive Associate Dean of Medical Education and Student Affairs within 30 days of receiving the grade. The appeal may be based on the process that led to the grade and/or questions of factual content used in
the evaluation process. The Executive Associate Dean for Medical Education and Student Affairs or his/her designee will then review the basis for the appeal of the grade.

Upon review, the Executive Associate Dean for Medical Education and Student Affairs may find that based on process or factual content, there is no basis for a change of an evaluation or grade.

Alternatively, the Executive Associate Dean for Medical Education and Student Affairs may recommend that the grade be changed.

After review by the Executive Associate Dean for Medical Education and Student Affairs and submission of the reconsidered grade, the student may appeal any decision to the Dean of the medical school. The decision by the Dean shall be final.

It should be noted that any and all grade appeals should be conducted in a professional manner by the student involved; that is, demonstrating respectful disagreement with the perspective and judgment used by faculty members. Failure to exhibit appropriate professional attitudes may immediately terminate the appeal process and lead to an unprofessional conduct report.

Section 17: Remediation

Assessments are used to identify those students who have not achieved minimal competency during a course: remediation is the process used to improve student performance and ensure that all students achieve the designated Student Physician Activities (SPAs) before moving on to the Application Phase of the curriculum.

Remediation Policy

The Office of Medical Education and Student Affairs will notify students of their need to remediate a course no later than two weeks after exam completion. This email will be cc’d to the course and Foundations director.

Schedule:

- The student must contact the course director within one week after the notification from OMESA. It is the responsibility of the student to schedule the remediation process with the course director.
- Students are required to make their first attempt at remediation no later than two weeks after their notification about the need to remediate an anatomy examination, and no later than the end of the week following the next school break for all other courses. Under certain circumstances, remediation may be delayed with prior permission from Dr. David Schulman, Director of Foundations.
- Students with remediations outstanding at the end of the Foundations Phase must complete these remediations no later than December 31 of their second year of medical school. All remediations must be complete before a student may move into the Application phase.
Process:

- Students requiring remediation must meet with the director of the course to be remediated. If, during this conversation, the student identifies a non-academic contributor to their poor performance (i.e., something medical or social), this should be brought to the attention of the Executive Associate Dean of Medical Education and Student Affairs, Dr. Bill Eley, jeley@emory.edu or 404-712-9979.
- The process for remediation, as determined by the course director, should be tailored to the individual student through the identification and correction of specific areas of deficiency. Retaking the entire course exam should only be necessary if the student’s performance in all major content areas is unsatisfactory.
- The course director will provide the Office of Medical Education and Student Affairs a record of the remediation process for each student. This record will outline the format of the remediation, the dates on which it occurred, and whether the student successfully remediated on that date. If the student was unsuccessful on an attempt at remediation, the course director will briefly outline how they were unsuccessful. This will be part of the student’s record. Failure to demonstrate adequate competence will necessitate additional remediation by the student. If a student is not able to demonstrate mastery of the course material after two attempted remediations, the course director may consult with the Progress and Promotions Committee regarding appropriate next steps.
- Each failed anatomy exam will need to be individually remediated. If a student fails any exam on the first attempt, that failure will be documented for Progress and Promotions.

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 course/thread will be provided with information on receiving a learning assessment, the results of which may trigger further support services that may help the student avoid the need to remediate additional courses.

For students required to repeat the Foundations phase of the curriculum, student progression in anatomy will be as follows:

- Students will be allowed to continue in anatomy, at the discretion of the anatomy director, if they begin the repetition process after having already started the anatomy thread. In this situation, students will not be required to retake anatomy (as part of repeating Foundations) if they pass ALL of the anatomy exams.

Section 18: Use of Student Feedback

Confidentiality of Student Evaluations

Students are expected to submit candid, constructive, professional evaluations of EUSOM courses, faculty, residents, and others when asked to do so. All evaluations are confidential and are blinded to prevent school personnel from knowing the identity of the person submitting an evaluation. It is vital
to the evaluation process that students not fear retribution or recrimination based on their honest perceptions.

Although students must log in to the OASIS system in order to submit evaluations, OASIS is specifically designed to redact all identifying data from every type of evaluation form submitted. This protects students from real or perceived retribution for the evaluation data that they submit. Evaluation data collected through OASIS are stripped of individual identifiers and stored on secure servers.

In the unlikely event that a student submits information through the evaluation process that could pose a credible threat to the safety of that student or others, a mechanism can be activated to retrieve identifying information about the responsible student. The decision to seek the identification of a student based on information from an evaluation form rests solely with the Executive Associate Dean for Medical Education and Student Affairs, or in his/her absence, a designee. In such a case, the specific evaluation will be matched to the individual student by the designated staff member who has the authority and ability to do so.

With the exception of the aforementioned extreme circumstance, no school personnel will have access to the identity of students who submitted an evaluation.

**Student Feedback of Courses, Clerkships and MD Program**

Student evaluations of individual courses, clerkships, phases and the MD program as a whole is essential to improving the education experience. In addition to being reviewed by course and clerkship directors, student feedback is reviewed by the Executive Curriculum Committee and its multiple subcommittees. Evaluations are designed to be completely anonymous and are reviewed as part of aggregate data. The School of Medicine is interested in both positive and negative feedback and finds specific, constructive feedback to be most helpful in making necessary changes to the program.

**Student Feedback of Residents and Faculty**

Student evaluations of residents and faculty are an essential component to improving medical education. Student feedback further assists with resident and faculty development. Course and clerkship directors and the dean’s office have developed ways to ensure that students are protected from retribution when completing evaluations. First, residents and faculty never see names associated with evaluations. Second, residents and faculty cannot see their evaluations until course and clerkship grades have been assigned to students. Third, student evaluations are not available to residents and faculty until they have been aggregated with other evaluations to provide a summarized analysis of resident and faculty teaching performance. These aggregations occur no more frequently than every six months and have at a minimum at least four evaluations aggregated and summarized. Finally, all student feedback of residents and faculty is handled by course and clerkship directors in a delicate and responsive fashion to further protect the identity of students submitting anonymous evaluations.
Policy 1.3

Equal Opportunity and Discriminatory Harassment Policy

Responsible Official: University President
Administering Division/Department: Department of Equity and Inclusion (formerly Equal Opportunity Programs or EOP)
Effective Date: April 13, 2007
Last Revision Date: May 27, 2020

Policy Sections:

I. Overview
II. Applicability
III. Policy Details
IV. Definitions
V. Related Links
VI. Contact Information
VII. Revision History

Overview

EMORY UNIVERSITY NONDISCRIMINATION STATEMENT

Emory University is an inquiry-driven, ethically engaged, and diverse community dedicated to the ideals of free academic discourse in teaching, scholarship, and community service. Emory University abides by the values of academic freedom and is built on the assumption that contention among different views is positive and necessary for the expansion of knowledge, both for the University itself and as a training ground for society at large. Emory is committed to the widest possible scope for the free circulation of ideas.

The University is committed to maintaining an environment that is free of unlawful harassment and discrimination. Pursuant to the University’s commitment to a fair and open campus environment and in accordance with federal law, Emory cannot and will not tolerate discrimination against or harassment of any individual or group based upon race, color, religion, ethnic or national origin, gender, genetic information, age, disability, sexual orientation, gender identity, gender expression, veteran’s status, or any factor that is a prohibited consideration under applicable law. Emory University welcomes and promotes an open and genuinely diverse environment.

This policy is a republishing of the Emory University Equal Opportunity and Discriminatory Harassment Policy, which previously was published at: http://www.emory.edu/EEO/equalopportunitydiscriminatoryharassment.htm
This policy also supersedes and retires Policy 8.6, Grievance Procedures – Employee and Student Complaints of Discrimination, and unifies the grievance process. The effective date represents only the date that this version was published on policies.emory.edu and does not reflect the original effective date of this policy.

**Applicability**

This Policy shall apply to persons who are employees and students of Emory University, vendors, contractors, guests, patrons, and other third parties participating in any Emory-sponsored event or program, whether on or off campus, and to such persons in other situations in which the respondent is acting as a member of the Emory community.

**Complaints Against Students**

Students are bound by the principles outlined in this policy. However, complaints against students (when acting in the capacity as a student) shall be resolved under the Conduct Code provided by that student’s school or college unless the student’s school or college conduct code provides otherwise. Investigation of complaints against students who are acting in the capacity of an employee shall be conducted by the Director of Department of Equity and Inclusion (DEI) and/or the Title IX Coordinator, or his or her designee, who shall report his or her findings and recommendations to the Senior Vice President and Dean for Campus Life and the Dean of the school or college in which the student is enrolled.

**Sexual Harassment Complaints Against Students**

Sexual Misconduct is a form of gender discrimination prohibited by Title IX of the Education Amendments of 1972. Title IX specifically prohibits sexual harassment and sexual misconduct in the educational setting. Emory University has adopted a separate Sexual Misconduct Policy, University Policy 8.2 that applies to student-on-student allegations or allegations in which the respondent is a student. Policy 8.2 explains how to report allegations of sexual misconduct, and sets forth detailed procedures designed to provide a fair process for parties when students are involved in allegations of sexual misconduct.

**Policy Details**

1.3.1. EQUAL OPPORTUNITY POLICY

1.3.2. DISCRIMINATORY HARASSMENT POLICY

1.3.3. INVESTIGATION AND RESOLUTION PROCESSES

1.3.4. COMPLAINTS AGAINST VENDORS, CONTRACTORS AND THIRD PARTIES

1.3.5 DEFINITIONS

1.3.6 ADDITIONAL UNIVERSITY RESOURCES

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**1.3.1. EQUAL OPPORTUNITY POLICY**

Emory University is dedicated to providing equal opportunities to all individuals regardless of race, color, religion, ethnic or national origin, gender, genetic information, age, disability, sexual orientation, gender identity, gender expression, and veteran’s status. Emory University does not discriminate in admissions, educational programs, or employment on the basis of any factor stated above or prohibited under applicable law. Students, faculty, and staff are assured of participation in University programs and in the use of facilities without such discrimination. Emory University complies with all applicable equal employment opportunity laws and regulations, and follows the principles
outlined above in all aspects of employment including recruitment, hiring, promotions, transfers, discipline, terminations, wage and salary administration, benefits, and training.

1.3.2. DISCRIMINATORY HARASSMENT POLICY

In keeping with its commitment to maintaining an environment that is free of unlawful discrimination and with its legal obligations, Emory maintains a policy prohibiting unlawful harassment. Discriminatory harassment of any kind, whether it is sexual harassment or harassment on the basis of race, color, religion, ethnic or national origin, gender, genetic information, age, disability, sexual orientation, gender identity, gender expression, veteran's status, or any factor that is a prohibited consideration under applicable law, by any member of the faculty, staff, administration, student body, a vendor, a contractor, guest or patron on campus, is prohibited at Emory.

At the same time, Emory recognizes the centrality of academic freedom and the University's determination to protect the full and frank discussion of ideas. (See Policy 8.14.) Thus, discriminatory harassment does not refer to the use of materials for scholarly purposes appropriate to the academic context, such as class discussions, academic conferences, or meetings. Additionally, discriminatory harassment does not refer to participation in lawful protests, public forums, or campus publications established for the purpose of freely expressing opinions or ideas in the university community.

A. Discriminatory Harassment of a Sexual Nature

Sexual harassment includes unwelcome conduct, based on sex or gender stereotypes, when:

- Submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment or student status or;
- Submission to or rejection of such conduct is used as the basis for employment or academic decisions affecting such individual or;
- Such conduct is so severe and/or pervasive it has the purpose or effect of unreasonably interfering with a person's university employment, academic performance or participation in university programs or activities, or creates a working, learning, program or activity environment that a reasonable person would find intimidating, hostile or offensive.

Depending upon the severity and/or pervasiveness of the conduct, sexual harassment may include, for example, subjecting a person to egregious, unwelcome sexual attention, physical or verbal advances, sexual flirtations or propositions, vulgar talk or jokes, degrading graphic materials or verbal comments of a sexual nature about an individual or his or her appearance, or the display of sexually suggestive objects outside a scholarly context and purpose.

Sexual harassment includes sexual misconduct, sexual violence, sexual assault, intimate partner violence, stalking, and gender-based bullying. Prohibited sexual harassment in the working or learning environment includes an attempt to coerce an unwilling person into a sexual relationship; to punish a refusal to comply with a sexual based request; to condition a benefit on submitting to sexual advances, and to make direct or implied threats that submission to sexual advances will be a condition of employment or academic opportunity. Sexual harassment may also occur in the form of unwelcome, sexually suggestive cartoons, pictures, email, text, tweets, video or other graphic materials that may contribute to a hostile working or learning environment.

The alleged harasser may be a member of the faculty, staff, administration, student body, a vendor, a contractor, a guest or patron on campus.

B. Discriminatory Harassment of a Non-Sexual Nature

Emory's policy prohibits discriminatory harassment of a non-sexual nature, which includes verbal, physical, or graphic conduct that denigrates or shows hostility or aversion toward an individual or group on the basis of race, color, religion, ethnic or national origin, gender, genetic information, age, disability, sexual orientation, gender identity, gender expression, veteran's status, or any factor that is a prohibited consideration under applicable law, and that is so severe and/or pervasive it:
The alleged harasser may be a member of the faculty, staff, administration, student body, a vendor, a contractor, a guest or patron on campus.

C. Reporting to Department of Equity and Inclusion (formerly Equal Opportunity Programs or EOP)

Emory encourages anyone who has knowledge of discrimination on campus to report alleged violations of this policy. Because discriminatory harassment interferes with the University’s educational mission and may be unlawful, anyone who becomes aware of discrimination or discriminatory harassment committed by a member of the faculty, staff, administration, student body, a vendor, a contractor, guest or patron on campus, is encouraged to report the harassment to the Director of the Department of Equity and Inclusion (DEI).

Emory faculty, administrators and supervisors are required to immediately report any employment complaints they receive or incidents of discrimination or discriminatory harassment they witness, to their immediate supervisor or to the Department of Equity and Inclusion.

Contact Information:

Maurice Middleton
Senior Director
Department of Equity and Inclusion
Office of Diversity, Equity, and Inclusion
Emory University
201 Dowman Drive
Administration Bldg, Ste 305
Atlanta, GA 30322
MS: 1000-001-1AX
(404) 727-6198 (404) 712-9108 fax
maurice.middleton2@emory.edu

OR

Carol E. Henderson, Ph.D.
Vice Provost
Office of Diversity, Equity, and Inclusion
Chief Diversity Officer
Advisor to the President
Emory University
201 Dowman Drive
Administration Bldg, Ste 305
Atlanta, GA 30322
MS: 1000-001-1AX
(404) 727-3127
(404) 712-9108 fax
carol.e.henderson@emory.edu
D. Prohibition Against Retaliation

Retaliation against an individual who, in good faith, complains about or participates in an investigation or a hearing relating to an allegation of discrimination or harassment is prohibited. Any individual who feels retaliated against, or has been threatened with retaliation, should report that allegation immediately to the Department of Equity and Inclusion (DEI).

E. False Accusations

Anyone who knowingly makes a false or bad faith accusation of discrimination, harassment, or retaliation will be subject to appropriate sanctions. However, failure to prove a claim of discrimination, harassment, or retaliation does not, in and of itself, constitute proof of a knowingly false accusation.

1.3.3. INVESTIGATION AND RESOLUTION PROCESSES

Individuals who believe that they have experienced or have information about acts of discrimination or discriminatory harassment may seek resolution through one of the methods discussed below. The University’s response to the alleged discrimination will depend upon the severity and pervasiveness of the alleged conduct, which may be determined by the existence of prior incidents of harassment or discrimination. Depending upon the severity of the offense, however, a single violation of this Policy may be sufficient to support a violation.

The University will take seriously every allegation or report of discrimination or harassment received. Emory University’s response is intended to ensure that all parties involved receive fair treatment, and that allegations are handled in a prompt, thorough and equitable manner.

A. Direct Communication with the Alleged Harasser

If the aggrieved person feels comfortable speaking directly with the alleged offending person to address concerns and obtain an appropriate resolution, he or she is encouraged to do so. While this method of resolution may be successful in solving the immediate problem, unless information is provided through the reporting channels covered in this policy, Emory may remain unaware of the issue and be unable to take any additional steps that might be necessary to address broader concerns. Individuals who choose not to address the alleged harasser directly, or who have not obtained a satisfactory resolution following such a discussion, are encouraged to utilize one of the other methods outlined below for addressing their concerns.

B. Filing an internal complaint with the Emory University Department of Equity and Inclusion

If a member of the Emory University community believes that he or she has been the victim of discrimination or discriminatory harassment or has information about discrimination/harassment in the university community, he or she may promptly report, without fear of reprisal, the facts of the incident and the name(s) of the individual(s) involved to the Department of Equity and Inclusion, located in Suite 305 of the Administration Building, or call the Department of Equity and Inclusion at (404) 727-9867. This report initiates a complaint.

Alternatively, a member of the university community may report the situation to his or her immediate supervisor, department head, or Dean, who will immediately notify DEI of the report. This report initiates a complaint. Supervisors must immediately report any complaints they receive or incidents of alleged harassment or discrimination they witness to the Department of Equity and Inclusion. However, if the complaint relates to a member of the Department of Equity and Inclusion, the complaint should be directed to the Supervisor of the Director of the Department of Equity and Inclusion, who shall appoint an appropriate investigator.

The Department of Equity and Inclusion (or an alternate investigator, where appropriate) will promptly, fairly and thoroughly investigate all timely claims of harassment and discrimination, regardless of whether such complaints are reduced to writing. All complaints of discrimination and harassment will be treated in the strictest confidence possible under the particular circumstances.

All complaints of discrimination or harassment should be filed as soon after the alleged offending conduct as possible, but in no event more than 180 calendar days after the most recent conduct alleged to constitute discrimination or harassment.
Emory will not retaliate or take any adverse action against anyone for truthfully reporting conduct that he or she believes to be in violation of this Policy, or for participating in good faith in an investigation of alleged discrimination or harassment, or for participating in any proceeding or hearing relating to such complaints.

Upon receipt of a complaint, the Director of the Department of Equity and Inclusion (or an appropriate alternate investigator) will assign an investigator who will, within forty-five (45) work days, investigate the circumstances of the allegations. However, if additional time is needed to conduct a thorough investigation, DEI may, at its discretion, extend the time for completing the investigation as reasonably necessary. In this case, DEI will notify the complainant and the respondent of the extension.

The investigation will include interviews with the complaining party, the respondent, and any material witnesses identified, as well as a review of any documents or other evidence. The complaining party and the respondent will be kept apprised of the conduct of the investigation and will be given the opportunity to provide any additional relevant information to the investigator, including the names of additional witnesses to contact and/or additional documents to review before the investigation is closed. At any time before the conclusion of the investigation, the Dean or equivalent division head of the unit of the University to which the respondent is assigned may take interim emergency action (not involving reduction of compensation) until the conclusion of the investigation.

The final written determination will state only whether, based on DEI’s investigation, there was a violation of this Policy. The complainant and respondent will be promptly notified of the final determination. The Department of Equity and Inclusion shall have no independent authority to impose sanctions.

If DEI finds that there has been a violation of this policy and if the Dean or division head seeks advice as to the appropriate penalty, DEI may provide a recommendation as to the appropriate sanction. The Dean or division head will then be responsible for deciding upon and imposing disciplinary action as soon as reasonably possible, but within no more than one month after receiving the final determination and advice of DEI. The Dean or deciding official shall notify DEI of the penalty imposed, if any.

Sanctions imposed on those individuals who have been found to be in violation of the University’s Equal Opportunity Policy or its Discriminatory Harassment Policy shall be commensurate with the severity and/or frequency of the conduct, and shall be adequate and sufficient to prevent such conduct in the future. The sanctions may include, but are not limited to, an apology to the victim; a verbal or written reprimand; a requirement to attend remedial training; appropriate workplace restrictions; denial of a merit pay increase or other benefit; denial of promotion; or reassignment, suspension or separation from the University. Staff members who receive disciplinary penalties under this policy may consult Human Resources for information about the Grievance process, which may be used to challenge alleged violations, misinterpretations, or inequitable application of policies or procedures.

C. Issues Specific to Faculty

If at any time during the investigation, a bona fide question arises out of a conflict between the principles of academic freedom and the requirements of this Policy, the respondent or Director of the Department of Equity and Inclusion may request that the Provost or his/her designee appoint a Faculty Review Panel to review the evidence and to provide advice to DEI as to whether there was a violation of Policy. If the Provost agrees that the situation involves a bona fide conflict between the principles of academic freedom and the requirements of this Policy, the Provost shall appoint a Faculty Review Panel. The convening, investigation and recommendation of the Faculty Review Panel will be concurrent with the investigation of DEI. The Faculty Review Panel will consist of a group of 5 to 7 faculty members, 3 of whom are from the respondent’s school, who will be chosen by the Provost from among a pool of eligible faculty members who are elected by University faculty. Once selected by the Provost, the Faculty Review Panel may question the respondent, the complainant, and any other witness necessary to adequately address the issue. The Faculty Review Panel may also review the DEI investigatory file and any other documentary evidence needed. The procedures shall be kept as confidential as possible so as to respect the rights of all involved parties. At the conclusion of its review, the Faculty Review Panel shall provide a recommendation to DEI as to whether it believes that there was a violation of the Discriminatory Harassment Policy. DEI shall include the recommendation of the Faculty Review Panel in submitting the final report to the Dean. The Dean shall make the final decision as to what, if any, sanctions may be appropriate under the circumstances.

Following a determination of sanctions, faculty may avail themselves of avenues of appeal as listed in the Statement of Principles Governing Faculty Relationships. Specifically, a faculty member shall be entitled to a hearing of the Faculty Hearing Committee when the sanction imposed by the Dean for violation of this Policy is the suspension, transfer, or termination of his/her employment.
D. Filing an External Complaint

An individual who believes that he or she has been subjected to unlawful discrimination, harassment, or retaliation has the right to file a complaint with an appropriate local, state, or federal agency, such as the Department of Education Office of Civil Rights (OCR) http://www2.ed.gov/about/offices/list/ocr/index.html or the Equal Employment Opportunity Commission (EEOC) http://www.eeoc.gov/, within applicable time limits. In addition, any person who is dissatisfied with Emory’s internal procedures utilized for handling complaints, or who is dissatisfied with the result of the investigation or the sanctions imposed, may seek redress through the EEOC, to the extent allowed by law. The complainant should be aware that filing a complaint with the University’s Department of Equity and Inclusion or other University resource does not extend or postpone the deadline for filing with external agencies. In the event that a complaint is filed with an external agency or court, the University reserves the right to determine, at its discretion, whether the University’s internal complaint resolution procedure should be discontinued or continued separately.

1.3.4. COMPLAINTS AGAINST VENDORS, CONTRACTORS AND THIRD PARTIES

Emory’s commitment to providing members of its community with a working and learning environment that is free of discriminatory harassment includes freedom from inappropriate conduct by vendors, contractors, and third parties. If a member of the University community believes he or she has been subjected to harassing conduct by a vendor, contractor, or third party, he or she should report such conduct to the Department of Equity and Inclusion, to his or her immediate supervisor or Dean, or to a higher University official. Such complaints should be forwarded to the Department of Equity and Inclusion immediately. DEI will work with the complaining party to investigate the complaint, and the University will take prompt corrective action if inappropriate conduct is found to have occurred.

1.3.5 DEFINITIONS

See definitions section below.

1.3.6 ADDITIONAL UNIVERSITY RESOURCES

All Emergencies (any campus/location) 9-1-1
Emory Police Department 404.727.6111 or 404.727.8005
Emory Police Department TIPS line 404.727.8477/TIPS
The Respect Program, Office of Student Health (Sexual Assault/Relationship Violence Response) 404-727-1514

Faculty Staff Assistance Program
1762 Clifton Road NE, Suite 1100, Atlanta, GA 30322, 404.727.4328

Emory University Human Resources
Employee Relations Department
1599 Clifton Road, NE
Atlanta, GA 30322
404.727.7625

Campus Life Offices 404.727.4364
Student Health 404.727.7551
Emory Trust Line 1.888.550.8850 (for non-emergencies)
DeKalb Rape Crisis Center 404.377.1428

Definitions

Allegation - A statement by a complainant that an act of harassment or discrimination has occurred.
Coercion - Coercion is unreasonable pressure for sexual activity. Coercive behavior differs from seductive behavior based on the type of pressure someone uses to get consent from another. When a person makes clear that the person does not want sex, wants to stop, or that going past a certain point of sexual interaction is unwanted, continued pressure beyond that point can be coercive.

Complainant - The person making an allegation or complaint of discrimination.

Complaint - A formal notification, either orally or in writing, of the belief that discrimination or violation of this Policy has occurred.

Consent - Consent is clear, unambiguous, and voluntary agreement between participants to engage in specific sexual activity. Consent is active, not passive, and is given by clear actions or words. Consent may not be inferred from silence, passivity, or lack of active resistance alone. A current or previous dating or sexual relationship is not sufficient to constitute consent, and consent to one form of sexual activity does not imply consent to other forms of sexual activity. Being intoxicated does not diminish one’s responsibility to obtain consent. In some situations, an individual may be deemed incapable of consenting to sexual activity because of circumstances or the behavior of another, or due to their age. Examples of such situations include, but are not limited to, incompetence, impairment from alcohol and/or other drugs, fear, unconsciousness, intimidation, coercion, confinement, isolation, or mental or physical impairment.

Force - The use of physical violence and/or imposing on someone physically to gain sexual access. Force also includes threats, intimidation (implied threats) and coercion that overcomes resistance or produces consent. There is no requirement that a person has to resist the sexual advance or request, but resistance is a clear demonstration of non-consent. The presence of force is not demonstrated by the absence of resistance. Sexual activity that is forced is by definition non-consensual, but non-consensual sexual activity is not by definition forced.

Incapacitation - Incapacity can result from mental disability, sleep, involuntary physical restraint, or from intentional or unintentional taking of alcohol and or other drugs. An incapacitated person does not have the ability to give knowing consent. Sexual activity with a person who one should know to be – or based on the circumstances should reasonably have known to be – mentally or physically incapacitated, constitutes a violation of this policy. The perspective of a reasonable person will be the basis for determining whether one should have known about the impact of the use of alcohol and/or drugs on another’s ability to give consent.

Intimate Partner Violence (IPV) - Physical, sexual, or psychological harm by a current or former partner or spouse. This type of violence can occur among heterosexual or same-sex couples, whether cohabitating or not, and does not require sexual intimacy. IPV can vary in frequency and severity, can occur on a continuum, and can include acts of physical violence, sexual violence, threats of physical or sexual violence, or psychological or emotional violence. Psychological or emotional violence is a broad term that results in trauma to a victim caused by acts, threats of acts, or coercive tactics, and can include acts of humiliation, intimidation, isolation, stalking, and harassment.

Non-Consensual Sexual Contact - Any intentional sexual touching by a person upon a person, that is without consent and/or by force. This includes, but is not limited to, intentional contact with the breasts, buttocks, groin, or genitals, or touching another with any of these body parts, or making another touch oneself or themselves with or on any of these body parts; any intentional bodily contact in a sexual manner, though not involving contact with/of/by breasts, buttocks, groin, genitals, mouth or other orifice, with any object.

Non-Consensual Sexual Intercourse - Any sexual intercourse, however slight, by a person upon a person, that is without consent and/or by force. Intercourse includes, but is not limited to, vaginal penetration by a penis, object, tongue or finger; anal penetration by a penis, object, tongue, or finger; and oral copulation (mouth to genital contact or genital to mouth contact), no matter how slight the penetration or contact.

Respondent - Refers to the person against whom the allegation or complaint of discrimination or harassment is made. Under this policy, respondents include employees and students of Emory University, vendors, contractors, guests, patrons, and other third parties participating in any Emory-sponsored event or program, whether on or off campus, and to such persons in other situations in which a person is acting as a member of the Emory community.

Sexual Exploitation - Occurs when a person takes non-consensual or abusive sexual advantage of another for his/her own advantage or benefit, or to benefit or advantage anyone other than the one being exploited. Examples of sexual exploitation include, but are not limited to the following:

- invasion of sexual privacy;
- prostituting another person;
- non-consensual video or audio-taping of sexual activity;
• going beyond the boundaries of consent;
• observing unsuspecting individuals who are partly undressed, naked, or engaged in sexual acts;
• knowingly transmitting a sexually transmitted infection or HIV to another person;
• exposing one’s breasts, buttocks, groin, or genitals, in non-consensual circumstances; inducing another to expose their breasts, buttocks, groin, or genitals;
• sexually-based stalking and/or bullying may constitute a form of sexual exploitation, as well as a form of sexual harassment, as discussed above.

**Sexual Harassment** - Unwelcome conduct, based on sex or on gender stereotypes, which is so severe or pervasive that it unreasonably interferes with a person’s university employment, academic performance or participation in university programs or activities or creates a working, learning, program or activity environment that a reasonable person would find intimidating, hostile or offensive. Sexual harassment may include, for example, an attempt to coerce an unwilling person into a sexual relationship; to repeatedly subject a person to egregious, unwelcome sexual attention or advances; to punish a refusal to comply with a sexual based request; to condition a benefit on submitting to sexual advances; sexual violence or sexual assault; intimate partner violence; stalking, or gender-based bullying.

**Sexual Misconduct** - Sexual misconduct encompasses sexual harassment, non-consensual sexual contact (or attempts to commit same), non-consensual sexual intercourse (or attempts to commit same), and sexual exploitation. Sexual misconduct can occur between strangers or acquaintances, including people involved in an intimate or sexual relationship. Sexual misconduct can be committed by persons of any gender or sex, and it can occur between people of the same or different sex.

**Stalking** - Behavior where a person follows, places under surveillance, or contacts another person without the consent of the other person for the purpose of harassing and intimidating the other person. The term “contact” means to make or attempt to make any communication, including, but not limited to: communication in person, by telephone, by mail, by broadcast, by computer or computer network, or by any other electronic device. “Harassing and intimidating” refers to communication directed at a person that causes emotional distress because of a reasonable fear for the person’s safety or safety of others, and which serves no legitimate purpose. It does not require that an overt threat of death or bodily injury be made.

**Related Links**
- Current Version of This Policy: [http://policies.emory.edu/1.3](http://policies.emory.edu/1.3)
- Sexual Misconduct Policy ([http://policies.emory.edu/8.2](http://policies.emory.edu/8.2))
- Respect for Open Expression Policy ([http://policies.emory.edu/8.14](http://policies.emory.edu/8.14))

**Contact Information**

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<td>Department of Equity and Inclusion</td>
<td>404-727-9867</td>
<td><a href="mailto:maurice.middleton2@emory.edu">maurice.middleton2@emory.edu</a></td>
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<td><a href="mailto:maurice.middleton2@emory.edu">maurice.middleton2@emory.edu</a></td>
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**Revision History**
- Version Published on: May 27, 2020 *(Contact information update, update with office name change)*
- Version Published on: Aug 27, 2018 *(Contact information update, update details numbering)*
- Version Published on: Jun 02, 2015 *(Updated contact)*
- Version Published on: Aug 28, 2014 *(Update with office name change)*
- Version Published on: Jan 16, 2014 *(Rewrite of policy)*
- Version Published on: Jan 18, 2012 *(Contact information update)*
Policy 1.4
Faculty, Staff, and Student External Volunteer Guidelines

Responsible Official: University President
Administering Division/Department: Risk Management
Effective Date: September 15, 2010
Last Revision Date: May 13, 2011

Policy Sections:
I. Overview
II. Applicability
III. Policy Details
IV. Definitions
V. Related Links
VI. Contact Information
VII. Revision History

Overview

Emory University and Emory Healthcare’s Professional and General Liability Insurance (“Liability Insurance”) covers its faculty, staff, students and alumni when: faculty and staff are acting in the course of their employment; when students are participating in an activity for which they are receiving academic credit; and when an employed faculty or staff member, student or alumni (when participating in an activity sponsored by the Office of Alumni Affairs) is participating in an Approved Volunteer Activity.

Applicability

Policy Details

1.4.1 Approved Volunteer Activity
1.4.2 Responsibilities and Rights of Volunteers
1.4.3 Volunteer Approval

1.4.4 Items to consider when the Decision Maker evaluates a Volunteer Request

1.4.1 Approved Volunteer Activity

Emory Deans, Vice Presidents, Department Chairs and Section Heads, or those individuals to whom they report, or Emory Healthcare’s Executive Team (those with Chief in their title) ("Decision Maker") have the authority to approve a Volunteer activity as an Approved Volunteer Activity. Such Approved Volunteer Activities must meet the following conditions:

I. The Volunteer activity is consistent with and supports the mission of Emory and the school or department.
II. The Volunteer activity benefits a nonprofit entity or the general public.
III. The Volunteer activity must not contain an unacceptable level of risk to the Volunteers and to Emory University or Emory Healthcare from a reputational, safety and financial standpoint. Guidelines for evaluating risk are included below.

The request for, and approval of, a Volunteer activity as an Approved Volunteer Activity should be made to the appropriate Decision Maker in writing. Each department must maintain records of all Approved Volunteer Activities. Approved Volunteer Activities must be evaluated every two years by the relevant Decision Maker. Volunteer activities carried on by recognized student groups or the Office of Alumni Affairs that meet the above conditions and that are approved pursuant to the standard policies of the Department of Campus Life or the Office of Alumni Affairs are deemed to be Approved Volunteer Activities. Failure to comply with the requirements prior to engaging in the Volunteer activity may result in the withholding of insurance coverage for the activity.

An Approved Volunteer Activity must be consistent with and support the mission of Emory University or Emory Healthcare, as well as the mission of the individual school or department. It must be for the benefit of a nonprofit entity or the general public, and it must contain an acceptable level of risk to the Volunteers and to Emory University and Emory Healthcare from a reputational, safety and financial standpoint.

1.4.2 Responsibilities and Rights of Volunteers

An Emory University or Emory Healthcare Volunteer is an agent of Emory University or Emory Healthcare while performing assigned duties. Therefore, Emory University and Emory Healthcare Volunteers are expected to abide by Emory University and Emory Healthcare policies and external regulations that govern their actions, including but not limited to ethical behavior, confidentiality, financial responsibility and use of illegal substances.

Insurance coverage will not extend to faculty, staff, students and alumni who are acting outside the scope of their duties as a volunteer or who violate Emory University or Emory Healthcare policies in the course of volunteering. This includes but is not limited to activities that are unethical or illegal.

Emory University and Emory Healthcare Volunteers are not covered by the Fair Labor Standards Act and are not considered employees for any purpose. Therefore, they are not eligible for certain Emory benefits, including Worker’s Compensation, as a result of the volunteer association.

1.4.3 Volunteer Approval

The following segments of this document specify three types of services based on the varying degrees of risk associated with each: services not requiring approval by a Decision Maker; services requiring approval; and prohibited activities. The lists that follow are not exhaustive; they are intended to provide guidelines when considering approving an activity as an Approved Volunteer Activity.
Services Not Requiring Approval

The following activities are generally considered low-risk; and do not require a completed Volunteer Agreement:

- Advisory council participation
- Clerical work
- Gallery/program guide
- Phone-a-thon volunteer
- Public Speaker

Services Requiring Approval by a Decision Maker

The following types of activities do require written approval via a completed Volunteer Agreement, see link to form below:

- Professional services such as those performed by nursing students, medical students, residents, fellows, nurses, physicians, law students, lawyers, etc.
- Work with minors
- Work with animals
- Work involving travel outside the Atlanta area
- Laboratory work

Prohibited Activities

An Emory Volunteer is generally prohibited from performing the following activities:

- Operation of heavy equipment
- Work with hazardous materials
- Any activity considered inappropriate for an employee
- Entering into any contract on behalf of Emory
- Work with a government agency, state or local agency or for-profit entity as their insurance should extend to those volunteering for the benefit of their organization

1.4.4 Items to consider when the Decision Maker evaluates a Volunteer Request

- Does the volunteer activity extend the mission of Emory University, Emory Healthcare, the Operating Unit and/or your Department?
- What are the possible risks associated with the volunteer activity?
- Is the volunteer providing medical services?
- Does the outside organization interact with minors?
- Does the organization have a good reputation and is it well-run?
- What precautions does the organization take to prevent injury and loss of property?
- Does the volunteer activity involve the serving of alcohol?
- How many Emory University or Emory Healthcare volunteers will be involved in the activity?
- If there is a loss, could it be sizable? Do you believe Emory University or Emory Healthcare should assume this expense?
- Is a release or waiver necessary? If so, consult the Office of General Counsel.

Definitions
**Emory**: “Emory” includes Emory University, Emory Healthcare, Inc., The Emory Clinic, Inc., Wesley Woods Center of Emory University, Inc., Emory-Children’s Center, Inc., Emory Medical Care Foundation, Inc., Emory Specialty Associates, LLC, and any other entity controlled directly or indirectly by Emory University or Emory Healthcare, Inc.

**Volunteer**: A “Volunteer” is an Emory University or Emory Healthcare employed faculty or staff member or student who is donating his or her time, free of charge, to a nonprofit organization or the general public. Volunteers are not typically supervised or directed by an Emory University or Emory Healthcare employee, and the Volunteer activity is not a requirement of a faculty or staff member’s normal duties or a student’s class work. A Volunteer may also include Emory alumni (when participating in a Volunteer activity sponsored by the Office of Alumni Affairs), if appropriate.

**Related Links**

- Current Version of This Policy: [http://policies.emory.edu/1.4](http://policies.emory.edu/1.4)

**Contact Information**

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**Revision History**

- Version Published on: Aug 27, 2018
- Version Published on: May 13, 2011
Policy 4.119
Child Abuse Reporting

Overview

Connecting the campus with the community is a defining feature of Emory's character. Emory University is committed to maintaining a supportive and safe educational environment and to enhancing the well-being of all members of its community. Within this commitment, Emory places importance on creating a secure environment for children. To that end, Emory has adopted the following child-protection policy and procedures.

In order to ensure the safety and well-being of children, this policy must be reviewed and followed by:

- Emory faculty and staff, including student employees, within their Capacity of Employment or Duties;
- Emory volunteers, including students, whose Capacity of Employment or Duties involve interaction with children; and
- Third-Parties within their Capacity of Employment or Duties involving Emory.

The purpose of this policy is to provide guidance to Emory University faculty, staff, volunteers, students and Third-Parties in the fulfillment of their legal responsibilities in reporting suspected Child Abuse.

Applicability
Unless there is an exception under Georgia law, Emory University requires all Emory University faculty, staff, volunteers, students and Third-Parties to report suspected Child Abuse of which they are made aware in their Capacity of Employment or Duties. Failure to do so may be a criminal offense under Georgia law. See O.C.G.A. § 19-7-5.

The safety and welfare of a child is paramount. Thus, any uncertainty about whether reporting is required should always be resolved in favor of making a report.

Policy Details

How to report suspected Child Abuse:

- Emory University faculty, staff, volunteers, students and Third-Parties should immediately report suspected Child Abuse to the Emory Police Department by submitting the Suspected Child Abuse Reporting Form (see Related Links) or by making an oral report.
- Physicians or Mental Health Professionals who suspect Child Abuse should immediately report such suspected Child Abuse to the Division of Family and Children Services office in the county where the child lives or where the abuse was witnessed.
- If a child is in imminent danger, Emory University faculty, staff, volunteers, students and Third-Parties should call 911 if not on Emory’s campus or the Emory Police Department at 404-727-6111 if on Emory’s campus to obtain immediate protection for the child.
- The Emory Police Department shall report suspected Child Abuse to the Division of Family and Children Services office in the county where the child lives or where the abuse was witnessed within 24 hours of receiving the report.
- It is Emory’s policy that no member of the faculty or staff or student making a good-faith report of suspected abuse or neglect will be retaliated against in the terms and conditions of employment or educational program.

Compliance:

Any Emory University faculty, staff or students who fail to report a case of suspected Child Abuse are subject to disciplinary action, which could include termination (if a faculty or staff member) or expulsion (if a student). If a Third-Party or volunteer fails to report a case of suspected Child Abuse, it risks termination of its contract or relationship and, if a Third-Party, future client status with Emory University.

Definitions

- “Capacity of Employment or Duties” means:
  - A faculty or staff member, volunteer or Third-Party who is acting within his/her employment or duties, on or off campus.
- “Child” means any person under eighteen years of age.
- “Child Abuse” means:
  - Physical injury or death inflicted upon a child by a parent or caretaker by other than accidental means; provided, however, that physical forms of discipline may be used as long as there is no physical injury to the child;
  - Neglect or exploitation of a child by a parent or caretaker thereof;
  - Sexual abuse of a child; or
  - Sexual exploitation of a child
  - For purposes of this policy, sexual abuse does not include consensual sex acts involving persons of the opposite sex when the sex acts are between minors or between a minor and an adult who is not more than five years older than the minor.
“Third-Parties” means:
  - Third-party entities, including vendors, that contract to use Emory University facilities.

Related Links

- Current Version of This Policy: http://policies.emory.edu/4.119
- Policy on Theft and Other Criminal Incidents (http://policies.emory.edu/4.68)
- Suspected Child Abuse Reporting Form (http://www.hr.emory.edu/eu/docs/child-abuse-report-form.pdf)

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Revision History

- Version Published on: Jun 26, 2013
- Version Published on: May 09, 2013
- Version Published on: May 09, 2013 (Original Publication)
Policy 8.12
University Recognized Student Organizations

Responsible Official: VP and Dean for Campus Life
Administering Division/Department: Campus Life
Effective Date: July 11, 2012
Last Revision Date: September 21, 2018

Policy Sections:
I. Overview
II. Applicability
III. Policy Details
IV. Definitions
V. Related Links
VI. Contact Information
VII. Revision History

Overview

The purpose of this policy is to outline the authority of various entities at Emory University to recognize Student Organizations. Further, the policy outlines the list of benefits that Emory University grants official Student Organizations. Finally, the policy provides for the registration of all Student Organizations on campus so that a comprehensive list of all groups can be maintained.

Applicability

n/a

Policy Details

8.12.1 Rights
8.12.2 Official Registration List
8.12.3 Authorization

8.12.4 Responsibilities of Student Organizations

8.12.5 Benefits to Registration

8.12.5.1 Available to all Student Organizations at Emory University

8.12.5.2 Available to Student Organizations who receive recognition from the Emory University Student Government Association.

8.12.6 Student Organization Websites

8.12.6.1 Student Organization Website Domain Names

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8.12.1 Rights

Emory University students may organize Student Organizations. In accordance with the Emory University Non-Discrimination Policy, no student shall be denied membership in any Student Organization.

Notwithstanding the foregoing, certain limitations for participation based on major, degree, grade point average, or school of enrollment may be imposed if approved in advance by the Recognizing Body. Student Organizations that wish to make exceptions to enrollment based on religious or other purposes must petition the appropriate Recognizing Body.

8.12.2 Official Registration List

Campus Life is responsible for maintaining a comprehensive and up to date list of all registered Student Organizations through the Office of Student Leadership & Service staff. All Student Organizations at Emory University who wish to have access to any of the rights, privileges, and benefits outlined in this policy must follow the official registration procedures as outlined by the Division of Campus Life. Such registration list shall be deemed the official list of Student Organizations recognized at Emory University at any time.

8.12.3 Authorization

In order for an organization to be recognized as an official Student Organization, the Student Organization must have the approval of a Recognizing Body and be listed on the official list of Student Organizations maintained by the Campus Life through Student Involvement, Leadership, and Transitions. Each Recognizing Body is responsible for managing their own processes to recognize Student Organizations. The Vice-President and Dean for Campus Life, or his/her designee, are responsible for holding Student Organizations and Recognizing Bodies accountable to all relevant University policies.

In addition, all Student Organizations must have an official University advisor. For groups recognized by University departments, their advisor is the director/chair of that department or his/her designee. For all groups chartered by the Student Government Association and/or Graduate Student Government Association, advisors are required to be a full-time faculty or staff member. Campus Life grants authority to Student Involvement, Leadership, and Transition to set additional requirements for SGA/GSGA Advisors.

The Student Government Association and/or Graduate Student Government Association, is also responsible for collecting and distributing the Student Activity Fee. Final decision-making authority regarding the Student Activity Fee resides with the Student Government Association and/or Graduate Student Government Association, in consultation with the Vice President and Dean for Campus Life or his/her designee, who will ensure accountability with relevant University policies and procedures.

8.12.4 Responsibilities of Student Organizations
All Student Organizations are required to abide by and follow all Emory University policies, rules, and regulations. Any Student Organization that does not follow such policies, rules or regulations will be referred to the Office of Student Conduct while graduate and professional school student organizations will be subject to disciplinary processes of their respective academic units.

8.12.5 Benefits to Registration

The following benefits are available, if applicable, to Student Organizations. No student groups who have not followed this policy to become officially recognized Student Organizations have access to these benefits.

8.12.5.1 Available to all Student Organizations at Emory University

- Use of Emory University name to identify institutional affiliation (per guidelines of Emory Brand Management) which can include a logo, access to letterhead, and other such benefits.
- Ability to reserve space on campus/use space on campus (some charges may apply) and use University meeting rooms and facilitates.
- Free organizational advising, consulting and training by Student Involvement, Leadership, and Transitions Staff.
- Participation in Student Activity Fairs as hosted by Campus Life or the Student Involvement, Leadership, and Transitions.
- Ability to be financially supported by other University Departments with co-sponsorship funding opportunities.
- Access to the Student Organization Management database "OrgSync."
- Access to a website supported and hosted by Emory University (subject to Emory University Policy 8.12.6)
- Ability to apply for Grant Opportunities in Campus Life such as Late Night @ Emory, the Student Organization Food Grant managed by SGA and/or GSGA and Emory Dining, etc…
- Other benefits as deemed appropriate by various offices, departments, and divisions of Emory University.

8.12.5.2 Available to Student Organizations who receive recognition from the Emory University Student Government Association and/or Graduate Student Government Association.

- Ability to apply for Student Activity Fee money
- Access to apply for Student Organization Locker storage

8.12.6 Student Organization Websites

Registered student organizations are entitled to a website supported and hosted on Emory OrgSync/Engage. All student organization websites must meet the following criteria:

- Hosted on Emory OrgSync/Engage
- Compliant with applicable local, state, and federal laws, including but not limited to those concerning copyright and trademark protections, harassment, and sexual misconduct
- Compliant with Emory University Branding Guidelines
- Compliant with Campus Life Technology and Communications Guidelines
- Administered by students bound by the Student Code of Conduct and other applicable Policies and Codes

Student organizations in violation of this policy forfeit their entitlement to a website and may have their website deactivated and archived until compliance is reestablished.

Websites are protected under Policy 8.14, Respect for Open Expression Policy.

8.12.6.1 Student Organization Website Domain Names

Registered student organizations are required to maintain their websites on Emory OrgSync/Engage. Each organization will have a unique website URL within OrgSync/Engage.

Domain names purchased through third parties will not be supported.
Unregistered student organizations will not be provided OrgSync access nor permitted to use the Emory name or logo for promotional purposes or establishing domains/URLs.

Definitions

Department or Division is defined as a department or division of Emory University that has a Director, Department Chair, or similar title.

Recognizing Body is defined as the Department or Division, Emory University Student Government Association and/or Graduate Student Government Association or other Emory University authorized governing or recognizing body that may authorize a Student Organization.

Student Organizations are groups of students that meet the Student Government Association and/or Graduate Student Organization requirements for recognition. This term includes, but is not limited to, student organizations recognized by the Emory Campus Life through the Student Involvement, Leadership, and Transitions, Greek letter organizations recognized by the Office of Sorority and Fraternity Life, athletic teams organized by Athletics and Recreation (including varsity and intramural sports teams), and organizations recognized and/or advised by a Recognizing Body or other administrative units of the University.

Related Links

- Current Version of This Policy: http://policies.emory.edu/8.12
- Community Platform for Registration (http://www.studentorgs.emory.edu)

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<td>Lisa Loveall</td>
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<td><a href="mailto:Lisa.loveall@emory.edu">Lisa.loveall@emory.edu</a></td>
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Revision History

- Version Published on: Sep 21, 2018 (Updated Details, Definitions, Contact)
- Version Published on: Aug 14, 2014 (added 8.12.6 & 8.12.6.1, changed name of policy, changed definition)
- Version Published on: Nov 27, 2012 (changed wording in 8.12.3)
- Version Published on: Jul 11, 2012 (Original Publication)
Policy 8.13
Missing Student Notification

Responsible Official: VP and Dean for Campus Life
Administering Division/Department: Campus Life
Effective Date: October 01, 2010
Last Revision Date: September 21, 2018

Policy Sections:
I. Overview
II. Applicability
III. Policy Details
IV. Definitions
V. Related Links
VI. Contact Information
VII. Revision History

Overview

The purpose of the Emory University Missing Student Policy is to establish procedures for the University’s response to a report of a missing student as required under the Higher Education Opportunity Act (HEOA) of 2008.

Applicability

The HEOA of 2008 requires institutions of higher education to establish:

- A missing student notification policy for students who reside in on-campus housing
- A process for students to register a confidential contact for use under this policy
- Procedures to implement this policy for students who reside in on-campus housing

Emory University applies this missing student notification process to all students. This policy applies to all students found to be missing or absent from the University for a period of 24 hours without any known reason or when the absence may be contrary to usual patterns of behavior. A student will be considered missing immediately, if his/her absence has occurred under circumstances that are suspicious or cause concerns for her/his safety. Such circumstances include, but are not limited to: reports or suspicions of foul play, suicidal thoughts, drug use, any life threatening situations, or where a student may be known to be with individual(s) who may endanger the welfare of the student.
Policy Details

8.13.1 Process Overview

8.13.2 Procedures for Designation of Missing Persons Contact Information

8.13.3 Official Notification Procedures for Missing Persons

8.13.4 Campus Communications About Missing Students

8.13.1 Process Overview

If any member of the University community has reason to believe that a student may be missing, he or she should immediately notify the Emory Police Department at 404-727-6111 (Main Campus) or 770-784-8377 (Oxford Campus).

A campus officer is available to respond to a call 24 hours a day and seven days a week.

If the student in question resides off-campus, or resides on-campus but is reported missing from an off-campus location, the Emory Police Department will assist the reporting party in notifying the appropriate law enforcement agency with jurisdiction at the off-campus residence or last known location.

8.13.2 Procedures for Designation of Missing Persons Contact Information

Each student will be given the opportunity during each semester registration process to designate one or more individuals to be contacted in the event the student is determined missing. This designation is distinct from the identification of a general emergency contact, but students may identify the same person for both purposes. Students’ missing persons contact information will be kept confidential and accessible only to authorized campus officials, and it will not be disclosed, except to law enforcement personnel in furtherance of a missing person investigation.

8.13.3 Official Notification Procedures for Missing Persons

1. Any member of the university community who has information that a student may be a missing person must notify the Emory Police Department as soon as possible.

2. If the initial report that a student is missing is made to a department other than the Emory Policy Department, the staff or faculty member receiving the report must ensure that the Emory Police Department is contacted immediately and that contact information for the original reporting party is shared with the Emory Police Department.

3. The Emory Police Department, Campus Life, and other appropriate staff members will attempt to locate the student. If the student resides off-campus or was reported missing from an off-campus location, the University will cooperate with the appropriate local law enforcement agency in its effort locate the student. The Emory Police Department shall act as the primary investigating agency in a missing person case only when it has been determined that the missing person was last seen in EPD’s jurisdiction.

4. Appropriate university staff will be notified to aid in the search for the student.

5. If the student is not located within 24 hours of the report or it is apparent immediately that the student is a missing person (e.g., witnessed abduction), the Emory Police Department shall notify the local law enforcement agency that has jurisdiction in the area that the student is missing (unless it was the local law enforcement that determined the student to be missing). The notification will be made within 24 hours of the student being determined missing.

6. When a student is determined to be a missing person, the VP and Dean for Campus Life and/or his or her designee will notify the individual(s) the student designated to be contacted for missing persons purposes that the student has been determined missing. If the student is under the age of 18 and not an emancipated minor, a custodial parent or guardian will be contacted in addition to the designated missing persons contact(s) if they are not the same person(s). The required notifications will be made within 24 hours of the student being determined missing.

*Successful contact is contingent upon the correct contact information being made available by the student.
7. Senior University Administration will be notified in accordance with this policy.

8.13.4 Campus Communications About Missing Students

In all cases of a missing student, where the student is declared missing by the Emory Police Department or by the appropriate local law enforcement agency after an initial investigation, the Emory University Office of University Media Relations will provide information to the media that is designed to obtain public assistance in the search for any missing student. Any media requests to the college will be directed to the Office of University Media Relations. Prior to providing the Emory University community with any information about a missing student, the Office of University Media Relations shall consult with the Emory Police Department and with local law enforcement authorities to ensure that communications do not hinder the investigation.

Definitions

n/a

Related Links

- Current Version of This Policy: http://policies.emory.edu/8.13

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Revision History

- Version Published on: Sep 21, 2018 *(Quick updates to Details, Updated Contact)*
- Version Published on: Aug 29, 2018
- Version Published on: Sep 30, 2016 *(recent changes to OPUS designed to capture specific missing persons co)*
- Version Published on: Oct 05, 2015 *(student designation of emergency contact)*
- Version Published on: Aug 02, 2012 *(Original Publication)*
Policy 8.14
Respect for Open Expression Policy

Responsible Official: VP and Dean for Campus Life
Administering Division/Department: Campus Life
Effective Date: October 29, 2013
Last Revision Date: September 21, 2018

Policy Sections:
I. Overview
II. Applicability
III. Policy Details
IV. Definitions
V. Related Links
VI. Contact Information
VII. Revision History

Overview
n/a

Applicability
n/a

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8.14.1 Principles
8.14.2 Applicability, Scope, and Definitions
8.14.3 Committee for Open Expression
   8.14.3.1 Jurisdiction
8.14.3.2 Committee Responsibilities
8.14.3.3 Composition and Term
8.14.3.4 Committee Procedures

8.14.4 Filing Complaints to the Committee for Open Expression
8.14.4.1 Hearing Panel
8.14.4.2 Investigations
8.14.4.3 Findings
8.14.4.4 Authority

8.14.5 Community Responsibilities
8.14.5.1 Awareness of Community Responsibilities
8.14.5.2 Freedom of Speech and Freedom of Expression: Joint Standards
8.14.5.3 Standards for Scheduling Meetings, Protests, and Events for both Indoor and Outdoor Locations
8.14.5.4 Violation of Community Responsibilities
8.14.5.5 Violation of Other Policies that relate to Open Expression
8.14.5.6 Supporting Expression, Protest, and Dissent through University Space
8.14.5.7 Protests in Spaces that have not been reserved
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8.14.1 Principles

Emory University ("University") is committed to an environment where the open expression of ideas and open, vigorous debate and speech are valued, promoted, and encouraged. As a community of scholars, we affirm these freedoms of thought, inquiry, speech, and assembly. Firmly grounded in the principles outlined by the 2011 Taskforce on Dissent, Protest & Community Report (https://www.emory.edu/CAMPUS_LIFE/documents/archive/2011_DPC_report.pdf), this Policy reaffirms Emory's unwavering commitment to a community that inspires and supports courageous inquiry through open expression, dissent, and protest, while acknowledging the challenges of the creative tensions associated with courageous inquiry in an ever changing community.

Recognizing that the educational process of our institution necessarily includes various and diverse forms of open expression, the University affirms the rights of members of the Community to assemble and demonstrate peaceably within the limits of this Policy. Simultaneously, the University affirms the right of others to pursue their normal activities and to be protected from injury or property damage, as defined by law.
Emory University also affirms values of diversity, inclusion, and community. The University Community is diverse—in race, ethnicity, gender, sexual orientation, background, age, religion, abilities, life experiences, political ideologies, ideas of thought, and in many other ways. The actions of each member have an impact upon the culture of inclusion and respect for which we strive as a community. The University is fundamentally committed to open inquiry, open expression, and the vigorous discussion and debate upon which the advancement of its multifaceted mission depends. Civility and mutual respect are important values in our community; while they do not limit the rights protected by this Policy, we ask all members of the Community to consider these values carefully when exercising their fundamental right to open expression.

8.14.2 Applicability, Scope, and Definitions

Emory University Community ("Community"): the following individuals are considered members of the Community for purposes of this Policy:

1. students, defined as any person pursuing studies at the University, including (1) a person not currently enrolled who was enrolled in the preceding fall, spring, or summer; (2) a person not currently enrolled who was previously enrolled in Emory University and may reasonably seek re-enrollment at a future date; (3) a person who has applied to and been accepted for admission to Emory University and has accepted an offer of admission or may reasonably be expected to enroll; and (4) a person enrolled in the Emory University Pre-College Program on a credit or non-credit basis;
2. persons who are employed by Emory University or Emory Healthcare as faculty or staff, and persons who are employed by contracted entities to provide a service to Emory University and whose work location is on any of Emory's multiple campus locations;
3. trustees of the University and members of Boards of various entities of the University;
4. alumni of the University when returning to campus or to official University events;
5. invited guests of the University such as guest speakers, panelists, artists, performers, participants, etc. for events, both on and off campus; and
6. patrons, guests, and those receiving the services of Emory Healthcare or other businesses, such as Continuing Education, of Emory University.

Meetings and Events ("Meetings" or "Events"): gatherings of members of the Community in a location specifically reserved for that purpose. Events are generally considered to be public. Meetings are generally considered to be private.

Dissent ("Dissent"): the fundamental right of expression of counterpoint(s) through symbols, speech, expression, satire, flyers or leaflets, action, and other comparable forms of expression.

Protest ("Protest"): dissent with the goal of change, which may attract attention. Protests may include an actual gathering of people to bring attention to the cause, such as picketing, rallies, sit-ins, vigils, or similar forms of expression. Protest may also include more individually-based forms of Dissent such as posting flyers, wearing t-shirts or arm bands, and other similar actions.

Internal vs. External Dissent: The University acknowledges that some protest may be externally focused, meaning the topic of protest is directed at some broader issue beyond the University. Examples may include protesting local legislation or global social injustices, among others. The University also acknowledges that some protest may be internally focused, directed at the leadership of the institution, at decisions made by faculty or administrators, or toward other members of the Community with whom one disagrees. Both forms of protest are valued, protected, and affirmed.

Nothing in this Policy prevents Emory Healthcare from managing its property with due regard for the unique needs of healthcare delivery. The Vice President and Dean of Campus Life (DCL) is responsible for enforcing this policy. The DCL and their designee may send Open Expression Observers on their behalf during Events to enforce this Policy.

Conflicting Policies: This Policy is paramount to other policies of the University that may conflict, except those grounded expressly in local, state, or national law.

8.14.3 Committee for Open Expression

The University Senate Standing Committee for Open Expression (hereinafter Committee) is a working group of community members—faculty, staff, and students—who seek to promote and protect the rights and responsibilities of
community members related to issues and controversies involving speech, debate, open expression, protest, and other related matters.

8.14.3.1 Jurisdiction

The Committee has responsibility for all issues and controversies involving various forms of expression, including but not limited to speech, debate, Protest, Dissent, and other related matters in accordance with this Policy.

8.14.3.2 Committee Responsibilities

The Committee shall provide advice and counsel to Community members interpreting the Policy and the rights and responsibilities of individuals and groups under it. The Committee shall have the following powers and duties:

• to investigate alleged infringements of the right of members of the Community concerning speech, debate, open expression, Protest, Dissent, and other related matters, between all members of the Community;
• to provide education and training to the Community regarding open expression;
• to provide resources and referral to appropriate campus colleagues as necessary;
• to regularly review this Policy and its applicability, and to recommend changes to the University Senate as necessary;
• to report annually on the status of the Committee’s work for presentation to the University Senate, and to make such reports available to the Community; and
• to take other actions as necessary to effectuate this Policy and the principles contained herein.

8.14.3.3 Composition and Term

The Committee shall consist of 13 members:

Four Faculty Members should be appointed to staggered two-year terms. At least one faculty should be from one of the Woodruff Health Sciences schools (Medicine, Public Health, Nursing, or Yerkes).

Three Staff Members should be appointed to staggered two-year terms so that each year at least one new member is named or reappointed to the Committee.

Five student members should be appointed to one-year terms. At least two students must be undergraduates and at least two students must be graduate or professional students. All of the graduate or professional students must represent different academic divisions of the institution.

One member of Student Government Association’s Constitutional Council, as appointed by the President and confirmed by the SGA Legislature, shall serve a one-year term as an ex officio member of the committee. This ex officio member is not a voting member of the committee and should not count for quorum purposes.

One representative from Campus Life should also be appointed to a two year term.

The appropriate nominating body (University Senate) should make all reasonable efforts to nominate new representatives to the Committee, but nothing in this Policy prohibits members from serving multiple and/or consecutive terms if deemed appropriate by the nominating body.

The Committee Chair will be nominated by the Committee for Open Expression for appointment by the University Senate Executive Committee.

Under the advice and consent of this Committee, Oxford College of Emory University may assemble its own Committee, which must include students, to support, promote, and protect Open Expression at Oxford.

8.14.3.4 Committee Procedures

The following procedures are designed to ensure continuity and effectiveness of the Committee:

a. Except as provided with respect to the conflict resolution and mediation function outlined in section 8.14.4, 7 members constitute a quorum. In order for a quorum to exist, at least one faculty, one staff, and one student representative must be present.
b. The Committee may authorize the creation of subcommittees to act for the Committee in any matter except for proposing changes to the Policy and submitting yearly reports. The University Senate must approve the membership of any subcommittees if 1) members of said subcommittees are not current approved Senate members and 2) members of the subcommittees need to cast any actionable votes.

c. The Committee or any subcommittee may invite other Community members to provide consultative services to the Committee for their areas of expertise. The opinions of invited members are non-binding and only serve to help inform the Committee in its decision-making.

d. The Committee shall maintain a spirit of openness and transparency. Under certain conditions, the Committee shall respect the privacy of individuals over transparency to the broader community and shall maintain the right to declare its proceedings confidential.

i. If a person appearing before the Committee requests confidentiality, the Committee will consider that request and notify the individual of the decision before the scheduled testimony.

ii. Committee minutes may be declared confidential by the overall Committee or by the Chair of the Committee or subcommittee subject to review by the overall Committee.

iii. All minutes and materials deemed confidential shall be clearly marked and shall be accompanied by a warning against unauthorized disclosure.

8.14.4 Filing Complaints to the Committee for Open Expression

The University seeks to actively promote open expression within our Community. As such, this Policy enumerates an investigation procedure for those members who believe their rights under this Policy have been violated. When an Event, Meeting, or Protest is occurring, the enforcement of this policy shall follow the guidelines outlined in 8.14.7; however, should a member of the Community believe their open expression has been violated, the Committee shall work to resolve those concerns as outlined in this section. An initial complaint may be submitted to the Committee for review through the Committee’s email, through the Campus Life, or through other channels as the Committee deems appropriate.

8.14.4.1 Hearing Panel

The Committee will appoint a three member panel from the membership of the Committee to investigate the incident. The Committee shall consider any potential conflicts of interest when appointing this panel.

8.14.4.2 Investigations

Investigations as conducted by this Panel may include:

• collection of written statements from involved parties;
• informal interviews of involved parties;
• informal interviews of topical experts for additional perspective; and
• other information as needed.

8.14.4.3 Findings

When a complaint is submitted and to the greatest extent possible, the Committee will seek to resolve the conflict and mediate the situation between the parties.

This Committee, however, has no disciplinary authority because of its role protecting and promoting Open Expression. Actions that violate other Community expectations such as the Undergraduate Code of Conduct, the conduct expectations of the graduate and professional schools, or any other appropriate University policy, may be referred to the appropriate body.

8.14.4.4 Authority

This Committee, when it finds violations of this Open Expression policy by any member of the Community including those acting in the name of the University, may submit recommendations to the University Senate, the President, the DCL, or any other appropriate person or governing body for review.
8.14.5 Community Responsibilities

Emory University respects the Constitutional rights of free speech and assembly. As such, the only responsibilities outlined in this section that limit the free exercise thereof have been done in a way to ensure maximum open expression and narrowly tailoring exceptions to specific safety or community concerns.

8.14.5.1 Awareness of Community Responsibilities

Each member of the Community is expected to know and follow this Policy. A person who violates these standards or other policies of the University in the course of open expression may be held accountable for that conduct. Any member of the Community who is in doubt as to the propriety of planned conduct may seek guidance from the Committee for Open Expression in advance of the Event.

8.14.5.2 Freedom of Speech and Freedom of Expression: Joint Standards

Expression that communicates a viewpoint, regardless of form, is protected as long as it does not violate the guidelines of this Policy. This includes protest, dissent, and any other communicative activity, whether or not it occurs in the context of a Meeting or Event.

The right to Dissent is the complement of the right to speak, but these rights may conflict at certain times. The University promotes simultaneous, but not disruptive, Dissent. As such, during a scheduled Event or Meeting, a speaker is entitled to communicate a message to an audience during an allotted time, and the audience is entitled to hear the message and see the speaker during that time. A dissenter must not substantially interfere with the speaker’s ability to communicate or the audience’s ability to hear, see, or question the speaker. Protests outside of a Meeting, Event, or another Protest shall not impede access to the Meeting, Event, or Protest nor substantially interfere with the communication inside.

8.14.5.3 Standards for Scheduling Meetings, Protests, and Events for both Indoor and Outdoor Locations

It is the policy of the University to protect voluntary assembly and to make its facilities available for assembly. The University shall establish standards for scheduling Events and Meetings. These standards should be published or provided to any member of the Community. Such standards must be reasonable and not require excessive limitations when not warranted, and it is the responsibility of administrators of space on campus to ensure policies and procedures promote open expression. Reservations shall not be denied to any member of the Community based on content of the Meeting, Event, or Dissent unless such content would otherwise violate the responsibilities set forth in 8.14.5.5 of this Policy.

The Committee for Open Expression should be consulted whenever possible before denying a request for use of a room, facility, or space by an organization recognized by the University for a reason other than prior assignment of the room, facility, or space. The University shall not deny recognition to an organization because of disagreement with its mission or the viewpoints it represents. However, the University may properly take into account, when allocating scarce resources to groups, whether one group’s mission is duplicative of another’s.

8.14.5.4 Violation of Community Responsibilities

The Committee for Open Expression exists to help support the right to Expression, Dissent, and Protest. An affirmative commitment to helping rectify violations through support and alternatives shall be the appropriate course of action. Members of the Community serving as Open Expression Observers shall focus on helping the Expression, Dissent, or Protest continue while making modifications to ensure no violations continue to occur. Further, the Committee for Open Expression should be consulted whenever possible before making a determination that members of the Community are indeed violating the principles of this Policy.

Community members, in the course of their actions, violate this Policy if they:

a. Unreasonably infringe on the rights of other Community members to engage in open expression, Protest, and Dissent.
b. Cause substantial disruption to a Meeting or Event that impedes the rights of attendees of that Meeting or Event, including excessive noise, continually interrupting a speaker, or preventing an audience from seeing/engaging with a speaker during a Meeting or Event.

c. Create undue hardship that substantially impedes a Community member’s right to open expression, such as unreasonable space reservation or usage policies.

8.14.5.5 Violation of Other Policies that relate to Open Expression

Community members, in the course of their actions, violate other policies of the University (such as the Undergraduate Student Code of Conduct, Codes of Conduct in the Graduate and Professional schools, and others that can be found at www.policies.emory.edu) and are no longer operating within the spirit of Open Expression at Emory if:

a. They violate any federal, state, local or other applicable law (e.g., gaining unauthorized access to restricted areas, refusing to leave restricted areas if instructed, defacing of public and/or private property, etc.).

b. They interfere unreasonably with the activities or rights of other persons. Factors that may be considered in determining whether conduct is reasonable include, but are not limited to, the time of day, size of audience, and noise level of a Meeting, Event, or Protest.

c. They interfere unreasonably with the general operations of the University.

d. They hold Meetings, Events, or Protests under circumstances where the health or safety of persons is endangered.

e. They knowingly interfere with unimpeded movement in a University location. Examples may include preventing access to a building, or blocking any entrances or exits in a way that causes safety concerns.

f. They cause injury to persons or property or threaten to cause such injury.

g. They use or threaten violence or force, or encourage others to use or threaten violence or force.

h. They cause harassment, as defined by state law.

i. They violate reasonable noise levels, such as but not limited to DeKalb County noise ordinances.

8.14.5.6 Supporting Expression, Protest, and Dissent through University Space

There are many locations on campus especially conducive to Expression, Protest, and Dissent. A list of suggested spaces can be obtained in the University Center’s Meeting Services, who can assist with reservations of most space on campus or assist in connecting with owners of other spaces.

Moreover, the foundations of this Policy are grounded in the principles of the entire campus being open and available to members to build community through Expression, Protest, and Dissent. As such, all spaces, both indoors and outdoors, are available to support both planned and impromptu Expression, Protest, and Dissent except as provided below. For planned events, reservations can be made and no reservation shall be denied because of the content of expression. For impromptu Expression, Protest, and Dissent, please see 8.14.5.7.

The following locations are not available for these types of Events, Meetings, or Protests unless a special exception is granted; however, if the focus of the Expression, Protest, or Dissent includes one of these areas, there is an affirmative support to ensure protests occur in places like the outdoor spaces in front of the buildings or common gathering places close to these locations.

a. Private offices, research laboratories or associated facilities, and computer centers.

b. Specific areas of offices, museums, libraries, and other facilities that contain valuable or sensitive materials, collections, equipment, and records protected by law, or by existing University policy such as educational records, student-related or personnel-related records, or financial records.

c. Classrooms, seminar rooms, auditoriums, meeting rooms, or outdoor spaces in which classes, private Events, or Meetings are being held or are scheduled to be held during the time of the Protest.
d. Outdoor and indoor locations when the free flow of traffic, both vehicular and pedestrian, is unreasonably impeded; when entrances or exits to private offices, classrooms, and meeting spaces are blocked; or when undue health and safety risks are created.

e. Hospitals, clinics, and surrounding green space or grounds (including, but not limited to, sidewalks, access roads, parking areas, etc.), the facilities of healthcare service providers, emergency facilities, communication systems, utilities, or other facilities or services vital to the continued functioning of the University.

8.14.5.7 Protests in Spaces that have not been reserved

We fully support and acknowledge as a Community that sometimes impromptu Expression, Dissent, and Protest are pivotal to achieve the principles of this Policy. Not having a reservation is not sufficient reason for terminating any Protest unless the impromptu Protest unreasonably interferes with prior scheduled Meetings, Events, or essential operations of the University. Community members serving as Open Expression Observers shall ensure impromptu Expression, Dissent, or Protest continues until it should otherwise be relocated to allow for prior scheduled activities. To encourage such impromptu Dissent, the Open Expression Observers shall demonstrate this affirmative commitment by working with those involved to identify space where the Expression, Protest, or Dissent can be continued should the space being used interfere with other scheduled Meetings, Events, or essential operations.

All general outdoor public areas of the institution, even those that have reservation procedures, should be available for impromptu Expression, Protest, and Dissent unless it otherwise violates this policy. Requirements to reserve space should not be unreasonable in terms of time frame, requirements, or costs to the group wishing to host the Event. No group or organization should be denied use of a space on campus because of the content of the Meeting, Event, or Protest, unless such content would otherwise violate the responsibilities set forth in 8.14.5.5 of this Policy.

8.14.5.8 Nonpersonal Expression such as flyers, signs, displays, etc.

For purposes of nonpersonal expression such as flyers, chalking, signs, and displays, persons expressing themselves should follow all applicable flyer posting policies and banner reservation rules; however, these requirements should not be unreasonable in terms of access, time frame, requirements, or costs to the group. No nonpersonal expression should be denied because of the content of the flyer, sign, or display within the limits of the law. Additionally, a member of the Community who defaces the open expression of others will be held in violation of this policy.

8.14.6 Promotion and Dissemination of this Policy

The Committee for Open Expression shall partner with the DCL to:

- promote this Policy through educational efforts to the Emory Community, at least annually;
- provide educational opportunities to make community members aware of their rights and responsibilities regarding Open Expression; and
- educate members of the Community actively participating in Expression, Dissent, or Protest of their rights and responsibilities.

8.14.7 Administration and Enforcement

Except for hospital facilities as managed by Emory Healthcare, it is the responsibility of the Vice President and Dean for Campus Life or their designee to protect and maintain the right of open expression under these Guidelines. This procedure is outlined as a transparent process for enforcing safety and other University policies while protecting the Community’s rights to open expression.

8.14.7.1 Administrative Procedures

a. Observation of Meetings, Events or Protests, when deemed necessary by the DCL to protect and maintain open expression, shall be the responsibility of the DCL, who may delegate such responsibility. This Observer shall have full authority to act in the name of the DCL under these Guidelines. References to the DCL include their designee, who will take the form of trained staff or faculty who will serve as Open Expression Observers to help protect open expression and the rights of all parties involved.
b. Except in emergencies, the DCL’s authority under these Guidelines shall not be delegated to employees of the Emory Police Department. Emergencies, for purposes of this clause, are defined as situations that include any of the following: imminent serious bodily harm; serious threat; imminent life threatening behavior; reckless disregard for human life; or threat to life, limb, or property.

c. The Observer shall identify himself or herself to those responsible for the Meeting or Event or to the leaders of the Protest.

d. The DCL shall attempt to inform the chair of the Committee for Open Expression of Meetings, Events, or Protests to which an Observer will be sent. The chair may designate a member or members of the Committee to accompany and advise the Observer. Such a Committee representative shall also be identified to those responsible for the Meeting or Event or to the leaders of the Protest.

e. Any Observer who attends a Meeting, Event, or Protest shall reasonably attempt to respect the privacy of those involved.

f. The Committee for Open Expression should be consulted whenever possible before making a determination that members of the Community are indeed violating the principles of this Policy.

8.14.7.2 Enforcement Procedures

The Committee and the DCL shall work with Protestors or Dissenters to identify ways to continue the Expression, Protest, or Dissent with modifications to avoid future violations. The spirit of this policy is to protect the right of Protestors to do so while ensuring the narrow exceptions in this policy are no longer being violated.

a. The DCL is responsible for enforcing Section 8.14.5 and may work with anyone whose behavior is violating or threatens to violate these Guidelines to modify or terminate such behavior. The instruction shall include notice that failure or refusal to comply is a further violation according to Section 8.14.7 of these Guidelines. However, an instruction or warning by the DCL is not a prerequisite for a finding that a violation has occurred.

b. The Committee for Open Expression should be consulted whenever possible before making a determination that members of the Community are indeed violating the principles of this Policy. When the DCL declares that an individual or a group has violated the Guidelines, they may request to examine their University or other identification. The hosts of invited guests may also be asked to provide their University identification.

ii. Failure to comply with this request is a violation of the Guidelines.

i. In the event that any person(s) are deemed by the DCL or their designee to have violated the Guidelines and such person(s) refuse to show University or other identification, the DCL has the authority to make reasonable efforts to identify the individuals. The DCL is not authorized to photograph or take video of individuals where a reasonable expectation of privacy exists.

c. In carrying out this responsibility for safeguarding the right of open expression, the DCL shall obtain the advice and recommendation of the Committee for Open Expression whenever feasible.

8.14.7.3 Terminations or Arrests because of Violations of this Policy

Termination of an event or any arrests must be the option of last resort. The Chair of the Committee for Open Expression, or their designee, must be consulted and must have advised of all alternatives to support continuation of the Expression, Protest, or Dissent before there is any termination or arrest. Avoidance of injury to persons by the continuation of a Meeting, Event, or Protest is a key factor in determining whether it should be forcibly terminated. Property damage and significant interference with educational processes are also factors to be considered and may be of sufficient magnitude to warrant forcible termination.

If a Meeting, Event, or Protest is forcibly terminated, a full statement of the circumstances leading to the incident shall be publicized by the DCL within the University.

8.14.7.4 Violations of Other University Policies

The Committee for Open Expression is not an investigatory committee related to conduct of Community members. As such, all Community violations shall be handled in the following manner:

a. Cases involving undergraduate students are referred to the Office of Student Conduct who investigates the Event and decides what disciplinary proceedings, if any, to pursue.

b. Cases involving graduate or professional students are referred to the established disciplinary body of the school in which the student is enrolled.
c. Cases involving faculty are referred to the appropriate Dean or to the Provost.
d. Cases involving University, including Healthcare, staff or administrators are referred to that individual’s supervisor, any other person with supervisory responsibility over that individual, or Human Resources.
e. Cases involving trustees and associate trustees of the University and members of the Boards of Overseers or other bodies advisory to the University are referred to the Executive Committee of the Trustees.
f. Cases involving contracted workers shall be discussed by the Committee for Open Expression in collaboration with the University administrator managing that relationship.

Definitions

Opinion of the Emory University Senate Standing Committee for Open Expression Regarding Definition of Community Member

Related Links

- Current Version of This Policy: http://policies.emory.edu/8.14
- Undergraduate Student Code of Conduct (http://conduct.emory.edu/)
- Meeting Services Space Reservation Policies (http://universitycenter.emory.edu/)

Contact Information

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<tr>
<th>Subject</th>
<th>Contact</th>
<th>Phone</th>
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<td>Complaints or Violations to this Policy</td>
<td>University Senate and the Committee for Open Expression</td>
<td>n/a</td>
<td><a href="mailto:openexpression@emory.edu">openexpression@emory.edu</a></td>
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<tr>
<td>Administration of Policy</td>
<td>Campus Life</td>
<td>404-727-4364</td>
<td><a href="mailto:campuslife@emory.edu">campuslife@emory.edu</a></td>
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<tr>
<td>Student Organization Support</td>
<td>Student Involvement, Leadership, and Transitions</td>
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<td><a href="mailto:lisa.loveall@emory.edu">lisa.loveall@emory.edu</a></td>
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<tr>
<td>Conduct-Related Questions or Sanctions</td>
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<td>404-727-7190</td>
<td><a href="mailto:conduct@emory.edu">conduct@emory.edu</a></td>
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<td>Space Reservations</td>
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<td><a href="mailto:universitycenter@emory.edu">universitycenter@emory.edu</a></td>
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<td>Open Expression Observers</td>
<td>Campus Life</td>
<td>404-727-2136</td>
<td><a href="mailto:mshutt@emory.edu">mshutt@emory.edu</a></td>
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Revision History

- Version Published on: Sep 21, 2018 (Quick updates to Details, Updated Links, Contacts)
- Version Published on: Apr 12, 2017 (policy updated by committee)
- Version Published on: Dec 05, 2016 (link to Standing Committee opinion-cmty member definition)
- Version Published on: Aug 26, 2016
- Version Published on: Jun 01, 2016 (links updated and uploaded guidelines)
- Version Published on: Nov 18, 2015
- Version Published on: Mar 02, 2015 (Senate approved changes 2.2015)
Policy 8.2
Sexual Misconduct

Responsible Official: Office of the Provost
Administering Division/Department: Office of Equity and Inclusion
Effective Date: May 24, 2007
Last Revision: February 28, 2020

Policy Sections:

I. Overview
II. Applicability
III. Policy Details
IV. Definitions
V. Related Links
VI. Contact Information
VII. Revision History

Overview

Emory University ("Emory") is committed to maintaining an environment that is free of unlawful harassment and discrimination. Pursuant to Emory’s commitment to a fair and open campus environment and in accordance with federal law, Emory cannot and will not tolerate discrimination against or harassment of any individual or group based upon race, color, religion, sex, ethnic or national origin, gender, genetic information, age, disability, sexual orientation, gender identity, gender expression, veteran’s status, or any factor that is a prohibited consideration under applicable law. Emory welcomes and promotes an open and genuinely diverse environment.

Title IX of the Educational Amendments of 1972 protects people from sex discrimination in educational programs and activities at institutions that receive federal financial assistance. Emory fosters a safe learning and working environment that supports academic and professional growth of students, staff, and faculty. Accordingly, Emory does not tolerate sexual misconduct in its community and will take prompt action when misconduct occurs.

This Policy covers sexual misconduct committed by Emory students. Sexual misconduct is a form of sexual harassment that is prohibited under federal law and Emory’s Equal Opportunity and Discriminatory Harassment Policy (Emory Policy 1.3- Applicable to all University Employees). Sexual misconduct can occur in many forms, including, but not limited to, sexual and gender-based harassment, non-consensual sexual intercourse, non-consensual sexual contact, dating violence, domestic violence, sexual exploitation and stalking.

Emory will take seriously every allegation or report of sexual misconduct received. Its response is intended to ensure that all parties involved receive appropriate support and fair treatment, and that allegations of sexual misconduct are handled in a prompt, thorough, and equitable manner.

Concerns, complaints, or questions relating to this Policy may be directed to the staff members listed below:
Yolanda Buckner, JD  
University Title IX Coordinator  
Office of Title IX  
Administration Building, Suite 305  
201 Dowman Drive  
Atlanta, GA 30322  
Phone: (404) 727-8205  
yolanda.buckner@emory.edu

Or

Judith Pannell, Ed.D.  
Title IX Coordinator for Students  
Office of Title IX  
Administration Building, Suite 308  
201 Dowman Drive  
Atlanta, GA 30322  
Phone: (404) 727-4079  
judith.pannell@emory.edu

Questions may also be directed to a Deputy Title IX Coordinator. Their names and contact information are listed at the end of this document.

Applicability

The following policies and procedures apply to situations in which a student is alleged to have engaged in sexual misconduct. Allegations of sexual misconduct not involving a student, or involving a student acting in an employment capacity, are primarily addressed through the Emory Policy 1.3. However, a student acting in an employment capacity may be subject to this Policy as well as any applicable employment policies.

The University Title IX Coordinator monitors and oversees Emory’s compliance with federal regulations concerning sexual harassment and discrimination. Upon receipt of a report of alleged sexual misconduct, the University Title IX Coordinator will monitor responsive action to ensure that the educational environment at Emory is free of discrimination and discriminatory harassment. Additionally, the University Title IX Coordinator monitors the steps taken, as appropriate, to remedy the effects of the sexual misconduct on the Complainant. This may include commencement of disciplinary proceedings against a Respondent.

This policy applies to sexual misconduct that occurs in connection with all academic, educational, extracurricular, athletic, and other programs of Emory, whether those programs take place in Emory facilities, at a program sponsored by Emory at another location, or elsewhere.

Policy Details

8.2.1. Reporting Sexual Misconduct

8.2.2. Investigation and Adjudication

8.2.3. Hearing Procedures

8.2.3.1. Appeals

8.2.4. Support Services and Options for Students Going Through the Sexual Misconduct Disciplinary Process

8.2.5. Contact Information
8.2.1. Reporting Sexual Misconduct

**Reporting to the Police.** Because sexual misconduct may constitute both a violation of Emory policy and criminal activity, persons having knowledge of a possible violation are strongly encouraged to report alleged sexual misconduct promptly to the Emory Police Department (EPD), or to local law enforcement authorities for incidents that occur off campus. Emory strongly encourages Complainants to report the incident, to seek assistance, and to pursue judicial action for their own protection and that of the entire campus community.

Confidential reporting (providing information without your name attached to it) is an available option with EPD through their TIPS line at (404) 727-TIPS/8477; however, investigative or criminal enforcement activity can be significantly limited in the case of anonymous reports. *(Note: EPD's TIPS line is a non-emergency telephone number; in the event of an emergency, please call 911.)* Regardless of whether a Complainant pursues a criminal complaint, Emory will investigate the incident in question and take appropriate responsive action to ensure that the educational environment is free of harassment, to prevent the recurrence of a hostile environment, and, as appropriate, to remedy the effects of the harassment.

When an individual elects not to, or is unable to, report an incident of sexual misconduct, Emory encourages other persons with knowledge of the incident to make a prompt and accurate report to the EPD. The wishes of the Complainant about confidentiality, if known, should be respected in making such a report.

Pursuant to Emory Policy 4.119, the Mandated Child Abuse Reporting Policy, unless there is an exception under Georgia law, Emory requires all personnel, including faculty, staff, students, as well as third-parties, to report suspected child abuse of which they are made aware in their capacity of employment or duties. Child abuse includes sexual abuse or exploitation of a person who is under eighteen (18) years old. Any uncertainty about whether reporting is required should always be resolved in favor of making a report to the EPD.

**Reporting Sexual Misconduct for University Action.** Every Emory employee who is informed about an allegation of sexual misconduct involving any student is required to notify a Title IX Coordinator either directly or through their relevant reporting structure. However, employees who serve in a professional role in which communications are afforded confidential status under the law (e.g., medical providers, therapists, and professional and pastoral counselors) are not bound by this requirement but may, consistent with their ethical and legal obligations, be required to report limited information about incidents without revealing the identities of the individuals involved, to a Title IX Coordinator or Deputy Title IX Coordinator. All members of the Emory community are encouraged to promptly report incidents of sexual harassment and discrimination.

Complaints under this sexual misconduct policy may be filed with: (1) the University Title IX Coordinator, (2) the Title IX Coordinator for Students, or (3) a Deputy Title IX Coordinator. The complaint may be made in a written or verbal format.

**Retaliation Prohibited.** Federal regulations and Emory policy protect against retaliation directed at any individual who files a complaint, is involved in the adjudicatory process under this Policy in good faith, or participates in an investigation of a complaint. A complaint of retaliation may be initiated with the Title IX Coordinator for Students for any retaliatory actions resulting from the filing of a complaint under this Policy. Retaliation is adjudicated under the guidelines of this Policy.

8.2.2. Investigation and Adjudication

The Title IX Coordinator for Students is primarily responsible for coordinating responses to complaints of possible violations of this Policy, directly overseeing the investigation and adjudication of complaints, and coordinating possible remedial actions or other responses designed to reasonably minimize the recurrence of the alleged conduct as well as mitigate the effects of the harassment. The Title IX Coordinator for Students will ensure prompt, fair, and impartial investigations and resolutions of complaints alleging violations of this Policy. Emory will endeavor to complete the investigation and resolution of a complaint in a prompt and timely manner; the Title IX Coordinator for Students will keep the parties apprised of the status of their case on a periodic basis.

The procedures for institutional disciplinary action will be conducted by Emory faculty, staff and graduate/professional students¹ who receive annual training on this Policy and the skills necessary to complete their roles in the Title IX process. These trained individuals will handle matters under this Policy promptly and equitably.

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¹ Emory Graduate/Professional students are only allowed to serve as hearing board or appeals panel members.
When conducting the investigation, Emory's primary focus will be on addressing the sexual misconduct and not on other Emory alcohol or other drug policy violations that may be discovered or disclosed. Emory encourages reporting sexual misconduct, and seeks to remove any barriers to reporting. Emory recognizes that a student who has been drinking or using drugs at the time of the incident may be hesitant to make a report because of potential Conduct Code consequences for the student who reports. An individual who reports sexual misconduct, either as a Complainant or a third-party witness, will not be subject to disciplinary action by the University for personal consumption of alcohol or drugs at or near the time of the incident, provided that any such violations did not and do not place the health or safety of any other person at risk. At the conclusion of the investigation, the Title IX Coordinator for Students may initiate an educational discussion or recommend other educational or therapeutic remedies regarding alcohol or other drugs for the reporting student(s).

The Complainant and Respondent may each be assisted by an advisor of choice during any investigative or other meeting that an Emory official schedules with a Complainant or Respondent. The principal role of an advisor is to serve as a support to a Complainant or Respondent, and not as a representative or advocate in interactions with Emory officials.

The filing of a sexual misconduct complaint under this Policy is independent of any criminal investigation or proceeding. Except in cases where it is determined that a sexual misconduct proceeding might impede a criminal investigation or otherwise not be in the best interests of the law enforcement agency, a Complainant, or Emory, Emory will not wait for the conclusion of any criminal proceedings to commence its own investigation and take needed interim measures.

**Investigation of a Complaint and Notice of Charges of Alleged Policy Violation.** The Title IX Coordinator for Students will appoint an investigator to examine each complaint received. The investigator will conduct a prompt, thorough, and impartial investigation of the complaint. The investigation may involve interviews of a Complainant, Respondent, or a witness / witnesses; collection of documents or other physical/electronic information; and other appropriate steps as needed. Individuals who are interviewed during the investigation will be advised that the matter is confidential and that retaliation is prohibited by this Policy. A Complainant and Respondent may both provide information and suggestions to the investigator, but the investigator has independent authority to conduct the investigation using their best judgment.

After the investigation, the investigator will submit a written Report of Investigation to the Title IX Coordinator for Students detailing the information that was collected. The Title IX Coordinator for Students may ask the investigator further clarifying questions of the Complainant, Respondent, or witness(es) to supplement the Report of Investigation. The Title IX Coordinator for Students will then provide the draft of the Report of Investigation to the parties and will allow them to submit written statements responding to or clarifying information found in the report prepared by the investigator; any material submitted by the parties will be attached to the Report of Investigation as appendices, and the Report of Investigation will be finalized.

The Title IX Coordinator for Students shall review the finalized Report of Investigation and determine whether there is sufficient information to support charging the Respondent with a violation of this Policy. If a determination is made that the available information will not support a violation, then the student will not be charged and the case is closed. If the Title IX Coordinator for Students determines that there is sufficient information that a Respondent may have committed a violation (or violations) of this Policy, then within 7 business days after the Report of Investigation is completed or supplemented, a written “Notice of Charges of Policy Violation” (“Notice of Charges”) will be provided to the Respondent and the Complainant with summary information that supports the charge(s).

**Input from the Complainant Regarding the Method of Resolution.** Early in the investigation, the Title IX Coordinator for Students will seek to determine how the Complainant wishes to proceed – whether the Complainant wishes to pursue a formal resolution, an informal resolution, or does not wish to pursue resolution of any kind.

A. If the Complainant wishes to proceed with a formal resolution and the Title IX Coordinator for Students determines there is sufficient information to proceed with the sexual misconduct disciplinary process, then a hearing will be conducted as outlined in Section 8.2.3 (Hearing Procedures) of this Policy.

B. If the Complainant wishes to proceed with an informal resolution, the Title IX Coordinator for Students may elect to initiate an informal resolution process. However, a Complainant (a) should never be required to work out a problem or resolve an issue directly with the Respondent without school involvement; and (b) must be advised of the right to end the informal process at any time and to begin to pursue a formal complaint process. Additionally, a Complainant and Respondent must mutually consent to use of the informal resolution process. The Title IX Coordinator for Students may elect not to pursue an informal resolution process if it is deemed not in the best interest of the involved parties or in Emory’s best interest.
Even if the Complainant does not wish to pursue resolution, requests that no action be taken, or requests that the complaint remain confidential or elects not to participate in the process, Emory has an obligation to respond to reports of sexual misconduct. Emory’s ability to respond may be limited if a Complainant wishes to remain anonymous. No guarantees can be made to a Complainant regarding confidentiality, but the Title IX Coordinator for Students, or their designee, will consider every request for confidentiality and significant weight will be given to honoring that request in determining a response to the report of sexual misconduct. In all cases, information will be treated with discretion and privacy but cannot always be handled confidentially.

A request for confidentiality will be considered in the dual contexts of Emory’s legal obligation to ensure a living and learning environment free from sexual misconduct and the due process rights of the Respondent to be informed of the allegations and their source. The Complainant’s request may be weighed against the following factors in considering how to respond: the seriousness of the alleged sexual misconduct, the Complainant’s age, whether there have been other complaints of sexual misconduct against the same Respondent, and the Respondent’s right to receive information about the allegations if the information is maintained by Emory as an “education record” under Family Educational Rights and Privacy Act (FERPA). Please note: in cases involving a pattern of conduct by the Respondent, the use of weapons, or drugs to limit a Complainant’s capacity, Emory is required to move forward with a formal process.

**Authority to Impose Interim Restrictions and Provide Accommodations.** During the investigation and until resolution of allegations, the Title IX Coordinator for Students, or their designee, may issue interim restrictions, including, but not limited to the following: a no contact order (NCO) between the Complainant and the Respondent; interim suspension; temporary exclusion from areas of campus; removal from or relocation to another residence hall, changes in academic/course schedules; or limiting participation in certain events, gatherings, or activities, among other measures. Interim measures should not be construed to suggest that any decision has been made about the merits of the case. Appeals of interim measures must be submitted in writing to the University Title IX Coordinator within 7 business days from the day the parties are notified about the interim restriction. The University Title IX Coordinator will review the materials within 5 business days of receipt of the appeal and may affirm the original restriction; modify the restriction, which may be of greater or lesser severity; or dismiss the original restriction. The University Title IX Coordinator’s determinations on any interim restrictions are final and not appealable. Both parties shall receive simultaneous written notice of the outcome of the appeal.

Accommodations may be provided to individuals involved, regardless of whether formal conduct proceedings are instituted, including academic/course schedule changes; housing reassignments; safety escorts; safety/crime prevention briefings, and other protective or safety measures.

Both interim restrictions and accommodations are considered on a case-by-case basis by the Title IX Coordinator for Students.

**Acceptance of Responsibility.** Within 5 business days after receipt of the “Notice of Charges,” the Respondent has an opportunity to accept or not accept responsibility for the charge(s). If a Respondent is charged and accepts responsibility for having violated this Policy, the Title IX Coordinator for Students will determine the appropriate sanction within 5 business days and send written notification of the sanction imposed and the appeal process to the Complainant and Respondent. The sanction determination is appealable to the University Title IX Coordinator within 7 business days of the notice of sanction. The University Title IX Coordinator’s determination shall be final and not appealable.

**8.2.3. Hearing Procedures**

If the Respondent does not accept responsibility for the alleged conduct, the Title IX Coordinator for Students will appoint a hearing board of three individuals, drawn from a pool of faculty, staff, and graduate/professional students with appropriate knowledge and training, to determine if the Respondent is responsible for violations in the Notice of Charges. The appointment of the hearing board will occur within 10 business days of the Respondent’s denial of Responsibility. The Title IX Coordinator for Students will appoint one member of the board as its chair. The Title IX Coordinator for Students will select the date, time, and location of the hearing, and will provide notice to all parties. All parties shall be given at least 10 business days’ notice in advance of the hearing date, absent agreement by the parties to shorten the time period or extraordinary circumstances as determined by the chair.

In hearings conducted under this Policy:

1. Both parties shall be given similar and timely access to information that will be used at the hearing and be given the substantially equivalent opportunities to present relevant evidence and witnesses.
2. The proceedings shall be non-adversarial in nature. The chair of the hearing board is empowered to take such steps as may be necessary to preserve the non-adversarial character of the hearing.
3. Both parties have the right to be present for the entire hearing, except for deliberations or recesses for the hearing board to discuss procedural issues.

4. Emory may require any student to attend and to give testimony relevant to the case under consideration. Signed, written statements from a Complainant, a Respondent, or from witnesses who cannot attend the hearing may be accepted at the discretion of the chair. Emory may request the attendance of a faculty or staff member, or alternatively request that a faculty or staff member furnish a written statement.

5. The Complainant and Respondent are both permitted to have an advisor of choice present at the hearing. If an advisor attends the hearing, the advisor is permitted to quietly provide advice and support to their student but cannot be directly involved in the hearing or disrupt the hearing. Accordingly, an advisor is not permitted to make statements to the hearing board or to question the opposing party or witnesses. The chair has discretion to place limitations or conditions on the advisor’s presence or participation, and in extreme cases, where an advisor fails to adhere to this Policy and disrupts a hearing, the advisor can be dismissed from a hearing. Any cost associated with the participation of an advisor is the sole responsibility of the student seeking the advisor’s assistance.

6. Neither party is required to be physically present in the same room, and at the discretion of the chair, electronic participation by either party may constitute presence for purposes of any hearing.

7. Hearing board members shall be required to disclose any conflicts of interest relating to the allegations or the hearing.

8. Neither party shall be permitted to directly question each other or any witness at the hearing, but they may submit questions to the chair for their consideration. The chair will determine whether specific, requested questions can be asked. If a specific question from a party cannot be asked, the chair will note the reason for its omission in the post-hearing report.

9. The chair will determine whether the hearing board can properly weigh or take into consideration any evidence offered by a party or witness based upon relevance. Rules of evidence applicable to criminal or civil court proceedings will not apply.

10. There shall be a single verbatim record, such as a tape recording, of the hearing (not including deliberations). The recording shall be Emory property. Documentation of sexual misconduct proceedings, including written findings of facts, transcripts, and any audio recordings, are maintained in accordance with the applicable Emory document retention records.

11. For all cases, the standard that shall be used to determine whether a violation was committed is “preponderance of the evidence”, i.e., it is more likely than not that sexual misconduct occurred.

12. After all admissible evidence has been reviewed, the hearing board shall deliberate to decide the case. The Respondent shall be found responsible or not responsible for each charge by a majority vote of the board.

The chair will submit a written report to the Title IX Coordinator for Students containing the hearing board’s determination and rationale within 10 business days of the conclusion of the hearing. If the hearing board concludes that, under a preponderance of the evidence standard, the Respondent violated this Policy, the hearing board will provide a sanction recommendation to the Title IX Coordinator for Students. The Title IX Coordinator for Students shall be empowered to affirm this sanction and/or determine an alternate sanction and remedy. Both parties shall receive simultaneous written notice of the outcome of the hearing, sanctions and remedies imposed, and the process and deadline for submitting an appeal by either party.

Emory may impose a range of sanctions and protective measures following a final determination of a violation of this Policy. The sanctioning decision will be informed by the degree to which the behavior was intentional, irresponsible, or without knowledge. Factors pertinent to the determination of what sanction applies include, but are not limited to, the nature of the conduct at issue, prior disciplinary history of the Respondent (shared with the hearing board only upon a finding of responsibility for the particular allegation), the Respondent’s willingness to accept responsibility for their actions, previous University response to similar conduct, and the interests of the University.

The broad range of sanctions includes:

- Expulsion (Students found responsible for engaging in actual or attempted nonconsensual sexual intercourse, or who are found responsible for repeated sexual misconduct, should be prepared to be permanently separated from Emory);
- Suspension for an identified time frame or until satisfaction of certain conditions, or both;
- Temporary or permanent separation of the parties (e.g. only: change in classes, reassignment of residence, no contact orders, limiting geography where parties may go on campus) with additional sanctions for violating orders;
- Successful completion of sexual or relationship sensitivity training/awareness education program / bystander intervention training;
- Successful completion of alcohol and other drug awareness and abuse prevention program;
- Counseling or mentoring;
• Volunteering / community service requirements;
• Educational programs
• Loss of Emory privileges;
• Delays in obtaining administrative services and benefits from Emory (e.g. only: holding transcripts; delaying registration, graduation, or receipt of diploma);
• Additional academic requirements relating to scholarly work or research on sexual misconduct or sexual misconduct on university campuses;
• Financial restitution (payments) to any individual(s) who were injured or impacted by the Respondent’s conduct; and
• Any other discretionary sanctions that are directly related to the violation or conduct and that are aimed at eliminating sexual misconduct, preventing its recurrence, and addressing its effects.

8.2.3.1. Appeals

Both parties shall have the right to appeal the outcome on any of the following grounds:

1. To consider new information, sufficient to alter the decision, or other relevant facts not brought out in the original hearing, because such information was not known or knowable to the person appealing during the time of the hearing.
2. To allege a procedural error within the hearing process that may have substantially impacted the fairness of the hearing.
3. To allege that finding was inconsistent with the weight of the information.

Appeals must be submitted in writing to the University Title IX Coordinator within 7 business days from the day the parties are notified about the outcome of the case. Upon receipt of an appeal, the University Title IX Coordinator will appoint an appeals panel of 3 members from a pool of trained faculty, staff, and graduate/professional students. The appeals panel will review the materials within 10 business days of receipt of the appeal. The panel will examine all documentation of the hearing to determine if there is a reasonable basis for changing the outcome. The panel will issue a written determination of the appeal, or may request that the University Title IX Coordinator take appropriate steps in the appeal, which may include: affirming the original finding and sanction; affirming the original finding but issuing a new sanction, which may be of greater or lesser severity; remanding the case to a new hearing panel to correct a procedural or factual defect; or, dismissing the case if there was a procedural or factual defect that cannot be remedied by remand. The panel’s determinations are final and not appealable. However, the outcome of a remanded case may again be appealed under this provision. Both parties shall receive simultaneous written notice of the outcome of the appeal.

8.2.4. Support Services and Options for Students Going Through the Sexual Misconduct Process

A variety of support resources are available on campus and in the community to assist students in dealing with sexual misconduct, whether it happened recently or in the past. A full listing of support services, including healthcare, counseling, advocacy or peer support, and other resources may be found at: http://sexualmisconductresources.emory.edu.

The Office of Respect at the Atlanta campus provides education, advocacy, and support for Complainants, as well as their friends and families: http://respect.emory.edu

Support Hotline (24/7): (470) 270-5360
Office: (404) 727-1514

Counseling and Career Services (CCS) is the primary point of contact for Complainants, as well as their friends and families, at Oxford College. (https://oxford.emory.edu/life/thriving-at-oxford/counseling-and-career.html/ (404) 727-7450)

Respondents should contact the Office of Title IX for referral to support resources.

8.2.5. Contact Information

All Emergencies (any campus/location): 9-1-1

Emory Police Department: (404) 727-6111

Emory Police Department TIPS line (non-emergency number): (404) 727-8477 (TIPS)
Emory HelpLine (non-emergency number): (404) 727-4357 (HELP)

**Atlanta campus**
Counseling and Psychological Services (CAPS): (404) 727-7450
Student Health Services: (404) 727-7551 (press 1)
Office of Spiritual and Religious Life: (404) 727-6226 or 404-727-4070

**Oxford campus**
Counseling and Career Services (CCS): (770) 784-8394
Student Health Services: (770) 784-8376
Office of Spiritual and Religious Life: (770) 784-8392

**Deputy Title IX Coordinators:**

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Oxford College
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Policy Definitions

Affirmative Consent. Affirmative consent is a knowing, voluntary, clear, and mutual agreement among all participants to engage in specific sexual activity.

a. Affirmative consent can be given by words or actions, as long as those words or actions express willingness to engage in the sexual contact or activity. It is important not to make assumptions. If there is confusion or ambiguity, participants in sexual activity should stop and verbally clarify each person’s willingness to continue. A person who wants to engage in a specific sexual activity is responsible for obtaining affirmative consent for that activity.
b. Affirmative consent to one form of sexual activity does not imply affirmative consent to other forms of sexual activity.
c. Affirmative consent to engage in sexual activity with one person does not imply affirmative consent to engage in sexual activity with another person.
d. Silence or the lack of resistance, in and of itself, does not demonstrate affirmative consent. Again, it is important not to make assumptions; if confusion or ambiguity arises during a sexual interaction, each participant should stop and verbally clarify the other’s willingness to continue engaging in the sexual contact or activity.
e. Affirmative consent may be initially given, but can be withdrawn at any time. When affirmative consent is withdrawn, or can no longer be given, sexual activity must stop.
f. Previous relationships or previous affirmative consent for sexual activity is not affirmative consent to sexual activity on a different occasion.
g. The definition of affirmative consent does not vary based upon a participant’s sex, sexual orientation, gender identity, gender expression or relationship status.
h. Affirmative consent cannot be procured using physical force, compulsion, threats, intimidating behavior, coercion, or from a person who is incapacitated.
i. Under Georgia law, minors under the age of 16 years are generally unable to provide affirmative consent, with narrow exceptions. See O.C.G.A. § 16-6-3, Statutory Rape.

Aiding, Facilitating, Encouraging, Concealing, or Otherwise Assisting. Aiding, facilitating, encouraging, concealing, or otherwise assisting in a violation (or attempted violation) of this Policy is prohibited by this Policy.

Coercion. Coercion is conduct that would reasonably place an individual in fear of immediate or future physical, emotional, or other harm and that is used to pressure someone to engage in sexual contact. Coercion can include manipulation, intimidation, unwanted contact, express or implied threats of harm. Coercion is more than an effort to persuade, entice or attract another person to engage in sexual activity. In evaluating whether coercion was used, the University will consider whether pressure was applied and, if so, the frequency, intensity, and duration of the pressure, as well as the degree of isolation of the person being pressured. Sexual activity that is coerced is non-consensual.

Complainant. The Complainant is the person reporting or making an allegation or complaint of sexual misconduct. Where a third-party has reported alleged sexual misconduct, the person alleged to have been subjected to sexual misconduct also will be referred to as the Complainant.

Complaint. A communication or statement lodged with the Office of Title IX alleging a violation under this Policy; a complaint filed by a party, which can be verbal or written, indicates that the party would like to initiate formal or informal Title IX proceedings as per this Policy.

Dating Violence. The use of physical violence, coercion, threats, intimidation, isolation, stalking, or other forms of emotional, psychological, sexual, technological, or economic abuse directed toward a person with whom one is or has been in a social relationship of a romantic or sexually intimate nature that does not constitute domestic violence. Whether there is or was such a relationship will be determined based on, among other factors, the parties’ statements, and with consideration of the length of the relationship, the type of relationship, and the frequency of interaction between the parties involved in the relationship. Dating violence includes behaviors that intimidate, manipulate, humiliate, isolate, frighten, terrorize, coerce, threaten, or physically injure someone. Dating violence can be a single act or a pattern of behavior in relationships. Dating violence is sometimes called intimate partner violence.
**Domestic Violence.** The use of physical violence, coercion, threats, intimidation, isolation, stalking, or other forms of emotional, psychological, sexual, technological, or economic abuse directed toward (1) a current or former spouse or intimate partner; (2) a person with whom one shares a child; or (3) anyone who is protected from the Respondent’s acts under the domestic or family violence laws of Georgia. This includes behaviors that intimidate, manipulate, humiliate, isolate, frighten, terrorize, coerce, threaten, or physically injure someone. Domestic violence can be a single act or a pattern of behavior in relationships. Domestic violence is also sometimes called intimate partner violence.

**Force.** Force refers to the use of physical violence and/or imposing on someone physically to gain sexual access. Sexual activity that is forced is non-consensual.

**Gender-Based Harassment.** Includes harassment based upon gender, sexual orientation, gender identity or gender expression, which may include acts of aggression, intimidation, or hostility, whether verbal or non-verbal, graphic, physical, or otherwise, even if the acts do not involve conduct of a sexual nature when:

- a. Submission to such conduct is made either explicitly or implicitly a term or condition of an individual’s academic, co-curricular, or campus life activities;
- b. Submission to or rejection of such conduct by an individual is used as the basis for academic or student life decisions affecting that individual;
- c. The conduct is so severe and/or pervasive that it unreasonably interferes with a person’s University employment, academic performance, or participation in University programs or activities; or
- d. The conduct is so severe and/or pervasive that it creates an intimidating, hostile, demeaning, or offensive campus or living environment.

**Incapacitation.** Incapacitation occurs when an individual lacks the ability to knowingly choose to participate in sexual activity. A person who is incapacitated lacks the ability to understand a decision to participate in sexual activity.

- a. Incapacitation may be associated with a person’s lacking consciousness or awareness; being asleep; being involuntarily restrained; having a disability that impedes affirmative consent; or if an individual otherwise cannot affirmatively consent due to other forms of mental or physical helplessness. Depending on the degree of intoxication, someone who is under the influence of alcohol, drugs, or other intoxicants may be incapacitated and therefore unable to provide affirmative consent.
- b. Individuals should be aware of, and carefully consider, the potential consequences of the use of alcohol or drugs. Alcohol and drugs can lower inhibitions and create an atmosphere of confusion over whether consent is freely and affirmatively given. It is the responsibility of each party to be aware of the intoxication level of the other party before engaging in sexual activity. If there is any doubt as to the level or extent of the other individual’s intoxication, it is safest to forgo or cease any sexual contact or activity. Being intoxicated, impaired, or incapacitated by alcohol or other drugs is never an excuse for sexual misconduct and does not diminish anyone’s responsibility to obtain affirmative consent. The use of alcohol or other drugs never makes someone at fault for experiencing sexual harassment/misconduct.

**Intimidation.** The use of implied or overt threats that menace or cause reasonable fear to overcome an individual’s freedom of will to choose whether to participate in sexual activity or provide affirmative consent. Affirmative consent obtained by intimidation is not valid.

**Non-Consensual Sexual Contact.** Any intentional sexual touching, without a person’s affirmative consent. Intentional sexual touching includes deliberate contact, under or over clothing, with the breasts, buttocks, groin, or genitals, or conscious and willful touching another with any of these body parts; making another person touch any of these body parts under or over clothing; and the emission of ejaculate on the clothing or body of another person.

**Non-Consensual Sexual Intercourse.** Any form of vaginal, anal, or oral penetration by a penis, object, tongue, or finger without a person’s affirmative consent; or oral copulation (mouth-to-genital contact or genital-to-mouth contact) without a person’s affirmative consent, no matter how slight the penetration or contact.

**Report.** A report of sexual misconduct is when a party notifies the Office of Title IX of alleged misconduct and requests support and resources, but where there has not yet been a decision about whether to proceed through the Title IX process.
**Respondent.** The Respondent is the person alleged to have committed or perpetrated the sexual misconduct. Respondents are entitled to a presumption that there is no violation of this Policy throughout the disciplinary process unless the Respondent chooses to accept responsibility for a violation or until they are found responsible for a violation of this Policy via the hearing process.

**Responsible Employee** (also called a “Mandatory Reporter”). A responsible employee is any University employee who has the authority to take action to redress the harassment; who has the duty to report sexual harassment or any other misconduct by students or employees to school officials; or an individual who a student could reasonably believe has this authority or responsibility. At Emory, responsible employees include all faculty and staff members who are not considered to be confidential.

**Retaliation.** Any adverse action or threatened action, taken or made, personally or through a third party, against someone who has filed a sexual harassment/misconduct complaint (a Complainant), has been the subject of a sexual harassment/misconduct complaint (a Respondent), or any other individual who engages with the University in connection with a sexual harassment/misconduct complaint. All individuals and groups of individuals, not just a Respondent or Complainant, are prohibited from engaging in retaliation.

a. Retaliation includes directly or indirectly threatening, intimidating, harassing, or any other conduct that would discourage a reasonable person from engaging in activity protected under this Policy, such as seeking services; receiving protective measures and accommodations; reporting sexual harassment/misconduct; and/or participating in an investigation or adjudication.

b. Retaliation includes maliciously and purposefully interfering with, threatening, or damaging the academic or professional career of another individual before, during or after the investigation and resolution of a report of sex- and gender-based harassment/misconduct under this Policy.

c. Retaliation may be present even where there is a finding of “no responsibility” on the allegations.

d. This provision does not apply to reports made or information provided in good faith, even if the facts alleged in the report are determined not to be accurate. Filing a counter complaint, counter appeal, or conduct complaint through processes established by University policy does not in itself constitute retaliation, unless it is determined that the filing was without a reasonable basis and made in bad faith.

**Sexual Exploitation.** Non-consensual abuse or exploitation of another person’s sexuality for the purpose of sexual gratification, financial gain, personal benefit or advantage, or any other purpose. Examples of sexual exploitation may include, but are not limited to:

- invasion of sexual privacy;
- prostituting an individual;
- non-consensual video- or audio-recording of sexual activity or circulation of such recorded material (i.e., revenge pornography);
- non-consensual photographing individuals who are partly undressed, naked, or engaged in sexual acts and transmitting or posting those photographs without an individual’s consent;
- observing unsuspecting individuals who are partly undressed, naked, or engaged in sexual acts;
- knowingly transmitting a sexually transmitted disease (STD); exposing one’s breasts, buttocks, or genitals without affirmative consent or inducing another to do the same; and
- inducing incapacitation for the purpose of making another person vulnerable to non-consensual sexual activity.

**Sexual Harassment.** Unwelcome sexual advances, requests for sexual contact or favors, conduct based on gender stereotypes, or other verbal, non-verbal, physical, or visual conduct of a sexual nature constitutes sexual harassment when:

a. Submission to such conduct is made either explicitly or implicitly a term or condition of an individual’s academic, co-curricular, or campus life activities;

b. Submission to or rejection of such conduct by an individual is used as the basis for academic or student life decisions affecting that individual;

c. The conduct is so severe and/or pervasive that it unreasonably interferes with a person’s University employment, academic performance, or participation in University programs or activities; or

d. The conduct is so severe and/or pervasive that it creates an intimidating, hostile, demeaning, or offensive campus or living environment.
**Stalking.** Engaging in a course of conduct directed at a specific person (or persons) that would cause a reasonable person to fear for his or her safety or the safety of others, or suffer significant mental suffering or anguish. Course of conduct means two or more acts, including acts in which a person directly, indirectly, or through third parties, by any action, method, device, or means, follows, monitors, observes, surveils, threatens, or communicates to or about a person, or interferes with a person’s property. Stalking does not require an overt threat.

**Student.** The term student means any person pursuing academic studies at the University. The term also includes:

a. A person who, while not currently enrolled, was previously enrolled at Emory and who is reasonably anticipated to seek enrollment at a future date, or
b. A person who has applied to or been accepted for admission to Emory and has accepted an offer of admission or may reasonably be expected to enroll, or
c. A person enrolled in an Emory program on a credit or non-credit basis.

**Related Links**
- Current Version of This Policy: [http://policies.emory.edu/8.2](http://policies.emory.edu/8.2)
- Policy 1.3: Equal Opportunity and Discriminatory Harassment Policy ([http://policies.emory.edu/1.3](http://policies.emory.edu/1.3))
- Policy 4.119: Mandated Child Abuse Reporting ([http://policies.emory.edu/4.119](http://policies.emory.edu/4.119))

**Contact Information**

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<th>Subject</th>
<th>Contact</th>
<th>Phone</th>
<th>Email</th>
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<tr>
<td>Policy Posting</td>
<td>Lynell Cadray</td>
<td>(404) 727-2611</td>
<td><a href="mailto:lynell.cadray@emory.edu">lynell.cadray@emory.edu</a></td>
</tr>
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**Revision History**

- Version Published on: February 28, 2020 (deleted and revised references to “co-investigators”)
- Version Published on: March 27, 2019 (replace University and deputy Title IX Coordinators)
- Version Published on: Aug 13, 2018
- Version Published on: Sep 26, 2016 (location of Judith Pannell, replace 2 deputies)
- Version Published on: Jul 14, 2016 (School of Medicine deputy info changed)
- Version Published on: Jul 13, 2016 (new Deputies for Laney and Oxford)
- Version Published on: Sep 15, 2015
- Version Published on: Nov 25, 2014 (based on community feedback)
- Version Published on: Nov 03, 2014
- Version Published on: Oct 08, 2014 (annual review of policy)
- Version Published on: May 27, 2014 (changed Lynell Cadray’s address)
- Version Published on: May 23, 2014 (updated University Title IX coordinator’s name, deputy names)
- Version Published on: Sep 25, 2013 (summer 2013-Centralized Sexual Misconduct)
- Version Published on: May 24, 2013
- Version Published on: Aug 16, 2012 (change coordinator & program names)
- Version Published on: Nov 28, 2007 (last paragraph-updated contact information)
- Version Published on: May 24, 2007
- Version Published on: Mar 28, 2007 (Original Publication)
Policy 8.8
Alcohol and Drug Abuse Policy

Responsible Official: VP and Dean for Campus Life
Administering Division/Department: Campus Life
Effective Date: March 31, 2007
Last Revision: March 2, 2020

Policy Sections:

I. Overview
II. Applicability
III. Definitions
IV. Policy Details
V. Related Links
VI. Contact Information
VII. Revision History

Overview

Emory University is committed to the health and well-being of its faculty, staff, and student body. Alcohol and drug misuse and abuse can be detrimental to one’s overall physical and emotional health; can be detrimental to academic and/or professional performance; and can adversely impact family, friends and co-workers.

As a recipient of federal grants and contracts, Emory University adheres to the provisions of the Drug-Free Workplace Act of 1988 and the Drug-Free Schools and Communities Act, as amended. As administrator of certain state-funded financial aid programs for students, Emory University also adheres to Georgia’s Drug-Free Postsecondary Education Act of 1990.

This policy is also designed to convey the University’s care and concern for its members and their well-being, given that alcohol and other drug misuse on college campuses is a major public health concern. In order to foster academic achievement, personal success and wellness, and to promote the safety of the community, the University has adopted the following tenets to guide the prevention of alcohol and other drug misuse:

- Emory University complies with and upholds all applicable federal, state, and local laws related to alcohol, illicit drugs and controlled substances. Violations of such laws that come to the attention of University officials may be addressed within the University or through prosecution in the courts, or both.
- In instances where individuals are found to be in violation of this policy, the University’s response will stress individual accountability, personal development and education, and connection to appropriate health services, as well as the effect on impacted parties and the community.
- The University strives to create an environment that supports individuals who choose not to use alcohol and individuals who choose to use alcohol legally and in a low risk way. Activities (e.g. drinking games) and paraphernalia (e.g. funnels, beer pong tables, and ice slides) that promote the rapid and unsafe consumption of alcohol are prohibited.
• The University encourages individuals with prescription medications to safely and legally use such medications in compliance with their prescriptions. The misuse of prescription medication or other controlled substances is not tolerated.

• The sale, distribution or use of illegal drugs is not permitted.

• The illegal sale, distribution or use of alcohol is not permitted.

• The sale of alcoholic beverages without an applicable license is not permitted.

• The University seeks to create an environment of personal development through education and supportive community. It supports individuals seeking services for alcohol, tobacco and/or other drug misuse and makes confidential services available to them.

• Emory is a Tobacco-Free Campus. The use or sale of tobacco products in or on Emory owned or Emory leased property is prohibited. See Policy 4.113 Tobacco-Free Environment for more information (http://policies.emory.edu/4.113), including resources for tobacco cessation.

Applicability

This policy applies to all Emory University full-time, part-time and temporary faculty, staff, and students for all University-Sponsored Events and to all activities conducted on University-owned property.

Emory University permits the purchase and use of alcoholic beverages with University funds under certain conditions but expects faculty, staff and students to take measures to prevent alcohol and drug misuse. Specific offices have been designated to provide clarification about the procedures and guidelines for event planning, as well as services and resources available to faculty, staff and students for reducing at-risk behaviors related to alcohol and drug use. The contact information for, and responsibility of, each of these offices is listed at the conclusion of this policy under “Contact Information.”

Definitions

*University Housing*- includes University-owned and/or managed student residential facilities such as residence halls, fraternity and sorority housing, theme houses, and apartments.

*University-Sponsored Event*—is an event hosted, organized or financed by a University-Sponsored Student Organization or by a department or division of the University. University-Sponsored Events include, but are not limited to, any internal or external sponsored events held on campus; fraternity and sorority events; and campus organization, divisional or departmental events.

*University-Sponsored Student Organization* – is a student organization, including sororities and fraternities, undergraduate, graduate and professional organizations, that (1) is registered with the University; (2) is affiliated with a University department or division that acknowledges the organization as part of its activities; or (3) sponsors activities that relate to the education, research and community service missions of the University or to the goals or objectives of the department or division of affiliation.

Policy Details

1. Standards of Conduct

2. General Restrictions as of the Policy Effective Date

2.1. Possession of Alcohol

2.2. Other Drugs

2.3. False Identification
3. Sanctions and Penalties

4. Notification of Drug-Related Convictions
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6. Purchasing Alcohol

7. Storage of Alcohol

8. Use of Alcohol in University Housing

9. Use of Alcohol at Athletic Events

10. Procedures for Events with Alcohol
   10.1. On-Campus and Off-Campus Events with Alcohol
   10.2. Additional Food and Beverages

11. Additional Information
   11.1. Health Risks
   11.2. Resources for Education, Consultation and Counseling
   11.3. Distribution
   11.4. Additional Policies Regarding Alcohol
   11.5. Review

1. Standards of Conduct

All Emory University faculty, staff and students are prohibited by the University from unlawfully using, possessing, manufacturing, dispensing or distributing alcohol, controlled substances or illegal drugs on University-owned property, University Housing or at University-Sponsored Events.

Emory University expects all of its faculty, staff and students to comply with any applicable federal, state or local laws pertaining to the use, possession, manufacture, dispensation or distribution of alcohol, controlled substances, or illegal drugs.

2. General Restrictions as of the Policy Effective Date
2.1. Possession of Alcohol

Possession or use of alcoholic beverages by persons under 21 years of age, or distribution or furnishing of alcoholic beverages to persons under 21 years of age or who are intoxicated, is prohibited.

2.2. Other Drugs

It is illegal for an individual to manufacture, possess, use, dispense, sell or distribute controlled substances or illegal drugs (as defined by state and federal law).

2.3. False Identification

It is illegal for an individual to provide false name, address or date of birth for the purpose of acquiring alcohol or other drugs.

3. Sanctions and Penalties

3.1. Any member of the Emory University faculty, staff or student body who violates this Policy shall be subject to corrective disciplinary actions and penalties up to and including expulsion from University academic programs, termination of employment and referral to the appropriate federal, state or local authorities for prosecution in the courts.

Alleged violations of this policy by an individual undergraduate student shall be referred to the Office of Student Conduct. Alleged violations of this policy by an individual graduate/professional student shall be referred to the established disciplinary body of the school in which the student is enrolled. The Office of Student Conduct and the established disciplinary bodies of the graduate/professional schools shall have the authority to make appropriate referrals and to impose on students and student organizations such sanctions for violations of the policy as it may deem appropriate, including but not limited to participating in educational programs, parental notification and/or loss of privileges.

3.2. Persons convicted of violating federal and/or state laws prohibiting the unlawful use, possession, dispensation, and distribution of alcohol, controlled substances, or illegal drugs may face stiff sanctions such as heavy fines; incarceration for various periods of time, including life; forfeiture of assets; or suspension or loss of driver’s, business or professional licenses. Federal, state and/or local officials are responsible for enforcing these laws and any sanctions for such crimes will be determined by the courts. The University does not manage the criminal process but will cooperate with legal authorities in a manner consistent with its legal obligations.

3.3. The Higher Education Act states that a federal or state drug conviction can disqualify a student for Federal Student Aid funds. As of the effective date of the policy, the period of ineligibility depends on whether the conviction was for sale or possession during a period of enrollment in which a student received federal student aid and whether the student had previous offenses, ranging from one year to an indefinite period of time. A student regains eligibility the day after the period of ineligibility ends, when he or she successfully completes a qualified drug rehabilitation program, when he or she successfully passes two unannounced drug tests conducted by a qualified drug rehabilitation program; or if the conviction is reversed, set aside or otherwise rendered nugatory.

Please see the Related Links section below for the Federal Drug Trafficking Penalties and Georgia Controlled Substance and Dangerous Drug Law charts for additional information.

4. Notification of Drug-Related Convictions

As of the effective date of the policy, the following is a summary of the notification requirements upon a drug-related conviction:

4.1. Employee Notification of Drug-Related Convictions

(a) In accordance with the mandates of the Drug-Free Workplace Act of 1988, and as a condition of employment at Emory, all employees (including student employees) will:
(1) abide by the terms of this policy; and

(2) notify, as appropriate, their supervisor, vice president, administrator, dean or department head, as applicable, if they have been convicted of any criminal drug statute violation occurring in the workplace no later than five days after such a conviction. If a federal grant is involved, the Emory University Office of Sponsored Programs must be notified immediately. Failure to notify the appropriate person within the five-day period may result in disciplinary action.

(b) Within thirty (30) calendar days of receiving notice of a conviction, the person notified pursuant to Paragraph 4.1(a)(2) above shall consult with the human resources department of Emory University (human resources department may contact the Office of Equal Employment Opportunity, as appropriate), and said person shall then:

(1) take appropriate personnel action against the employee, up to and including termination, consistent with the requirement of the Rehabilitation Act of 1973, as amended, or the Americans with Disabilities Act; and/or

(2) require the employee to participate successfully, and provide evidence of such participation, in a drug-abuse assistance or rehabilitation program approved for such purposes by a federal, state or local health, law enforcement, or other appropriate agency.

4.2. Student Notification of Drug-Related Convictions

All students must abide by the terms of this policy. In accordance with the State of Georgia’s Drug-Free Postsecondary Education Act of 1990, any student convicted under the laws of Georgia, the United States or any other state of any felony offense involving the manufacture, distribution, sale, possession or use of marijuana, a controlled substance, or a dangerous drug must, within ten (10) days of said conviction, report it in writing to the Emory University or Oxford College of Emory University Office of Financial Aid, as appropriate. Any student who suffers such a conviction shall, as of the date of the conviction, be denied state of Georgia funds for certain types of loans, grants or scholarships, including Georgia Higher Education Loan Program loans, student incentive grants or tuition equalization grants.

As of the effective date of the policy, the denial of state funds shall become effective on the first day of the term for which the student was enrolled immediately following either the date of conviction or the date on which the court accepts a plea of nolo contendere or formally allows a student to receive first offender treatment. The denial of funds shall continue through the end of said term.

5. Advertisements and Promotions

5.1. Advertisements and Promotion of Events

Publications of any type and in any media, including but not limited to The Wheel and other newspapers, pamphlets, flyers, and websites, that receive some or all of their funding from University sources (including the Student Activity Fee) must not accept or contain commercial advertising or other materials that promote, depict or encourage excessive or underage consumption or use, or underage purchase, of alcoholic beverages or controlled substances. This section is not intended to restrict advertisement or promotion of curricula or research objectives involving alcohol consumption.

Depictions promoting excessive alcohol consumption including but not limited to any of the following may not be used in advertisements or in the promotion of events:

- Excessive or underage consumption or use, or underage purchase, of alcoholic beverages or controlled substances
- All-you-can-drink activities
- Drinking games
• Price specials on alcohol
• Promotions or prizes featuring alcohol

This list is not exhaustive; it is meant to provide examples of the types of activities that are considered by the University as promoting excessive alcohol consumption.

5.2. Use of Name, Logo, Seal, Insignia or Mascot

Neither the University’s name, including the names of university departments and University-Sponsored Student Organization, nor its logos, mascots, marks or other identifying indicia may be used in conjunction with any materials, references or imagery, including commercial sponsorship, related to excessive or underage consumption or use, or underage purchase, of alcoholic beverages or controlled substances.

6. Purchasing Alcohol

Alcoholic beverages may not be purchased with any state or federal appropriated funds. For more information, contact Research Grants and Contracts.

Schools, colleges, departments, or units determine the permissibility of charging alcoholic beverages to University accounts. For more information, contact the head of the specific unit or department.

University-Sponsored Student Organizations must follow all applicable Student Government Association and Graduate Student Government Association financial policies for the purchase of any alcoholic beverages.

Fraternities and sororities recognized by the Office of Sorority and Fraternity Life are prohibited from using organizational funds to purchase alcohol.

The use of alcoholic beverages purchased with University and student activity funds as a prize in any type of contest is prohibited.

7. Storage of Alcohol

Any alcohol that is stored on campus must be kept in a place where it is not accessible by those under twenty-one years of age.

8. Use of Alcohol in University Housing

Activities that take place within University Housing are governed by applicable laws and regulations and the terms of applicable University policies, including but not limited to the Undergraduate Code of Conduct.

• Alcohol is not allowed in University Housing community spaces (such as lobbies, lounges, study rooms, or hallways) without prior approval from Residence Life and Housing Operations, with the exception of organizations that fall under the Office of Sorority and Fraternity Life. Fraternities and sororities are required to follow Office of Sorority and Fraternity Life Social Events Policy and from their respective national organizations. Other individuals or groups who wish to serve alcohol in community spaces of University Housing are required to complete the Campus Life online registration form.

• Common containers (such as kegs and punch bowls) are not permitted.

• Activities (e.g. drinking games) and paraphernalia (e.g. funnels, beer pong tables, and ice slides) that promote the rapid and unsafe consumption of alcohol are prohibited.

• Brewing or production of alcohol beverages is prohibited.
Residents are required to inform all guests of the aforementioned regulations and to make sure their guests abide by all provisions of this policy. In cases where the guest of a resident violates this policy, the hosting resident may be subject to disciplinary consequences.

Residents under the age of 21:

- Are not permitted to be in possession of, consume or store alcohol in any University Housing, consistent with state law.

Residents age 21 and over:

- Are permitted to be in possession of, consume or store alcohol in University Housing, consistent with state law, with the exception of those at Oxford College. Possessing, consuming and/or storing alcohol is prohibited in all residence halls at Oxford College.

9. Use of Alcohol at Athletic Events

Alcoholic beverages may not be possessed, consumed or served at University intramural and club sports contests or intercollegiate athletic contests but may be allowed at adjacent events. Interpretation of “adjacent events” will be under the authority of the Director of Athletics or his/her staff, as appropriate.

The possession, consumption and purchase of alcoholic beverages, tobacco and/or illegal drugs by any student-athlete or manager is prohibited while participating in an intercollegiate, club, intramural or recreational athletics activity, including such activities taking place off campus, from the time the team leaves campus until the time the team returns to campus.

Student-athletes should refer to Emory’s Student-Athlete handbook for information regarding NCAA banned substances or contact their team physician or certified athletic trainer with any questions.

10. Procedures for Events with Alcohol

The following procedures apply to all University-Sponsored Events where alcohol will be served. The following procedures are provided to assist with the planning of University-Sponsored Events; however, the service of alcoholic beverages is permitted only in accordance with this policy and applicable local laws.

10.1. On-Campus and Off-Campus Events with Alcohol

University-Sponsored Student Organization Events

All University-Sponsored Student Organizations must complete the online registration form for student organizations if they are serving alcohol at an event.

The following management strategies must be in place in order for alcohol service to be permitted:

- The president or risk manager of the University-Sponsored Student Organization must attend a Campus Life sponsored training session that includes content about hosting events with alcohol;
- University-Sponsored Student Organizations must comply with any applicable regulations from their national organizations;
- Under no circumstances is the alcohol to be left unattended; and
- Activities (e.g. drinking games) and paraphernalia (e.g. funnels, beer pong tables, and ice slides) that promote the rapid and unsafe consumption of alcohol are prohibited.

In addition, the following management strategies must be in place in order for alcohol service to be permitted at events in which attendance is expected by individuals under the age of twenty-one (21):

- EmoryCard readers or another age-verification plan approved by Campus Life must be utilized; and
A licensed caterer or a non-student employee must serve the alcohol. The non-student employee must:
  a. Be at least twenty-one years old;
  b. Be listed by name on the online registration form for University-Sponsored Student Organizations;
  c. Be present for the duration of the alcohol being served; and
  d. If not an employee, have documentation of current insurance.

Other Events

Any academic or administrative department having or hosting an event with alcohol at which individuals under twenty-one (21) years of age are expected to attend must implement an age-verification plan, such as use of an Emory Card Reader or licensed server and must not leave alcohol unattended.

10.2. Additional Food and Beverages

All University-Sponsored Events where alcohol is served must have free non-alcoholic beverages and free and substantive food offerings available at all times during the event.

11. Additional Information

11.1. Health Risks

The scope and impact of health risks from alcohol and drug misuse and abuse are extensive and well documented, ranging from mood-altering to life-threatening, with consequences that extend beyond the individual to classmates, co-workers, family, friends, organizations and society at large. The University, therefore, conducts regular programs to educate its faculty, staff, and students that the misuse and abuse of alcohol and other drugs alters behavior, distorts perception, impairs thinking, impedes judgment and sabotages opportunity. Alcohol and drug abuse also may result in deterioration of physical health by causing or contributing to various diseases, illnesses, birth defects and even death. In addition, substance use negatively impacts health and wellness. Please see the Related Links section below for Drugs of Abuse – Uses & Effects, for additional information.

11.2. Resources for Education, Consultation and Counseling

The University sponsors several programs that provide information and professional services for its faculty, staff and students on matters related to the misuse and abuse of alcohol and drugs. These programs provide education, consultation, assessment, counseling and referral in a professional environment that respects individual confidentiality and integrity. The University maintains the Faculty Staff Assistance Program (404.727.4328) for faculty and staff; and the Counseling and Psychological Services (404.727.7450) and the Office of Health Promotion (404.727.7551) are available to students on the Atlanta campus. Counseling and Career Services (770.784.8394) and Center for Healthful Living (770.784.8634) are available to students on the Oxford Campus. Augmenting these formal programs, a variety of other campus programs and services educate and assist individuals who take the initiative to help themselves. Please see the Related Links section below for additional information on these services.

Common to all of these programs is the ethic that personal responsibility and professional guidance are keys to success. Therefore, the University expects its faculty, staff, and students to take measures to prevent alcohol and drug misuse and abuse in the community. The University also encourages its members to seek assistance from the above programs if they think that they may have a problem with alcohol or drug use.

11.3. Distribution

This policy and any revisions thereto shall be distributed to all faculty, staff, and students at least annually. Other applicable policies that reference this policy are found in the Campus Life Handbook, the Faculty Handbook, the Staff Handbook, the Human Resources Handbook and Policies and Procedures Manual, the Undergraduate Code of Conduct, and the Doctor of Medical Student Handbook.

11.4. Additional Policies Regarding Alcohol
All University-Sponsored Student Organizations are under the jurisdiction of the Student Government Association and/or Graduate Student Government Association and their policies and procedures and the policies and procedures of the Office of Student Involvement, Leadership, and Transition.

In addition:

Fraternities and sororities must comply with their respective national organizations’ alcohol policies, the Interfraternity Council, Multicultural Greek Council, National Pan-Hellenic Council and Panhellenic Council policies, and the policies of the Office of Sorority and Fraternity Life:

Residence Hall events must comply with the Office of Residence Life and Housing Operations policies:

Students at Oxford College must comply with the Oxford College Alcohol Policy; and

Miller Ward Alumni House events must comply with the Miller Ward Alumni House Alcohol Policy.

11.5. Review

A biennial review of this policy shall be conducted by a committee appointed by the president that shall include representatives from the following offices, programs, divisions and departments: Office of the President, Office of the Senior Vice President and General Counsel, Office of Compliance, Faculty Staff Assistance Program, Human Resources Division, Division of Campus Life, Office of Financial Aid, Emory Police Department, Office of the Provost, and Office of the Vice President for Health Affairs, as well as one or more student representatives. In addition, in accordance with the Higher Education Opportunity Act, the review shall include the number of drug and alcohol-related violations and fatalities that occur on campus or as part of the University’s activities and are reported to campus officials, as well as the number and type of sanctions imposed as a result of such drug and alcohol-related violations and fatalities that occur on campus or as part of the University’s activities.

Related Links (references and links)

Laws, Policies, and Protocols
- Current Version of This Policy (http://policies.emory.edu/8.8)
- Student organization registration system for events with alcohol (https://emory.campuslabs.com/engage/submitter/form/start/315808v)
- Office of Sorority and Fraternity Life Social Event Policy (http://osfl.emory.edu/current-members/index.html)
- Substance Abuse/Drug-Free Workplace (http://policies.emory.edu/4.66)
- Tobacco Free Environment Policy 4.113 (https://policies.emory.edu/4.113)
- Medical Amnesty Protocol (http://conduct.emory.edu/policies/medical_amnesty/)
- Undergraduate Student Code of Conduct (Atlanta) (http://conduct.emory.edu/)
- Oxford College Code of Conduct (http://www.oxford.emory.edu/life-at-oxford/student-conduct/)
- Student Government Association Finance Policy (https://orgsync.com/116828/chapter)
- Graduate Student Government Association Finance Policy (http://emory.orgsync.com/org/gsga/)
- Georgia Controlled Substance and Dangerous Drug Laws Chart (http://tinyurl.com/26pfhy)
- Miller-Ward Alumni House Policy (http://millerward.emory.edu/)

Support Resources
- Faculty Staff Assistance Program (www.fsap.emory.edu)
- Office of Health Promotion (http://healthpromotion.emory.edu/)
- Counseling and Psychological Services (http://counseling.emory.edu/)
- Student Health Services (http://studenthealth.emory.edu/hs/)
- Oxford College Counseling and Career Services (www.oxford.emory.edu/counseling)
- Emory Police Department (www.campserv.emory.edu/epd/)

Educational Resources
• Drugs of Abuse: Uses and Effects (http://www.emory.edu/WELCOME/SECURITY/2005-06/charts/ControlledSubUses&Effects.pdf)

Handbooks
• Doctor of Medicine Student Handbook (https://med.emory.edu/handbook/)
• Emory’s Student-Athlete handbook (https://issuu.com/emoryathletics/docs/student-athlete_handbook_2016-17)

Contact Information

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<td>Clarification of Policy</td>
<td>Emory Campus Life</td>
<td>404-727-4364</td>
<td><a href="http://campuslife.emory.edu/">http://campuslife.emory.edu/</a></td>
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<tr>
<td>Information about state and federal laws and the interpretation of the policy</td>
<td>Office of General Counsel</td>
<td>404-727-6011</td>
<td><a href="http://www.emory.edu/OGC">www.emory.edu/OGC</a></td>
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Revision History
• Version Published on: Mar 02, 2020
• Version Published on: Aug 31, 2017 (Reinstated "health risks" section 8.8.11.1)
• Version Published on: Jun 07, 2016 (updated MWAH web address)
• Version Published on: Sep 18, 2014 (added Oxford contact information)
• Version Published on: Feb 06, 2014
• Version Published on: Feb 05, 2013 (resource contact information updated/revised 8.8.11.1)
• Version Published on: Jan 31, 2013 (reordered 8.8.1 and 8.8.2. Wording changed in 8.8.2)
• Version Published on: Dec 20, 2012 (revised Campus Services Available for Drug Abuse document)
• Version Published on: Dec 14, 2012 (revised 8.8.3.3 and Drug Trafficking Penalty Link)
• Version Published on: Jul 02, 2012
• Version Published on: Jun 29, 2012 (June 2012-updated 8.8.10. Clarify definition for student organizations)
• Version Published on: Dec 02, 2009 (12/2/2009-changed name to Office of Student Leadership & Service)
• Version Published on: Jun 04, 2007 (Original Publication)
Policy 8.9
Student Vehicle Use Policy

Responsible Official: VP and Dean for Campus Life
Administering Division/Department: Campus Life
Effective Date: May 01, 2010
Last Revision Date: September 21, 2018

Policy Sections:
I. Overview
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VII. Revision History

Overview

The goal of the Student Vehicle Use Policy is to protect our students from injury while driving personal vehicles on University-sponsored activities and programs and while driving University vehicles or those rented for University sponsored-activities and programs.

Applicability

This Student Vehicle Use Policy sets forth the University's regulations and procedures for all students (graduate, professional, and undergraduate) who drive University-owned, rented, or leased vehicles in connection with University-sponsored activities or programs or personal vehicles in connection with University-sponsored activities and programs.

The Student Vehicle Use Policy does not apply to the rental of vehicles to be used by graduate or professional students for a University-sponsored activity or program and that is: (1) for less than seven days, and (2) for a driving distance of no more than 300 miles one-way.

University-sponsored activities and programs are defined in this policy as all activities funded in any way through the University, such as all recognized/chartered student organizations, Residential Life, programs and organizations in
Civic and Community Engagement, programs and organizations in Recreation and Wellness, athletic or academic, academic employment or internships, and off-campus programs.

**Policy Details**

8.9.1 Requirements

8.9.2 Motor Vehicle Record

8.9.3 Driver Training

8.9.4 Personal Vehicles

8.9.5 Travel Limitations

8.9.6 Travel Itineraries/Parties

8.9.7 General Operating Instructions

8.9.8 Emergency Action Plan and Accident Reporting

8.9.8.1 Important Notes

8.9.8.2 Recommended Emergency Action Plan Guidelines

8.9.9 Violations of this policy for undergraduate students are subject to the Undergraduate Code of Conduct while graduate and professional school students will be subject to the disciplinary processes of their respective academic units.

8.9.1 Requirements

To drive a University-owned, rented, or leased vehicles or personal vehicle in connection with University-sponsored activities or programs for any purpose, a student will need to:

- Follow this policy;
- Be at least 18 years of age;
- Hold a valid U.S. driver’s license and have held either such license or a foreign license for at least two years;
- Disclose any moving violations and vehicle accidents during the last three years;
- Complete the Motor Vehicle Record Consent Form (available in the forms section on any student organizational portal on Orgsync), which authorizes Emory University Human Resources to conduct a state level driving record check;
- Have a "clear" or "acceptable" driving record as defined below; and
- Successfully complete the Emory Defensive Driving Course every two years in order to drive a University-owned, rented, or leased vehicles or personal vehicle in connection with University-sponsored activities or programs.

8.9.2 Motor Vehicle Record

The University will check a motor vehicle record (MVR) when the Consent Form is first submitted and at least bi-annually (every two years) thereafter. Additional checks may be conducted if the University becomes concerned about a student's ability to drive in an official capacity on a University-sponsored activity or program.

Please allow sufficient time for the MVR receipt and review, as you will not be permitted to drive a University Vehicle on a University-sponsored activity or program until your MVR is received, approved and the defensive driving program test is passed and certificate of completion is submitted to Student Involvement, Leadership, and Transitions.
MVRs will be assessed based on the criteria below, as a minimum standard. In certain situations, drivers may be held to higher standards, depending on the nature of the driving, driving record, or concerns about ability to drive safely.

An MVR will be considered unacceptable if it involves:

(a) One or more of the following violations during the previous three-year period:
   - reckless driving;
   - driving while impaired or under the influence of alcohol or drugs;
   - homicide by vehicle, negligent homicide or involuntary manslaughter;
   - fleeing or attempting to elude police officers;
   - driving without a license or while a license is suspended or revoked;
   - hit and run or failure to stop after an accident; or
   - major speeding (20 MPH or more over limit)

(b) Two or more of the following violations during the previous two-year period:
   - speeding (less than 20 MPH over limit);
   - any other moving violation other than speeding or listed in (a), (b) or (c);
   - "at-fault" accident; or
   - failure to have required insurance

(c) Three of the following violations during the previous two-year period:
   - defective equipment;
   - oversize or overweight load;
   - operating without required equipment or warnings;
   - other equipment violations; or
   - not "at-fault" accident

Driving records must be clear or acceptable, as outlined above, for a student to drive a University-owned, rented, or leased vehicles or personal vehicle in connection with University-sponsored activities or programs on a University-sponsored activity or program.

If a student does not meet the requirements, he or she will not be allowed to drive a University-owned, rented, or leased vehicles or personal vehicle in connection with University-sponsored activities or programs on a University-sponsored activity or program.

If a student’s driving record changes or if there is a change in a student’s medical condition that may affect his or her driving after initial driving approval, the student must report the change immediately to the office or department that manages such travel, or owns, rents, or leases the vehicle and Student Involvement, Leadership, and Transitions.

If a student becomes ineligible to drive a University-owned, rented, or leased vehicles or personal vehicle in connection with University-sponsored activities or programs on a University-sponsored activity or program, the approved status will be revoked for the duration of enrollment at the University. Further, the student may be subject to disciplinary action from the Office of Student Conduct for undergraduate students or the appropriate graduate or professional school conduct process for graduate students.

8.9.3 Driver Training

In order to drive a University-owned, rented, or leased vehicles or personal vehicle in connection with University-sponsored activities or programs, students must successfully complete the Emory Defensive Driving Course once every two years. Student Involvement, Leadership, and Transitions oversees the online Emory Defensive Driving Course, and the National Safety Council will certify individuals who successfully complete the Defensive Driving Course.

Students must first have their Motor Vehicle Record checked by turning in an MVR Clearance Form and a copy of their Drivers License to Student Involvement, Leadership, and Transitions via OrgSync. Once the MVR passes, the student will be informed on how to take the course. For forms and more information go to the forms section of any student organization portal on OrgSync.
Individuals who do not successfully complete the Defensive Driving Course will be provided an opportunity to repeat the course and successfully complete it. If a passing score is not attained the second time, such students will not be allowed to drive on a University-sponsored activity or program, and a decision will be made regarding the employment status of a student whose job requirement requires driving on a University-sponsored activity or program.

8.9.4 Personal Vehicles

A student who uses his or her personal vehicle on a University-sponsored program must:

- Obtain personal auto insurance and provide the following upon request - a valid and current certificate of insurance that includes insurance company name, make/model of vehicle, vehicle VIN number, policy number and name of person insured.
- Acknowledge that the University does not carry insurance on, and assumes no responsibility for, any damage to personal vehicles, even when used on a University-sponsored activity or program. The student’s auto insurance will respond for third party liability including liability for injuries to passengers in the vehicle. It is an industry standard that insurance follows the vehicle.
- Acknowledge responsibility for paying any deductibles or co-pays associated with personal insurance in the event of an accident.

8.9.5 Travel Limitations

- Students may not drive a University-owned, rented, or leased vehicles or personal vehicle in connection with University-sponsored activities or programs, on a University-sponsored activity or program, more than 500 miles one-way. For trips over 500 miles one-way, students must contract with a third party carrier (i.e. airline, bus company, shuttle service) or received special permission from the Director of Student Involvement, Leadership, and Transitions.
- Note: Proposed travel that falls outside of these travel limitations must be reviewed and approved in advance by the Student Travel Committee (Director of Student Leadership and Service, Dean of Students, Director of Athletics and Recreation). Third party carriers must be chosen from a list pre-approved by the Student Travel Committee. For more information, please contact the Director of the Office of Student Leadership and Service.
- Do not exceed the recommended load capacity for vehicles for both number of passengers and weight of cargo.
- 15 passenger vans may not be leased, purchased or driven as University vehicles. Only 12 passenger vans or smaller may be used.

8.9.6 Travel Itineraries/Parties

This section of the policy applies to all trips greater than 60 miles from Emory’s campus.

- A complete roster of travelers including cell phone numbers and a trip itinerary should be filed with appropriate on-campus personnel (i.e. staff member, student organization advisor) for each University-sponsored activity. There should be at least two on-campus personnel who have responsibility for implementing the emergency action plan (see 8.9.8), and the traveling party should have emergency phone numbers for both of these individuals.
- There should be more than one traveling person designated as the “person responsible” on all trips in case of injury to one of the persons.
- Other than Emory students, minors may not ride in vehicles used on a University-sponsored activity or program.
- Family members may not be transported in University-owned, rented, or leased vehicles or personal vehicle in connection with University-sponsored activities or programs on a University-sponsored activity or program.

8.9.7 General Operating Instructions
• Drivers must drive responsibly and are expected to follow traffic laws, posted speed limits, practice defensive driving, wear seat belts and avoid any activity that has the potential to divert attention from driving safely.
• Drivers are restricted from activities of distracted driving while driving on behalf of the University, including but not limited to use of navigation, cell phones, texting, smoking, eating, checking email, etc.
• Drivers must abide by the hands free law (House Bill 673) in the state of Georgia.
• Drivers must monitor weather and road conditions and commit to change plans if warranted to ensure safety. This may mean taking breaks more frequently, stopping overnight, or postponing the trip altogether.
• Change drivers at least every 2 hours, more frequently if the driving is fatiguing. If a trip is more than 2 hours away, there must be at least 2 certified drivers per vehicle.
• Drivers must assess the type of driving (highway, back roads, winding roads, hilly roads) compared to the driver's experience and comfort level and assign driving shifts accordingly.
• Do not caravan. Each driver should have a set of directions and maps. Do not attempt to stay together or rendezvous along the way. Each driver should travel independently. It is recommended that there be no driving between 12:00 midnight and 6:00 a.m.
• While driving on a University-sponsored activity or program, a driver may not be under the influence of illegal drugs or alcohol. Drivers and passengers may not bring alcoholic beverages (even unopened) into a vehicle. Such behavior will subject students to disciplinary action as determined by the Office of Student Conduct.
• Drivers must secure University Vehicles when not occupied and must have contents reasonably safeguarded.
• The use of radar detectors (or similar speed enforcement detection) is strictly prohibited.
• Trailer, hitches or towing are not permitted without special permission.
• University Vehicles should be used only for University business and should not be taken home at night (special exceptions may be approved by student activity advisor).
• Drivers are personally responsible for paying all traffic tickets.

8.9.8 Emergency Action Plan and Accident Reporting

8.9.8.1 Important Notes

• The University’s liability insurance protects the University against damages resulting from bodily injury and/or property damage. The University’s liability insurance will also protect an authorized driver as long as the authorized driver is driving a University Vehicle and is acting within the scope of his/her authority and responsibilities. As noted above, however, when driving your personal vehicle - even on a University-sponsored activity or program - your personal insurance is primary.
• Immediately report all accidents during a University-sponsored program to your student activity advisor, even if you are driving your personal vehicle per the agreed upon Emergency Action Plan.
• Depending on the circumstances, advisors will contact the following University officials to enact an emergency action plan:
  o University Communications – 404/727-6216
  o Emory Police Department - 404/727-6111
  o Campus Life Emergency Line – 404/280-7073 or 404/895-5948
• Failure to report an accident will result in the revocation of your authorization to drive a University Vehicle on a University-sponsored activity or program.
• All University-owned vehicles contain an accident reporting kit and insurance card. Driver is responsible for using kit in the event of an accident.
• When you return to campus, promptly complete an accident report form with the Emory Police Department and contact the Office of Risk and Insurance Services.
• All accidents will be investigated and may result in revocation of driving authorization and other disciplinary action.

8.9.8.2 Recommended Emergency Action Plan Guidelines

• Each department and division should develop detailed instructions in an Emergency Action Plan. This plan should be disseminated to all students driving or travelling under your jurisdiction.
• All chartered Student Organizations should abide by the Office of Student Leadership & Service Emergency Action Plan unless otherwise noted (http://www.osls.emory.edu/student_orgs/eagle_source/student_driving.html).

• General recommended actions to include are as follows:
  o Assess safety of self and passengers
  o If injuries, Call 9-1-1 immediately.
  o If no immediate injuries, move the vehicle to a nearby, safe place if possible.
  o Call 9-1-1.
  o Take down all information, take pictures of damages, etc.
  o Contact your activity advisor, faculty, or staff member ASAP
  o When police arrive, do file a police report no matter how serious the damage or injuries
  o Work with your advisor, faculty, or staff member contact to determine how to proceed back to campus.
  o Within 24 hours, contact Office of Risk Management to alert to the issue (EPD/Risk Management – 404-727-6111/ 404/686-2470).
  o Complete an internal incident report form to document statements from all witnesses back on campus.

8.9.9 Violations of this policy may subject a student to disciplinary action as determined by the Office of Student Conduct.

Definitions

n/a

Related Links

• Current Version of This Policy: http://policies.emory.edu/8.9
• Safe Driver Enrollment Form (http://www.osls.emory.edu/student_orgs/eagle_source/student_driving.htm)

Contact Information

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Revision History

• Version Published on: Sep 21, 2018 (Updated policy content, contact information.)
• Version Published on: Sep 19, 2013
• Version Published on: Dec 12, 2012 (2nd sentence under applicability)
• Version Published on: Sep 27, 2012 (procedures and protocol revisions)
• Version Published on: Jun 22, 2012 (corrected link in 8.9.3)
• Version Published on: Oct 18, 2010
• Version Published on: Mar 03, 2010
• Version Published on: Feb 12, 2010 (Original Publication)
Policy 10.12
Student Complaints

Responsible Official: Provost and Executive Vice President for Academic Affairs
Administering Division/Department: General Policies
Effective Date: April 01, 2013
Last Revision Date: February 24, 2020

Policy Sections:
I. Overview
II. Applicability
III. Policy Details
IV. Definitions
V. Related Links
VI. Contact Information
VII. Revision History

Overview

Emory University is committed to receiving and addressing written student complaints against the university, its faculty, staff, or administrative personnel in a timely manner. Appropriate procedures are described below and should be adhered to in response to student complaints. Students should first attempt to resolve their complaints with the office most directly responsible for the action being challenged. Each school or administrative unit at Emory has an office of Student Services or other office that can further assist students and direct them -if they are uncertain about where to start. In addition, students may use the Office of the Ombuds (https://ombuds.emory.edu/) to assist with complaints if they are uncertain or wish to discuss a situation confidentially before taking more formal action. Note that in cases of sexual misconduct, the Ombuds is a mandated reporter.

Federal financial aid laws and regulations require that each state has a process to review and act on complaints concerning educational institutions in the state. You may file a complaint about Emory University with the State of Georgia Office of Inspector General by following the directions at the OIG website. In the event that OIG receives a student complaint relating to financial aid, it will forward it to the Office of Inspector General of the U.S. Department of Education.

An agreement with the Georgia Nonpublic Postsecondary Education Commission permits students enrolled in distance learning programs to file a complaint with the following agencies if their complaint cannot be resolved by following Emory University procedures: 1) the Georgia Nonpublic Postsecondary Commission, 2) the Southern Association of Colleges and Schools, Commission on Colleges, and 3) a complaint to the state in which the distance learning student resides.
Applicability

This policy applies to current and former students who choose to make a formal written complaint against the university, its faculty, staff, or administrative personnel.

Policy Details

Documentation of Complaint

Student complaints must be submitted in writing and accompanied by relevant documentation describing 1) the specific action, practice or decision that is being challenged, 2) the individuals involved in or with knowledge of the action, practice or decision at issue, 3) the impact of the decision, 4) what resolution is desired, and 5) why it should be granted.

Complaint Resolution

Except in situations involving allegations of discrimination or harassment (where students may file complaints directly with the Office of Equity and Inclusion), Emory encourages each student to pursue complaints against faculty, staff or administrative personnel at the school, office, or unit level. Each school and administrative unit has its own procedures as described in the student handbook, school's catalog, or unit website. Academic or other concerns usually begin with student service personnel in each school or administrative unit who then typically route the concerns to the appropriate school or administrative authority. Student concerns can be effectively handled by school or administrative unit personnel who have expertise in the academic or service discipline involved, familiarity with the faculty/staff, and who have experience in handling similar decisions made regarding its students.

To expedite a prompt resolution, complaints should include current contact information of the individual filing the complaint. In most cases, responses to the complaint, including the final decision, will be provided in writing within 30 days of receipt of the complaint. However, exceptions to this timeframe may be allowed with reasonable and regular communication to inform the student of the current status of the complaint.

Record Retention

The designated school or unit representative for reporting purposes should retain the written complaint along with the resolution of the complaint, and any additional supporting documentation including emails, or other communication. In addition, an action log of all complaints received should be maintained each year. This action log is collected by the Office of Planning and Administration as a part of the Annual Report process. An example is provided below in the "Related Link" section.

Distance Learning: National Council for State Authorization Reciprocity Agreements

Effective March 17, 2016, the Georgia Nonpublic Postsecondary Education Commission (GNPEC) approved Emory University to participate in the National Council for State Authorization Reciprocity Agreements (NC-SARA). A “State authorization reciprocity agreement” is an agreement between two or more States that authorizes an institution located and legally authorized in a State covered by the agreement to provide postsecondary education through distance education or correspondence courses to students in other States covered by the agreement. If a complaint submitted by a student enrolled in a distance learning program cannot be resolved by following the Emory University procedures, a student may file a complaint with the following agencies: 1) Georgia Nonpublic Postsecondary Commission (complete the SARA Online Student Complaint form), 2) the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC), Emory University’s regional accrediting body (“Complaint Procedures”), and 3) a complaint to the state within which the distance learning student resides (file a complaint in your state).

State of Georgia

Federal financial aid laws and regulations require that each state has a process to review and act on complaints concerning educational institutions in the state. If you have a complaint, you may file it with Emory's financial aid office or call the Trust Line at 1-888-550-8850 or file a report online at https://www.mycompliancereport.com/EmoryTrustLineOnline. You may also file a complaint about Emory
University with the State of Georgia Office of Inspector General by following the directions at the OIG website.
In the event that OIG receives a student complaint relating to financial aid, it will forward it to the Office of Inspector General of the Department of Education.

Southern Association of Colleges and Schools Commission on Colleges

The Southern Association of Colleges and Schools Commission on Colleges is Emory University’s regional accrediting body. Students may make inquiries to SACSCOC regarding complaint procedures or about issues and concerns that could be considered complaints. Policy and procedures for filing student complaints are outlined in the document “Complaint Procedures against SACSCOC or its Accredited Institutions.” SACSCOC asks that you read its policy statement before filing a complaint.

Definitions

A complaint is a written description of a problem or concern that has not been resolved through normal academic or administrative processes at the office or unit level. Student complaints can be categorized into four major areas: Academic, Non-academic, Discrimination/Harassment (equityandinclusion.emory.edu), or Appeals of any of the previously mentioned areas.

If a student has a complaint involving discrimination, harassment or sexual misconduct against an Emory employee, the complaint can be made directly to the Office of Equity and Inclusion. Otherwise, a complaint should be filed with and handled by the relevant school or administrative unit.

The “handling official” is the person designated in each school or administrative unit to address the complaint.

An ombudsperson is an independent, impartial individual from whom students may seek confidential guidance regarding a problem, conflict or concern. The Emory Ombuds Office offers assistance through informal means only and is not an advocate in grievance procedures, judicial procedures, or any other formal processes.

A “State authorization reciprocity agreement” is an agreement between two or more States that authorizes an institution located and legally authorized in a State covered by the agreement to provide postsecondary education through distance education or correspondence courses to students in other States covered by the agreement.

Related Links

- Current Version of This Policy: http://policies.emory.edu/10.12
- Office of the Ombuds Website (https://ombuds.emory.edu/)
- Emory Trustline (http://www.mycompliancereport.com/EmoryTrustLineOnline)
- Office of Inspector General (https://oig.hhs.gov/)
- Southern Association of Colleges and Schools Commission on Colleges Complaint Procedures (http://www.sacscoc.org/pdf/081705/complaintpolicy.pdf)
- NC-SARA Online Student Complaint Forms (https://gnpec.georgia.gov/student-complaint-forms)
- Information for Filing Complaints in Other States (https://sheeo.org/about/)
- Equity and Inclusion Website (http://equityandinclusion.emory.edu/)
- Student Complaint Example (https://policies.emory.edu/uploads/StudentComplaintLogExample1.pdf)

Contact Information

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Revision History

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Travel Policies

If a student is traveling utilizing University funds or at the request of the University, then he or she should refer to Emory University Travel Policies.

Section 2: EUSOM Policies

Clinical Supervision of Medical Students

Purpose

To ensure the safety of patients and students and foster an optimal environment for student learning.

When is this policy applicable?

This policy applies to medical students involved in patient care as part of the MD curriculum

Who may supervise medical students?

1. Faculty physicians or residents/fellows supervised by faculty physicians
2. Licensed and board certified or board eligible non-faculty physicians approved by the clerkship/course director
3. Licensed healthcare providers when supervising an activity within the scope of their own practice

Levels of supervision

Students must be supervised at all times at one of the two following levels:

1. Direct supervision: supervisor is physically present with student and patient
2. Indirect supervision: supervisor is not physically present with student and patient but is present on the clinical site and immediately available to the student to provide direct supervision

Special Situations

1. Intimate exams: Students must be directly supervised by a clinician while performing an intimate exam. Intimate exams include genitourinary, rectal, and breast exams.
2. Procedures: The supervising physician is responsible for determining the level of supervision that is required based on the student’s competency and the procedure being performed.

Regardless of the level of supervision, the supervising clinician must evaluate all patients seen by students before the patient leaves the healthcare setting.

Training of supervisors
Faculty physicians are responsible for all learning events in their environment, including events supervised and facilitated by non-physician healthcare providers and non-faculty physicians.

1. All supervising clinicians must be aware of and have access to this supervision policy and Emory’s student mistreatment policy.
2. All faculty physicians responsible for supervising a student during a given clerkship/course must be aware of MD course objectives. Clerkship/course directors are responsible for disseminating this information.

**Policy Implementation**

1. Clerkship/course directors are responsible for ensuring access to aforementioned policies.
2. Clerkship/course directors must ensure students are aware of how to report violations of this policy.

**Confidentiality of Student Evaluations**

Students are expected to submit candid, constructive, professional evaluations of EUSOM courses, faculty, residents, and others when asked to do so. All evaluations are confidential and are blinded to prevent school personnel from knowing the identity of the person submitting an evaluation. It is vital to the evaluation process that students not fear retribution or recrimination based on their honest perceptions.

Although students must log in to the OASIS system in order to submit evaluations, OASIS is specifically designed to redact all identifying data from every type of evaluation form submitted. This protects students from real or perceived retribution for the evaluation data that they submit. Evaluation data collected through OASIS are stripped of individual identifiers and stored on secure servers.

In the unlikely event that a student submits information through the evaluation process that could pose a credible threat to the safety of that student or others, a mechanism can be activated to retrieve identifying information about the responsible student. The decision to seek the identification of a student based on information from an evaluation form rests **solely** with the Executive Associate Dean for Medical Education and Student Affairs, or in his/her absence, a designee. In such a case, the specific evaluation will be matched to the individual student by the designated staff member who has the authority and ability to do so.

With the exception of the aforementioned extreme circumstance, no school personnel will have access to the identity of students who submitted an evaluation.

**Consensual Teacher – Student Relationships**

The relationship between teacher and student is the foundation of the academic mission of the University. This relationship vests considerable trust in the teacher, who, in turn, bears the responsibility to serve as mentor, educator, and impartial evaluator. In discharging this responsibility,
teachers are accountable for behaving at the highest professional level, recognizing the dignity and worth of each person, and protecting the integrity of the student-teacher relationship.

Teacher-student relationships carry risks of conflict of interest, breach of trust, abuse of power, and breach of professional ethics. For these reasons, teachers must not engage in any consensual sexual relationships with a student while the teacher is in a position of supervisory academic authority with respect to the student. Nor may a teacher assert any supervisory academic authority with respect to a student who was the subject of a previous consensual sexual relationship. This prohibition extends to consensual sexual relationships between a graduate or professional student and an undergraduate when the graduate or professional student has some supervisory academic responsibility for the undergraduate, to consensual sexual relationships between department Chairs and students in that department, to consensual sexual relationships between graduate advisors, Program Directors, and all others (each of whom is considered a teacher) who have supervisory academic responsibility for a student and that student.

When a teacher-student consensual sexual relationship exists, has previously existed, or develops, the teacher must decline to participate in any evaluative or supervisory academic activity with respect to the student. Furthermore, it is the responsibility of the student to inform the appropriate dean when such a relationship exists, or has existed, so that he/she will not be placed in any such situation. The appropriate dean to inform includes the Associate Dean for Medical Education and Student Affairs, Director of Admissions and/or Assistant Dean for Medical Education and Student Affairs for students in the Foundations Phase, and the Associate or Assistant Dean for Clinical Education for students in the Application, Discovery, and Translation Phases.

The deans, department chairs, and other administrators should respond to reports of prohibited sexual relationships by inquiring further and, if such reports appear to be accurate, initiating appropriate disciplinary action or remedial measures against the teacher involved. Egregious breach of this policy is adequate cause for termination under paragraph 12.2 of the Emory University Faculty Handbook Statement of Principles Governing Faculty Relationships.

Non-consensual sexual relationships are prohibited by the Equal Opportunity and Discriminatory Harassment policy (1.3).

**Gross Anatomy Laboratory**

The bodies available for dissection were donated by individuals who wanted their remains to be used for education and research. As a medical student, you are privileged to have the opportunity to use this anatomical donation. The rules of the anatomy laboratory are based upon PATIENT PRIVACY, RESPECT, SECURITY, SAFETY, and MAINTENANCE. These rules will be observed in the laboratory AT ALL TIMES.

**Respect**

The anatomical donors are to be treated with the utmost respect at all times. Inappropriate or improper behavior and/or comments within and outside the laboratory is/are unacceptable.
The articulated skeletons, skulls and isolated bones are to be afforded the same respect as cadavers. 

**Do not remove the numbered tag from your cadaver.**

The cadavers are to be properly maintained. Drying of tissue can be prevented by wrapping body parts in wet paper towels after each dissection. A special wetting fluid with a mold inhibitor is provided for this purpose in the large carboys near the sinks; do not use tap water. Any suspicion of mold or rot should be reported to the facility director immediately, since it can rapidly spread throughout body and to other donors in the room. The plastic body bag should be closed after each dissection. **Take good care of your cadaver – it is the best teacher you have in this course.**

All cadaver waste tissues are to be disposed of in the green trash bins. No other waste is to be disposed of in these bins (see below for the disposal of other waste).

Dissection tables should be kept clean and free of excessive tissue.

**The right of privacy and confidentiality due all medical patients is extended to our anatomical donors at all times.**

Cadavers will be appropriately draped at all times. All regions not being studied should be draped. Entirely cover the cadaver when leaving it for any period of time.

Use of cameras, cell phones or other photographic or video equipment is not permitted in the laboratory at any time unless specifically authorized by the course administration.

Only students, faculty and other authorized UVA personnel are allowed in the gross anatomy lab. Under no circumstances may a student bring an unauthorized visitor into the lab. Permission to bring a visitor into the lab can be granted only by Drs. Iwanik and McCollum and is restricted to healthcare professionals or individuals with an approved academic purpose.

**NOTHING leaves the lab without the permission of the facility administrator or the course director.**

Food and/or drinks are not allowed in the laboratory.

**Security**

Access to the anatomy lab is via electronic ID card key. Students have access to the Anatomy Lab 24 hours a day, seven days a week. Student access to the lab is recorded in the University ID card access database. **For safety and security after hours, students should only use the lab in the presence of another student - a “buddy system”.**

Keep the doors of the laboratory closed **AT ALL TIMES.**

Do not share your bone drawer combination with anyone.

**Safety**

The following safety procedures are in place to prevent injuries and limit exposure to chemicals:
Students must wear long pants and closed shoes whenever they are in the laboratory. Open-toed or perforated shoes (e.g., sandals), shorts and skirts are not to be worn in the anatomy lab. You will be asked to leave the laboratory if you are in violation of this dress code.

Students must wear a lab coat when in the lab. It is your responsibility to maintain your lab coat in a reasonably clean condition. The faculty will insist you wear your lab coat regardless of how dirty it is.

Nitrile gloves must be worn throughout the dissection period.

Eye protection must be worn whenever you are within five (5) feet of an open cadaver. Regular eyeglasses are sufficient eye protection. Students must wear safety goggles when using hammers, chisels, bone pliers and Stryker saws.

All used scalpel blades must be disposed of in the provided “sharps” containers. Never dispose of “sharps” in wastebaskets or garbage cans (see below for the disposal of other waste).

All injuries incurred in the gross anatomy laboratory, no matter how insignificant they may appear, must be reported immediately to an instructor. The instructor will administer first aid and determine whether the student should be directed to a facility for further treatment.

If an injury occurs in the anatomy lab after hours, students should first seek proper medical care and then report the injury to an instructor as soon as possible.

In case of an EMERGENCY, use the lab phone to call the police (9-911).

Students who are pregnant, or believe they may be pregnant, are responsible for discussing attendance in the gross anatomy lab with their physician.

**Maintenance**

The laboratory must be kept neat at all times and you are expected to clean your area after each day’s dissection. This includes frequently emptying the bucket at the end of your table and wiping up any large spills from the floor. You are provided space for storing your atlases and dissection tools – please use it! Atlases and tools that are left on the counters will be placed in the lost and found box. Note that proper trash disposal is as follows:

- cadaver (tissue) waste – green trash cans
- gloves and cadaver-soaked paper towels – red hazardous waste containers
- blades – red sharps disposal boxes located on counter tops
- paper towels, papers, etc. – regular gray trash cans

The anatomy study room is a grease-free area. Do not wear lab coats or gloves in this room. Please shut the door to the study room if you are the last person to leave the lab after hours.

Models are to be examined only in the anatomy study room. Using a pen or pencil to point out structures on a model is strictly prohibited. Blunt probes are to be used instead.
Do not share the laboratory combination with anyone! Do not allow any unauthorized person entry into the laboratory!

**Inclement Weather**

During a weather emergency, student safety is the highest concern. In the event of inclement weather, the School of Medicine follows the [Emory University Inclement Weather Policy 4.42](#) with the following modifications:

When the University is closed, classes during Foundations are canceled. The Executive Associate Dean for Medical Education and Student Affairs will notify students of any new arrangements for required activities or exams.

The Executive Associate Dean for Medical Education and Student Affairs will notify students of the expectations regarding reporting for clinical duties during inclement weather. As a general rule, if you live within walking distance of your clinical site or if you can travel via public transit (assuming it is running), you should report to your site. If you are working at a private practice or another outpatient site, you should call to confirm that the office is open. If travel to the clinical site would be dangerous, students should let their clerkship director and team know that you cannot safely travel to the site (you will not be penalized for this decision).

If students miss clinical time due to inclement weather, they may be asked to make up this time (especially a call day/night) if it is feasible within the duty hour restrictions and time left in the clinical rotation.

**Industry Relations**

The primary missions of the School of Medicine are to provide outstanding educational programs for medical and graduate students and trainees; to provide the highest standard of clinical care for patients; to develop outstanding, knowledgeable physicians and scientists who serve the community and the world; and to conduct innovative and collaborative research and integrate this knowledge into the practice of medicine. The School of Medicine is committed to ensuring that its faculty, staff, students, and trainees strive for the highest degree of ethical and professional standards in carrying out its missions. As part of this commitment, the School supports principled relationships with industry in which its faculty, staff, students, and trainees collaborate with industry on advances in science and medicine that enhance Emory’s missions and are beneficial to the public.

Industry has a long history of collaboration with academic medicine that has contributed to our educational, clinical, service, and research missions. These partnerships have often benefitted individual and public health through the development of new drugs, devices, equipment, computer technology, therapies, and services. For example, industry provides grants to Emory University to fund clinical trials and other research conducted by faculty; and faculty consult with industry to advise on research directions and health needs.
The primary intent of this policy is to support faculty, staff, students, and trainees in effectively engaging in relationships with outside entities. The individual, the School and University can work together to enhance the beneficial outcomes of personal external relationships and to prevent situations that might create actual or perceived conflicts of interest and might harm the public, the institution, or the individual. [View the entire policy.]

Emory SOM students:

- May not accept gifts from industry, on or off the Emory campus (pens, pads, cash, food and drink, entertainment, books, software, etc.). Travel expenses are also considered a gift, and therefore prohibited.
- May not accept donations of medications.
- Must not disclose information regarding clinical trials of medical devices or drugs to any outside entity.
- Must not provide advice or training to industry regarding selling, marketing, or promoting of a company’s products.
- May not receive remuneration for listening to sales talks or attending industry-sponsored education and training.
- May be part of interactions between industry representatives and faculty that concern research being done by the faculty member and industry, as long as the meeting does not include sales, marketing, or promotion.
- Must cooperate with inquiries from Emory administrative offices regarding compliance with these policies.
- Submit proposals for personal, external professional relationships with industry and other entities to the Dean for review and approval prior to engaging or receiving compensation for the activities.

Additional regulations in this policy include:

- Commercial Exhibits are prohibited in School of Medicine Buildings.
- Any book or educational material that is recommended by a faculty member who has a financial interest in the book or material must be approved by a committee formed by the faculty member’s chair.
- Faculty presentations to School of Medicine students and residents should disclose all their personal, professional financial relationships with industry in each presentation.

Any violation of this policy by a student will be considered unprofessional behavior and will subject the student to actions by the appropriate Progress and Promotions Committee or by an ad hoc Conduct Committee appointed by the Executive Associate Dean for Medical Education and Student Affairs.

Involuntary Withdrawal of Student from EUSOM

Overview
Emory University considers the safety and welfare of its students, faculty, staff and patients a top priority. When a student engages in behavior that violates Emory’s rules of conduct, the behavior will be addressed as a disciplinary matter under the applicable Student Conduct Code. The Student Conduct Code defines prohibited conduct and outlines a process for conducting disciplinary proceedings.

This Involuntary Withdrawal Policy and Procedure is not a disciplinary code, policy or process. It is not intended to apply to situations in which a student engages in behavior that violates the University’s rules of conduct. It is intended to apply when a student’s observed conduct, actions and/or statements indicate a direct threat to the student’s own health and/or safety, or a direct threat to the health and/or safety of others. There may be situations in which both this Involuntary Withdrawal Policy and the Student Conduct Code may apply. In all cases, the Dean of the School of Medicine shall have final authority regarding the decision, enactment, enforcement and management of the involuntary withdrawal of a student.

Policy Details

Criteria

A student may be withdrawn involuntarily from Emory if the University determines that the student represents a direct threat to the health and safety of himself/herself or others by (1) engaging or threatening to engage in behavior which poses a high probability of substantial harm to himself/herself or others; or (2) engaging or threatening to engage in behavior which would cause significant property damage, would directly and substantially impede the lawful activities of others, or would interfere with the educational process and the orderly operation of the University; or (3) is unable to fulfill his/her role as a student of the healthcare profession.

Procedure

When the Executive Associate Dean for Medical Education and Student Affairs (EAD) or his/her designee, based on a student’s conduct, actions or statements, has reasonable cause to believe that the student meets one or more of the criteria for involuntary withdrawal, he or she may initiate an assessment of the student’s ability to safely participate in the University’s program.

The EAD initiates this assessment by first meeting with the student to (1) review available information concerning the behavior and/or incidents which have caused concern, (2) provide the student with a copy of this Involuntary Withdrawal Policy and Procedure and discuss its contents with the student, (3) provide the student an opportunity to explain his/her behavior, and (4) discuss options available to the student, including counseling, voluntary withdrawal and evaluation for involuntary withdrawal. If the student agrees to withdraw voluntarily from the University and waives any right to any further procedures available under this policy, the student will be given a grade of W for all courses, will be advised in writing of any conditions that must be satisfied prior to re-enrollment, and may be referred for appropriate mental health or other health services. If the student refuses to withdraw voluntarily from the University, and the EAD continues to have reasonable cause to believe the student meets one or more of the criteria for involuntary withdrawal, the EAD may require the student to be evaluated by an appropriate mental health or other healthcare professional.
Evaluation

The EAD may refer the student for a mandatory evaluation by an appropriate mental health professional or other appropriate professional. The professional may be selected by the University, so long as there is no cost to the student for the evaluation. A written copy of the involuntary referral shall be provided to the student.

The evaluation must be completed within five school days after the date the referral letter is provided to the student. Prior to the evaluation, the student will be required to sign a written authorization authorizing the exchange of relevant information among the mental health professional(s) (or other professional) and the University. Upon completion of the evaluation, copies of the evaluation report will be provided to the EAD and the student.

The professional making the evaluation shall make an individualized and objective assessment of the student’s ability safely to participate in Emory’s program, based on a reasonable professional judgment relying on the most current professional knowledge and/or the best available objective evidence. This assessment shall include a determination of the nature, duration and severity of the risk posed by the student to the health or safety of himself/herself or others, the probability that the potentially threatening injury will actually occur, and whether reasonable modifications of policies, practices or procedures will sufficiently mitigate the risk. The professional will, with appropriate authorization, share his/her recommendation with the EAD, who will take this recommendation into consideration in determining whether the student should be involuntarily withdrawn from Emory. A copy of the professional’s recommendation will be provided to the student, unless, in the opinion of the professional, it would be damaging to the student to do so.

If the evaluation results in a determination that the student’s continued attendance presents no significant risk to the health or safety of the student, patients, or others, and no significant threat to property, to the lawful activities of others, or to the educational processes and orderly operations of the University, no further action shall be taken to withdraw the student from the University.

If the evaluation results in a determination that the continued attendance of the student presents a significant risk to the health or safety of the student, patients, or others, such that there is a high probability of substantial harm, or a significant threat to property, to the lawful activities of others, or to the educational processes and orderly operations of the University, the student may be involuntarily withdrawn from the University. In such an event, the student shall be informed in writing by the EAD of the involuntary withdrawal, of his/her right to an informal hearing, of his/her right to appeal the decision of the hearing officer to the Dean of the School of Medicine, and of any conditions necessary for re-enrollment. In most cases, a student who is involuntarily withdrawn will be given a grade of W in all courses in which the student is currently enrolled.

Informal Hearing

A student who has been involuntarily withdrawn may request an informal hearing before a hearing officer appointed by the EAD by submitting a written request to be heard within two business days
from receipt of the notice of involuntary withdrawal. A hearing will be set as soon as possible. The
student shall remain involuntarily suspended pending completion of the hearing.

The hearing shall be informal and non-adversarial. During the hearing, the student may present
relevant information and may be advised by an Emory faculty or staff member or a health professional
of his/her choice. The role of the advisor is limited to providing advice to the student.

At the conclusion of the hearing, the hearing officer shall decide whether to uphold the involuntary
withdrawal or whether to re-consider, and the student shall be provided written notice of the hearing
officer’s decision as soon as possible.

Appeal to the Dean

The student may appeal the hearing officer’s decision to the Dean, who shall review all information
presented and make a final decision as to whether or not to uphold the involuntary withdrawal.

Emergency Suspension

The University may take emergency action to suspend a student pending a final decision on whether
the student will be involuntarily withdrawn, in situations in which (a) there is imminent danger of
serious physical harm to the student or others, (b) there is imminent danger of significant property
damage, (c) the student is unable or unwilling to meet with the EAD, (d) the student refuses to
complete the mandatory evaluation, or (e) the EAD determines such other exceptional circumstances
exist that suspension is warranted. In the event emergency action is taken to suspend the student on
an interim basis, the student shall be given notice of the emergency suspension and an initial
opportunity to address the circumstances on which the emergency suspension is based.

Conditions for Re-enrollment

Because this Involuntary Withdrawal Policy applies to cases in which there is a concern about the safety
of the student or others, the Dean or his/her designee may require a student who has been
involuntarily withdrawn under this Policy to be re-evaluated before he/she is readmitted in order
to assure that he/ she presents no direct threat to himself/ herself or others.

Personal Recordings

Students are not permitted to record (either via audio or video) any Emory School of Medicine
educational event without the prior expressed authorization of the faculty member. Furthermore,
audio or video recording of meetings, phone calls, conversations, patients, or of any content involving
others is prohibited unless prior consent of all parties involved is obtained. Violation of this rule may be
deemed a violation of the Student Conduct Code, and improper use of any curricular material, including
recordings, may constitute infringement of intellectual property rights.

Research Studies Involving School of Medicine Students as Subjects
All research studies that include Emory School of Medicine medical students as subjects (i.e. any study that requires human subject protections as defined in HHS 45CFR46) must be approved by the School of Medicine. This policy includes: all studies performed by Emory University School of Medicine students on other students, studies by Emory University School of Medicine faculty members, studies performed by students or faculty members from all other LCME- accredited medical schools, or all others. Internal approval of a study does not replace the judgment of the Emory Institutional Review Board (IRB) and consent may be contingent on obtaining the appropriate IRB approval. All requests to conduct studies using Emory University School of Medicine medical students as subjects should be directed to the Associate Dean of Medical Education, Dr. Erica Brownfield.

Separation of Roles

Faculty and house staff members’ professional or personal roles, should not conflict with their roles as teachers and evaluators of students. Faculty and house staff members who have a professional, personal, or familial relationship to a student, including providing health services or psychiatric/psychological counseling, should not have any involvement in the academic assessment of that student.

All faculty and house staff members are required to recuse themselves of assessing a student with whom they have such a conflict. For any student assessment they complete, faculty and house staff must attest that no conflict exists.

Students must notify the Executive Associate Dean of Medical Education of any potential conflicts of interest in order to allow for changes in a resident or faculty teaching assignment. Students will be reassigned to a different faculty or house staff member for coursework and subsequent assessment. Any information provided to the Executive Associate Dean regarding potential conflicts will be treated as confidential.

Students as Chaperones

A chaperone’s role regarding intimate examinations (those involving breast, genitalia or rectum), is both to protect patients from abuse, as well as to protect medical care providers from false allegations. Due to the potential liability issues, medical students cannot serve as a chaperone for intimate examinations. This does not preclude medical students from performing or for being present for such examinations as part of their educational experience.

Students as Interpreters

Medical interpreting is a profession that requires training, experience, skills, knowledge of medical terminology, the Standards of Practice, and the Code of Ethics, as well as language fluency and proficiency in both English and the patient’s language. The Department of Human Health Services states that “an individual that has above average familiarity with speaking or understanding a language other than English does not suffice to make that individual a qualified interpreter for an individual with limited English proficiency.”
A qualified interpreter is required per federal standards and compliance with hospital policies. Students should not interpret for another person (third party), unless they meet the required interpreter qualifications. The same regulations apply to those that are hearing impaired. The only exception is if the medical situation is considered to be life threatening and no professional interpreters are available.

Furthermore, when a patient, family member or companion is deaf, non-English speaking or is Limited English Proficient (LEP), in order for bilingual/multilingual providers to communicate directly with said patient, family member or companion, in a language other than English, the provider must be assessed to determine their ability to communicate effectively in the target language. Students who wish to be assessed should contact the Office of Medical Education and Student Affairs to understand the responsibility and procedures related to doing this.

**Student Employment During the MD Program**

The schedule of studies and clinical activities of the MD 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 degree program. While employment is discouraged by the medical school, any student contemplating employment for any reason should discuss the matter with the Executive Associate Dean for Medical Education and Student Affairs 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.

**Student Mistreatment**

The School of Medicine strives for an environment that is respectful of all community members and does not tolerate mistreatment of students. Emory students are protected by two University Policies as stated in the following two paragraphs.

The [University Equal Opportunity and Discriminatory Harassment Policy (Policy 1.3)](#) is incorporated into this Policy. Per Policy 1.3, Emory encourages anyone who has knowledge of discrimination on campus to report alleged violations of Policy 1.3 to the Director of Equal Opportunity Programs. Emory faculty, administrators and supervisors are required to immediately report any complaints they receive or incidents of discrimination or discriminatory harassment they witness, to their immediate report or to the Office of Equal Opportunity Programs.

Per the Emory University [Sexual Misconduct Policy (Policy 8.2)](#) every university employee who is informed about an allegation of sexual misconduct involving any student is required to notify a Title IX Coordinator.
In conjunction with the two University Policies listed above, the School of Medicine Student Mistreatment Policy addresses additional types of behavior that will not be tolerated. Mistreatment of medical students includes, but is not limited to, students:

- Being treated in a manner that a reasonable person would find belittling, humiliating insulting or disrespectful under the circumstances
- Being sexually harassed
- Being denied opportunities for training or rewards, or receiving lower evaluations or grades based on the basis of any prohibited consideration, including race, color, religion, ethnic or national origin, gender, genetic information, age, disability, sexual orientation, gender identity, gender expression, veteran’s status, or any factor that is a prohibited consideration under applicable law (referred to as “prohibited considerations”).
- Being maliciously and intentionally left out of communications to the detriment of a student
- Being subjected to offensive sexist, racist, or ethnically offensive remarks or names
- Being required to perform inappropriate personal services (i.e. babysitting, shopping)
- Being threatened with physical harm (e.g. hit, slapped, kicked)

**Reporting Mistreatment**

Student mistreatment is contrary to the values, respect, civility, and community as set forth in the University's Statement of Ethical Principles. Medical students who experience mistreatment themselves or observe other students experiencing possible mistreatment are expected and encouraged to follow the following reporting process.

The initial step is for students to discuss the incident of mistreatment with their **Society Small Group Advisor (SGA)** in a confidential but not anonymous manner. SGA's develop a longitudinal relationship with each medical student and play an essential role in their development. SGA's have the experience to understand the context of the alleged offense and the training to guide the student to the next most appropriate action steps for resolution.

Students may choose to seek resolution through several other pathways. Any or all of the following persons may be contacted in seeking guidance to resolve an incident of experienced or observed mistreatment:

1. Small Group Advisor
2. A different Small Group Advisor
3. The Director of the Society System: Dr. Mary Jo Lechowicz
4. One of the Deans of the School of Medicine
5. The Executive Associate Dean for Medical Education and Student Affairs

The Society Advisors and Deans are trained to respond to complaints related to student mistreatment. The Society Advisors and Deans will report any alleged mistreatment to appropriate School and/or University officials as per the policies that apply to the report.
After discussing the mistreatment with their Society Advisor, another Society Advisor, or a dean, subsequent actions by the student may include any or all of the following:

Direct Communication with the Person Alleged to have Mistreated the Student

If the student feels comfortable speaking directly with the alleged offending person to address concerns and obtain an appropriate resolution, the student may do so.

File an Internal Complaint (within the School of Medicine)

A student who believes he or she has been mistreated may file a written complaint (via email or hard-copy) with the Executive Associate Dean for Medical Education and Student Affairs. The complaint should include the name(s) of those accused of mistreatment, the names of any witnesses of the alleged mistreatment, the nature of the alleged action(s), the date and times of the alleged action(s), and any adverse consequences experienced by the student.

If the mistreatment includes alleged sexual misconduct by a student, a report will be submitted to the University Title IX officer. If the mistreatment is alleged to be of a discriminatory nature and by a staff member, a faculty member, or others in the educational environment, the report will be submitted to the Equal Opportunity Program (EOP) for review.

If the alleged mistreatment is not sexual or discriminatory harassment, the Executive Associate Dean for Medical Education and Student Affairs will investigate the alleged mistreatment and make a report to the Dean of the School of Medicine, when possible, within 30 days of the filing of the complaint. The Dean or his or her designee will be responsible for deciding upon and imposing disciplinary action(s).

File an External Complaint

If a student believes he or she has been subjected to unlawful discrimination, harassment, or retaliation as described in Emory University Policy 1.3, the student may file a complaint with the Equal Employment Opportunity Commission.

Prohibition of Retaliation

The School of Medicine prohibits retaliation against a student who, in good faith, complains about or participates in an investigation of student mistreatment. Any student who feels he or she has been retaliated against or threatened with retaliation should report the allegation immediately to the Executive Associate Dean for Medical Education and Student Affairs. The Executive Associate Dean for Medical Education and Student Affairs will investigate the alleged retaliation and make a report to the Dean of the School of Medicine, when possible, within 30 days of the filing of the complaint. The Dean, or his or her designee, will be responsible for deciding upon and imposing disciplinary action(s).

While mistreatment issues may be written in student evaluations of residents or faculty and evaluations of courses or clerkships, students should NOT rely on those mechanisms as the primary or sole means to report mistreatment. The reporting mechanisms described above have been established to produce a timely and effective resolution to any mistreatment concerns.
Use of School of Medicine Buildings

All student activities in the School of Medicine that require the reservation of space must submit a request for approval to Ms. Shikina Harrison in Student Affairs. Once approval has been given the student leader can proceed with the following steps:

1. Use 25Live with your University User ID and Password.
2. Login with your Emory NetID and password and request the space. If you do not have access to 25Live, notify Ms. Harrison to request access. If time is a concern, let Ms. Harrison know the request has been placed in the system.
3. Ms. Harrison can assist you in getting a diagram of the set-up for your event to the Staging Department in Campus Services. This is needed only if changes must be made to the space; Campus Services will need it in order to set up and return the space to its original order.
4. All users of space in the School of Medicine must abide by the Use of School of Medicine Buildings policy. Failure to do so would prevent confirmed reservations in the future.

Students must use the on-line request procedures. Student Affairs staff can advise student leaders on their staging (tables and chairs) requests or needs for custodial or Campus Services in conjunction with their events.

Part V: Costs and Financial Aid

Section 1: Costs of the MD Program

Medical school tuition covers a normal program of study for the Doctor of Medicine degree. In addition, students must pay the following mandatory fees each semester: Athletic Fee, Activity Fee, Immunization/Disability Fee, Mental Health Fee, Clinical Administrative Fee and Technology Fee. A one-time Transcript Fee is assessed to students for their first semester of a degree seeking program at Emory.

A portion of the Student Activities Fee is returned to the individual classes/organizations to cover funding of appropriate class activities. Tuition payments are divided, one-half to be paid at fall registration and one-half to be paid at the beginning of spring semester. In the case that certain federal funds are not appropriated in future years for the support of education in the School of Medicine, subsequent increases in tuition rates may be necessary. Tuition rates are subject to change and will affect all students unless otherwise specified.

The 2020-2021 tuition rate for the Doctor of Medicine program is $25,500 per semester.

The Doctor of Medicine program has two semesters of payment (Fall and Spring) per year.

2020-2021 Fees for the Doctor of Medicine program

- Athletic Fees Per Semester $150
Each year the Financial Aid Office must estimate all normal expenses incurred by students in each academic program. This estimate is called the Cost of Attendance. In addition to tuition and fees, this estimate includes expenses for books, supplies, transportation, health insurance, food, rent, utilities, etc.

The estimated Cost of Attendance for the 2020-2021 academic year (Fall 2020/Spring 2021) is approximately $88,000. This covers a 12-month period.

How much should I expect to borrow for the entire MD program?

The average indebtedness for the MD students who graduated from the program in 2020 was approximately $182,000.

Are there programs that can reduce my indebtedness?

Yes, there are a number of employment arrangements in which students can reduce their indebtedness after they complete their degree. Some of these include the National Institutes of Health, the U.S. military and state health agencies. Also, some healthcare facilities will offer loan repayment incentives to potential employees. These arrangements often require the employee to commit to employment for a specific number of years. Also, students who work for a non-profit healthcare facility may qualify to have the balance of their loans forgiven after 10 years of repayment through the Public Service Loan Forgiveness Program.

Section 2: Applying for Financial Aid

Incoming MD students are encouraged to apply for financial aid as soon as possible. You do not have to be accepted to begin the financial aid process.

Students who wish to apply for need-based scholarships must complete both the Free Application for Federal Student Aid (FAFSA) and the CSS PROFILE. Parental income and assets must be included on the PROFILE regardless of the student’s age or marital status. The 2020-2021 FAFSA and PROFILE are based on 2018 income.

Students who wish to apply for federal loans only can complete just the FAFSA. Only the student (and spouse) information is required on the FAFSA.

View detailed instructions for applying for financial aid for the MD program
The FAFSA is available online. The school code for Emory is 001564. The PROFILE site school code is 0140.

The deadline to submit your financial aid documents is February 15, 2020 for incoming students. This is a target date and not a cut-off date, but students who complete their financial aid file later may miss out on some institutional funds. The deadline for returning students is May 1, 2020.

Once the university Office of Financial Aid receives your FAFSA information, they will begin to send you e-mails to let you know if other documents are required. Your financial aid file will be considered incomplete until all documents requested have been received.

The Office of Financial Aid will review your application and begin sending award letters to incoming students in April. The award letters will be electronic. Returning students will begin receiving their award letters in June.

By the time you are awarded, you will have access to Emory’s student information system OPUS. You will be able to review and accept your awards on-line, and you will be given instructions to complete promissory notes for any student loans that you accept.

Section 3: Types of Financial Aid

Veterans Benefits

The University Office of the Registrar is responsible for certifying the eligibility and enrollment for students receiving veteran’s educational benefits.

Yellow Ribbon Program for Veterans

The Yellow Ribbon Program is a provision of the Post-9/11 Veterans Educational Assistance Act of 2008. This program provides additional financial support for veterans who have 100% eligibility for Post-9/11 benefits. The dependents of such veterans can be eligible for Yellow Ribbon also.

Currently, one student in the MD program is awarded this funding annually in the amount of $7,000. The VA will match this amount in addition to providing any other benefits the veteran (or his/her dependent) is eligible to receive.

All veterans’ benefits are administered through the University’s Office of the Registrar. However, each school in the University has a specific contact for Yellow Ribbon. In the School of Medicine, the contact is the Associate Director of Financial Aid and Scholarships, Mike Behler. Interested students should contact him on June 15, 2020 for the 2020-2021 Yellow Ribbon Awards. Keep in mind that the funds are offered on a first-come, first-served basis for eligible applicants.

For detailed information about Veterans Benefits, including the Yellow Ribbon Program at Emory, please review the information on the Office of the Registrar’s website.
Emory Payment Plan

The Emory Payment Plan is available to qualified students who wish to divide tuition fees into scheduled payments. A $60 service fee is charged to participate in the Emory Payment Plan. The fee is added to the second payment.

Instructions are given for deduction of loans and for University-administered scholarships in listing the amount due, which is to be paid in four installments each semester according to the Emory Payment Plan Schedule. (The Payment Plan for summer semester is paid in three installments.)

Contact Student Financial Services at (404)727-6095 or their website to sign up for a payment plan.

Scholarships for Medical Students

Over 90 named scholarships are available and awarded by the Office of Financial Aid based on eligibility as determined by the information students submit on the FAFSA and the PROFILE. In addition to need, there are scholarships based on merit and community service. No supplemental applications are required. For a list of scholarships, please refer to the financial aid website.

Loan Programs

Direct Federal Unsubsidized Stafford Loan

Not based on financial need; up to $47,167 per academic year; 4.30% interest rate; interest is assessed as soon as student receives full disbursement of loan but student can allow interest to accumulate and accumulated interest is added to loan amount when student begins repayment; up to 10 years to repay (may be extended up to 25 years depending on total indebtedness); no cosigner required.

Direct Federal GradPLUS

Not based on financial need; can borrow up to the Cost of Attendance (see above) minus any other aid student is receiving; 5.30% interest rate; repayment begins 60 days after student receives full disbursement of loan but student can request a deferment until 6 months after leaving school; interest accumulates if student defers payments while enrolled; up to 10 years to repay (may be extended up to 25 years depending on total indebtedness); student must pass a credit check or have a credit-worthy cosigner.

Institutional Loans

Based on financial need; $5,000 per academic year; 4.22% interest rate; repayment begins 6-months after leaving school; up to 10 years to repay. These include: Emory Clinic Medical Loan, Medical School Dean’s Loan, Martha W. Andrews Medical Loan; AMA-ERF Medical Loan; Georgia Pediatric Society Medical Loan; Richardson Medical Loan; and Ben Smithloff Medical Loan.

Private Loans
Students are encouraged to take advantage of all institutional and federal aid before turning to private loans, which may have higher interest rates and/or lack some of the other benefits of federal aid. However, students who have reached federal loan limits or fail to meet certain academic requirements may need to look to private loans for assistance. These loans are available from some banks that participated in federal loans previously. Borrowers must be credit-worthy or have a credit-worthy cosigner. Contact the Office of Financial Aid or refer to its website for more information.

Emergency Loans

Students in need of emergency loans should contact the Associate Director of Financial Aid and Scholarships. Short-term, interest-free loans up to $1500 are available to students for their living expenses. These emergency loans are available within 90 days of the next financial aid disbursement date. Any amount due on emergency loans will be deducted from the student’s next financial aid disbursement on the disbursement date. If the disbursement does not cover the emergency loan amount, the student must cover the remaining balance out of pocket. Finance charges will accrue monthly on any remaining balance.

Section 4: Maintaining Academic Eligibility for Financial Aid

An underlying requirement for all federal, state and institutional financial aid is the need for students to meet 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 academic 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 the Financial Aid Satisfactory Academic Progress Policy is distinct from the Satisfactory Academic Progress that governs progress and promotions.

Financial Aid Satisfactory Academic Progress Policy – MD Program

Federal regulations require that students receiving financial assistance maintain satisfactory academic progress. The Office of Financial Aid is required to monitor a student aid recipient’s academic progress. Aid recipients must meet certain quantitative and qualitative measures and complete their programs within a maximum time frame. All students who receive financial aid, whether from federal, state or Emory-funded sources, must be enrolled degree candidates in good standing to retain financial aid awards.

Academic records will be evaluated each semester as follows:

Grade point average (GPA), time to degree completion (maximum attempted units), and percentage of courses passed (completion rate) will be evaluated at the conclusion of each semester. Medical students must maintain a 2.0 current GPA each semester and an overall GPA to meet satisfactory academic progress standards.
Failure to maintain the minimum GPA for two successive semesters will result in disqualification from receiving financial aid. Any student who fails for two successive semesters to pass two-thirds of the hours, i.e., maintain a 66.66% completion rate, will also be disqualified from receiving financial aid.

All students are expected to complete their degree programs within a maximum time frame. The maximum time frame for graduate students is 150% of the hours required to complete their degree program. Time to degree completion is calculated for all credit hours for which the student enrolls or receives credit at Emory and any of the following grades are assigned: A, B, C, D, F, Satisfactory and Unsatisfactory. A course assigned an Incomplete, In Progress or Withdrawal is also counted toward attempted credits. Audited classes are not considered attempted credits. Medical students must complete the degree within 269 attempted units based on a 179 unit-degree requirement.

Students who exceed the maximum timeframe are disqualified from receiving financial aid.

**Monitoring Eligibility: Disqualification, Probation, Suspension and Conditions of Reinstatement**

Students whose academic records fall below the minimum standards stated above will be disqualified from receiving future financial aid payments. Disqualified students may be approved to receive financial aid after successfully appealing their case. Students who successfully appeal are placed on Financial Aid Probation. During the probationary period students remain eligible for financial aid. Students who, at the conclusion of the probationary period, are making satisfactory academic progress will have their financial aid reinstated unconditionally for the next award term.

Students on probation must receive a GPA of at least 2.0, and are not permitted to receive grades of F, U, W, WF, WU, I, IF, or IU. Students who receive aid on probation and fail to meet probationary conditions will be ineligible for future financial aid payments. Students who become ineligible for financial aid or fail to meet probationary terms can re-establish their eligibility by attending classes at their own expense or with the help of private resources from outside the University. Once minimum standards are met, financial aid funding may be reinstated.

An appeal for extenuating circumstances should be submitted by the first day of class for the semester one is appealing to ensure adequate time to prepare for any impact to the student account. Failure to submit a complete appeal by this date may result in the probationary term being postponed to a future semester.

A Satisfactory Academic Progress Appeal Form should be submitted with supporting documentation of any mitigating circumstances that negatively impacted academic progression. The financial aid advisor should be contacted for any questions.

Generally, the Office of Financial Aid will only approve one appeal per academic degree. This policy may be waived on a case-by-case basis where extenuating circumstances can be documented.

**Section 5: Financial Obligations for Graduation**
It is a requirement for graduation that all financial obligations to the University shall have been satisfied. Students with an unpaid balance on their student accounts may have a hold placed on their diploma and transcripts until the balance is paid in full.

**Section 6: Tuition Refunds**

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 refer to the [Withdrawal Deadlines Schedule](#) posted on the Student Financial Services webpage for the most current refund policy for complete withdrawals.

No refund is given after the fifth week of any semester. 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.

Tuition refunds will apply as follows:

<table>
<thead>
<tr>
<th>Withdrawal during:</th>
<th>Charge</th>
<th>Credit</th>
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</thead>
<tbody>
<tr>
<td>First 5 class days</td>
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<td>100%</td>
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<td>Second 5 class days</td>
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<td>Third 5 class days</td>
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<td>Fifth 5 class days</td>
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**Section 7: Financial Aid Resources and Helpful Links**

Emory has created a 4-year program to provide students with up to date knowledge regarding debt management and personal finances during school and after. Workshops and classes on financial management and individual coaching sessions are provided during your medical school career. This is a component of the EUSOM “Debt Management Initiative”.

Other helpful resources include:

- [Emory University Office of Financial Aid](#) - Detailed instructions and information regarding the financial aid application process
Part VI: Student Wellness, Health and Other Resources

Section 1: Student Health

The health and well-being of Emory students is a top priority and essential to student success. While we encourage self-care, health promotion and prevention, medical 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.

The mission of Emory University Student Health Services and Counseling and Psychological Services (CAPS) 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 Services and CAPS are 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 Services is very proud to be fully accredited by the Accreditation Association for Ambulatory Healthcare, Inc. (AAAHC). The Emory Counseling and Psychological Services’ (CAPS) Psychologist Training Program is fully accredited by the American Psychological Association (APA).

Student Health Services (SHS)

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. 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, psychiatry, PrEP, transgender care, 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.
An after hours medical call center is available for telephone consultation with provider backup when the office is closed and can be contacted by calling 404-727-7551, option 0.

Professional fees for primary care visits to Emory Student Health 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 EUSHs are covered 100% by the Aetna Student Health Insurance Policy. The Emory Student Health Services (EUSHS) is a member of over 43 national PPO networks, including most major insurance carriers. The EUSHs 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 options are available by calling the front office at 404-727-7551 and discussing with the billing office.

The Student Health “Your Patient Portal” is a 24-hour Internet communication tool for Emory students. 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/FERPA 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, including same day/urgent care appointments. 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.

Due to the impact of COVID, we have added Telemedicine visits for those living in Georgia. We have COVID and non-COVID related in person appointments available. If you develop symptoms of COVID, send a message in the patient portal to the “COVID Assessment Provider” and a provider will call you to develop next steps. For non-COVID related appointments, call the front office at 404-727-7551 or access an appointment through the patient portal as they are made available.

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 Sharon Rabinovitz, MD, Executive Director
Student Health Immunization Nurse: Send a message on the patient portal to “Immunization Compliance” or email to immunizations-shs@emory.edu.

Student Counseling and Psychological Services (CAPS)

The Emory University Student Counseling & Psychological Services (CAPS) is located in the 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, faculty, or staff who are concerned about an Emory student. In addition, CAPS provides outreach and educational workshops on a variety of topics. Telemental health visits are available for those living in Georgia as an option for care.

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 CAPS between 8:30 am and 5:00 pm, Monday through Friday. Same day crisis triage appointments are available between 8:30 am and 3:30 pm. Psychiatric services are available at Student Health Services at 1525 Clifton Road, phone (404) 727-7551.

Learn more information about CAPS services.

Other after hours’ resources include:

DeKalb County Mental Health Support Line: 404-892-4646

In case of an emergency the Police should be called by dialing 911.

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 the Respect Advocate Michelle Passanno at 404.727.1514. Assistance is always available on the Respect Hotline at 470-270-5360 or visit: the RESPECT Program website.

Section 2: Student Insurance

Mandatory Health Insurance

Student Health insurance coverage for sickness, accidents and hospitalization is required of all Emory students. See Emory Mandatory Student Insurance Policy 8.7. All new and continuing degree-seeking and international Emory University students are required to have health insurance. Coverage must be
continuous from the date of matriculation until the date of graduation and must meet University minimum coverage requirements.

The Emory University Student Health Insurance Plan (EUSHIP) provides care for enrolled Emory students. View an overview of the Emory University Student Health Insurance Plan.

All students are automatically enrolled and charged for the Emory University Student Health Insurance Plan. The charge will appear on students’ tuition statements.

Students who have health insurance coverage through another carrier must complete an online waiver in OPUS confirming they have health insurance coverage that is comparable and meets Emory University waiver criteria. The Health Insurance Waiver site opens every spring (April or May) prior to matriculation. After the online waiver has been completed and approved through the online audit process, the charge for the Emory University Student Health Insurance Plan will reverse on the student’s university account.

Incoming MD students (including MD/PhD students starting in July) must complete the waiver by the August date only, as July starts the fall term for the MD program. Beginning with students’ second year, the waiver process must be completed annually for EACH year they are enrolled at Emory.

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.

View more information regarding the mandatory health insurance waiver process.

Disability Insurance

All students enrolled full-time in the Emory University School of Medicine are provided with group long-term disability insurance coverage. For the 2020-2021 academic year this coverage is provided by The Guardian Insurance Co., Inc. 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 Insurance

Students are covered by professional medical liability insurance any time they are enrolled in a clinical course for credit, 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 their Emory educational program.
This would include:

- activities that are an official component of the curriculum, including required and elective courses
- clinical activities that students may participate in, at the invitation of faculty, but which are not required as part of that faculty member’s SOM clinical duties
- volunteer clinical activities supervised by Emory faculty

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 the supervisor’s training and certification.

Students who provide medical services outside the scope of the School of Medicine curriculum or with non-Emory faculty physicians are NOT covered by University liability insurance. Students are advised not to engage in such activities unless other liability coverage is provided for them.

Section 3: Wellness and Well-Being

Emory University School of Medicine is committed to the wellness and well-being of learners, faculty, and staff from diverse backgrounds. This is facilitated through multiple domains which is longitudinal and begins at the start of medical student and extends to graduation. These faculty and student-driven initiatives are in alignment with the EUSOM’s goal on wellness which is to “facilitate system-wide cultural changes to maximize the success and well-being of our patients, learners, and teachers”.

While not an exhaustive list, EUSOM supports student wellness including mental and physical health, and financial, environmental, and social well-being. Well-being resources include:

1. **Relationships and Community**: Emory organizes society social events, and other offerings that help promote a healthy learning environment and a sense of belonging within the community for students.
2. **Purpose**: EUSOM helps students develop their professional identity and find meaning within their medical school experience. EUSOM embraces the value of diversity and personal growth, and encourages students to pursue their passions (via Discovery, elective and other opportunities).
3. **Mental and physical health**: Emory provides counseling and psychological (CAPS) and student health services (SHS) for all medical students. EUSOM encourages the practice of meditation, supports the enhancement of the physical environment (such as the Healthy Emory Sustainable initiatives) and strives to ensure students build their resiliency. EUSOM provides support systems and encourages healthy habits such as allowing students time to go to their doctor’s appointments. In addition, Emory is a Tobacco Free Campus. EUSOM provides suggestions to enhance how students organize and manage their lifestyle which can be found in the manual “Academic Success in Emory Medical School”.

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4. **Security**: EUSOM promotes student safety through policies and procedures regarding student mistreatment, harassment, and equal opportunity, and by ensuring a safe environment with the help of Emory’s Public Safety Departments. EUSOM helps promote financial security by organizing workshops on debt management and finances throughout the curriculum.

Other resources include your Small Group Advisors, Deans and access to the SOM Wellness and Well-being Committee through your student representative.

**Section 4: Infection Control Protocols**

**Needle Sticks and Other Blood/Body Fluid Exposures**

1. Learn and 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) Needle stick 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-healthcare 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 needle stick injury. Each hospital has a protocol 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).
9. Again, call the WHSC Needle Stick Hotline 404-727-4736 if you have any questions about management of the needle stick or other occupational exposure.

The following list of specific areas and/or individuals should be contacted at the facility in which the exposure occurs:

**Contacts for Infection Control Protocol**

**Grady Memorial Hospital and Affiliated Sites**

- Healthcare worker goes directly to Employee Health Services (EHS) – 15th floor EHS nurse will facilitate post-exposure care in collaboration with EHS doctor EHS staff will arrange for source patient testing
- EHS staff may call ID attending (on the call schedule for needle sticks) for consultation as needed.

**After hours and on weekends:**

Healthcare worker should NOT go to the emergency room unless they need an emergency eye wash. Healthcare worker calls STIX Hotline (404-616-STIX) and follow directions:

- Press 4: to be connected directly to the cell phone of the Health System Administrator HSA (who is physically present in the hospital). This cell number is: 404-319-7367
- Press 5: to leave a voicemail message for the Health System Administrator. This message will be delivered immediately to their cell phone and they will return the call promptly.

HCW may also call the WHSC Needle Stick Hotline and the Grady ID attending on-call for BBF exposures will be paged. The attending will inform the HCW of reporting procedures and assist them. HSA will personally arrange for source patient testing. Rapid HIV test results should be back within the 4-hour time frame for starting ART PEP.

If source patient is known to be HIV positive or the rapid test returns positive, the HSA will escort the HCW to the Emergency Department where they will receive care from an ED attending with consultation from the ID attending on call for BBF exposures. The HSA will contact the ID attending on call for BBF exposures. The ID attending will discuss the exposure with the ED attending (and the HCW) and make recommendations for ART PEP. The first dose of PEP will be given in the ED. Additional doses needed to last until the next business day will also be provided directly to the HCW.

If the source patient tests HIV negative, the HCW will be instructed to report to EHS on the next business day to get final lab results on the source patient (hep C, hep B sAg) and determine if additional follow-up is needed.

**Other contacts at Grady:**

- Employee Health Nurse on call (from home): 404-809-7470
• Susan Ray, MD cell: 404-536-8233 or PIC 17255

VA Medical Center

• Report incident directly to occupational health. VA Occupational Health Injury Management Dr. Joyce Thompson, DNP, FNP-C x6471
• Ms. Teneka Hosang, PA-C (x6471)
• Receptionist (x5400)

After hours and on weekends:

• Contact the nurse supervisor on call (physically present in the hospital): Call hospital operator and ask for the “AOD” on call.
• The HCW is seen in Emergency Room for Treatment with follow-up in Occupational Health the next business day. This is important for OH to forward BBPE information to Emory for further follow-up

Other contacts at VAMC:

• Robert Gaynes, MD, Hospital Epidemiologist – cell: 770-315-3335
• Rudy Tacoronit, MD, VA Occupational Health Director – x 5400
• If you are unable to reach any of the above individuals, call the WHSC Needle Stick Hotline 404-727-4736.

Emory University Hospital - Midtown

• Daytime hours, Monday thru Friday (7 am to 4 pm)
• Employee Health Service 404-686-2352

After hours, and on weekends:

• Healthcare worker calls Exposure Pager (PIC 11917) or calls the WHSC Needle Stick Hotline (404-727-4PEM).
• If WHSC Needle Stick Hotline called, the on-call OIM nurse practitioner will be paged (PIC 50464). The Occupational Injury Management (OIM) nurse practitioner will facilitate immediate post-exposure care. Healthcare worker should go to OIM during the next business day to have baseline labs drawn.

Other contacts at Midtown:

• Jesse Jacob, MD – cell: 404-402-5110

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

Emory University Hospital
• Daytime hours, Monday thru Friday (7 am to 4 pm) 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:

• Occupational Injury Management (Worker's Compensation) 404-686-8587
• Employee Health Services 404-686-8589
• Healthcare worker calls Exposure Pager (PIC 13084) or calls the WHSC Needle Stick Hotline (404-727-4PEM). If WHSC Needle Stick Hotline called, the on-call OIM nurse practitioner will be paged (PIC 50464). The OIM nurse practitioner will facilitate immediate post-exposure care.
• Healthcare workers should go to OIM during the next business day to have baseline labs drawn.

Other contacts at EUH:

• Jay Varkey, MD – PICC 12084

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

Children's Healthcare of Atlanta (CHOA) (Egleston or Scottish Rite)

• Any needle sticks or blood borne pathogen exposure is referred to the 24/7 hotline 404-785-7777. This is staffed by an employee health nurse who will provide guidance to students.
• Employee Health Digital Pager 1-800-682-4549 or Needle Stick Hotline (ext. 4444 at Egleston and ext. 824444 at Scottish Rite)

Other contacts at CHOA (if students cannot reach employee health nurse via hotline or pager)

• Employee Health Digital Pager 1-800-682-4549 or Needle Stick Hotline (ext. 4444 at Egleston and ext. 824444 at Scottish Rite)
• Andi Shane, MD – cell: 404-354-7692 or office 404-727-9880
• Infectious Disease Service Team on Call – pager: 404-785-7778

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

Financial considerations of accidental needle sticks

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 procedures outlined above are followed.
For medical students and students in the health professions, initial evaluation of the exposure should be as explained above. Following this initial evaluation, all incidents and follow-up for exposures occurring at a hospital should be reported by the student within 4 days to the Registrar, **Ms. Mary Kaye Garcia** 404-712-9921.

**Conversions**

PPD tuberculin skin tests will be performed every year (at a minimum) or at the time of exposure for medical 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 for students continued education 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 for persons with the given condition. In conducting this evaluation and making such recommendations, the Executive Associate Dean will consult with the student, the student’s personal physician, student affairs deans 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 Executive Associate Dean for Medical Education and Student Affairs 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 healthcare 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.

Section 5: Academic Assistance

Academic Counseling

All students will need to maintain grades of “Satisfactory” or “C” or better in all courses and clerkships throughout medical school. If a student is having academic difficulty, academic counseling or tutoring may be suggested. It is always advisable for students to seek academic assistance from
instructors/course directors immediately during a course or clerkship - rather waiting until examinations or final grades are issued.

Despite the self-discipline and good study habits that students developed, which has gotten them into medical school, there are many occasions when students may need assistance for the first time in their career. In addition, guidance is necessary to help students make up for work lost because due to an illness (or any other unforeseen event).

Students are requested to make an appointment with their Small Group Advisor or an Associate/Assistant Dean for counsel and advice concerning academic problems unresolved by discussions with course/clerkship directors. All students select faculty advisors during the Application Phase. These advisors assist primarily in residency planning and preparation of the senior year schedule.

Resources

Students are provided with a handbook that addresses many issues which confront students in medical school, including effective study methods and time management. Students will meet regularly with an academic Dean to review their progress throughout medical school. In addition, special information sessions are held throughout the curriculum to advise students on topics such as preparation for USMLE examinations and residency applications.

Counseling and Tutoring

In addition to their Small Group Advisor or an Associate/Assistant Dean, students in academic difficulty have the opportunity for counseling and assessment through a partnership between the school and an outside entity.

Students who are in academic difficulty in the first or second year of medical school, as defined by the Student Progress and Promotions Committee, may request tutoring. Course Directors will work in concert with the Assistant Dean for Medical Education and Student Affairs to develop a tutoring plan.

Section 6: Career Advising

Choosing a career path is one of the most significant decisions a medical student will make. At Emory, the career planning begins at matriculation and continues throughout medical school.

Career planning is part of every academic year’s Orientations, and specific Career counseling sessions occur throughout the curriculum. Small Group Advisors are trained to provide guidance on this important issue, and are able to advise medical students where to seek specialty-specific information and counselors.

Career planning at Emory includes:
Resources

- Emory Development of Career Specialty (DOCS) website – (information regarding career planning, advisors, match results, and related resources)
- Association of American Medical Colleges Careers in Medicine (CiM) website (career planning program designed to help medical students choose a specialty and residency program, successfully land a residency position, and plan their physician career)

Counseling

- Small Group Advisors offering career guidance and facilitating networking within and outside Emory
- Scheduled career advice and planning sessions throughout the curriculum
- One-on-one meetings with an Associate or Assistant Dean for Clinical Education and Student Affairs for career counseling
- Department-designated medical student advisors chosen to counsel students regarding their specialty (on EmoryDOCS website)
- Choosing advisors, both informally for career advice, and formally to help students plan and schedule their Translation Phase of medical school
- Easily accessible deans, faculty, recent Emory graduates, and staff to contact for career advising

Activities

- Planned curricular activities to aid in making a career choice
- Exposure to a wide variety of specialties and careers through the Foundations, Application and Translation Phases (required clerkships and electives)
- Research opportunities through the Discovery Phase

Three class meetings during the Translation Phase to discuss:

- Advice and counseling for students who are still undecided after completing the Application Phase
- Early preparation for residency applications
- Timeline for applying to residency programs
- Information about early match programs
- The residency application and matching process
- Exploring residency options – panel discussions with residency program directors
- Where to access detailed information about specific residency programs
- Applying for highly competitive programs
- How to prepare for and interview effectively
- Mock residency interviews

For additional information and/or questions:
Section 7: Other Resources

Parking and Transportation

Emory Campus Parking

Parking on the Emory Campus requires the display of a valid permit. Only permits issued by Emory Transportation and Parking Services are valid. Permits are the property of Emory University.

Permits are non-transferable and are for use by the permit holder.

Any permit purchased requires submission of vehicle information for all vehicles which will be used with the permit. Vehicle information includes the make, model, color, style, and state issued license plate number. Failure to maintain current vehicle information with Parking Services will result in a fine.

Permits can be requested in person at the Parking Office or online.

Permit Types

- Annual permit: Provides unlimited access to assigned parking area.
- Eagle Pass (occasional permit): Provides one access to assigned parking area per use.
- Temporary permit: Provides unlimited access to assigned parking area during the time period purchased, up to six months.
- Motorcycle/Scooter decal: Provides approval to park in designated motorcycle/scooter parking. Must register in person at the Parking Office.

Acceptance of a permit indicates acknowledgement and agreement to abide by the Transportation and Parking Services Rules and Regulations.

Parking privileges be suspended or revoked for violation of the Rules and Regulations.

Permit ownership is nontransferable.

Falsifying information in order to obtain a permit is a violation of parking regulations.

Replacement cost of a lost or stolen permit is $20, nonrefundable.
All vehicles that belong to the immediate family of a student, whether registered with Emory or not, will be considered the responsibility of that individual. Any parking violations charged against that vehicle will be the responsibility of the individual.

Permit owners are responsible for maintaining current vehicle information with Parking Services.

Unregistered vehicles with outstanding citations will be identified through the vehicle plate information obtained from the U.S. state registration system. An additional fine will be applied if a vehicle is not registered with Parking Services.

Individuals with outstanding fines will not be allowed to purchase new permits until the fines are paid in full. Outstanding fines can also result in loss of parking access, immobilization of vehicle, or the vehicle being towed.

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

Emory Parking Permit Costs*

View information about annual and other parking permit costs.

Parking at Affiliated Hospitals

- **Emory Midtown** – No charge for parking. Arrangements for MD students are made by Barbara Bingham in the Office of Clinical Education at Grady.
- **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.

View Cliff routes & schedules.

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
To report shuttle delays or problems, call 404-727-1829 or email shuttles@emory.edu.

Safety and Security

Emory University School of Medicine is enriched by the legacy and energy of Atlanta, but the location also means that urban crime or violence are possible.

Every effort is made by the Emory University School of Medicine and Emory University to provide a safe and secure environment for our students at all sites (campuses, healthcare facilities, etc.). Emory maintains its own police department that manages law enforcement, fire safety and emergency medical services as well as advising schools and individuals on public safety matters. The Emory University School of Medicine is made aware of all public safety matters and acts on them accordingly. Grady and the VA have their own security departments and we work in conjunction with them to maintain a safe environment for all students.

The James P. Williams School of Medicine building provides 24-hour study space for School of Medicine students and a security guard is on duty after hours. The entire building can be accessed outside of business hours only by using an Emory ID card. The security guard checks student ID cards to limit after hours use to registered School of Medicine students only.

We encourage students to request a security escort to or from the parking decks. Each campus also provides motorist assistance. Contact information for security escorts at each site:

- Emory Main Campus – 404-727-7555
- Emory Midtown – 404-686-2597
- Grady – 404-616-4025
- Veterans Hospital – 404-728-7641 or 404-321-6111 (ext. 4911)
- Children’s Healthcare of Atlanta – Egleston – Call the Emory Main Campus escort if your car is parked on Emory’s campus or call 404-785-6142 if your car is parked in the ED parking at Egleston
- Children’s Healthcare of Atlanta – Hughes Spalding – Call Grady Escort above

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

Although parking decks have restricted access, the possibility still exists for break-ins. Please remove all valuables from your vehicle and either store them in locked storage spaces provided at each site or leave them at home.

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

Emory University-affiliated Hospitals Public Safety Departments

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Officers are on duty twenty-four hours each day. Students are encouraged to notify the Public Safety Departments concerning any activity which may compromise an individual student’s safety and/or the safety of any other students, physicians, residents, hospital employees, patients, or visitors.

- Emory University Hospital - 404.712.5598
- Emory University Midtown Hospital - 404.686.2597
- Grady Hospital - 404.616.4024
- Veterans Hospital - 404-321-6111 (ext. 4911) or 404-728-7641
- Other important numbers to have include the following:
  - Emory Police Department – 404-727-6111
  - DeKalb County Police – emergency 911 number

### Student Life

#### Campus Life

Emory University’s [Division of Campus Life](#) cultivates a welcoming and dynamic community that is committed to modeling and teaching holistic well-being, ethical leadership, civic engagement, cultural humility, and global citizenship by providing a supportive and responsive foundation for an evolving campus community to develop skills necessary for lifelong success and positive transformation in the world.

As a graduate student at Emory University, medical students not only contribute, but also have access, to the vibrant Emory community. In addition to the over 400 organizations officially recognized by the Emory Student Government Association, athletic and recreational programs, public service and leadership opportunities, Campus Life is a resource to assist you with social, career, and intellectual advancement.

#### Housing

Emory’s preferred graduate housing is available at Campus Crossings Briarcliff (operated by Campus Apartments). [View a complete listing of all nearby housing](#).

Each year in June, the Office of Admissions and the rising second year class with host a Housing Weekend for the incoming medical students. This event is designed to showcase the variety of housing options available in the Emory area and surrounding neighborhoods.

#### Student Government

The students of Emory University are governed by the Graduate Student Government Association (GSGA) and all student organization charters must be approved by the GSGA.

The Medical Student Senate (MSS) approves all applications for medical student groups seeking charter with the SGA. To submit an application to the MSS:

#### Starting a Student Organization
Students are encouraged to charter new organizations when there is interest. Funding for guest speakers, teaching forums, and other education events are available for chartered organizations.

For more information about chartering a student organization, please visit the Medical Student Senate website.

Medical Student Class Officers

Each medical school class will elect officers annually, including Medical Student Senators. These elections are run in accordance with the SGA Code of Elections. The current list of officers for each class can be found on the Student Portal.

Section 8: Video Lecture Capture

SOM will caption any audiovisual content captured in Echo360. If you have a verified need for this service, please contact Ms. Sherice Allen Henry, Assistant Director of Medical Education Programs Management, to make arrangements:

- Email: sahenry@emory.edu
- Phone: 404-712-7967

In your request, please be sure to include the name and date of the lecture to be captioned.
Part VII: Library and Information Technology

Section 1: Information Technology Conditions of Use

As a student who is issued an Emory NetID computer account, it is important for you to know the policy that apply to connecting to the Emory network and Emory IT resources. View Policy 5.1

Section 2: School of Medicine Information Technology Services (SOMITS)

The School of Medicine’s Information Technology Services Department collaborates with OMESA in the delivery of student support services. Information Technology Services’ primary objective is to manage and maintain technology utilized for the delivery of the School of Medicine’s curriculum.

For help with Emory University School of Medicine’s IT Resources: Student Computing, Equipment Checkout, Public Printing, SOM Computer Labs, Mobile Video Conferencing, Audio / Visual Assistance, Classroom Podiums, Classroom Audio / Visual Training, and SOM Event Consultation.

- Phone: 404-72-SOMITS (7-6648)
- Web: https://emory.sharepoint.com/sites/SOMITS
- Email: meded-help@emory.edu
- Hours: Monday - Friday, 8 am - 5 pm.*Excludes Emory Observed Holidays

Mark Trenchard
Senior Director, SOMITS
404-582-3222
mark.trenchard@emory.edu

Jess Bowling
IT Manager, Curricular Support
jbowlin@emory.edu
404-712-8824

Jon Hamilton
Manager, Audio Visual
jon.hamilton@emory.edu
404-712-1563

Tom Quinn
Director, SOMITS (Operations)
tdquinn@emory.edu
404-727-9805

Section 3: Smart Device Security

The Emory Smart Device Security Policy applies to any smart device, either Emory owned or privately owned, that accesses Emory Exchange e-mail, and/or stores sensitive Emory data.

Section 4: Student Portal

The Student Portal Website provides a real time calendar on curricular and event information. The Portal includes a link to the most current version of this student handbook as well as to other valuable
resources or references. Be sure to bookmark it as a favorite to get up to the minute information. Updates or additions to the portal can be submitted to Mary Kaye Garcia who will forward to the appropriate Student Portal Editor.

Section 5: 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.

Main Location

1462 Clifton Road, Atlanta, GA 30322

Hours (May be different due to COVID-19)

- Monday through Thursday: 7:30 AM - Midnight
- Friday: 7:30 AM - 9:00 PM
- Saturday: 9:00 AM - 7:00 PM
- Sunday: 9:00 AM - Midnight

Contact Information

- “Ask A Librarian”
- Information Desk – 404-727-8727

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: 404-727-3094

Emory University Hospital Midtown Branch Library

550 Peachtree St. NE, Atlanta, GA 30308, Davis-Fischer Building, 1st Floor, Room 1312
• 24/7 card access available to students on rotations with activated ID card
• To have your ID programmed, take your schedule to Security Services, Orr Building

Contact Information

• EUH Midtown Branch Clinical Informationist: 404-686-1978

Grady Branch Library

69 Jesse Hill, Jr. Drive, Atlanta, GA 30303

• Hours: Monday through 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

• Identify yourself with your network ID and password when prompted

To Research Questions & Topics, Perform a Literature Search, or Analyze Data

• Clinical Decision Support – AccessMedicine, ClinicalKey, Cochrane Library, DynaMed
• Databases – PubMed, EMBASE, CINAHL, Web of Science, Scopus
• BrowZine – Desktop program and app that customizes access to Emory’s ejournals
• eJournals – Searchable A-Z List of Emory’s eJournals
• eBooks – AccessMedicine, AccessEmergency Medicine, AccessSurgery, ClinicalKey,
• eTools – EndNote, Lasergene, 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 full-text or print unavailable, click on “Request via ILLiad”

To Make Online Requests, Go to the Library’s Services Section

• Get an article delivered from another institution if not available at Emory (Interlibrary Loan)
• Schedule a consultation (“Ask a librarian”)
• Have an Informationist complete a literature search for you (“Ask a Librarian”)

Submit Questions, Suggestions, Corrections, Additions

Questions, suggestions, corrections or additions regarding the information contained in the Student Handbook should be sent to ebrownf@emory.edu.