

College Of Medicine

Steve J. Schwab, M.D., Executive Dean

Message from the Dean.....	114	Tutoring Services.....	121
History	114	Student Evaluation	121
Mission Statement	114	Appeal of Grades	122
Organizational Structure	114	Progress and Promotions.....	122
Academic Program	115	First Year	122
Academic Calendar.....	115	Second Year.....	123
Class Attendance	115	Third Year	123
Grading System.....	116	Fourth Year	123
Leave of Absence/Withdrawal	116	Progress and Promotions	
Scheduling M-3 Clerkships	116	Committee (P&P)	124
Student Workload	116	Licensure Examinations	124
General Guidelines for		Graduate Training.....	125
Professional Behavior.....	117	Graduation Activities.....	126
Code of Professional Conduct	118	Honors and Recognition	126
Student Mistreatment	119	Research Opportunities	127
Mentor/Counseling Systems.....	119	Student Governance.....	127
General Information	120	Student Organizations	128
Student Records	121	Student Interest Groups.....	129

MESSAGE FROM THE DEAN

Medical school provides the basis for a career that is among the most rewarding possible. The curriculum is demanding and requires your total effort. Our programs are exciting and innovative, combining the solid foundation needed for a good medical education, while instilling the habits and tools that are necessary to assimilate the rapid changes that will occur in the future. Our faculty are dedicated to providing the stimulus and environment to maximize your learning experience. The administration of the College is charged with providing support to you, as students, through our faculty and facilities that will ensure your development as practitioners who are as concerned about improving patient care as you are about providing care. The Dean's office is available to you. We hope that you will take full advantage of the opportunities offered by all aspects of the College of Medicine.

Steve J. Schwab, M.D.

Executive Dean, College of Medicine

HISTORY

The University of Tennessee College of Medicine traces its origin to 1851 as the Medical Department of the University of Nashville. In 1909, the Medical Department of the University of Tennessee and the Medical Department of the University of Nashville were consolidated as The University of Tennessee Department of Medicine. The Department continued in the Nashville location for two years. In 1911, The University of Tennessee Department of Medicine moved to Memphis and merged with the College of Physicians and Surgeons, founded in 1906, and with the Memphis Hospital Medical College, founded in 1876, and became The University of Tennessee College of Medicine. Later that same year, the name of the campus was changed to The University of Tennessee Medical Units, and the Colleges of Medicine, Pharmacy, and Dentistry were established. In the early 1970's, the College moved toward a statewide system of medical education with the development of clinical education centers external to the Memphis campus. Since the opening of the Clinical Education Center in Knoxville in 1973, additional centers have been established in Chattanooga, Jackson, and Nashville. These centers have enabled the College to provide quality health care, education, and research throughout the State of Tennessee. The designation of the campus as The University of Tennessee, Memphis - The Health Science Center was adopted in 1985 by The University of Tennessee Board of Trustees. The name was changed to The University of Tennessee Health Science Center in 1999.

MISSION STATEMENT

The mission of the University of Tennessee College of Medicine is to improve the health of Tennesseans and society as a whole by providing an exceptional and nurturing environment for the education of students and physicians, advances in medical science, and the provision of health services of the highest quality.

ORGANIZATIONAL STRUCTURE

The College of Medicine includes a primary campus located in Memphis, as well as clinical sites located in Knoxville and Chattanooga, an internal medicine program in Nashville, and a Family Practice Center in Jackson. In 2006-07 year, the College governance was reorganized to include an Executive Dean, a Dean Memphis Campus, Dean Knoxville Campus, and Dean Chattanooga Campus. A new Executive Dean and deans for the three campuses have been appointed.

The College is organized into departments relating to the various clinical and biomedical science disciplines and centers relating to research emphasis. The campus dean appoints a chair for each department who is responsible for the total operation of the department including teaching, research, service, patient care, personnel administration, and financial affairs. A number of executive associate deans, also appointed by the Executive Dean, are responsible for specific administrative areas within the College statewide. They chair various standing faculty committees, which are established by the Dean to make recommendations regarding policies and programs.

The standing committees for the College of Medicine and the various subcommittees are:

- Committee on Undergraduate Medical Education (CUME)*
 - Clinical Sciences Subcommittee (CSS)*
 - Biomedical Sciences Subcommittee (BSS)*
 - College Appointment, Promotion and Tenure Committee (CAPT)
 - Committee on Admissions*
 - Committee on Continuing Medical Education
 - Committee on Graduate Medical Education (CGME)*
 - Progress and Promotions Committee for each class (P&P)
 - Committee on Recognition and Awards.

- indicates the committees on which there are voting student members, nominated by the Medical Student Executive Council (MSEC) and appointed by the Executive Dean.

ACADEMIC AND FACULTY AFFAIRS

The Office of Academic and Faculty Affairs is responsible for the curriculum; course and student evaluation; academic standards affecting the M.D. degree program in the College of Medicine; and the process of faculty appointments, promotions and tenure. This office is involved with faculty in curriculum design and coordination and the allocation of educational resources. It also works with faculty in the development and implementation of policies and procedures affecting the academic progress, promotion, and graduation of medical students.

ADMISSIONS AND STUDENT AFFAIRS

The Office of Student Affairs is concerned with the overall growth, development, and graduation of medical

students. Thus the goal of this office is to serve students through a wide range of activities and programs, which include the following:

- Freshman Orientation
- White Coat Ceremony
- Faculty Mentor Program
- Parents Recognition Day
- Peer Counseling Program
- Liaison with Honor Council
- Student Publications
- Student organization support
- Counseling: personal, social
- Residency placement assistance:
 - Medical Student Performance Evaluation (Deans' Letters)
 - Career Counseling
 - National Residency Match Program
- Student/Faculty award selection
- Caduceus Ball
- Graduation Activities

The Office of Student Affairs is intimately involved in seeking ways to enhance students' non-academic experiences with a goal of assuring that problems are addressed before they have an adverse affect on students. Students with various concerns, whether personal, financial, or social, should not hesitate to contact this office.

The University Tennessee College of Medicine admits a class of 150 students in August each year. Applicants must be citizens or permanent residents of the United States at the time of application. Applications are accepted from: 1) Tennessee residents; 2) residents of the eight states contiguous to Tennessee; and 3) children of UT System alumni regardless of their state of residence. As a state supported institution, qualified Tennesseans are given priority in each entering class. A maximum of ten percent of the matriculants may be non-residents; therefore, nonresidents must possess superior qualifications to be seriously considered for admission. The College of Medicine utilizes the American Medical College Application Service (AMCAS).

OFFICE OF GRADUATE MEDICAL EDUCATION

The University of Tennessee College of Medicine's commitment to medical education is to provide "a broad array of programs targeted at the education and training of physicians at the undergraduate, graduate and postgraduate levels."

As the responsible institution for all ACGME accredited residency programs, the College of Medicine is responsible for the administrative oversight and academic quality of the residency programs that it sponsors. The policies of the University of Tennessee and College of Medicine govern the administration of the residency programs. Each resident is registered as a graduate student in the College of Medicine, and all residents are paid and provided benefits by the University of Tennessee. The UT GME Program is a statewide program with approximately 900 residents training in participating hospitals located in Chattanooga, Jackson, Knoxville, Memphis and Nashville.

ACADEMIC PROGRAM

(www.utm.edu/Medicine/Acad_Affairs/)

The following table outlines the four-year program:

Freshman (M-1)

Doctoring: Recognizing Signs and Symptoms (DRS)

- Gross Anatomy
- Molecular Basis of Disease (MBOD)
- Physiology
- Prevention, Community and Culture (PCC)

Sophomore (M-2)

Doctoring: Recognizing Signs and Symptoms (DRS)

- Microbiology
- Neurosciences
- Pathology
- Pathophysiology
- Pharmacology
- Prevention, Community and Culture (PCC)

Step 1 - U.S. Medical Licensing Exam

(USMLE)

Junior (M-3) (Core Clerkships)

- PCC/DRS (2 weeks)
- Family Medicine (8 weeks)
- Medicine (8 weeks)
- Obstetrics & Gynecology (8 weeks)
- Pediatrics (8 weeks)
- Psychiatry/Neurology (8 weeks)
- Surgery (8 weeks)

Senior (M-4) (Clerkships Selectives & Electives)

- PCC/DRS (1 week)
- Ambulatory Medicine (4 weeks)
- JI- Any (4 weeks)
- JI - Medicine (4 weeks)
- Patient Safety/Quality Improvement Clerkship (4 weeks)
- Surgery Specialties (4 weeks)
- Specialty Clerkship (4 weeks)
- Electives (16 weeks)
- Optional Blocks (12 weeks)

Step 2 CK - USMLE Clinical Knowledge Exam

Step 2 CS - USMLE Clinical Skills Exam

ACADEMIC CALENDAR

(www.utm.edu/Medicine/OLSEN/)

A master calendar, calendars which detail daily schedules in M1 and M2 courses, and a calendar of important clerkship dates can be found at this website.

CLASS ATTENDANCE

The instructional program in the biomedical sciences portion of the curriculum has been developed by the faculty to provide students with the knowledge and background necessary for the study of clinical medicine. Students are expected to attend the various experiences as an expression of their professional commitment and dedication. Some curricular experiences, because of their special nature (e.g. laboratories, small group conferences and related

activities), may be designated by faculty as required experiences. Students will be informed of these requirements at the beginning of the course.

GRADING SYSTEM

The marks used in all official reports of students' grades are listed below. Some courses are graded on a PASS/FAIL (P/F) basis. The performance level and quality value assigned to that performance are outlined in the following table:

Grade	Performance Level	Quality Pts.
A	Consistently outstanding	4
B	Exceeds expectations	3
C	Satisfactory	2
D	Marginal	1
F	Failure	0
R	Retake	0
W	Withdrawn	0
WP	Withdrawn, Passing	0
WF	Withdrawn, Failing	0
I	Incomplete	0

The cumulative grade point average recorded on the transcript from the Registrar is used by the Progress and Promotions Committees (P&P), in part, to make recommendations about the promotion and continuation of students in the curriculum.

When a student must repeat either courses or clerkships to correct academic deficiencies, the cumulative grade point average (GPA) is calculated by averaging the final grades attained in all courses or clerkships in which he/she has been enrolled for academic credit. This includes those courses or clerkships repeated at UTHSC and those courses approved by the P&P to be taken at other AAMC institutions.

A student withdrawing from courses/clerkships will receive either a "W", "WP" or "WF" on his/her official transcript to indicate pass or failure in those instances in which a student withdraws before completing the work. When a student does not complete a required course/clerkship at UTHSC, he/she must repeat the course/clerkship at UTHSC in the next academic year.

The P&P has the option of recommending that a student who fails first- or second-year courses, or a student who has "D" grades with a cumulative GPA less than 2.0 at the end of the first or second academic years, may correct the academic deficiency or unacceptable cumulative GPA requirement by successfully completing either courses taken at other institutions, courses repeated at UTHSC, or both. Any student earning the grade of "D" in two or more courses in any of the first two academic years, irrespective of cumulative GPA, will have his/her academic record reviewed by the P&P. The Committee may make one of the following recommendations concerning this student: a) re-evaluation in specified course(s); b) repeat part or all of the particular academic year; and c) no recommendation.

The designation of "I" (incomplete) will be used when a student is unable to complete the course required at the regular time because of a reason acceptable to the course director. In such cases, arrangements will be made by the course director for the student to complete the course

requirements, and the "I" will then be replaced by whatever grade the course director considers the student to have earned. It is the responsibility of the student to work with the course director in determining when and under what circumstances the "I" grade can be changed.

The designation of "R" (Retake) will be recorded in those instances in which a student completes all requirements in a clerkship and passes the clinical portion but fails the written exam. The retake must be done by the end of Block 8 prior to the year of graduation. The student will retake the written exam and the appropriate grade will be assigned by the clerkship director. A second failing score on the exam, or failure to retake the exam on time, will result in the assignment of a failing grade for the clerkship.

The P&P will review the overall academic record of any student who fails more than one (1) written examination in the third-year clerkships. Each student may have no more than one Retake ("R") grade simultaneously posted in the required third-year clerkships.

An alteration of the student's schedule that provides a period of time when the student is taken out of the core clerkships and scheduled into one or more option blocks may be recommended. During these option blocks, the student would prepare to retake one or more written examinations that had been failed on the first attempt on a schedule specified by the P&P.

LEAVE OF ABSENCE/WITHDRAWAL

Any student who feels that he/she cannot continue in the regular curriculum is expected to contact immediately the Office of Academic and Faculty Affairs. A "Change in Student Status Form" is submitted electronically by Academic Affairs in order that appropriate administrative offices are notified of the leave or withdrawal from student rolls.

SCHEDULING M3 CLERKSHIPS

In order to begin clerkships, all students must satisfy the following requirements: immunization against measles and rubella, completion of the hepatitis vaccine series, completion of a TB skin test, certification in CPR, HIPAA Compliance Training, Criminal Background Check (completed prior to matriculation), Human Subjects Training (CITI), USMLE Step 1, and attendance at mandatory sessions on OSHA standards and blood borne pathogens.

CLERKSHIP, SELECTIVES AND ELECTIVES CATALOG (www.utmem.edu/Medicine/OLSEN/)

This is a description of clinical programs. It also includes academic regulations and policies. The complete catalog can be found at the Academic Affairs web site.

STUDENT WORKLOAD

The educational experiences in the clinical clerkships of the UTHSC College of Medicine are presented in various formats which include: patient experiences either in

a hospital or physician's office, procedural workshops, skills laboratories, reading assignments, tutorials and didactic lectures. These clerkships provide a breadth of clinical experiences whereby students, under supervision by residents and faculty as well as other health professionals in the teaching hospitals, assist in the care of patients in order to master clinical knowledge, skills and attitudes. In these clinical experiences, students observe the patient, the illness, the effects of procedures and treatment over an adequate span of time in order to learn the natural history of the diseases and the specific effects of interventions to include treatment and/or prevention. This often is best done by being present and working with the patient over a relatively long period of time as the expression of the illness unfolds. Accomplishing this requires that students be assigned continuous patient care and in-house call for prolonged periods on some specific rotations.

To address the time commitment required of medical students during clinical rotations, and taking into account the effects of fatigue and sleep deprivation on learning, clinical activities, student health and safety, and patient safety, the medical school has adapted the following policy.

- Duty hours must be limited to 80 hours per week averaged over a four-week period, inclusive of all in-house call and patient care activities.
- Continuous on-site duty, including in-house call, must not exceed 30 consecutive hours. Students may remain on duty additional hours to participate in transferring care of patients, conducting outpatient clinics, maintaining continuity of medical and surgical care, and attending required didactic activities.
- Students must be provided with one day in seven free from all educational and clinical responsibilities, averaged over a rotation, inclusive of call. One day is defined as one continuous 24-hour period free from all clinical, didactic, and administrative activities.
- Students should be provided with a 10 hour period after in-house call during which they are free from all patient care activities. (Approved by the Clinical Sciences Subcommittee, June 18, 2007.)

The director for each clerkship will be responsible for scheduling student work hours, monitoring the intensity of each rotation, assuring that undue stress and fatigue among students is avoided, and arranging adequate resident and faculty supervision. This supervision by the attending faculty member ensures that students are assigned only patient care responsibilities for which they are qualified and that students are required only to perform functions appropriate to their educational program. The clerkship director also will be responsible for ensuring that the students' acquisition of knowledge, skills and attitude necessary to progress are documented. The Office of

Academic and Faculty Affairs will be responsible for reviewing each clerkship's compliance with this policy on a periodic basis.

Students may appeal the workload in a particular clerkship if they feel that it is inappropriate. The appeal is directed initially to the clerkship director and then to the department chair. If resolution of the issue is not made at the department level then the concerns of the students should be presented in writing to the Office of Academic and Faculty Affairs.

Taking USMLE Step 2 Exams during the required clerkships. All students must take the United States Medical Licensing Examinations, Step 2CK and 2CS, and pass at the national standard in order to be certified for graduation. The Step 2CK and Step 2CS exams should be taken no later than December 31 of the M-4 year.

Students must declare, in writing to the appropriate clerkship director, if they have registered to take the USMLE Step 2 exams during a required clerkship. Students are not permitted to schedule the USMLE Step 2 exams at times conflicting with the scheduled administration of any end-of-clerkship examinations.

The declaration must be done as soon as possible, but no later than two weeks prior to the orientation to the appropriate clerkship and be on file in the clerkship director's office. A student who is registered to take Step 2, and who has properly indicated such, will be provided with an excused absence from all clerkship activities to sit for the USMLE. The course director has the discretion to allow, on a case-by-case basis, an appropriate number of days with the excused absence prior to the examination date. If not notified properly, the clerkship director reserves the right to refuse a student's request for excused absence from the scheduled activities.

Training sites for required fourth-year clerkships. All required rotations must be taken at an institution within the University of Tennessee System. There may be extenuating circumstances exempting selected students from this policy. A student who wishes to be granted an exemption must present his/her case to the Office of Academic and Faculty Affairs for review.

Dropping/adding rotations. All rotations (i.e., the required clerkships, selectives and electives) may be dropped/added if the process is 30 days prior to the beginning of the Block. Routine changes are effected by accessing the computer program for scheduling the rotations.

GENERAL GUIDELINES FOR PROFESSIONAL BEHAVIOR

General Guidelines for Professional Behavior and Conduct in Clerkships, Selectives and Electives:

The clinical rotations in the third and fourth years of medical school place demands and requirements on the students that go significantly above and beyond academic

achievement as measured by performance on tests and by the ability to field questions learned through didactic instruction and reading. The student also is accountable for his or her behavior in each of the following areas:

1. Professional and Ethical Conduct

The welfare of patients and their families is of foremost concern. Students must show respect and courtesy for patients and their families, even under difficult situations such as being challenged or provoked. Students must safeguard their patients' confidentiality. There are to be no casual communications regarding patients in public places, such as hallways, elevators, cafeterias, gyms, etc. Students must obey professional boundaries with their patients.

2. Punctuality, Responsibility and Reliability

Students are expected to be available and present for all scheduled clerkship activities. Any absences must be approved by the clerkship director in advance. Make-up assignments will be determined by the clerkship director; absences due to illness may require a physician's statement. Chronic tardiness is unacceptable. Students are expected to conform to the prevailing schedule at the sites to which they are assigned.

3. Getting Along with Other Members of The Medical Team

Good relationships with nurses, aides, ward clerks, and anyone else involved in the care of the patient are absolutely essential. Students are expected to be courteous to all medical staff at the sites to which they are assigned for their clinical instruction.

4. Getting Along with Staff

Students must be polite and respectful to people other than the patients, faculty and residents, and hospital employees. Much of the daily work in maintaining a clerkship falls on the shoulders of administrative assistants, secretaries, receptionists, and other staff. Students are expected to be considerate of and courteous to all of these employees.

5. Getting Along with Peers

Students are expected to have pleasant working relationships with their fellow students. This includes an equitable sharing of the workload, and helping and supporting each other.

If clerkship directors receive consistent complaints about a student in any of these areas, the student's grade may be affected. Serious documented problems with unprofessional or unethical behavior, in the judgment of the clerkship director, may result in a failing grade even if the student has passed the written or oral examinations and has an otherwise satisfactory clinical rating. Also, consistent or serious complaints about unprofessional or unethical behavior may be reflected in the Medical Student Performance Evaluation (MSPE).

There may be times when any student has a personal or a personality conflict that impairs his or her ability to function properly on the clerkship. It is the student's

responsibility to promptly notify the clerkship director at the first occurrence, not after the fact.

CODE OF PROFESSIONAL CONDUCT

In 1986 the College of Medicine established its Code of Professional Conduct following significant assistance from students as well as faculty and administration. The document addresses those responsibilities to patients, colleagues, family, and community as well as to the individuals themselves. Following discussion with incoming students it is assumed that all will subscribe to this code as part of their commitment to the profession of medicine.

The University of Tennessee medical community believes that professionals gain their credibility by their commitment to society. As a professional group, we recognize our obligation to our patients, colleagues, community, families, and ourselves. Realizing that it is a privilege and an honor to be a medical professional, we the students, residents, fellows, and faculty of the UTHSC College of Medicine embrace the following ideals:

Patient welfare is our primary concern, for only by commitment do we justify the trust placed in us by patients and the community at large. Although we hold the acquisition of knowledge and the development of technical skills essential to patient care, we shall strive to balance the science with the art of medicine by maintaining respect and compassion for the dignity of all patients. Each patient shall receive our best efforts regardless of personal feelings or biases. Desires for social or economic gain shall not affect the honesty and integrity with which we deal with patients. Nor shall the pressures placed upon the members of our profession compromise the quality of care we provide.

Relationships with our colleagues are an exceedingly important part of professional conduct. Our interactions with colleagues provide us a sense of support, trust, and sharing. As members of a professional community, we shall be aware that our personal conduct reflects upon others of that community. We shall be willing to share our knowledge and expertise with colleagues and remain open to their advice and criticism. We shall fulfill our own responsibility and, in the spirit of professional cooperation, accommodate a colleague if our assistance is requested. We shall be sensitive to the physical and emotional weaknesses of a colleague and shall lend support in time of need. Further, our responsibility to patient care implies identification of colleagues whose ability to provide care is impaired. This must be followed by our full support toward the rehabilitation of those colleagues, and their reintegration into the professional community.

Integrating personal growth into our professional development is essential to our commitment to medicine. To this end, we shall be attentive to our needs for physical, spiritual, and emotional well being. We shall allow time for personal and family relations which enrich our lives and promote self knowledge. Attention to personal maturation, family commitments and

professional growth represent a continuing challenge throughout our career.

As medical professionals, we realize that we share with all citizens certain civic duties. We shall strive to be responsible citizens. Our professional status shall not be used as a means to power and control. Rather, we seek to offer informed and compassionate leadership.

STUDENT MISTREATMENT

The policy on student mistreatment has three main components: a statement of College of Medicine standards of behavior with regard to mistreatment, a description of methods used in the ongoing education of the college community concerning the standards of behavior and the process by which they are upheld, and a description of the College of Medicine process for responding to allegations of mistreatment.

The statement of College of Medicine standards of behavior with regard to mistreatment is as follows:

The University of Tennessee College of Medicine has a responsibility to foster in medical students, postgraduate trainees, faculty, and other staff the development of professional and collegial attitudes needed to provide caring and compassionate health care. To nurture these attitudes and promote an effective learning environment, an atmosphere of mutual respect and collegiality among teachers and students is essential. While such an environment is extremely important to the educational mission of the College of Medicine, the diversity of members of the academic community, combined with the intensity of interactions that occur in the health care setting may lead to incidents of inappropriate behavior or mistreatment. The victims and perpetrators of such behavior might include students, preclinical and clinical faculty, fellows, residents, nurses, and other staff. Examples of mistreatment include: sexual harassment; discrimination based on race, gender, religion, ethnic background, sexual orientation, handicapped condition, or age; and purposeful humiliation, verbal abuse, threats, or other psychological punishment. Such actions are contrary to the spirit of learning, violate the trust between teacher and learner, and will not be tolerated by the College of Medicine.

To promote an environment respectful of all individuals, the College of Medicine will provide ongoing education to students, residents, fellows, faculty, and other staff emphasizing the importance of professional and collegial attitudes and behavior. Also, the college will make available a readily accessible neutral party (called a mediator) whom students may approach if they believe they have been mistreated. A process has been established to seek reconciliation between the parties in cases of alleged mistreatment. This process seeks to protect the accuser from retaliation and to protect the rights of all parties involved in a complaint. Through these efforts the college will maintain an atmosphere essential to its educational mission in the training of physicians.

To mistreat is to treat in a harmful, injurious, or offensive way. For example:

- to speak insultingly or unjustifiably harshly to or about a person
- to belittle or humiliate

- to threaten with physical harm
- to physically attack (e.g., hit, slap, kick)
- to require to perform personal services (e.g., shopping, baby-sitting)
- to threaten with a lower grade for reasons other than course/clinical performance.

Accusations of racial or gender discrimination or harassment are referred to the UTHSC Affirmative Affairs Director. Disputes over grades are handled in accordance with College of Medicine academic policies.

Additional information regarding the Mistreatment Policy and procedures can be found on the Office of Student Affairs web site –

<http://www.utmem.edu/Medicine/StudentAffairs>

MENTOR/COUNSELING SYSTEMS

FACULTY MENTOR SYSTEM

The Faculty Mentor System is comprised of College of Medicine faculty members who serve as ombudsmen for students. Scientists and/or clinicians are assigned by the Office of Student Affairs to a small group of entering students. A sophomore student is assigned to each group to facilitate meetings between mentors and students. Mentors meet with students individually and in groups, beginning with orientation and continuing throughout their medical education. Students are befriended and assisted by their mentors in taking full advantage of the institution's educational as well as extracurricular opportunities.

The essential ingredient for the success of the Mentor System is the degree of responsibility assumed by mentors and students. Faculty Mentors are responsible for being accessible, caring, and equipped with accurate information. Students are responsible for availing themselves of the opportunity to meet with their mentors on a regular basis.

For further information, contact the Office of Student Affairs.

PEER COUNSELING PROGRAM

Peer Counselors are trained sophomore student volunteers who offer a support system to freshman students. The program teaches prospective physicians that it is acceptable to ask for and offer support. In addition, the program fosters positive development and a shared, cooperative approach to education. A national model, this unique program has been well received and utilized by the UT medical students.

AUDIENCE OF ONE PEER COUNSELING

In an ongoing effort to provide support for students, the College of Medicine Peer Counseling Program has extended its services with the introduction of "Audience of One." Audience of One is composed of M2 peer counselors with interest in exploring special needs of M1 students that may be better addressed through private discussions rather than a group format. For information, contact the Office of Student Affairs.

BIG BROTHER/BIG SISTER PROGRAM

Each entering student is assigned a "Big Sib." The Big Brother or Big Sister offers invaluable insight into the "ropes" of the first year: which books are best, the first test, best grocery store, where to get a hair cut, where to relax and have fun, how to sign up for intramurals, etc. Close and lasting relationships often develop through this program.

AID TO THE IMPAIRED MEDICAL STUDENT (AIMS)

The pressure and stress of a medical education can tax the coping skills of a student at times. Often this is a healthy means of developing the maturity and responsibility necessary for the profession; however, if a student cannot successfully adjust or employs inappropriate adaptive measures, such as the use of alcohol or other substances, he or she may become psychologically and professionally impaired, seriously jeopardizing his/her well-being and possibly that of others.

In an effort to prevent impairment by early intervention, the Aid to Impaired Medical Students (AIMS) program was established in 1982 and was the first program of its kind among medical schools in the U.S. The AIMS program is administered by a council composed of eight students (two elected by each class) and eight physicians/staff. The functional aspects of the AIMS program include detecting and reporting the existence of an impaired student to a member of the council, confronting the affected student in an appropriate and effective manner, evaluation of the extent of the student's impairment, and most importantly, treatment and monitoring of the student's progress.

The success of the AIMS program depends on three critical principles:

- (1) AIMS must be perceived by the students and the faculty as a positive, student-oriented program designed to assist the impaired student, while ensuring the development of highly professional young physicians;
- (2) Confidentiality must be maintained at all costs in order to protect the impaired student;
- (3) AIMS must function autonomously and separately from the UTHSC administration. The Dean's office is notified of a student's impairment only upon refusal to participate in or failure to successfully complete the program. It must be emphasized that the goal of the AIMS program is to provide a positive system through which student quality and professionalism are enhanced.

GENERAL INFORMATION

BOOK, COMPUTER AND EQUIPMENT EXPENSES

Outside of certain college expenses where cost is "fixed," the most expensive single item that students face is the purchase of books - required or recommended.

Here are guidelines which you may wish to follow as you purchase textbooks:

- wait to buy any textbook until the instructor has been consulted or has held a class. The bookstore usually has enough of the required textbooks.
- consider buying used textbooks from bulletin board notices or the MSEC book sale at the beginning of each semester.
- consult upperclassmen for advice on textbooks and about the possibility of borrowing/buying their books.

Students are required to purchase certain clinical equipment as outlined in the website for use in M1-M4 courses.

All students in the College of Medicine are *required* to have a computer and access to the Internet. The College of Medicine provides students with access to campus-based computer labs, but due to the limited number of workstations available and increasing utilization, it is necessary for students to have their own computers. Students also are expected to possess at least minimal computer literacy. Beginning with the Class of 2011, students will be expected to purchase an Instant Response System keypad (available in the Bookstore). Students are required to purchase a Personal Digital Assistant (PDA) prior to beginning the clinical portion of the curriculum.

CAMPUS NEWSLETTER

The Record, published by the Office of Communications and Marketing, is a bi-monthly newsletter for faculty, staff, and students. It is distributed both electronically and in hard copy format throughout campus and selectively to alumni, friends of the University, and others.

COLLEGE E-MAIL POLICY

The College continuously seeks ways to improve the lines of communication between the various College of Medicine offices/departments and medical students. Upon acceptance to the College of Medicine each student is assigned an email account which enables the College of Medicine to send official electronic correspondence. Each student is responsible for checking and maintaining his/her email account since it is where he/she will receive official College communications. The format of an official University email address is: *NETID@utm.edu*. Students can forward email from their official University email account to any external email account. Please note, however, that if a student elects to forward e-mail and that process fails, the student will still be responsible for reading and responding to any official information sent to their official University email account.

DRESS AND IDENTIFICATION

All students are expected to dress as professional school students. Recognizing the need to identify members of the professional medical team and to distinguish them from other hospital personnel or patients, they must wear clinic coats of a type described below while in patient contact situations:

- A. Attending staff wear coats of their choice.

B. Interns and resident staff are expected to wear coat length, long sleeve clinic coats, generally white; however, color variations may be uniformly adopted by any department.

C. Medical students wear white long sleeve jacket length coats and display their name tags at all times.

Medical student name badges are to be worn at all times. Badges will be provided during orientation. Replacements are available in the GEB, for a fee. Students interested in access to various buildings after business hours are required to present identification badges for access and to display them while on the premises.

HOUSING ON CAMPUS – MEMPHIS

The University of Tennessee Health Science Center offers single student housing in the Goodman Family Residence Hall, which offers a single bedroom in a four bedroom apartment setting. Contact June Floyd, Director Goodman Family Residence Hall, 448-5609

OFF CAMPUS - MEMPHIS FRATERNITY HOUSING

Phi Chi is the nation's largest medical fraternity with more than 45,000 members in all parts of the world. There are over 350 Phi Chi alumni in Memphis alone, many of whom are active in the Alumni Association.

The Phi Chi Fraternity houses 28 persons and is two blocks from the Wassell Randolph Student-Alumni Center. The house is completely furnished with central heat and air, washer, dryer, color TV, table tennis, and a kitchen where students may prepare meals and snacks. Nonmembers are welcomed. Phi Chi invites any medical student interested in additional information to write to:

**House Manager
Phi Chi Fraternity
687 Jefferson Avenue
Memphis, Tennessee 38105**

OFF CAMPUS - CHATTANOOGA, KNOXVILLE, AND NASHVILLE

Many junior and senior students choose to take rotations in Chattanooga, Knoxville or Nashville. For questions or assistance on housing, contact the Office of Academic and Faculty Affairs. The following persons can provide assistance relative to these campuses:

1. Ms. Liz McGhee, Medical Education Office, UT College of Medicine-Chattanooga, 960 East Third St., Suite 104, Chattanooga, Tennessee 37403. Phone: (423) 778-7442.
2. Ms. Missy Maples, Office of Student Affairs, Graduate School of Medicine at UTMCK, 1924 Alcoa Highway, Third Floor GSM Building, Room 327, Knoxville, Tennessee 37920. Phone: (865) 544-9618.
3. Ms. Jeanne Stoker, Baptist Dept. of Internal Medicine, University of Tennessee, Nashville, 2000

Church St. Nashville, TN 37236. Phone: (615) 284-3353.

LOANS

Emergency loans are available to medical students through the Office of Financial Aid. Students may borrow up to \$300 from the Cooksey-Callison and Hand Loan Funds. Interest is six percent per annum and repayment is within thirty days. Loans are based on need and availability of funds.

Students experiencing financial difficulty are also encouraged to contact the Office of Financial Aid Services, 910 Madison Avenue #520, 448-5568.

STUDENT RECORDS

Student records are maintained in the Office of the Registrar (academic and personal); University Health Service (student health); Student Mental Health Service (counseling); UTHSC Student Affairs Office (disciplinary action and misconduct); and with course directors and/or departmental offices.

Students do not have the right of access to financial records of parents, or personal memory notes being maintained by any university official or faculty members. Students do have the right of access to their academic records in the College's Student Affairs Office. Students have access to individual transcripts online via the Student Information System (SIS).

TUTORING SERVICES

Tutoring services are available for students. Tutors are assigned based on availability and an assessment of students' need. For further information, contact Student Academic Support Services (SASS), 448-5056.

STUDENT EVALUATION

Biomedical Sciences

Examinations are given at periodic intervals during this portion of the curriculum. The content and time of each examination is established by the course directors responsible for instruction during the period each examination covers. The questions are generally multiple choice and computer graded.

It is the responsibility of each course director to establish the criteria for the awarding of course grades, the role of examinations in the determination of those grades, and the communication of this information as of the first day of each course. Any concerns relative to individual examination questions, criteria for course evaluation or final grades should be directed to the appropriate course director. Laboratory performance, participation in small group activities, special projects, etc., may also influence the final grade in each course.

Students are expected to take examinations as scheduled. Students unable to take an examination as scheduled because of an emergency situation (hospitalization or death in the family) must notify the Office of Academic and Faculty Affairs and the course director prior to the examination.

All students must take the United States Medical Licensing Examination (USMLE), Step 1, and pass at the national standard in order to be officially promoted to the Clinical Sciences portion of the curriculum. This examination is usually taken by all students in April following their second year, unless specifically deferred by the Office of Academic and Faculty Affairs.

Clinical Sciences

Student evaluation in the clerkship portion of the curriculum includes written examinations as well as other forms of evaluation. Clerkship examinations are normally multiple choice format and obtained from the National Board of Medical Examiners (NBME). Oral examinations are utilized in some clerkships and are administered by faculty or faculty and house staff. In addition, clinical performance is evaluated by attending faculty and house staff. These evaluation areas include:

- fund of information
- interest in learning
- history taking and physical examination skills
- technical skills
- organization of data/formulation of hypothesis
- ability to relate to patients
- professionalism.

The methods of evaluation are established by each clerkship director and communicated to students during clerkship orientations. Student evaluation reports are filed in the Office of Student Affairs and are available for review by the student. Student evaluations are also maintained by departmental offices.

A student unable to take a clerkship examination due to illness or other emergency situation must notify the director of that clerkship at the earliest possible time.

Concerns affecting individual examination questions or other forms of evaluation, as well as final grades, should be directed to the appropriate clerkship director. This must be done within one block of notification of the award of the final course grade.

Evaluation of students in selectives and electives does not normally include a written examination. The evaluation method is established by the course director and available to the student on the first day of the rotation.

APPEAL OF GRADES

A student may appeal his/her final grade if he/she feels that the grade was assigned inappropriately and not in accordance with the course or clerkship statement of policy distributed at the beginning of the program. The appeal is directed initially to the course/clerkship director; and then to the department chair. If resolution of the issue is not made at the department level, then the appeal is made in writing to the Office of Academic and Faculty Affairs. Any student wishing to appeal to the Dean concerning the recommendation must make a written request within five (5) working days of receipt of written notification of the recommendation from the Office of Academic and Faculty Affairs.

PROGRESS & PROMOTIONS

The following are the minimum standards for student promotion to the next year of the curriculum and for graduation as set by the College. No student may be promoted to the next year of the curriculum or certified for graduation without having met all of these standards, unless a recommendation for an exception is justified in writing by the appropriate Progress and Promotions Committee (P&P) and accepted by the Executive Dean. An exception to any minimum standard is made only under extremely extenuating circumstances. The statements following the minimum standards are potential recommendations for the disposition of marginal or failing performance regarding that minimum standard.

Any student not having met the minimum standards may be allowed to repeat the curriculum in lieu of regular progress only under extremely extenuating circumstances. The P&P should recommend that a student repeat the curriculum in lieu of regular progress only in those situations in which the following three (3) criteria are met:

1. Committee identification of a specific circumstance(s) judged as having had a probable adverse effect on the student's academic performance.
2. Committee judgment that the identified specific circumstance(s) shows probability of resolution in a reasonable period of time.
3. Committee expectation that resolution of the identified specific circumstance(s) will result in subsequent satisfactory student performance in the curriculum.

The cumulative grade point average recorded on the transcript from the Registrar is used by the P&P, in part, to make recommendations about the promotion and continuation of students in the curriculum.

For students who must retake either courses or clerkships to remove academic deficiencies, the cumulative grade point average is calculated by averaging the final grades attained in all programs in which they have been enrolled for academic credit, including those repeated at UTHSC and those taken in approved summer programs.

FIRST YEAR:

1. Each student must obtain a passing grade in each course.

The Progress and Promotions Committee (P&P), after consideration of all available information including academic performance to date, may make one of the following recommendations concerning student failure of a course(s) within the first year:

- a. Re-evaluation in the failed course(s).
- b. Repeat all or part of the first year.
- c. Academic dismissal from the College.

2. Each Student must achieve a grade point average (GPA) of 2.0 (on a 4.0 scale).

The P&P, after consideration of all available information including academic performance to date, may make one of the following recommendations concerning student failure to achieve an overall GPA of 2.0 by the end of the first year:

- a. Re-evaluation in specified course(s).

- b. Repeat all or part of the first year.
- c. Academic dismissal from the College.

3. Any student earning a grade of “D” in two or more courses in the first year will have his/her academic record reviewed as previously described under grading system.

SECOND YEAR:

1. Each student must obtain a passing grade in each course.

The P&P, after consideration of all available information including performance to date, may make one of the following recommendations concerning student failure of a course(s) within the second year:

- a. Re-evaluation in the failed course(s).
- b. Repeat part or all of the first and/or second year.
- c. Academic dismissal from the College.

2.0. Each student must achieve an overall GPA of 2.0.

The P&P, after consideration of all available information including academic performance to date, may make one of the following recommendations concerning student failure to achieve an overall GPA of 2.0 by the end of the second year:

- a. Re-evaluation in specified courses.
- b. Repeat part or all of the second year.
- c. Academic dismissal from the College.

3. Each student must obtain a passing score at the national standard on the United States Medical Licensing Examination (USMLE) Step 1.

a. All students must take the USMLE Step 1 examination and pass at the national standard in order to be officially promoted to the Clinical Sciences portion of the curriculum. This examination must be taken by all students in April following their second year unless deferred by the Office of Academic and Faculty Affairs. Students who are approved for deferment will not begin clerkships until a passing score is submitted.

b. The P&P will review the total academic performance to date of any student failing to achieve a passing score on the USMLE Step 1 examination.

c. Any student failing to submit a passing score on the first attempt will be withdrawn from the Clinical Sciences portion of the curriculum and will not be scheduled for clerkships until a passing score is submitted.

d. For students who fail the exam a second time, the P&P will review the student’s academic record and recommend a program for the student to follow while preparing to take the examination for a third time.

e. Any student failing to submit a passing score after three attempts will be academically dismissed from the College.

f. Any recommendation for an exception to the College of Medicine policy concerning the USMLE Step 1 examination will be justified in writing to the

Executive Dean by the Progress and Promotions Committee.

THIRD YEAR:

1. Each student must obtain a grade of “C” or better in each core clerkship.

The Progress and Promotions Committee (P&P), after consideration of all available information including academic performance to date, may make one of the following recommendations concerning a grade of “F” in a clerkship within the junior year:

- a. Re-evaluation in the clerkship in which an “F” was made.
- b. Repeat the clerkship in which an “F” was made and obtain a grade of “C” or better.
- c. Repeat all of the core clerkships.
- d. Academic dismissal from the College.

FOURTH YEAR:

1. Each student must obtain a grade of “C” or better, or a “P,” in each clerkship, selective or elective program.

The Progress and Promotions Committee (P&P), after consideration of all available information including academic performance to date, may make one of the following recommendations concerning a grade of “F” in a clerkship, selective or elective:

- a. Re-evaluation in the program in which an “F” was made.
- b. Repeat the program in which an “F” was made and obtain a grade of “C” or better.
- c. Academic dismissal from the College.

2. Each student must obtain a passing score at the national standard on the United States Medical Licensing Examinations Step 2CK (Clinical Knowledge) and Step 2CS (Clinical Skills).

a. All students must take the USMLE Step 2CK and Step 2 CS examinations and pass at the national standard in order to be certified for graduation. Students should take the Step 2 CK and the Step 2 CS examinations no later than December 31st.

b. Any student failing to submit a passing score on the first attempt will be allowed to retake the exam.

c. Any student failing to submit a passing score on the second attempt may be allowed to retake it again after consultation with the P&P Committee.

d. Any student failing to submit a passing score after three attempts will be academically dismissed from the College.

e. Any student sponsored for a second or third attempt may be required to remain enrolled for 2 semester hours until the examination has been retaken, regardless of whether or not all other academic requirements have been met.

f. Any recommendation for an exception to the College of Medicine policy concerning the USMLE Step 2CK and Step 2CS examinations will be justified in writing to the Executive Dean by the P&P.

PROGRESS AND PROMOTIONS COMMITTEE (P&P)

The Progress and Promotions Committee is charged by the Executive Dean of the College of Medicine with monitoring and making recommendations concerning the results of student performance in each academic year and certification of students for graduation. A committee is appointed for each academic class.

Each Committee is composed of faculty members, including a voting chair. All members, including the chair, are appointed by the Executive Dean of the College of Medicine. The Office of Academic and Faculty Affairs and the Office of Student Affairs appoint ex-officio non-voting members to the Committee. The Office of Academic and Faculty Affairs and/or the Office of Student Affairs provides each Committee with all pertinent information available from the Registrar's Office and College of Medicine student records for those students under consideration.

The deliberations of a Committee are confidential. A recommendation by the P&P to the Executive Dean requires a majority vote of the members present. The meetings are called by the Office of Academic and Faculty Affairs or the Committee chair as necessary. The Committee maintains written records of the recommendations made to the Executive Dean. Summaries of Committee proceedings are on file in the Office of Academic and Faculty Affairs.

ROLE OF COURSE DIRECTORS CONCERNING PROGRESS AND PROMOTIONS

Each Course Director is responsible for the evaluation of students and the assignment of student grades in the course(s) for which he/she is responsible, and for presenting to the appropriate Committee all pertinent data collected on any student during a course in which a student earned a "D" (marginal), "F" (failing), or "I" (incomplete) grade. In addition, each Course Director reports to the Committee the method, if any exists, by which any grade can be modified or changed.

RECONSIDERATION OF PROGRESS AND PROMOTIONS COMMITTEE RECOMMENDATIONS

In the case of an adverse recommendation, the student has the right to reconsideration by the Progress and Promotions Committee (P&P) that made the original recommendation. The student must make a request to the Office of Academic and Faculty Affairs within five (5) working days of receipt of written notification of the P&P recommendation. The student will meet with the P&P and have the opportunity to bring with him/her any person(s), excluding legal counsel, whom the student feels can contribute to his/her presentation to the P&P. Committee reconsideration is conducted without the presence of legal counsel. Should the original adverse recommendations be sustained by the P&P, the student may then appeal to the Office of Academic and Faculty Affairs and subsequently to the Executive Dean of the College of Medicine.

ROLE OF THE STUDENT IN RECONSIDERATION OF COMMITTEE RECOMMENDATIONS

It is the responsibility of the student requesting reconsideration by a Progress and Promotions Committee (P&P) to obtain and submit any information or documentation to support an alternative recommendation prior to P&P reconsideration. This includes any academic, psychiatric, personal, financial or physical information the student wishes to release to the P&P and the Executive Associate and Assistant Deans. The Office of Academic and Faculty Affairs and the Office of Student Affairs are responsible for assisting the student in obtaining this information.

ROLE OF THE OFFICE OF ACADEMIC AFFAIRS CONCERNING STUDENT PROGRESS AND PROMOTIONS

The Office of Academic and Faculty Affairs reviews all recommendations made by the Progress and Promotions Committee (P&P) and, after all Committee considerations have taken place, submits these to the Executive Dean for consideration and decision. At that time, the Office of Academic and Faculty Affairs either concurs in the recommendation(s) of the P&P or makes alternative recommendation(s) to the Executive Dean. The recommendation(s) of the P&P, as well as the position of the Office of Academic and Faculty Affairs, are communicated to the student in writing by the Office of Academic and Faculty Affairs. The position of the Office of Academic and Faculty Affairs and the decision of the Executive Dean will be reported to the P&P by the Office of Academic and Faculty Affairs.

ROLE OF THE EXECUTIVE DEAN CONCERNING STUDENT PROGRESS AND PROMOTIONS

The Executive Dean may receive recommendations from the Progress and Promotions Committee, the Office of Academic and Faculty Affairs and other sources concerning the result(s) of individual student performance in the curriculum. Within the College, only the Executive Dean makes decisions concerning the result(s) of individual student academic performance.

Any student wishing to appeal to the Executive Dean concerning recommendation(s) made in his/her case must make a written request to meet with the Executive Dean within five (5) working days of receipt of written notification of the recommendation(s) concerning his/her case from the Office of Academic and Faculty Affairs.

LICENSURE EXAMINATIONS

USMLE Step 1 and 2 examinations are administered by the National Board of Medical Examiners (NBME) for all eligible examinees. Further information can be obtained from the NBME at <http://www.usmle.org>. The Step 3 examination is administered by licensing authorities for the State of Tennessee. Further information can be obtained from the Tennessee State Board of Medical Examiners, Public Health State Office Building, 283 Park Boulevard, Nashville, Tennessee 37219.

GRADUATE TRAINING

The National Resident Matching Program (NRMP)

A. How It Works

1. The NRMP Match is a mechanism by which appointments to residency programs are made at a uniform time. It provides an impartial venue for matching applicants' preferences for residency positions with program directors' preferences for applicants. Each year approximately 16,000 U.S. allopathic medical school seniors compete for residency positions through the Match.

2. In the Match, all steps of the admissions process are carried out (by computer) at uniform times. ERAS is the Electronic Residency Application Service developed by the Association of American Medical Colleges to transmit via the Internet residency applications, personal statements, recommendation letters, deans' letters, transcripts, and other supporting credentials from medical schools to residency program directors. Program directors decide on the order in which they will offer positions to candidates, and transmit their Rank Order List to the NRMP via the internet. Applicants decide on the order in which they will accept offers from programs, and transmit their Rank Order Lists to the NRMP via the internet also.

3. The Match obviates what can be possibly premature decisions and less-than-comfortable direct interchanges between program directors and applicants in the offering and acceptance or rejection of positions.

4. In the Match, applicants and program directors obtain their highest possible choices as determined by their Rank Order Lists. A position is "offered" to an applicant whenever his/her name appears within the quota of positions offered by a program. An applicant "accepts" (is matched to) a position in the program highest on his Rank Order List that "offers" him/her a position.

5. In the Match, the Confidential Rank Order Lists are the sole determinants of offers and acceptances of residency positions. The only reason an applicant does not "accept" an offer from a particular program director is that the applicant preferred (ranked higher) another program from which he/she also received an offer. The only reason an applicant does not "obtain" (match to) a position in a particular program is that the program director preferred (ranked higher) other applicants.

6. Top choices on Rank Order Lists can be made by applicants and program directors in the order of desirability - they should ignore probability of acceptance. When an applicant is "offered" his/her first choice position, the match is final. His/her name is removed from the lists of all other programs, and their Rank Order Lists are adjusted as necessary, to maintain their quotas by including the next person down the list. If an applicant matches to a lower-ranked program, the match is tentative. His/her name is removed from the lists of all programs ranked lower but is maintained on the lists of his/her higher-ranked

programs. If his/her name should subsequently be included within the quota of a program he/she has ranked higher, he/she will be moved to the higher-choice position. No matter how many top-ranked applicants "decline" offers from a given program, lower-ranked applicants who rank that program first will be matched to it as long as they are included in the program's unfilled quota.

7. For the Match to work optimally, applicants must list (rank) all acceptable programs to which they have applied and program directors must offer positions to (rank) all acceptable applicants. Applicants must, as in any admissions process, rank a range of programs on their Rank Order Lists including lower choices of less desired but satisfactory programs. Applicants who do not match tend to be those with shorter Rank Order Lists and those who list only highly competitive programs. Program directors who rank only a few more of their applicants than they have positions or concern themselves about "how far down" their Rank Order List they go do not understand the Match. If, on the average, each applicant were to apply to five programs, the average program director would have an acceptance from only one out of every five applicants to whom he/she offered (ranked) a position

B. NRMP Special Cases

1. Public Health Services Programs: Students on these scholarship programs are also required to participate in the NRMP.

2. Armed Forces: Students on these scholarship programs are required to participate in the Armed Forces Residency Matching Program. This is conducted at an earlier time to allow students who are unmatched through the Armed Forces to secure a civilian position. Therefore, all students on Armed Forces scholarships are encouraged to enroll in NRMP as a backup.

3. Couples: Married/engaged/etc. couples may go through NRMP as a single unit through a special procedure or make arrangements outside NRMP.

4. Students whose academic progress has been altered such that they will not complete all requirements for the M.D. degree on schedule may need to make special arrangements with the Office of Student Affairs.

C. NRMP approximate dates.

Spring, Junior Year - initial information regarding NRMP distributed.

August, Senior Year - students sign up with NRMP and send in registration fee.

July, Senior Year - letters of recommendation with individual faculty members arranged; appointment made with Office of Student Affairs for writing the Medical Student Performance Evaluation (Dean's Letter); and applications made to programs of your choice with interviewing appointments made.

February - receipt of Applicant and Hospital Confidential Rank Order List by NRMP.

March - results of "The Match."

D. Letters of Recommendation

It is suggested that students not seek letters of recommendation for residency training until the end of the third year. Every residency will require letters of recommendation from the chair of the department of the specialty you wish to enter and, generally, from two additional faculty members as well. Each student will be required to have a Medical Student Performance Evaluation (MSPE), which is prepared in the Office of Student Affairs.

GRADUATION ACTIVITIES

The College of Medicine has instituted a Dean's Convocation in honor of the graduating class and their families. This ceremony includes an address by the Executive Dean of the College of Medicine, recognition of honors and award recipients, administration of the Oath of Hippocrates, and addresses by faculty and student representatives.

UTHSC commencement activities are held in May and December of each year. The UTHSC Office of Student Affairs provides information concerning commencement activities.

Attendance at graduation is required of all students. Graduation in absentia may be permitted by the Executive Dean after a petition for graduation in absentia is submitted to the College of Medicine's Office of Student Affairs at least two months before graduation. Students should contact the Office of Student Affairs for further information.

HONORS & RECOGNITION

Outstanding students are recognized for their achievement during the College of Medicine Dean's Convocation each year. These awards are given in recognition of academic excellence, achievement in clinical medicine, research, leadership and service to the community and to the institution. The Committee on Recognition and Awards, with the support of the Office of Student Affairs, considers all candidates for these awards and makes the final selection of the recipient.

WITH HONORS

The College of Medicine acknowledges the superior academic achievement of students by the designations of "With Highest Honors" (top 5%) and "With High Honors" (next 10%) on their transcripts. All academic programs taken through Block 3 of the fourth year are counted for the determination.

FACULTY MEDAL FOR ACADEMIC ACHIEVEMENT

This award is presented by the College of Medicine faculty to the graduating senior who has the highest academic standing in the class. Determination is based on all academic programs taken through Block 3 of the fourth year.

ALUMNI ACHIEVEMENT AWARD IN CLINICAL MEDICINE

This award is presented to an outstanding senior who has exemplified the highest ideals of the practice of medicine. The recipient has displayed the best qualities of personal honesty, character, compassion for patients, and dedication to the highest ethical and professional standards. A plaque and stipend are provided by the College of Medicine Alumni Association for the continued pursuit of excellence in medical arts and skills. The recipient is chosen by the Committee on Recognition and Awards.

ALUMNI ACHIEVEMENT AWARD IN RESEARCH

This award is given to a graduating senior in recognition of outstanding achievement in biomedical research while a student in the College of Medicine. A stipend is provided by the College of Medicine Alumni Association for continuation of research pursuits. The recipient is chosen by the Committee on Recognition and Awards.

ALPHA OMEGA ALPHA DISTINGUISHED GRADUATE AWARD

An engraved plaque is presented to the graduating senior who, in the opinion of the Committee on Recognition and Awards, will make the most significant contribution to the medical profession. The award is presented by the University of Tennessee College of Medicine chapter of Alpha Omega Alpha National Honor Medical Society.

ROBERT L. SUMMITT, M.D. DISTINGUISHED STUDENT ACHIEVEMENT AWARD

The Committee on Recognition and Awards selects a graduating senior who has shown distinction in scholarship, leadership, service, and character during his or her medical studies. An engraved plaque and stipend are awarded by the College of Medicine.

CHARLES C. VERSTANDIG AWARD

This award is presented to a member of the graduating class of the College of Medicine who surmounts the greatest difficulty in obtaining a medical education. The recipient is selected by the graduating class.

DEPARTMENT AWARDS

Family Medicine - Medicine - Neurology - Obstetrics and Gynecology - Pediatrics - Psychiatry - Surgery.

Each of the above departments presents an award to the graduating senior, respectively, who has shown outstanding abilities in that specialty.

ANTHONY S. FICALORA AWARD

The individual selected to receive this award shall have shown unusual sensitivity to and respect for patients and shall be one who by example and attitude teaches others. The recipient is chosen by the Committee on Recognition and Awards.

OUTSTANDING COMMUNITY SERVICE AWARD

An engraved plaque is given to a graduating senior for outstanding service to the community and the medical profession while a student of medicine. The recipient is selected by the Medical Student Executive Council.

DISTINGUISHED STUDENT SERVICE AWARD

An engraved plaque is given by the College of Medicine to a graduating senior for outstanding service to the student body and to the College of Medicine. The recipient is selected by the Medical Student Executive Council.

UTHSC STUDENT AFFAIRS SERVICE AWARD

Presented by the Office of Academic, Faculty, and Student Affairs to a member of the Student Government Association Executive Council in recognition and appreciation of outstanding leadership and service.

OUTSTANDING STUDENT IN FAMILY PRACTICE AWARD

A plaque and a stipend are provided by the Tennessee Academy of Family Physicians (TAFP) to a graduating senior. The recipient is selected by the TAFP.

ALPHA OMEGA ALPHA HONOR SOCIETY

Alpha Omega Alpha (AOA) is an honorary medical society whose purpose is to perpetuate excellence in medicine. In selecting members, the UT chapter considers both an applicant's academic performance and demonstration of other attributes exemplary of a physician. In addition, faculty and alumni are also elected as members. It should be noted that many members are in non-university settings. AOA, in its effort to increase medical excellence, has two major activities each year. AOA sponsors a visiting professor annually. In addition to giving a formal lecture, the visiting professor meets with students in less formal settings, often including rounds. AOA Day, held in the spring of each year, includes a visiting professor and the presentation of student research papers, including those papers which have already received AOA awards for research.

Alpha Omega Alpha National Honor Medical Society student membership is based entirely upon scholarship, personal honesty, and potential leadership. Students are elected to the chapter during their third and fourth years of medical school. The UT chapter of AOA makes all selections.

RESEARCH OPPORTUNITIES

MEDICAL STUDENT RESEARCH FELLOWSHIP PROGRAM

http://www.utmem.edu/research/edu_training/MSRF/home.htm

The Medical Student Research Fellowship Program was established in 1978 to provide medical students with

opportunities to engage in biomedical research. Since the inception of this program, over 600 medical students have received grants on a competitive basis and have conducted a wide range of projects during option periods.

These research projects have generated numerous papers and abstracts in the scientific literature. A number of student researchers have also presented their research findings at national and regional conferences. By introducing students to the possibility of a career in research, the goal of the program is to ease a serious shortage of young physicians entering research fields.

A grant from the National Institutes of Health provides stipend awards for 24 medical students to spend from 2-3 months in research under the supervision of College of Medicine faculty members who are established biomedical investigators. M-1 students may participate during the summer. The M-2, M-3, and M-4 students may apply for support during their option blocks. All participants are expected to devote full-time effort to their projects.

The Medical Student Research Fellowships are available on a competitive basis to all students in the College of Medicine who are in good academic standing. Students are asked to contact the College of Medicine Research Office to discuss potential faculty preceptors. All applications are reviewed for their scientific merit and perceived value as a research training experience. Selection is based on evaluation of proposals submitted jointly by students and their preceptors, the student's academic record, and the preceptor's curriculum vitae.

Students are encouraged to submit their applications as soon as possible. The deadlines are: Summer Period-March 31. Other Option Blocks-two months before the start of the requested research block.

Every effort will be made to provide notification of awards as soon as possible. For further information and application instructions regarding this program, contact the College of Medicine Research Office, Suite 825, 920 Madison Building, 448-5528 or stom@utmem.edu. The COM also offers students other research opportunities. Additional program information can be found at http://www.utmem.edu/research/edu_training/.

STUDENT GOVERNANCE

Rules and regulations governing the organization and structure for each class are the sole responsibility of the Medical Student Executive Council (MSEC) and each respective class.

Each class elects a slate of officers to formally represent them on all matters concerning their class. The initial election for the freshman class is held during the first month of school and is conducted by the MSEC. Officers elected serve for an interim period. After a period of the freshman year and at the end of every academic year, elections are held to elect officers for the coming year. These elections are conducted by the MSEC or by any officer running unopposed. At any time during the year, a recall petition signed by at least 25% of the class is grounds for a new election.

The class president is the official liaison between the class and the administration and faculty. The president is also a voting member of the MSEC. Currently, each class elects vice-presidents, a secretary and a treasurer.

Each class elects three representatives to the MSEC, three representatives to the Honor Council, two representatives to the AIMS Council, and two representatives to the Professionalism Committee. These representatives support the class' interest in their respective organizations and report the actions of their group to the class. Students are urged to contact their class representatives to voice any concerns regarding the areas of the student organizations' responsibilities.

Additionally, each class has a social committee of two or three students who plan class social events, and athletic directors to coordinate involvement in intramurals.

STUDENT GOVERNMENT ASSOCIATION EXECUTIVE COUNCIL (SGAEC)

The Student Government Association Executive Council provides representation for all students at the UTHSC campus. The presidents of each college within the UTHSC system form this student government body. The president of the Medical Student Executive Council is the College of Medicine student representative on the SGAEC. The SGAEC studies matters of importance to students and submits recommendations expressing student views and concerns to the administration and faculty of the University.

MEDICAL STUDENT EXECUTIVE COUNCIL

Van Morris

President, MSEC, 2007-08

The Medical Student Executive Council is the governing council of the student body of the University of Tennessee College of Medicine, representing the students to the administration and faculty of the University, and the Memphis community. The Council is headed by a President and Vice President, elected annually. Other members include:

1. Each class president (4)
2. Four class representatives (16)
3. American Medical Association-Medical Student Section (1)
4. American Medical Student Association (1)
5. Family Practice Student Association (1)
6. Organization of Student Representatives to American Association of Medical Colleges (AAMC) (2)
7. Phi Chi Medical Fraternity (1)
8. Student National Medical Association (1)
9. CIAO representative (1)
10. Honor Council representative (1)
11. BSS representatives (2)
12. CSS representatives (2)
13. CUME representatives (2).

The Council serves to represent all students in the College of Medicine, addressing academic, financial, social, and other issues affecting the students' overall learning experience. MSEC meetings are held Thursdays at noon in the Student Alumni Center and are open to all students in the College of Medicine. Meetings are periodically visited by the Dean of the College of Medicine, Associate Dean of Academic and Faculty

Affairs, and Associate Dean of Admissions and Student Affairs. Many of the changes in the curriculum are a direct result of MSEC action and support, either from the Council itself or its representatives on the Committee on Undergraduate Medical Education, Clinical Sciences Subcommittee, and Biomedical Sciences Subcommittee. These representatives report directly to the MSEC, as do the various other committee representatives. The effectiveness of the Council is related directly to its leadership and participation.

Minutes of the weekly meetings of the Medical Student Executive Council (MSEC) are posted on class bulletin boards and the lobby of the Cecil C. Humphreys General Education Building (GEB), and the lobby of the Student Alumni Center (SAC). A copy of the minutes is emailed to students via the student listservs. A permanent record is kept on file in the Office of Student Affairs.

HONOR COUNCIL

The UTHSC College of Medicine's Honor Code was established in 1960 and is one of the oldest codes among U.S. medical schools. Please refer to the Honor Code Section IV, Addendum D, of the Student Judicial System section of this handbook, for the special provisions of the UTHSC Honor Code that pertain to the College of Medicine.

PROFESSIONALISM COMMITTEE

The Professionalism Committee deals with unprofessional behavior between peers, peers and faculty, and toward patients and staff. The committee consists of three (3) *elected members* from each medical school class and is responsible for, fostering patient welfare, colleague cooperation and teamwork, personal growth, civic duty, professional ethics, honesty, integrity, accountability, respectful attitudes, and commitment to excellence.

STUDENT ORGANIZATIONS

AMERICAN MEDICAL STUDENT ASSOCIATION

The American Medical Student Association (AMSA) is a national organization which offers students an opportunity to become involved in community outreach projects through locally organized chapters. AMSA is well known for its commitment to facilitating student impact on medical education and practice by developing networks that would increase physicians' awareness and sensitivity to their patients and communities. As a national organization, AMSA offers many opportunities, such as preceptorships in a variety of specialties across the country, participation in the International Medical Student Association, and access to experiences of other AMSA chapters. AMSA chapters receive support from AMSA national staff and task forces. AMSA task forces publish newsletters and hold seminars on areas of interest other than those already covered by our curriculum. These task forces include: Nutrition and Preventive Medicine, Death and Dying, Women in Medicine, Law and Medicine, and many others. Involvement with AMSA also affords students the opportunity to meet and work with students

attending other medical schools via regional and national conferences.

Activities of the UT AMSA chapter have included discussion of clinics by M-3s and M-4s, ongoing M-1 support group, blood pressure screenings in the community with the Memphis High Blood Pressure Coalition and CPR training sessions. The UT AMSA chapter is a forum for student concerns, both personal and professional.

THE STUDENT NATIONAL MEDICAL ASSOCIATION (SNMA)

The SNMA was founded and organized in 1964. It is a non-profit corporate association of minority students in pursuit of a medical education. The SNMA is dedicated to:

- (1) leadership development by augmenting and enhancing individual efforts as well as providing collective group development of minority medical students,
- (2) social awareness through student interaction with minority consumers and other health professional groups to keep abreast of social changes and their implications for the minority communities, and
- (3) service to humanity through a commitment to professional excellence which will ultimately benefit others in their chapters and in the community. The SNMA supports the concept of a well-rounded, thoroughly-trained physician - one who can treat people, not just disease - and who can communicate with and understand the health needs of all Americans.

AMERICAN MEDICAL ASSOCIATION Medical Student Section (AMA-MSS)

The AMA-MSS is a national organization of medical student members of the AMA which is dedicated to improving medical education, developing leadership and promoting activism for the health of America.

The AMA-MSS offers students unique opportunities to interact with students and physicians from across the state and the country. UTHSC has a long tradition of producing national leaders for the AMA-MSS.

As a member of the AMA-MSS, students are full members of the AMA and as such receive all the benefits that are available to physician members of the AMA including subscriptions to JAMA, AMNews - a weekly update on issues facing medicine, and Members Matters - a newsletter published by the AMA with more immediate concerns facing medicine. Members receive a free copy of the Drug Evaluation textbook, a helpful resource during Pharmacology.

UTHSC members also receive the Journal of the Tennessee Medical Association (TMA) and other publications from the TMA. On a local level, members receive Memphis Health Care News and updates both from our local chapter and the Memphis-Shelby County Medical Society.

Members also receive special banking and insurance benefits through the AMA, as well as having the full resources of the AMA to call upon whenever needed for researching issues to finding information of externships and residencies.

The local chapter also conducts a physician match program which matches M1 and M2 students with local

physicians for a day to shadow them to learn more about the actuality of practicing medicine. UT's AMA-MSS chapter also conducts several seminars each year that offer students educational opportunities outside the traditional curriculum.

ORGANIZATION OF STUDENT REPRESENTATIVES (OSR)

The Organization of Student Representatives provides student input into the Association of American Medical Colleges (AAMC). The AAMC is a group with membership from American, Puerto Rican and Canadian Medical Schools, over 400 teaching hospitals, and 60 major academic societies.

The OSR has both national and regional meetings once a year. During these meetings, the student members discuss the status and trends in medical education nationwide, pass resolutions, and elect officers who meet during the year to act upon those resolutions. For the College of Medicine, representatives are chosen by the Medical Student Executive Council. OSR representatives have information concerning issues at other medical schools and at the national level in medical education.

COUNCIL FOR INTERNATIONAL AND AREA OUTREACH (CIAO)

The College of Medicine fosters student commitment to local and international public service and understanding. This commitment is consistent with our Code of Professionalism which describes the responsibilities of physicians to patients, colleagues, families and community. It prepares medical students for global, cultural, educational, and medical interactions. The council is composed of at least two members from each of the four medical classes chosen for their interest and commitment to public service. Faculty members on the committee have been identified because of their expertise as well as commitment to local and international service. The council manages a fund which is used to assist with expenses for local and international service projects. The group also keeps current data on fourth year international elective opportunities on the College of Medicine web page. CIAO strongly encourages medical students to become involved in a wide variety of local community service programs.

STUDENT INTEREST GROUPS

ADOLPH MEYER SOCIETY

Adolph Meyer Society is an organization of medical students who are interested in psychiatric aspects of medicine. The monthly meetings are held at the home of a faculty member and consist of informal discussions with faculty members. Meetings are open to all medical students and spouses.

EMERGENCY MEDICINE INTEREST GROUP

Purpose: Introduce students to the study of emergency medicine as a specialty and serve as a source of information for students who wish to pursue residency training in emergency medicine.

Dates and Location: Meetings are monthly; location varies.

Membership Criteria: Membership is open to anyone with an interest in emergency medicine. No dues are required.

FAMILY PRACTICE STUDENT ASSOCIATION

Faculty Advisor: Frank Williams

Purpose: Introduce family practice residents and physicians to hands on training, educational opportunities and speakers.

Dates and Location: Scheduled monthly on Tuesday evenings at the GEB or SAC.

Membership Criteria: Ten dollars per year membership fee which entitles members to receive monthly and quarterly journals.

SPECIAL INTEREST GROUP IN NEUROLOGY (SIGN)

Faculty Advisor: Daniel L. Menkes, M.D.

Purpose: Introduce students to the study of neurology as a specialty and serve as a source of information for students who wish to pursue residency training in Neurology.

Dates and Location: Meetings are semiannual; location varies

Membership Criteria: Open to anyone with an interest in Neurology. No dues are required.

Additional benefits: Scholarship funds are often available to those students who wish to attend the annual meeting of the American Academy of Neurology.

OB/GYN STUDENT INTEREST GROUP

Faculty Advisor: Owen Phillips, M.D.;

Purpose: The Ob-Gyn special interest group educates students about career opportunities in women's health through discussions of health related issues particular to women.

Dates and Location: Meetings bi-monthly; location varies

Membership Criteria: Open to any faculty and students.

PEDIATRIC ISSUES STUDENT ASSOCIATION (PISA)

Faculty Advisor: Valerie Jameson, M.D.

Purpose: PISA was founded in 1997 by a group of students interested in providing young physicians with additional information and exposure to pediatrics. PISA arranges guests to speak on topics such as residency programs, childhood development, child abuse, and community service projects. The goal of this organization is to help students with difficult career decisions. PISA also serves to assist students interested in pediatrics with finding mentors, applying for residencies and making important class decisions.

Dates and Location: This group meets three times a semester at the Le Bonheur auditorium.

Membership Criteria: Open to any student or faculty member sharing an interest or love for children.

STUDENT SURGICAL SOCIETY

Faculty Advisor: Gayle Minard, M.D.

Purpose: Provide career counseling, fellowship and professional mentoring opportunities to medical students interested in pursuing professions in general surgery and the surgical subspecialties.

Dates and Location: Meetings are monthly; location varies.

Membership Criteria: Medical students enrolled at the University of Tennessee Health Science Center College of Medicine.