These guidelines do not constitute a contract, either expressed or implied, with the University of Nebraskan College of Medicine (COM) and the University reserves the right at any time to change, delete or add to any of the provisions at its sole discretion. Furthermore, the provisions of this document are designed by the University to serve as guidelines rather than absolute rules, and exceptions may be made on the basis of particular circumstances.
The Student Evaluation Committee is a standing committee of the University of Nebraska Medical Center, College of Medicine, with the responsibility of determining whether students are making satisfactory progress in the medical curriculum. The goal of the College of Medicine is to produce excellent physicians. There is a shared responsibility by both the College of Medicine and the student to accomplish that goal. The College of Medicine is committed to helping students achieve the knowledge, skills and professional attributes to be successful physicians. Students are expected to be an active partner with the College Of Medicine in meeting this commitment.

The criteria set forth in this document are guidelines for determining the student’s fitness to earn the M.D. degree. Each student case requiring action by the Student Evaluation Committee will be considered on its own merits.

**CHARGE, STRUCTURE AND ACTION OF THE STUDENT EVALUATION COMMITTEE**

**Role:** The primary responsibility of the Student Evaluation Committee is the evaluation of student academic performance, which includes, but is not limited to cognitive, professional, attitudinal, and skill performance. The Student Evaluation Committee will consider the student’s progress and assess the fitness for continuation in the College of Medicine. Secondary responsibilities include providing feedback on student performance to the Admissions and Curriculum Committees as well as reviewing and making recommendations concerning candidates for degrees and honors programs.

**Composition:** The Student Evaluation Committee consists of representative faculty members in the cores or clerkships for which evaluation is required, a house officer, and/or two students. The Associate Dean for Admissions and Student Affairs, the Assistant Dean for Admissions and Student Affairs, the Assistant Dean for Student Affairs, and the Director of the Student Counseling Center, are non-voting members.

**Considerations:** In evaluating student performance and progress, the Student Evaluation Committee reviews the cumulative academic record. The Committee takes into account such matters as fund of knowledge, ability to organize and logically present information, test-taking skills, understanding and judgment, clinical skills, problem solving ability, and professional behavior.

Furthermore, when reviewing students in academic difficulty, the Student Evaluation Committee may seek information about the student’s personal and psychological adjustment.
Objectives: The Student Evaluation Committee’s objective is to identify students with ‘at risk’ performance as early as possible in an academic period and assist those students to achieve success. Some of the mechanisms used to achieve these objectives are: “Notice of Concern” letters, Academic Probation letters, counseling with the Student Evaluation Committee, meeting with the Director of the Student Counseling Center and the Associate Dean of Admissions and Student Affairs or Assistant Dean for Student Affairs and possible enrollment in the Academic Success Program.

Reporting Procedure: The Student Evaluation Committee meets regularly to evaluate student progress. All recommendations (academic probation, termination, honors, etc.) of the Student Evaluation Committee are forwarded to the Dean of the College of Medicine for action.

Student Responsibility: Students selected for admission are expected to be successful in the curriculum. Students who experience personal health or psychosocial problems that may interfere with academic or clinical performance are required to notify the Associate Dean for Admissions and Student Affairs and/or other appropriate College officials in a timely manner and seek appropriate assistance. Students who experience academic difficulty must comply with directives set forth by the Student Evaluation Committee.

GUIDELINES

GRADES:
The grading system is as follows: Honors (H), High Pass (HP), Pass (P), Marginal (M), Fail (F) and Incomplete (I).

Incomplete: A core or clerkship, which, for good reason, has not been completed at the end of the term, but in which progress has been satisfactory, may be reported as Incomplete (I). A grade of Incomplete cannot be used as a method of remediation of marginal or failing performance in a core/clerkship. A core or clerkship issuing a grade of Incomplete will indicate, in writing, with a copy to the student and to the Student Evaluation Committee, how the Incomplete is to be removed. The core/clerkship director and student must enact a plan that can be completed by the end of the term following the one in which the Incomplete was received. Failure to remove the Incomplete by the end of the following term will result in the grade automatically being converted to a Fail. Core or clerkship directors may petition the Student Evaluation Committee to make individual exceptions to this rule.

REPORTING PROCESS:
Core and clerkship directors should be prepared to provide the Student Evaluation Committee with a written description of the decision-making process used to assign Marginal or Fail grades. This description should include any information given to students during the course of the core/clerkship describing
examination and grading policies and any information (in addition to achievement scores on examinations) that was used in the decision-making process of assigning the final grade.

PROFESSIONAL BEHAVIORS:
Besides cognitive and psychomotor skills, the student will demonstrate professionalism. Expectations for professionalism include but are not limited to: attendance at regularly scheduled instruction; relating well to patients and establishing sensitive and professional relationships with them; responding to criticism by appropriate modification of behavior; interacting effectively, humanely and consistently with faculty, peers, all members of the health care team and support staff; demonstrating honesty, courtesy, and integrity in all aspects of interaction with patients and others be it public or private; being punctual and dependable; being receptive to instruction by faculty and staff; exhibiting grooming, dress and hygiene commensurate with responsibilities, demonstrating a knowledge of medical ethics; and maintaining confidentiality at all times.

Health Insurance and Portability and Accountability Act (HIPAA) and Patient Confidentiality

All students must follow HIPAA when participating in clinical activities. The Privacy Rule protects individually identifiable health information, called PHI, held or transmitted by a covered entity or its business associate, in any form, whether electronic, paper, or verbal. The United States Government takes compliance seriously and an offense may lead to fines and prison. Compliance violations start with $100 fines and can go all the way up to 10 years in prison (HIPPA, 1996). It is incumbent on the student to understand and follow HIPAA. Ignorance of the law is not an excuse for non-compliance in the eyes of the United States Government. Students are not exempt from these potential punishments. If a HIPAA violation is felt to have occurred, there may be a separate and parallel investigation completed by any covered patient care site. The process described below only reflects the policies and procedures of the College of Medicine.

Maintaining patient confidentiality is of critical importance for medical students and physicians alike. Medical students are privileged to learn information that patients share only with healthcare professionals. In turn, keeping this important medical information confidential is a key component of medical professionalism for medical students to learn.

Ensuring patient confidentiality, at times, may appear to conflict with other activities important to the delivery of patient care and other important American laws and values such as academic freedom, and freedom of speech. When these values clash, it may give rise to difficult and complex ethical issues. In confronting these issues students are expected to be proactive, seeking assistance as they would for any other academic or patient care issue. Many
resources are available through the medical school to include academic advisors, faculty, house staff, and the office of student affairs to name a few.

When concerns of a breach of HIPAA/patient confidentiality arise, the medical school, through the office of student affairs, will initiate a process to assess the validity of the claims. If no violation of patient confidentiality is found, no further action will be taken. If patient confidentiality has been violated, the Office of Student Affairs may elect to refer the case to the Student Evaluation Committee. In making this determination the Office of Student Affairs may take into consideration the significance of the confidentiality breach and other relevant information. The focus of this process is to create an educational experience to help the student remEDIATE.

If the case is referred to the Student Evaluation Committee, the committee (or a smaller subcommittee which would report back to the committee at large) will determine if patient confidentiality has been violated and the significance of the confidentiality breach. Important in the deliberations will be if any private health information was shared inappropriately, with whom it was shared, and the manner in which it was shared. Based on all the facts available, including the student interview, the committee may recommend remediation and/or probation or termination. The committee's findings and recommendation will be discussed with the student.

NOTICE OF CONCERN:
A student, whose academic performance or professional behavior is below expectations during the course of the academic year, may be sent a "notice of concern". Academic issues may include, but are not limited to, a poor or failing performance on a single examination and/or a poor or failing performance in a core or clerkship. Disciplinary/citizenship issues indicating a deficit in professional behavior could include those items discussed in the professional behavior section of the Student Evaluation Committee guidelines, HIPAA violations, and any additional concerns noted on an evaluation. Students receiving a "notice of concern" will be required to discuss any difficulties with the Associate Dean for Admissions and Student Affairs or the Assistant Dean for Student Affairs. Students may also be referred to the Student Evaluation Committee for further evaluation which could result in a recommendation for remediation, and/or probation or termination.

The academic and/or professional performance of students receiving a "notice of concern" will be reviewed following the posting of grades. Students may at that time be placed on probation if their performance remains sub-standard.

PROBATION:
Probation may be imposed in any instance in which academic work and/or professional conduct has been or is unsatisfactory. While on Probation and enrolled in classes, the student may be prohibited from engaging in employment
at UNMC and holding University-related elected offices or appointed positions. Students may not be allowed to participate in summer research programs while on Probation.

The performance of students on Probation will be reviewed at the end of the probation period as defined by the Student Evaluation Committee. Probationary status may be removed at the discretion of the Student Evaluation Committee if improvement in academic and/or professional performance has been demonstrated; however, the probationary action will remain as a part of the permanent record. Students will not be recommended for graduation while on Probation.

EXAMINATIONS:

USMLE Step 1 (M2 Students):
Passage of USMLE Step 1 is a requirement for graduation from the University of Nebraska College of Medicine. All students must take the examination before entering the junior year clerkships. Students who fail will be expected to re-take the examination within 90 days of receipt of the failing grade.

First Time Failure: First time failure of the examination will result in Academic Probation and automatic review by the Student Evaluation Committee of the student’s performance and any extenuating circumstances. Possible actions may include remediation of a core, participation in a board review course, or repetition of the academic year. Students who fail will be expected to re-take the examination within 90 days of receipt of the failing grade.

If a student is currently enrolled in the twelve-week Internal Medicine Clerkship or the eight-week Pediatric Clerkship, the student will be removed from the clerkship. In the case of the other clerkships, removal from the clerkship will be dependent upon consultation with the Associate Dean for Admissions and Student Affairs or Assistant Dean for Student Affairs. This action may result in a delay of graduation.

Second Time Failure: Second time failure of the examination will result in the student being removed from clinical rotations for a period of six months, placed on an extended leave of absence and strongly urged to enroll in a board review course.

Third Time Failure: Third time failure of the examination will result in termination of enrollment.

Students enrolled in a special program that requires a passing score on USMLE Step 1, as a condition for advancement into that medical curriculum (e.g. oral surgery), must meet the requirements for passing the examination as prescribed by the program.
OSCE (M4 Students):
Passage of the OSCE (Objective Structured Clinical Examination) is a graduation requirement. Students who fail the Senior OSCE have an opportunity for a make-up examination. Students who fail to pass the make-up Senior OSCE must remediate the failure by a proposed course of study that meets the approval of the Student Evaluation Committee.

CONSEQUENCES OF MARGINAL AND/OR FAILING GRADES:
The Student Evaluation Committee considers the following criteria as primary justifications for requiring remediation or repetition. “Remediation” refers to re-registering for an individual course (core or clerkship); “Repetition” refers to re-registering for a complete academic year.

Remediation of One Core/Clerkship:

1. A grade of Fail in a core (M1 and M2 students).
2. A grade of Marginal in two or more M1 or M2 cores in a single academic year.
3. A grade of Fail in a clerkship/elective (M3 and M4 students).
4. Evidence of sustained unprofessional behavior.

In the case of a single grade of Fail in a clerkship or elective, the clerkship or elective must be remediated within one year (M3 students) or six months (M4 students) with departmental and Student Evaluation Committee approval.

In the case of two grades of Marginal in a clerkship or elective, both clerkships and/or electives must be remediated within one year (M3 students or M4 students). This action may result in a delay of graduation.

Any summer courses that are permitted by the Student Evaluation Committee must be completed and passed in time for the student to take the next appropriate examination (USMLE Step 1 for M2 students).

The grading system will be Honors, high Pass, Pass, Marginal and Fail. A grade of Marginal or Fail upon remediation is not acceptable and a recommendation to terminate enrollment will be made. Grades of Honors or High Pass are not available for remediated cores or clerkships.

The following are guidelines for students who are required to remediate a single core outside of the normal course schedule, e.g., summer remediation.

1. The student must re-register for the core to be remediated and will be charged tuition at the current graduate rate per credit hour.
2. The grading system will be Pass/Fail. Grades of Honors and High Pass are not permitted for remediated cores.
3. The core director will be responsible for the format and content of the remediated core. The core content should address the specific knowledge deficits of the student if these can be identified. The core director must submit to the Chair of the Student Evaluation Committee a written mechanism of the remediated core and a timetable for completion of the core to be approved by the Chair of the Student Evaluation Committee and the Associate Dean for Admissions and Student Affairs before implementation.

4. The grade for the remediated core will be permanently recorded on the students’ transcript along with the original core grade.

5. The final percentage score of the student will be determined from the average of the initial and remediated attempts at the core for purposes of calculating cumulative performance.

6. A student required to remediate a core in the second year will be required to delay USMLE Step 1 until the core has been successfully remediated. Progression into clerkships may be delayed in order to accommodate core remediation and preparation for the examination. Delays in progression into the third year may also lead to a delay in graduation.

**Repetition of an Academic Year:**

1. One grade of Fail in the M1 or M2 year, coupled with an overall low academic performance.
2. Two grades of Marginal in the M1 or M2 year, coupled with an overall low academic performance.
3. One grade of Fail and two or more grades of Marginal during the same academic year (M1 and M2 students).
4. Two or more grades of Fail during the same academic year (M1, M2, and M3 students).
5. Three or more grades of Marginal during the same academic year (M1, M2, and M3 students).
6. Evidence of sustained unprofessional behavior.

Repetition of a year will require re-enrollment in the entire course load for the repeated year and earning a grade of Pass or higher in all cores/clerkships during the repeated year.

The following are guidelines for students who are required to repeat cores/clerkships during the normal course schedule, i.e. repetition of an academic year:

1. The student must re-register for the repeated cores/clerkships and will be charged tuition at the current rate for that academic year.
2. The content, format and grading procedure applied to the student for the repeated cores/clerkships will be the same as administered to the class as a whole. Grades of Honors and High Pass are permitted for repeated cores.
3. Grades for repeated cores/clerkships will be permanently recorded on the transcript along with the original core/clerkship grade.
4. The final percentage score of the student that is used to calculate class rank will be determined from the average of the initial and repeated attempts at the cores.
5. A student required to repeat the entire second year must delay USMLE Step 1 until the repetition has been successfully completed.

TERMINATION OF ENROLLMENT:
The Student Evaluation Committee considers the following as primary justifications for recommending the termination of enrollment of a student for performance in an academic year:

1. Failure to obtain a grade of Pass in a remediated core, clerkship or elective, even if the original grade was “audit.”
2. Failure to obtain a grade of Pass in all cores, clerkships or electives during repetition of an entire academic year.
3. A third failure on USMLE Step 1.
4. The need for repetition of more than one academic year.
5. Documentation of unprofessional behavior.
6. Cumulative record of sustained poor performance; academic and/or professional.

EXTENDED COURSE OF STUDY:
The normal medical curriculum is expected to be completed in four years. An extended course of study is not intended as an elected alternative pathway for the medical curriculum. The course of study to complete the M.D. degree is limited to five years. Extension beyond the five-year limit will be permitted only under unusual circumstances. Extension beyond the five year limit will not be considered for students on Academic Probation.

Students, who are in good standing, but because of family, personal or financial problems, are unable to complete the normal curriculum, may be moved from the regular program to an extended course of study only with prior approval of the Student Evaluation Committee.

LEAVE OF ABSENCE:
Students may be granted a Leave of Absence (LOA) from medical school. Leaves of Absence are granted for academic, medical or personal reasons by the Associate Dean for Admissions and Student Affairs or the Assistant Dean for Student Affairs.

The following guidelines apply to all requests for a Leave of Absence. The student must request the Leave of Absence in writing. The request should describe, in detail, the rationale for requesting the Leave of Absence and should
be addressed to the Associate Dean for Admissions and Student Affairs or the Assistant Dean for Student Affairs.

Any such Leave of Absence granted shall be solely based upon the merits of the request, and are evaluated on a case-by-case basis. Students who are considering requesting a Leave of Absence should discuss this request with their academic advisor and with the Associate Dean for Admissions and Student Affairs or Assistant Dean for Student Affairs.

Requests for a Leave of Absence from students who are not in good standing may be referred to the Student Evaluation Committee. This would include any student on Academic Probation or students with failing grades in core examinations, junior clerkships or senior electives. If the Student Evaluation Committee grants such a Leave of Absence, it may require specific actions to be completed by the student as a condition for return to classes at a later date.

In the case of a medical Leave of Absence, the Student Evaluation Committee may require documentation from a physician stating the student’s fitness to return to the medical curriculum, before the student is allowed to return.

A student who is the subject of an involuntary dismissal from medical school for any reason, including, but not limited to, academic performance or disciplinary action, is ineligible to invoke the procedures contained in the Leave of Absence policy.

The student is responsible for initiating determination of the financial consequences of taking a Leave of Absence. Financial obligations regarding tuition payment and loan repayment need to be reviewed with the Director of Financial Aid.

If a Leave of Absence is granted, the student will be required to return no later than the beginning of the next academic year, unless a shorter time is specified. It will be up to the discretion of the core, clerkship or clinical elective director to assign a grade of Withdraw Passing (WP) or Withdraw Failing (WF) if the Leave of Absence occurs before the end of a core, clerkship or clinical elective. Extension of a Leave of Absence for longer than one year will require a request, in writing, directed to the Associate Dean for Admissions and Student Affairs or Assistant Dean for Student Affairs. Approval will depend upon the strength of the rationale for the request.

Students who have been granted a Leave of Absence are responsible for notifying the Office of Admissions and Student Affairs of their intentions to return to classes on the appointed date no later than two months before the start of classes. If not so notified, the student’s place in the class will be forfeited. Re-entry into the College of Medicine would require re-application through the usual
admissions process of the American Medical College Application Service (AMCAS).

Students who withdraw from the College of Medicine with an official Leave of Absence will be required to approach the college through the regular admissions/application process, i.e., through AMCAS.

Students who withdraw from the College of Medicine in poor academic standing or are dismissed from the College of Medicine by the Student Evaluation Committee are not eligible for re-admission to the College of Medicine.

Upon re-enrollment following a Leave of Absence, the student will be subject to all rules and regulations that pertain to the class being joined. In the case of mid-year graduates, i.e., December, the student is considered part of the class of the calendar year in which the student graduates. The rules, regulations and graduation requirements may differ from those for the class into which the student initially matriculated.

PERSONAL APPEARANCE BEFORE THE COMMITTEE:
Any student with academic difficulty manifested by grades of less than Pass, failure of USMLE Step 1, and/or questionable behavior, will be subject to thorough review by the Student Evaluation Committee.

The expectation to appear before the Committee will be extended to any student whose academic deficiencies are of major proportions. This includes students for whom such actions as termination of enrollment, repetition of an academic year or other major alterations in progress are likely possibilities. In less severe cases, written statements provided by the student or supplied by others to clarify extenuating circumstances may be sufficient for the review process.

All student appearances before the Committee shall be arranged by the Office of Admissions and Students Affairs and are confirmed in writing or by E-mail prior to the meeting. Likewise, the presence of an advisor or counselor for the student is permitted if prior arrangements with the Chair of the Student Evaluation Committee have been made. The purposes of providing the student access to the Committee are to guarantee that all information required by the Committee is provided and to reassure the student that the Committee’s actions will be careful and deliberate.

APPEAL PROCEDURES:
Students recommended for probation, for dismissal, or to repeat a year by the Student Evaluation Committee for failure to meet academic and/or professional behavior standards, have the right to appeal the decision to an Appeal Board appointed by the Office of Student Affairs. An appeal must be made, in writing, within two weeks after receiving written notification of the recommendation of the
Student Evaluation Committee. Pending an appeal of dismissal, a student may not participate in classes and/or clerkships.

The Appeal Board shall consist of four members of the faculty from the College of Medicine and one medical student, all with equal voting status. The Board shall not include current members of the Student Evaluation Committee or other individuals who might have a conflict of interest.

The members of the Appeal Board shall select one of the members as Chairperson in a manner agreed upon by the members. The Chairperson shall, in all cases, vote as a member of the Board.

If a student requests a personal appearance before the Appeal Board, the request shall be granted. The student requesting an appeal will be given at least ten days' notice about the time and place of the hearing, the membership of the Appeal Board and the procedures to be followed.

An advisor of choice may accompany the student wishing to appear personally before the Appeal Board. The name of the advisor must be provided to the Office of Admissions and Student Affairs at least one week before the hearing. Unless the Chairperson of the Board specifically permits, the role of the advisor shall be limited to assisting the student. In addition, legal counsel may also accompany the student. In this case, the student must provide this information to the Office of Admissions and Student Affairs at least one week in advance of the hearing. The Appeal Board may have the assistance of counsel for the University to advise the Board on procedural and other matters.

The Chairperson of the Appeal Board shall determine the order of the hearing, will direct questioning of the student, if present, and any other witnesses, if present, and ensure that the student and an advisor, if present, and any other individuals appearing before the Appeal Board are treated fairly.

The Associate Dean for Admissions and Student Affairs, who is a non-voting member of the Appeal Board, shall act as Secretary to the Board. The secretary shall keep minutes of the Board's proceedings. Although it will not be necessary to provide a verbatim transcript of testimony before the Board, either the student or the Appeal Board may request that the proceedings be audio recorded. Requests by students must be made one week before the meeting. If the Appeal Board requests an audio recording of a meeting, the student shall be notified prior to the meeting. If a request for an audio recording of the meeting is made, the secretary shall arrange for audio recording of the student's testimony and the testimony of any other witnesses and also prepare a digest of the hearing. Deliberations of the Appeal Board will not be audio recorded. The student shall have access to the recording of the testimony and the testimony of any other witnesses that appear before the Board and to the digest.
The student must show by a preponderance of the evidence that the action was improper or unfair. After consideration of all the presented written and/or oral testimony, the Appeal Board shall determine by secret ballot, either to sustain the original recommendation of the Student Evaluation Committee or recommend its abrogation or modification. The decision of the Appeal Board, which will be based solely on the results of the investigation and, if a hearing has been held, the evidence presented at the hearing, shall be presented to the Dean of the College of Medicine as a recommendation. The Dean shall make the final decision.

In cases in which a student is reinstated as a result of the Appeal Board recommendation, a program of remediation or repetition to meet the academic and/or professional behavior expectations of the faculty shall be developed by the Student Evaluation Committee. The proposed program may come from a recommendation of the Appeal Board and also may become part of the action recommended by the Dean.

Approved by the Student Evaluation Committee
August 2, 2016