



**ALBANY MEDICAL  
COLLEGE**

**UNDERGRADUATE MEDICAL  
EDUCATION**

**Principles, Policies, Protocols and Rules  
Student Handbook**

Revised July 2024

GENERAL PRINCIPLES AND POLICIES

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**ALBANY MEDICAL COLLEGE**  
**UNDERGRADUATE MEDICAL EDUCATION**  
**Principles, Policies and Rules**  
Revised July 2024

Albany Medical College is accredited by the Middle States Commission on Higher Education (MSCHE), 3624 Market Street, Philadelphia, PA 19104, (215) 662-5606. The MSCHE is an institutional accrediting agency recognized by the US Secretary of Education and the Commission on Recognition of Postsecondary Accreditation.

The Albany Medical College is also accredited by the Liaison Committee on Medical Education (LCME) of the American Association of Medical Colleges, 655 K Street NW, Suite 100, Washington DC, 20001, (202) 828-0400.

**I. GENERAL PRINCIPLES AND POLICIES**

**A. Admission to the Undergraduate Medical Education Program**

Albany Medical College defines diversity in the broadest sense, meaning the inclusion of all persons regardless of ethnic and racial background, socioeconomic background, geographic (urban and rural), gender, gender identity, sexual orientation, religious beliefs, age, physical disabilities and other personal attributes, that can contribute to a welcoming, inclusive culture across the Medical College and Medical Center. Understanding and recognizing that disparities exist in society today and can be clearly documented in health care, the College looks to develop and educate future physicians to be able to practice medicine in a way that supports the health care needs of all people. To successfully achieve this goal, Albany Medical College and Medical Center believes it serves as the role model that helps to shape the knowledge, skills, behaviors and attitudes of its graduates.

The Medical College has instituted tactics to:

- Provide a culturally rich and diverse environment that is recognized for providing encouragement, support and resources to people from all backgrounds.

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- Increase the number of individuals who are underrepresented in medicine (UIM) in faculty and leadership of the Medical College
- Challenge stereotypes and prepare students for the provision of care in a demographically diverse national and international arena.
- Assess retention of individuals who are underrepresented in medicine through continuous monitoring.
- Develop curricular components and professional development opportunities to support an inclusive worldview for individual healthcare practitioners, thereby influencing the health of the public.

Therefore, Albany Medical College is committed to the belief that educational opportunities should be available to all qualified persons without regard to race, creed, color, age, sex, gender identity, religion, marital status, disability, or national origin. The admission policies and procedures reflect and support this belief.

The Undergraduate Medical Education Program is approved by the New York State Education Department for the training of veterans and other eligible persons.

Each year the medical college seeks to enroll approximately 145 diverse and multi-talented students in our freshman class, ready to begin an educational program leading to the degree of Doctor of Medicine. Ultimately, the final selection of students is the responsibility of the Admissions Committee. The Committee employs a holistic approach in their review process and strives to ensure that every qualified applicant receives fair and careful consideration.

Further, admission is not restricted solely to New York State residents. Instead, the admissions process attempts to attract the best qualified applicants reflecting a wide geographic diversity of United States citizens.

The academic record of an applicant provides the basis for predicting potential success in medical school. Academic performance can be evaluated by course load, course rigor, and grade trajectory. In addition, standardized tests provide a common measure by which to compare applicants.

Of equal importance are the personal characteristics of an applicant, such as motivation, maturity, compassion and fitness for a career in medicine. The personal essay, extracurricular activities and community involvement all provide insight into an applicant's character and personality. In addition, the Committee must rely, to a considerable extent, on the thoughtful recommendations of premedical advisors, college professors, supervisors, and mentors. These

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individuals inform the decisions of the Admissions Committee, sharing our obligation to society and to the medical profession to select the most qualified and promising applicants.

The College utilizes the Multiple-Mini Interview (MMI) process to determine how an applicant might fulfill the Medical College's outcome objectives. Interviews are by invitation only. Unfortunately, it is neither possible nor practical to interview all applicants. Interview offers are made based on a thorough holistic screening process conducted by the Admissions Committee.

Under exceptional circumstances, deferments of admission may be granted. Requests are considered on an individual case basis. Further information is available on the admissions website or by contacting the Admissions Office.

### **B. Combined Degree and other Admission Processes**

Albany Medical College reserves up to 45 places in its first-year class for students matriculating via combined degree programs with Rensselaer Polytechnic Institute, Union College and Siena College.

#### **i. Rensselaer Polytechnic Institute:**

Albany Medical College and Rensselaer Polytechnic Institute offer an accelerated Biomedical Program that enables qualified individuals to complete requirements of both the BS and MD degrees in seven calendar years. Three years of study are carried out at Rensselaer Polytechnic Institute followed by a four-year course of study at Albany Medical College. Medical research is a focus of this program and is carried out at the medical school during the third year at Rensselaer and during the first and second years at Albany Medical College. The goal of this program is to prepare physicians who will advance the practice of medicine through their clinical skills combined with their understanding and ability to carry out health care research. Awarding of the MD degree is contingent upon successful completion of both the undergraduate and medical school curriculum requirements.

Admission to the Physician Scientist Program is limited to individuals who have not initiated full-time undergraduate study and who display the motivation, maturity, and intellectual capacity necessary to pursue an accelerated course of study.

Applications are initially reviewed by Rensselaer Polytechnic Institute. Applications of candidates who meet the program standards of Rensselaer Polytechnic Institute are forwarded to Albany Medical College for further review. Since it is impossible to interview all qualified applicants, only applicants with uniformly superior academic credentials and test scores as well as relevant experiences are invited to the required interview at the Medical College. The



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interview provides applicants with the opportunity to learn more about this innovative program and for the committee to assess their readiness to undertake such an enriched program.

Applicants must complete secondary school with superior scholastic credentials. Course work must include: four (4) years of English; one (1) year each of biology, physics and chemistry; four (4) years of mathematics through pre- calculus or equivalent. Previous research experience is required, and prior clinical experience (hospital volunteering or shadowing) is highly recommended. Admission to the program is limited to citizens and Permanent Residents of the United States.

### **ii. Union College:**

Union College and Albany Medical College Leadership in Medicine Program offer a joint program enabling qualified students to earn the BS, MS or MBA and MD degrees in eight years. Awarding of the MD degree is contingent upon successful completion of all requirements at both Union College and Albany Medical College.

The curriculum stresses thorough undergraduate preparation in the sciences, humanities, and health care management. The requirements of an inter-departmental major "a non-science discipline" as well as ten (10) courses in health care management provide the opportunity to acquire a breadth of knowledge and understanding not typically found in premedical programs. The goal of this program is to prepare physicians who will be leaders capable of addressing the managerial, moral, multicultural and international challenges facing American medicine in the twenty-first century.

Admission to the Leadership in Medicine Program is limited to individuals who have not initiated full-time undergraduate study and who display the motivation, maturity, and intellectual capacity necessary to pursue an accelerated course of study.

Applications are initially reviewed by Union College. Applications of candidates who meet the program standards of Union College are forwarded to Albany Medical College for further review. Invitations to interview will be extended to select applicants with uniformly superior academic credentials and test scores, as well as relevant backgrounds. The interview will provide an opportunity to assess the applicant's motivation for medicine, level of maturity, and personal development.

Candidates must complete secondary school with superior scholastic credentials. Course work must include four (4) years of English, three (3) years of mathematics through trigonometry and one (1) year each of biology and chemistry. Physics is preferred but not required. Clinical or volunteer service in medicine and interest in healthcare management is required. Applicants are required to complete and submit SAT or ACT scores. All tests must be completed prior to the

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November 1 application deadline. Admission to the program is limited to citizens and Permanent Residents of the United States.

### **iii. Siena College:**

The Siena College and Albany Medical College Science, Humanities and Medicine Program, the first of its kind in the country, places emphasis on humanities, ethics, and social service. Personally and academically talented students who have demonstrated a commitment to the service of others will be jointly accepted by Siena and Albany Medical College into a unique eight-year program in medical education. Students accepted into this program will earn a BA degree from Siena after four years of study and an MD degree from Albany Medical College upon completion of the medical curriculum. Successful completion of all undergraduate degree requirements is necessary before matriculation into medical school.

In addition to the traditional science courses that provide a firm foundation for the basic medical sciences, students in this program will take more humanities courses at Siena than in traditional premedical programs. Included in the curriculum are courses in philosophy, ethics, decision making, social work, medical sociology, and metaphysics. Through this coursework, interactions with faculty and personal experiences, students will learn that every medical issue has an ethical dimension which requires a broadly educated physician.

Unique aspects of this program include two summers spent in volunteer service. Grants are available for travel and living expenses. During the summer between the junior and senior year at Siena, students are engaged in nonmedical work with the disadvantaged in settings such as urban ghettos or developing nations. During the summer following the second year of medical school, medically oriented volunteer experiences may be sought in rural or in inner city clinics.

Admission to the Science, Humanities and Medicine Program is limited to individuals who have not initiated full-time undergraduate study and who display the motivation, maturity, and intellectual capacity necessary to pursue an enriched course of study.

Applications are initially reviewed by Siena College. Applications of candidates who meet the program standards of Siena College are forwarded to Albany Medical College for further review. Invitations to interview will be extended to select applicants with uniformly superior academic credentials and test scores, as well as relevant experiences. The interview will provide an opportunity to assess the applicant's motivation for medicine, level of maturity, and personal development.

Candidates must complete secondary school with superior scholastic credentials. Course work must include four (4) years of English, four (4) years of mathematics through pre-calculus and one (1) year each of biology, laboratory-based physics and chemistry. Prior community service

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and volunteer activities are required, and prior clinical experience (hospital volunteering or shadowing) is highly recommended. Applicants are required to complete and submit SAT or ACT scores. All tests must be completed prior to the November 1<sup>st</sup> application deadline. Admission to the program is limited to citizens and Permanent Residents of the United States.

### **iv. Early Assurance Programs:**

The Early Assurance Pathway Program (EAPP) with the University at Albany aims to recruit, retain, and matriculate a diverse population of interested and qualified University at Albany undergraduate students with backgrounds that have been underrepresented in the medical profession, including first generation college students and low-income individuals as defined by federal TRIO programs into the AMC MD program. In addition, the program seeks students who have shown a demonstrated and sustained interest in issues affecting medically underserved populations. Students eligible to apply have successfully completed three (3) semesters (36 credits) of academic work at UAlbany, with at least twelve (12) credits in core pre-med science and math courses with a 3.5 cumulative and science GPA and grades of B or better in all math and science courses. Successful applicants will have participated in community and public service. The MCAT is waived. The final selection of students is the responsibility of the Albany Medical College Admissions Committee. The screening, interview, and Admissions Committee process follows the same process used for traditional applicants. Students are offered admission to Albany Medical College contingent on continued academic performance, meeting professionalism standards, and graduation from the University at Albany. Once admitted, student progress is monitored by the Albany Medical College EAPP Progress and Promotions Committee to ensure minimum GPA and professionalism requirements of all students accepted into the program.

In addition to the EAPP, Albany Medical College has Early Assurance Programs with the following undergraduate institutions:

- Albany College of Pharmacy and Health Sciences
- Amherst College
- Bowdoin College
- College of the Holy Cross
- Colgate University
- Hamilton College
- Haverford College
- Middlebury College
- Rensselaer Polytechnic Institute
- Siena College
- Skidmore College
- SUNY Albany

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- Swarthmore College
- Syracuse University
- Union College
- Wesleyan University
- Williams College

Through these Early Assurance Programs, students apply to AMC at the end of their sophomore year and if admitted, are assured admission two years later, provided their conduct is fitting of a future physician and they meet the academic standards of the program. Students must have a competitive SAT/ACT score and a 3.5 cumulative and science GPA to be eligible for this pathway and must maintain a 3.5 GPA once they are in the pathway. The MCAT is waived for program participants. As with EAPP, the final selection of students for this pathway is the responsibility of the Albany Medical College Admissions Committee. The screening, interview, and Committee process follows the same process used for traditional applicants. Once admitted, to remain in the program, students must continue to meet the academic and professionalism standards of the program. Student progress is monitored by the Albany Medical College EAPP Progress and Promotions Committee to ensure minimum GPA and professionalism requirements of all students accepted into the program.

### **v. MD/PhD Program**

A combined program of study which leads to both an MD and PhD degree is available to students who wish to pursue a career in research and academic medicine. Students can apply to the PhD program after they have completed their second year of medical school. Once accepted, they enter the PhD program full-time. Approved transfer of credits earned in the MD program helps students complete two or three years of graduate study and thesis preparation. They then return to the MD program to complete their final two years of clinical clerkships. Stipends are available to cover tuition and defray expenses during the years when a student is enrolled as a PhD candidate. Tuition is covered by a grant for the final two clinical years after the student completes the PhD.

### **vi. MD-MPH**

The MD-MPH is available for medical students at AMC in conjunction with the University at Albany. Students can apply after they have been admitted to the medical school, usually during their first or second year. The program prepares the students to become physicians who have the skills to address both clinical and public health problems. Both degrees can be completed in five years with a program of studies that is individualized.

### **vii. Dual MD/MBA in Healthcare Management**

The MD/MBA in Healthcare Management is available in conjunction with Clarkson University. The program is designed to provide students with a business understanding specific to health care and move them on to their medical education quickly. Students are first admitted to Albany Medical College and then apply separately to Clarkson University. Both degrees can be completed in five years. Once admitted to both institutions, students defer the start of medical school by one year and spend one year at Clarkson University working on Healthcare Management MBA courses. The second through fifth years are spent completing the MD degree requirements at Albany Medical College.

## **C. Disability Accommodations and Minimum Technical Standards for Admission and Matriculation**

The College will attempt to develop creative ways of opening the medical school curriculum to competitive, qualified disabled individuals. In doing so, however, the College must maintain the integrity of its curriculum and preserve those elements deemed essential to the education of a physician. The College cannot compromise the health and safety of patients. It is inevitable that adherence to minimum requirements will disqualify some candidates and students, including some who are disabled. Exclusion of such an individual, however, does not constitute unlawful discrimination. The Rehabilitation Act of 1973 prohibits discrimination against an "otherwise qualified" disabled person. A candidate or student who is unable to meet the minimum academic and technical standards is not qualified for the practice of the profession.

### **i. Disability Accommodations**

The Rehabilitation Act of 1973 (29 USC, Section 794) prohibits a recipient of federal financial assistance from denying benefits to an "otherwise qualified" person with a disability solely because of their disability. Albany Medical College (referred to as the College) is a recipient of federal financial assistance and is committed to reasonable accommodations. No qualified disabled person shall be denied admission or benefits or be subjected to discrimination solely by reason of their disability. Pursuant to federal regulations for postsecondary educational institutions, a disabled person can be required to meet the institution's "academic and technical standards." The Admissions Committee and Promotions Committee will not discriminate against qualified disabled individuals but will expect candidates and students to meet certain minimum academic and technical standards.

Albany Medical College is committed to the academic, social, and cultural integration of individuals with disabilities. Students with physical, learning, or other disabilities as defined by law will receive reasonable accommodation to help them attain the necessary level of achievement. Individuals requesting accommodation may be required to present medical and

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other documentation deemed necessary by the College for that purpose. The full Disability Accommodations Policy and Procedure can be found on the College webpage.

### **ii. Minimum Technical Standards**

The holder of an MD degree must have the knowledge and skills to function in a broad variety of clinical situations and to render a wide spectrum of patient care. To carry out the activities described below, candidates for the MD degree must be able to consistently, quickly, and accurately integrate all information received, and they must have the ability to learn, integrate, analyze, and synthesize data.

A candidate for the MD degree must have certain specified abilities including observation, communication, motor, conceptual-integrative, quantitative, behavioral, and social skills. Technological compensation can be made for some disabilities in some of these areas, but a medical student must be able to perform in a reasonably independent manner.

#### **Observation**

Candidates and students must have sufficient vision to be able to observe demonstrations, experiments, and laboratory exercises in the basic sciences. They must be able to observe a patient accurately at a distance and close at hand.

#### **Communication**

Candidates and students should be able to speak, hear and observe patients to elicit information, examine patients, describe changes in mood, activity, and posture, and perceive nonverbal communications. They must be able to communicate effectively and sensitively with patients. Communication includes not only speech but also reading and writing. They must also be able to communicate effectively and efficiently in oral and written form with all members of the health care team.

#### **Motor**

Candidates and students should have sufficient motor function to execute movements reasonably required to provide general care and emergency treatment to patients. Examples of emergency treatment reasonably required of physicians are cardiopulmonary resuscitation, administration of intravenous medication, application of pressure to stop bleeding, opening obstructed airways, suturing simple wounds, and performance of simple obstetrical maneuvers.

#### **Conceptual, Integrative, and Quantitative**

Candidates and students must possess the ability to measure, calculate, reason, analyze, and synthesize. Problem solving, the critical skill demanded of physicians, requires all these intellectual abilities. In addition, candidates and students should be able to

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comprehend three-dimensional relationships and to understand the spatial relationships of structures.

### **Behavioral and Social**

Candidates and students must possess the emotional health required for full utilization of their intellectual abilities, the exercise of good judgement, the prompt completion of all responsibilities necessary for the diagnosis and care of patients, and the development of mature, sensitive, and effective relationships with patients. Candidates and students must be able to tolerate physically taxing workloads, adapt to changing environments, display flexibility, and learn to function in the face of uncertainties inherent in the clinical problems of many patients. Compassion, integrity, concern for others, interpersonal skills, interest, and motivation are all personal qualities that are integral to the practice of medicine.

## **D. Undergraduate Medical Education Program Requirements Overview**

The Undergraduate Medical Education Curriculum consists of 169 weeks of study not including vacations or holidays. All offerings have allotted credit hours by the Registrar based on data generated by the curriculum database with input from the Assistant Dean for Phase 1 Medical Education, the Associate Dean for Medical Education, and the Senior Associate Dean of Academic Administration. The content of the undergraduate curriculum at Albany Medical College is integrated over four years. The Basic Sciences have been organized into conceptual or organ system modules, called Themes.

The Phase 1 curriculum integrates normal and abnormal foundational concepts within a clinical context. The clinical clerkships during Phase 2 include the core disciplines of Family Medicine, Internal Medicine, Neurology, Obstetrics & Gynecology, Pediatrics, Psychiatry, and Surgery. Phase 3 is designed to prepare students for residency and practice through required rotations, including acting internships, critical care medicine, emergency medicine and transition to residency, plus a selection of clinical and non-clinical electives. During Phase 2 and 3, students revisit basic science in the context of their own clinical experiences. The curriculum features longitudinal educational experiences spanning all years in ethics, law, humanism, nutrition, evidence-based medicine, clinical skills and information searching and service learning.

Students may finish in more than four (4) years, but no more than six (6), if they take one or more leaves of absence for personal or health issues, participate in extended curriculum to do research or complete fellowship, or another degree of higher education. They may decelerate in Phase 2 or 3 of the curriculum, taking one year of study over two years. Deceleration may be based on personal, health or academic circumstances.

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Students may also be required to repeat an entire year of study for academic reasons. Students are considered matriculants at Albany Medical College except when they are on leave of absence or extended curriculum. The Undergraduate Curriculum does not allow for part-time enrollment. To remain on full-time student status, decelerated students must have a curricular plan requiring at least two (2) credit hours per term and demonstration that they will fulfill the balance of requirements divided over two years. Students who extend their training for any reason will be subject to the Satisfactory Academic Progress policy outlined below. Students are considered in good academic standing if they have not been placed on academic probation.

The medical college is supportive of students who wish to expand the scope of their undergraduate medical education by pursuing complementary areas of academic interest. Typically, students who delay their medical school graduation do so to pursue graduate degrees in public health, health care or business administration, biomedical ethics, or to engage in a significant research endeavor. Students who are in good standing may apply for an “extended curriculum” opportunity **after** completing the first year, Phase 1, or Phase 2. Typically, their goals will be accomplished in a one-year period, but more time for completion may be approved. Requests to enroll in another academic program, thus extending the medical school graduation date, must be detailed in writing, and submitted to the Associate Dean for Medical Education. Requests to pursue research must include a detailed plan that covers purpose and methods as well as the lab and mentor overseeing the work.

### **E. Satisfactory Academic Progress**

A student must fulfill both of the following criteria to be making satisfactory academic progress (SAP):

1. **Time to Degree:** MD students must complete their degree requirements within six years. Any time spent on a leave of absence will be included in the total time to graduation. Maximum time to graduation will be individualized for students enrolled in the MD-PhD program and for students who pursue other additional degrees while enrolled at AMC. This determination will be made by the Senior Associate Dean of Academic Administration.
2. **Academic Status:** students who are dismissed or withdrawn from the MD program will not be making SAP. Students on Academic Concern, Warning, or Probation are still making SAP. Students on an approved leave of absence or a decelerated curriculum are making SAP unless they will not be able to complete their degree within the time to degree requirements above.



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All students are subject to the above requirements, and any student who is not making SAP will be administratively withdrawn. A student who will not be able to complete their remaining degree requirements within the maximum timeframe will be administratively withdrawn. Appeals may be brought to the Deans Committee and may be granted for rare and exceptional circumstances only.

### **F. Undergraduate Medical Education Curriculum**

In Phase 1, students must complete all the components of the curriculum in order to progress. The requirements are made known at the beginning of each academic year. Students must complete Phase 1 Blocks and the requirements of each of the following longitudinal themes:

- Clinical Skills
- Health, Care and Society
- LaGrange Evidenced Based Health Care
- Longitudinal Clerkship

In the summer between first and second year, students from combined degree programs may be required to complete specific program components.

Students must take USMLE Step 1 prior to the first day of the Clinical Bridge Block (CBB). Students **MUST** take the CBB in order to progress to Phase 2. The CBB allows students to improve their clinical skills and introduces procedures and protocols necessary in Phase 2 required clerkship rotations.

Phase 2 consists of a two-week study block (“Continuing Medical Education”), required clerkships in Family Medicine, Internal Medicine, Neurology, Obstetrics & Gynecology, Pediatrics, Psychiatry, Radiology, Surgery, a two-week Selective, and Scholarly Endeavors. Additional educational requirements, such as longitudinal themes, are determined by the Phase 2/3 Committee and approved by UME Council.

The 4<sup>th</sup> Year in the traditional curriculum consists of ten periods of four weeks each. There are twelve (12) weeks of required rotations, eighteen (18) weeks of electives, and ten (10) weeks of vacation/flexible (Flex) time. Students can take up to twelve (12) weeks of one specialty area for academic credit within the sixteen weeks of electives. Students taking more than twelve weeks in one specialized area of study must use Flex time. Such activities will show on their official transcript, but no academic credits will be assigned for them.

Phase 3 in the new curriculum consists of thirteen periods of four weeks each. There are twelve (12) weeks of required rotations, twenty-six (26) weeks of electives, and ten (10) weeks of vacation/ flexible (Flex) time. Students can take up to twelve (12) weeks of one specialty area

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for academic credit within the 26 weeks of electives. Students taking more than twelve weeks in one specialized area of study must use Flex time. Such activities will show on their official transcript, but no academic credits will be assigned for them.

Required Phase 3 clerkships are at least two that the student may select from three options: Critical Care, Emergency Medicine and an Acting Internship in the student's choice of Family Practice, Medicine, Pediatrics, Surgery or Ob/Gyn. The Clinical Skills Capstone is required.

To do away rotations during the fourth year/Phase 3, a student must be in good academic standing. Please refer to the "Off-Campus and Away Rotations" and "Actions of Promotions Committee" sections of this document for more detail. Students cannot take two courses / clerkships at the same time, and no more than four credits may be earned for non-clinical rotations.

All students must complete forty (40) hours of approved Service Learning activities over the four years of medical school. The Office of Community Outreach and Medical Education is responsible for designing and approving qualified experiences and monitoring student progress.

### **G. Student Supervision**

Albany Medical College appreciates the role of learners in the provision of clinical care. We also follow the educational principle of graded responsibility for learners, commensurate to their level of training. All students must be appropriately supervised when participating in clinical activities. Student level of responsibility while being supervised adheres to the guidelines put forth by the New York State Department of Health (contained in *New York Codes, Rule, and Regulations* Title X, section 405.4).

Supervision must occur by a physician who possesses an AMC faculty appointment or an individual designated by an AMC faculty member in a teaching/supervising role. These individuals can include but are not limited to physicians, residents, fellows, or other licensed health professionals.

Albany Medical College students may take patient histories, perform complete physical examinations and enter findings in the medical record of the patient with the approval of the patient's attending physician. Medical students may be assigned and directed to provide additional patient care services under the direct in-person supervision of an attending physician or authorized postgraduate trainee.

## GENERAL PRINCIPLES AND POLICIES

At any time, if a student is uncomfortable performing an assigned procedure because they feel either that their skills are inadequate or that they need more supervision/guidance than is available, then the student must refrain from doing the procedure.

### **H. Personal Identity, Personal Safety and Public Safety Requirements**

The Registrar will verify all college transcripts at time of application. All background checks and other Association of American Medical Colleges (AAMC) data on file will be evaluated. Any students with discrepancies will be required to demonstrate consistency to remain at the College.

To comply with New York State law, Occupational and Safety Administration requirement and policies of Albany Medical College, all students must provide proof of immunity to certain diseases, have an annual physical or health assessment, and be respirator fit-tested, in accordance with Albany Medical Center requirements. All students must pass the Albany Medical Center Health and Safety Module and the HIPAA Module required of all employees yearly. Failure to comply with these requirements will result in removal from classes, including simulations and clinical rotations.

In compliance with New York State Education Policy 129 A, students must not participate in any reckless activities, which may include but not be restricted to any activities that would endanger the physical or mental health of others. Any student accused of such activity will be investigated and may be disciplined. No student may be involved in activities that force students to drink alcohol or take drugs. If these activities are proven the students involved will be dismissed.

Students found to be abusing alcohol or drugs will be required to have an Administrative Psychiatric evaluation and may be required to be evaluated and followed by the Committee on Physician Health of the New York State Medical Society (CPH). Lack of compliance will result in dismissal.

### **I. Professionalism and Professional Identity Formation**

Upon matriculation to Albany Medical College, students are considered physicians in training and are expected to adhere to the standards of the medical profession in all clinical and educational settings. Professional identity formation (PIF), the process of possessing and exhibiting the conduct of a medical professional, begins in orientation and continues throughout the curriculum. The college's Educational Program Objectives contain a section with specific goals addressing professionalism and behavior. Students are expected to:

## GENERAL PRINCIPLES AND POLICIES

- Demonstrate a commitment to the highest standards of professional responsibility and ethical principles in all interactions with patients and others (EPO 6.0)
- Show compassion, integrity, and respect when caring for a diverse patient population (EPO 6.1)
- Demonstrate respect for patient autonomy, placing patient needs above self-interest (EPO 6.2)
- Demonstrate respect for all members of the health care team (EPO 6.3)
- Engage in ethical behavior that inspires patient and public trust (EPO 6.4)
- Advocate for the needs of patients and communities (EPO 6.5)
- Develop personal habits that promote one's own social, physical, and mental health and well-being (EPO 6.6)

### **i. Expectations and Ideals for Teachers and Learners**

Albany Medical College values professional behaviors and attitudes, including altruism, integrity, respect for others and a commitment to excellence. Learning is best fostered in an environment of mutual respect between teachers and learners. In the context of medical education, the term “teacher” is used broadly to include peers, resident physicians, full-time and volunteer faculty, clinical preceptors, nurses, ancillary support staff as well as others from whom students learn.

#### **Principles:**

##### **Duty:**

Teachers have a duty not only to facilitate the acquisition of knowledge and skills required to deliver the standard of care but also to instill the values and attitudes required for preserving the medical profession's social contract with its patients.

##### **Integrity:**

Learning environments that are conducive to conveying professional values are based on integrity. Students learn professionalism by observing and emulating role models who epitomize professional values and attitudes.

##### **Respect:**

Respect for every individual is fundamental to the ethic of medicine. Mutual respect is essential for nurturing that ethic. Teachers have a special obligation to ensure that students are always treated respectfully.

#### **Teachers should:**

- Treat students fairly and respectfully

## GENERAL PRINCIPLES AND POLICIES

- Maintain high professional standards in all interactions
- Be prepared and on time
- Provide relevant and timely information
- Provide explicit learning and behavioral expectations early in the course of instruction
- Provide timely, focused, accurate and constructive feedback on a regular basis and thoughtful and timely evaluations at the end of instruction
- Display honesty, integrity and compassion
- Practice insightful questioning, stimulate self-discovery and avoid questioning which may be perceived as humiliating, degrading or punitive
- Solicit feedback from students regarding their perception of the educational experience
- Encourage students who experience mistreatment or who witness unprofessional behavior to report the facts immediately

### **Learners should:**

- Be courteous of teachers and fellow students
- Be active, engaged and curious learners
- Demonstrate professional behavior in all settings
- Recognize that not all learning stems from formal and structured activity
- Establish personal learning objectives
- Recognize their responsibility to participate as active learners
- Strive to be life-long learners
- Recognize personal limitations and seek assistance as needed
- Display honesty, integrity and compassion
- Recognize the privileges and responsibilities that come from the opportunity to work with patients
- Recognize the duty to prioritize patient welfare in clinical judgment
- Recognize and respect patient privacy
- Solicit feedback on their performance
- Be open to constructive criticism

### **Relationships Between Teachers and Students:**

Students and teachers should recognize the special nature of the teacher-learner relationship which is in part defined by role modeling, mentorship and supervision. Student-teacher interactions should be characterized by mutual trust, acceptance and confidence. Both teachers and learners should recognize the potential for conflicts of interest and respect appropriate boundaries, but teachers have a special burden to do so given their roles as mentors and role models and their positions of relative power. Actions that violate these boundaries, or even that give the appearance of doing so, should be avoided. These include, but are not limited to:

## GENERAL PRINCIPLES AND POLICIES

- Romantic involvement
- Business relationships
- Faculty or students accepting services or personal favors from each other (e.g., baby-sitting, work in the office)
- Accepting substantial gifts
- Special treatment of a student, including gifts, meals, entertainment or social contacts that differ from the usual teacher-learner relationship with other students.

### **ii. Public Communication and Social Media**

Social Media is not an appropriate vehicle for photos taken in any patient care areas, or any comments/discussions relating to patients, faculty, staff, or other students. Students must adhere to the Albany Medical Center Public Communication/Social Media Policy and the Media Relations Policy. If a complaint is received regarding violation of these policies or other types of unprofessional behavior on social media, it may lead to a formal investigation, Honor Code referral, Disciplinary Hearing, and/or other actions.

### **iii. Appropriate Dress while a Student at Albany Medical College**

The medical school does not have a uniform dress code. However, it is expected that students will wear their white coats for any standardized patient exercises that replicate true clinical encounters. When patients are present in the classroom for other activities, it is not necessary to wear a white coat, but students are expected to dress professionally (business casual). When students are interacting with patients in the outpatient or hospital setting, they must comply with the professional dress standards of that setting and institution.

### **iv. Unprofessional Behavior and Reporting**

Failure to exhibit or meet professional standards, behaviors, or expectations may result in various outcomes. Professionalism attitudes and behaviors can be determinants of all final grades in Phases 1-3. Unprofessional behavior may lead to a failing grade or dismissal from the College.

Unprofessional behavior may be reported to any of the following committees/groups for investigation: Promotions Committee, Disciplinary Hearing Panels, the Student Honor Committee, and/or the Deans Committee (see Section XXV).

## **J. Learning Environment**

### **i. Harassment and Discrimination**

Albany Medical College is committed to promoting and maintaining an environment that is free of discrimination and harassment and encourages respect for the dignity of each individual. Policies and procedures related to harassment and mistreatment comply with applicable federal, state, and/or local laws. These policies can be found in the Student Non-Discrimination and Harassment Policy and Complaint Procedure, which is posted on the College website.

### **ii. Mistreatment**

Albany Medical College does not tolerate mistreatment in the learning environment, and any allegations of mistreatment will be appropriately investigated and addressed. Although harassment and discrimination are forms of mistreatment, other behaviors also fall within this category. These behaviors include, but are not limited to: public humiliation, requiring a student to perform personal services (e.g., shopping or babysitting), or subjecting a student to negative or offensive behavior(s) based on their personal beliefs or other characteristics.

### **iii. Reporting Mistreatment**

Students may report mistreatment through various avenues, including anonymous course evaluations and an anonymous Concerns Submission Tool on the College webpage. They may also report mistreatment directly to the following members of the academic administration:

- Course Directors
- Advising Deans
- Associate Dean for Student Affairs
- Associate Dean for Medical Education
- Assistant Dean for Phase 1 Medical Education
- Department Chairs
- Senior Associate Dean of Academic Administration
- Chief Compliance Officer

### **iv. Monitoring of the Learning Environment**

The College will perform ongoing monitoring of the learning environment to identify positive and negative influences on the maintenance of professional standards. The Learning Environment Committee will meet periodically to review and address concerns about the

## CLASSROOM RULES AND REGULATIONS

learning environment from a variety of sources. This Committee will consist of representatives with expertise in each of the following categories:

- Continuous Quality Improvement
- Equity, Diversity, and Inclusion
- Faculty Affairs
- Graduate Medical Education
- Student Affairs
- Undergraduate Medical Education
- Wellness

The Committee will respond to concerns appropriately and monitor the progress of any interventions to improve the learning environment, and they will review summative data on the frequency of medical students experiencing mistreatment. This Committee will also provide summary reports on an annual basis to the Academic Quality Council.

## **II. CLASSROOM RULES AND REGULATIONS**

### **A. Scheduling in Phase 1**

1. All educational sessions must begin exactly on time whether the entire class is present or not. As a matter of courtesy to faculty and to fellow students, it is expected that students arrive for educational sessions at the appointed time and not leave the session before the appointed time.
2. If an instructor is more than ten (10) minutes late for an educational session, the students may assume the session is canceled unless prior notice has been given that indicates that the instructor will be late.
3. Educational sessions must end ten (10) minutes before the next educational session, free period or lunch period.
4. Any conferences, demonstrations, seminars, etc. that last more than one hour should allow a ten (10) minute break for each fifty (50) minutes of teaching.
5. There cannot be more than twenty-eight (28) scheduled educational hours in a given week per student. One hour for lunch must be officially scheduled every day. Every student's schedule must contain at least one unscheduled one-half day per week. Any



deviations must be approved by the Office of Medical Education and communicated to the students prior to the experience.

6. Review sessions that are not formally part of a course schedule need to be scheduled with the concurrence of students and faculty. Student workloads and course schedules must be considered. A representative of the Office of Medical Education or their designee must approve the review session schedule.

## **B. Learning Format in Phase 1**

1. It is recommended that a system of varied pedagogical approaches to teaching be adopted for all Phase 1 Blocks including but not limited to straight lecture teaching and non-lecture approaches, e.g., small group sessions, conferences, labs, clinics, or audio-visual or computer self-instruction exercises.
2. No block shall have more than 50% of its student contact hours exclusive of examinations devoted to straight lecture teaching.
3. The mix of pedagogical approaches on a given day should reflect an attempt to limit lectures to no more than four hours, as averaged over the entirety of the Block.
4. Block Leaders may require attendance at all small group sessions. Attendance at full class lectures will not routinely be required, however, a Block Leader can request required attendance for patient or community panels. To require attendance, the Block Leader must meet with the Assistant Dean for Phase 1 Medical Education and the Senior Associate Dean of Academic Administration to gain approval. When attendance is required in any curricular offering, students must sign in.

## **C. Syllabus Material, Lecture Support Resources**

Students will view the Syllabus and all lecture materials on their computers. Students will be able to take notes on the supplied course materials (Power point slides, etc.) using a OneNote or PDF annotator supplied by AMC.

## EDUCATIONAL OFFERING DESCRIPTION REQUIREMENTS

### **III. EDUCATIONAL OFFERING DESCRIPTION REQUIREMENTS**

On or before the starting day of each block or clerkship, all students will be provided with the following information electronically:

- \*Statement of goals and objectives of the block or clerkship rotation
- \*Outline of format (i.e., starting and ending times, when and where taught, hours and days taught as well as subject materials for lectures, conferences, labs, clinical rounds and other types of teaching).
- For clerkships, the number and type of patient to be followed will be clearly outlined as will the student's responsibility in patient care (observation, patient assessment, etc.)
- List of audio-visual and self-teaching material (if any).
- Required and recommended texts
- Examination schedule that includes when and where an exam is given (two lecture halls are suggested for exams in pre-clerkship courses). The exam schedule should specify the material that will be tested.
- Type of exams that will be administered, e.g., objective questions, lab practical exams, Objective Structured Clinical Examination (OSCE), grading on ward, etc.
- Estimate of relative portion of the grade derived from each kind of teaching exercise or experience, i.e., basic explanation of how final grades are determined.
- \*Criteria for grade calculations, including grading rubrics, if available.
- Professional behaviors can be determinants of all final grades in all phases of the curriculum. Unprofessional behavior can be the cause of a failing grade
- Mechanism for student request for review of a grade for all course offerings.

\*Goals and objectives, course format and grade determination should be presented and discussed at the beginning of every course.

Lecture material will be supplied to students electronically as part of their electronic syllabus. Faculty will provide the office of medical education with electronic versions of their

## GRADING AND EXAMINATION GUIDELINES

presentation and supplementary materials in a timely manner allowing students to have the material no later than the day before any lecture. Visiting Professors should also supply such material before lectures, if possible, or provide their material at the time of the presentation.

### **IV. GRADING AND EXAMINATION GUIDELINES**

#### **A. Grading**

Final grades permitted in Phase 1 are: H (Honors), P (Pass), F (Fail). For students in the Class of 2025, final grades for Year 3 and 4 are: EH (Excellent with Honors), E (Excellent), G (Good), M (Marginal), and U (Unsatisfactory). Beginning with the Class of 2026, Phase 2 and 3 grades are H (Honors), HP (High Pass), P (Pass), M (Marginal), and F (Fail). Several academic offerings in Phase 2 and 3 will be graded P (Pass) or F (Fail).

In all phases, the grade of I (Incomplete) may be assigned if a student has not completed all requirements at the time of course or clerkship end date. The Office of Student Records will be notified of the I grade. Within two (2) weeks of receipt of an I grade; the student must have a plan approved by the course or clerkship director and the appropriate Medical Education Dean that will allow completion of requirements. Failure to develop an approved plan within two (2) weeks, or failure to complete the requirements based on such a plan, will result in the assignment of a grade of Unsatisfactory (U). No student can carry more than one Incomplete in Year 1 or four weeks of Incomplete in Year 2. Circumstances requiring more Incomplete coursework will necessitate the student taking a Leave of Absence, returning for the next academic year. Depending on the situation, the Promotions Committee will either have the student repeat the full year or begin the year at the point the student took the Leave of Absence.

#### **B. Examination Scheduling**

1. All examinations/quizzes and other evaluation exercises in the pre-clerkship years that are worth 5% or more of the final grade must appear on the official curriculum block schedule. Any evaluation session must be planned as part of the Block planning protocol with the oversight of the Office of Medical Education. Any evaluation session in Health, Care and Society or Evidence Based Health Care must be authorized by the Office of Medical Education after consultation with the Block Leader of the block that is being presented at the time of the exam.
2. Any major examination in Phase 1 (e.g., midterm or final) must be noted on the official curriculum block schedule and preceded by either a study day or a weekend. Major

## GRADING AND EXAMINATION GUIDELINES

examinations in Clerkship Phases must be noted in the clerkship's orientation and syllabus. Exams in Clerkship Phases need not be preceded by a study day, but no student should be on call the night before a scheduled exam.

3. No examinations or quizzes should be scheduled on the day of, or the day following Diwali, Yom Kippur, Rosh Hashanah, Good Friday, Easter Sunday, Eid al-Fitr, Eid al-Adha or the first two days of Passover. Other religious holiday considerations will be made by the joint consideration of the Senior Associate Dean of Academic Administration and the Associate Deans (see Section XI).
4. Examinations as they appear on the official block or clerkship schedule cannot be changed by class vote.
5. No student (Year 1-4) shall be excused from taking a required evaluation session unless permission has been obtained from the Block Leader or Clerkship Director and the associated Medical Education Dean.
  - a. Compelling reasons, such as illness or death in the family, can necessitate a change in the examination time on the day of an exam.
  - b. Permission to reschedule an examination for any other reason must be requested as soon as possible before the day of the exam.
  - c. In cases where there is ample time to reschedule an exam due to an acceptable long-term commitment (e.g., wedding, etc.), students should take the exam before, rather than after, the official administration date, when possible.
  - d. All rescheduled exams must not conflict with other block or clerkship responsibilities. All rescheduled exams must be scheduled as close to the original exam date as possible. In Phase 1, the exam should be given before or after scheduled classroom activities of the following block.
  - e. Exams that are delayed must be taken as soon as possible without affecting other academic efforts. Extenuating circumstances may require the postponement of an exam thereby leading to a grade of Incomplete until the test is completed and graded. Incomplete grades must be made up within two (2) weeks unless special consideration has been granted by the respective Dean of Medical Education.

## GRADING AND EXAMINATION GUIDELINES

### **C. Examination / Evaluation Protocol**

1. Examinations will be initiated by the Office of Medical Education.
2. Examinations delivered by computer will have a defined beginning and an end. (The length of an exam will be specified. Students will only have that amount of time to take the exam no matter when they start within the time the exam is “opened”). Students will be assigned a specific time and place to take every examination. An examination can be completed only during the assigned time.
3. During an examination, students may ask questions that clarify typographical errors. There will be no discussion of the spirit or meaning of test question options.
4. Breaks should be taken only to go the restroom and to attend to other medical needs. No communication between students is allowed during the exam.
5. NBME customized subject exams will be administered according to the NBME protocol.

### **D. Examination Results for Blocks/Required Clerkships**

1. Grades on interim exams should be distributed as soon as possible after the examination and no longer than three (3) school days after the examination is given.
2. Final course grades must be delivered as soon as possible to the Office of Student Records from which they will be distributed, and no more than ten (10) days after the end of a Phase 1 Block and four (4) weeks after the end of a rotation or elective.
3. The distribution of grades will be reviewed yearly by the UME Council. (See section IV for clerkship grade distribution)
4. Posting of examinations and answers:
  - a. For pre-clerkship courses, after all students have taken the examination, a copy of the examination with correct answers may be made available by the Block Leader or the Assistant Dean for Phase 1 Medical Education. The exam should be reviewed on a secure browser.
  - b. When an NBME customized exam or subject exam is administered there will be no review of the test.

## GRADING OF REQUIRED CLINICAL ROTATIONS

5. **Preclinical Grade Review:** Students can appeal or contest a block grade. The student should speak with the Block Leader and the Assistant Dean for Phase 1 Medical Education. If the student is dissatisfied, the student can request a meeting of the Deans Committee, which consists of the Senior Associate Dean of Academic Administration and the Associate Deans in the College. The Senior Associate Dean will schedule the meeting and invite the Block Leader and the Assistant Dean for Phase 1 Medical Education. After the meeting the Deans will determine if any change in grade is appropriate.

## **V. GRADING OF REQUIRED CLINICAL ROTATIONS**

All required Phase 2 and 3 clerkships and course offerings must be taken under the direct supervision of medical college faculty. For each required clinical rotation, there will be a written rotation description that will include information pertaining to goals and objectives of that rotation, the number and type of patients to be seen and followed, how learning will be assessed and how the rotation grade will be determined, as well as the procedure for requesting of review of a grade.

Each department, through its Education Committee, composed of clerkship leadership and other relevant departmental faculty, working in conjunction with the AMC Undergraduate Medical Education Council shall endeavor to identify those areas of clinical performance and knowledge acquisition considered essential to the education of every physician that are included in the curriculum of that rotation. Methods to assess performance in such areas either by grade or by meeting a minimum standard should be devised. In like manner, the AMC Undergraduate Medical Education Council should work to enumerate skills and areas of knowledge acquisition essential to the education of a physician and assign to departments and rotations such specific areas of training deemed appropriate to that medical specialty. Each department is required to develop appropriate criteria for assessing students to ensure the evaluation truly reflects the outcome objectives of the rotation.

All students must receive mid-clerkship feedback that specifies their strengths, weaknesses, and then receive coaching. Students identified as being in academic difficulty or having a serious problem in any area represented on the Professional Profile by the mid-point of a required rotation or elective should develop a formal corrective plan with the clerkship director.

The approved AMC Student Evaluation Form and Comments sections will be completed for all required rotations and electives. The completed evaluations will be submitted within four (4) weeks after the completion of the clerkship experience. The registrar will notify the Department Chair and the Dean if grades are not submitted within four (4) weeks.

## GRADING OF REQUIRED CLINICAL ROTATIONS

### A. Grades and Grading Components

For required clinical rotations the Clerkship Director will submit to the Office of Student Records both a letter grade (EH, E, G, M, U or H, HP, P, M, or F) and a numerical grade. The numerical grade will not appear on the student's transcript. Students are required to meet a minimum passing score on NBME subject exams as outlined below. Students who do not perform at an acceptable level on OSCEs during Phase 2 will be required to remediate and demonstrate competency in core clinical skills. Professional behaviors can be a determinant of all final clerkship grades.

Grade distributions for required Phase 1 clerkships should fulfill the following criteria: the fraction of grades above the "Good" (G) or "Pass" (P) level should be between one-sixth (1/6) and one-third (1/3) of the class. No more 10% of the class should receive grades of "Excellent with Honors" (EH) or Honors (H). The distribution will be reviewed yearly by the UME Council.

The "Comments" section of the AMC Student Evaluation Form will be divided into two parts, these being the "Summary" and "Advisement" sections. The Summary comments should be the overall assessment of the student including strengths and any persistent weaknesses. The summary comments will be quoted in the MSPE. The Advisement comments are meant for the use of the student and advisor in planning future growth, study and education goals. Such comments, especially when recurrent, may be used in the MSPE.

Students receiving grades of "U" or "I" for Phase 2 rotations must correct these deficiencies before the start of the fourth year unless they request a waiver in writing to the Senior Associate Dean of Academic Administration. Students must achieve a passing score on all NBME subject examinations prior to the start of Phase 3 unless they request a waiver in writing to the Senior Associate Dean of Academic Administration.

Students who receive grades of "U" or "I" for Year 4 or Phase 3 elective courses must correct these deficiencies in accordance with the recommendation of the course director and the Promotions Committee. Remedial action may include repetition of all or part of the course work, possibly requiring withdrawal from another elective.

### B. Albany Medical College NBME Subject Examination Minimum Policy

To reflect national standards and expected competencies established by Clerkship faculty, Albany Medical College students must achieve a minimum score on respective Clerkship NBME subject examinations.

- The final grade designation in the clerkship will incorporate the original score value.

## GRADING OF REQUIRED CLINICAL ROTATIONS

- The Clerkship Director will refer a student who has not achieved a minimum score to the Associate Dean of Medical Education and the student's Advising Dean to devise a remediation and re-take plan.
- Students must pass all Year 3 NBME subject examinations before promotion to Year 4/Phase 3. Students will be referred to Promotions Committee if they do not successfully complete prior to starting Year 4 Coursework
- If taking a Year 4/Phase 3 exam, students must pass the NBME subject examination before graduation.

### C. Missed Clinical Experiences

For all rotations or courses during Phases 2 and 3 students cannot miss more time than can be made up during the rotation or course. The Clinical Clerkship Directors or Elective Preceptors will contact the Associate Dean for Medical Education regarding time a student missed from the experience that is in excess of that which could be made up during the experience. In instances when a student misses more time than can be made up during the educational experience a remediation plan will be developed. All absences are subject to approval of the Clerkship Director or Course Director and must be made up.

All Clerkships must have a written policy that demonstrates how students can make up educational experiences. The Clerkship Director must have a policy that clearly describes how to make up missed educational experiences. It must state how the time will be made up, for example, by taking extra night call duty or weekend duty. Time off during clinical rotations, whether required or elective, must be approved by the Clerkship Director or Elective Course Director. At the end of the rotation or elective, if any requirement(s) have not been met, a grade of Incomplete (I) should be submitted and the Associate Dean for Medical Education should be notified.

### D. Clerkship Grade Appeals

Students may appeal a Clerkship grade. The appeal **must** be made in writing directly to the Clerkship Director. The Clerkship Director may: recalculate the numerical grade, review the final examination or clinical examination grade, or clarify comments or input from preceptors or residents on the clinical rotation. The Clerkship Director does not have to show the student all their evaluation sheets but must summarize the contents. Students should not meet with Clerkship Preceptors or residents to question evaluations without the approval of the Clerkship Director. All disputes regarding grades should be mediated / coordinated by the Clerkship Director.



## ACADEMIC SUPPORT SERVICES

If a student is dissatisfied with the results of the discussions with the Clerkship Director, then he/she may request that the Department Chair review the issue. This request must be in writing. If a student still is dissatisfied, the student must detail their dissatisfaction in a letter to the Deans Committee, which consists of the Senior Associate Dean of Academic Administration and the Associate Deans in the College, within one month after grades are distributed. The Senior Associate Dean will arrange a forum that includes, the Clerkship Director, the Chair of the department, the Associate Dean for Medical Education, and the other members of the Deans Committee. The Committee will be chaired by the Senior Associate Dean of Academic Administration or his/her designee. All parties may present their positions and discuss the issues. The meeting will result in a final grade determination. Furthermore, a student who has exhausted all these procedures to appeal a clinical grade and is still dissatisfied has the right to put a letter stating their dissatisfaction with the grade into their official academic file.

### **E. Off-Campus and Away Rotations**

Students taking required Phase 2 or 3 clerkships at approved distant sites must be offered alternative assignments for longitudinal themes that can be completed during the period of that clerkship. The alternative assignments (e.g., web-based active participation, web-based assignments, reading, paper, etc.) must be developed by the longitudinal Theme Leaders, must have the same educational objectives as the assignment at AMC, and must be made clear in the Clerkship syllabus. These assignments should be completed and reviewed by the longitudinal theme leader so that students are given feedback on their work before the end of the period.

Phase 3 off-campus (“away”) electives should be planned with the assistance of the student’s Advising Dean. A student must be in good academic standing in order to gain approval for off-campus electives. The appropriate forms are available from the Office of Student Records. All off-campus electives must be approved by the Associate Dean for Medical Education at least four (4) weeks prior to the date on which the elective is to begin. The student must obtain the application form from the program or the AAMC Visiting Student Learning Opportunities program. Affiliation agreements should be signed. All necessary fees, documents, and approvals from the off-campus program need to be obtained prior to final approval by Albany Medical College. No more than twelve (12) weeks of elective credit may be in the same specialty.

## **VI. ACADEMIC SUPPORT SERVICES**

All students have access to faculty and staff who are dedicated to supporting their academic progress. These individuals include faculty, course directors, Advising Deans, the Learning Specialist, and the Deans of Medical Education. Students experiencing academic challenges

## CLERKSHIP NIGHT DUTY SCHEDULING

may reach out to any of these individuals for guidance and appropriate support, which is individualized based on a student's specific circumstances and needs.

Students may be referred to services and/or individuals within the College for academic support. The Learning Specialist is available to all students, regardless of their academic performance, and the Learning Specialist has no role in making assessment or promotion decisions about students. Students experiencing academic hardship may be referred to additional third-party resources, as appropriate.

### **VII. CLERKSHIP NIGHT DUTY SCHEDULING**

All clerkship call schedules must comply with ACGME work hours rules while reflecting NY State 405 regulation. No more than eighty (80) hours a week should ever be scheduled. Students should not be required to perform patient care or graded educational activities without proper rest.

### **VIII. 4TH YEAR/PHASE 3 NON-CLINICAL ELECTIVES**

AMC currently offers several credit-bearing, non-clinical elective experiences in the fourth year/Phase 3 of the curriculum. There is a cap of four credits of non-clinical electives.

1. The Office of Student Records will distribute a course roster to the Course Director at least two (2) weeks before the course start date. The Course Director will provide the students with a general overview of the course, course goals & objectives, expected course activities, and course expectations. Acceptable communication includes e-mail correspondence or a conference call.
2. The Course Director should have a mechanism in place to check-in with the student midway through the rotation so that there is an opportunity to comment and provide feedback on the student's progress toward the expected goals for the rotation. For example, students could be asked to provide written weekly updates to the Course Director, submit a first written draft of a written product for review, or meet virtually online or in person to discuss their progress.
3. Students must complete the elective course requirements in the same timeframe for which they are officially registered for the course. No credit will be awarded for work submitted after the end of the Period for which the student is registered.

## EVALUATION OF EDUCATIONAL OFFERINGS

4. Students who submit written final products that are below expectations should be given a formal grade of Incomplete and be provided comments back and allowed to re-write and re-submit the work. If upon re-submission, the work is still below expectations, the Course Director may, depending on the circumstances, either award a grade of Unsatisfactory/Fail or continue to work with the student on revision until the work meets expectations.
5. Visiting students will not be accepted for non-clinical electives

## **IX. EVALUATION OF EDUCATIONAL OFFERINGS**

### **A. Student Evaluations Requirements**

1. The Class Vice President will oversee the Student Evaluation process for his or her class. The Class Vice President is responsible for designing and editing the evaluation tool with the input of the Assistant and Associate Deans, for developing a student committee to participate in the evaluation process, and for reviewing the results of the Student Evaluations.
2. The Student Evaluation Committees will be chaired by the class Vice-President. This committee is responsible for designing and reviewing the student evaluations of the block and clerkship evaluations with input from the Assistant and Associate Deans and the Block Leaders and Clerkship Directors.
3. Evaluation of required blocks/clerkships by every student is **mandatory**. An evaluation is to be completed by every student shortly after the final examination. Final grades will be withheld from those students who fail to complete the evaluation. The student's grade is released automatically upon completion of the evaluation.
4. The Student Evaluation Committee for each class will meet annually with each Block/Clerkship leader to present a report based on the data from the student evaluations. A Curriculum Assessment Team representative will be present at each student evaluation meeting. The Block Leaders and Clerkship Directors are expected to reflect upon the Student Evaluation as part of their annual Block or Clerkship End-of-Year Report.

### **B. UME Council Assessment of Curriculum Requirements**

1. The Curriculum Assessment Team (CAT) is a subcommittee of the UME and will review every component of the curriculum on a triennial basis. The UME must approve the

## CLASS RANK

schedule for assessments proposed by the CAT each year. These individual course reviews will be based on Student Evaluations, Annual Course reviews, data from the GQ, and scores on the USMLE and other data sources deemed relevant to a thorough review. The Chair of the CAT will present the draft CAT report for each Block, Clerkship, Acting Internship or Course on the schedule for discussion, revision and approval by the UME. These reports will highlight strengths and weaknesses of particular courses and will include commendations and recommendations for changes. The Assistant Dean for Phase 1 Medical Education or the Associate Dean for Medical Education and their Workgroups will support and monitor progress on recommendations made in the UME-approved CAT reports and will provide an update on summary of progress made annually.

2. For Blocks and Clerkships not on the CAT schedule for review during a particular academic year, any problems identified by the Student Evaluation Committee, the Annual Course Review, or by the Associate Dean for Medical Education will be brought to the first to the Phase 1 Workgroup (comprised of the Block Leaders) or to the Phase 2/3 Workgroup (comprised of the Clerkship Directors). These groups are convened monthly by the Assistant Dean for Phase 1 Medical Education and by the Associate Dean for Medical Education, respectively. The working groups will review the issues raised and make recommendations to the UME if action is needed that changes the curriculum in any substantive way. The Assistant Deans, who sit on the CAT, are responsible for reporting recommendations of the Workgroups to the CAT.
3. The CAT will perform an overall curriculum assessment on an annual basis. The purpose of this is to ensure that the 4-year curriculum is meeting the overall program objectives and that there are appropriate methods of assessment in place. This overall curriculum assessment will be done by a careful review of the Curriculum Database and Patient Logs to identify any objectives which are not being represented adequately in the curriculum (missing), which are overly represented (too much redundancy), or which are under-represented (in need of mindful redundancy). Student Evaluations, Annual Course reviews, USMLE data, GQ data and other data sources deemed necessary for a thorough review will help identify areas of inadequacy that need to be addressed.
4. Faculty, Block Leaders and Clerkship Directors must cooperate with the requests of CAT. Noncompliance will not be tolerated. Noncompliance will be reported to Departmental Chairs and the Dean as a component of the annual faculty evaluation process.

## **X. CLASS RANK**

The College will not share specific class rank information with any student or third party. The Registrar uses class rank to determine which students will receive Scholastic Excellence in

## CHANGE IN STUDENT STATUS

Phase 1 and Phase 2 A student's class rank and numerical grades will be protected by the Administration in the same manner that all grades are protected, and in accordance with the Family Educational Rights and Privacy Act (FERPA).

The class rank of all students will be computed based on numerical grades received in all courses and clerkships. Class rank will be based on the original final grades a student received and NOT grades received through repetition of a course or clerkship. When remedial work has been required for a Theme or a Clerkship, and has been successfully completed, the AMC transcript will reflect the original word grade (Unsatisfactory or Marginal) followed by a "P" for "Pass"; e.g., U/P or M/P.

Class rank of all students for the purpose of the Medical Student Performance Evaluation (MSPE) will be computed based on numerical grades received in Phase 2 of the new curriculum or Year 3 of the traditional curriculum. Class rank will be based on the original final grades a student receives and NOT the grades received through remediation or repeat of a clerkship. Class rank will be divided into quartiles and reported as such on the MSPE.

Class rank of all students for the purpose of honors at graduation will be computed based on numerical grades received in Phase 1 and Phase 2 of the new curriculum or Year 1/2/3 of the traditional curriculum. Class rank will be based on the original final grades a student receives and NOT the grades received through remediation or repeat of a course/block/theme/clerkship. Class rank will determine Summa Cum Laude, Magna Cum Laude and Cum Laude designations for graduation.

## **XI. CHANGE IN STUDENT STATUS**

Any change of status, such as Leave of Absence, Deceleration, or Withdrawal, (as defined below) must first be approved by a student's Advising Dean and/or the Senior Associate Dean of Academic Administration. All requests for a status change must be accompanied by an AMC Status Change Request Form, which is provided by the Registrar. Upon completion, the student must submit the completed form to the Registrar's office for final approval.

### **A. Leave of Absence**

Students are expected to follow a continuous course of study at Albany Medical College. However, a student may wish or need to interrupt his or her study temporarily. Students may request, or be required, to take a Leave of Absence (LOA).

## CHANGE IN STUDENT STATUS

A student who wishes or needs to interrupt study temporarily because of personal circumstances, such as physical or mental illness or injury, academic circumstances, or to engage in research or other degree programs may request a *personal* LOA. In the case of illness or injury, a student may be granted a *medical* LOA with the approval of their Advising Dean and/or the Senior Associate Dean of Academic Administration, on the written recommendation of a physician. A letter stating their readiness to return to class will be required. Students requesting to engage in research or to participate in a graduate degree program must provide documentation to their Advising Dean.

### **i. Leave of Absence Process**

To request a LOA, the student must meet with their Advising Dean and/or the Senior Associate Dean of Academic Administration, explain the reasons for the proposed leave and propose the start and end dates of the leave. If they both find the student to be eligible and approve the request, the student must complete the AMC Status Change Request Form with the Registrar, their Advising Dean, and either the Assistant Dean for Phase 1 Medical Education or the Associate Dean for Medical Education. Upon completion, the student must submit the form to the Registrar's office for final approval.

A student who does not request a personal LOA but does not participate in the academic program they were admitted to, or whose request for a personal leave is denied and does not enroll in courses, will be considered to have withdrawn from the school effective as of their last date of recorded academic activity.

Albany Medical College reserves the right to place a student on a LOA when, on the recommendation of an Administrative Psychiatric Evaluation, the Advising Dean and/or the Senior Associate Dean of Academic Administration determines that the student is a danger to themselves or others because of a serious medical or psychiatric problem.

### **ii. Leave of Absence Policies**

- A student may be granted a LOA for a maximum of one year with possible extension for one additional year. Any approved leave will be for a specified period and during this period the student will not be considered to be enrolled.
- A student on a LOA is not eligible for financial aid, including loans; and in most cases, student loans are not deferred during periods of non-enrollment.
- A student on a LOA in a given academic program may not fulfill any degree or curricular requirements in the same academic program during the time on leave.

## CHANGE IN STUDENT STATUS

- A student on a LOA is still eligible to use any AMC facilities normally available to enrolled students, including the library.
- A student on a LOA may continue to be enrolled in AMC Health Insurance by making arrangements through the Office of Student Affairs. Coverage is not automatic. In order to secure continuous coverage from AMC, enrollment in this plan must be requested prior to the beginning of the term in which the student will be on leave or, if the leave commences during the term, within thirty (30) days of the date when the leave is approved.
- A student on a LOA must notify the Registrar in writing of his or her intention to return at least thirty (30) days prior to the documented end date of the approved leave. In addition, if the returning student wishes to be considered for financial aid, he or she must submit appropriate financial aid applications to the school's Financial Aid Office to determine eligibility.
- Prior to returning to AMC, all students must satisfy all stipulations for return outlined on the AMC Status Change Request Form.
- Any additional changes to a student's LOA (e.g., extension, change of circumstances) must be approved by the student's Advising Dean and/or the Senior Associate Dean of Academic Administration. Once approved, a new AMC Status Change Request Form must be submitted to the Registrar's Office.
- A student on a LOA who either does not notify the Registrar at least thirty (30) days prior to the documented end date of the leave that they are returning from, or does not return at the end of the approved leave, or does not request and receive an extension from their Advising Dean or the Senior Associate Dean of Academic Administration, will be administratively withdrawn from the Albany Medical College.

### **iii. Extended Curriculum Leave of Absence**

A medical student in good standing, with permission from their Advising Dean and/or the Senior Associate Dean of Academic Administration, may choose to interrupt their program to pursue other academic endeavors (MPH, research, etc.) and take an *Extended Curriculum* LOA.

The general policies governing all LOA's are described above. Once approved, the student must provide a completed AMC Status Change Request Form to the Registrar's Office for final approval. This paperwork will include the specific start and end dates of the academic program, and the student is expected to get approval from their Advising Dean before any changes to this plan can be made.

## TUITION REFUND POLICY

### iv. Academic Leave of Absence

Any student that the Combined Promotions Committee has determined shall repeat any academic year due to not satisfying curricular requirements will be granted an *Academic LOA* until the start of the next academic year. The general policies governing all LOA's are described above. An AMC Status Change Request Form must be completed for an Academic LOA.

### B. Withdrawal

If a student decides not to continue studies at Albany Medical College, it is the student's obligation to officially withdraw through the Registrar's Office. To officially withdraw, the student must do so in writing to the Registrar, either via email sent from the student's AMC email account, or via a signed letter. In addition, the student is required to also notify their Advising Dean, the Senior Associate Dean of Academic Administration, and their appropriate Assistant Dean. The effective date of the withdrawal will either be the last date of academic activity (as determined by the Advising Dean) or the date of the letter, whichever is later. In the event that the student is not on campus or is physically unable to complete the form, the student must request alternate arrangements from the Registrar's Office.

## XII. TUITION REFUND POLICY

A student may be eligible for a full or partial refund of tuition based on the number of days past the term start date that they withdraw. The Table below details the refund policy.

Tuition Refund Policy for MD, PA, NA and Graduate Students		
Effective Date of Withdrawal	Tuition Credited %	Tuition Liability %
Prior to term start	100	0
Day 1-7	100	0
Day 8-14	80	20
Day 15-21	70	30
Day 22-28	60	40
Day 29-35	50	50
Day 36-42	40	60
Day 43-49	30	70
Day 50-56	20	80
Day 57-63	10	90
Day 64+	0	100

Please note, non-attendance of classes does not classify as an official withdrawal and does not relieve the student of the financial obligation or entitle the student to a refund. Under certain circumstances students who take a leave of absence may opt not to take the refund but rather



## THANKSGIVING HOLIDAYS

have the funds used toward the payment for the semester in which they return. If a student decides not to officially return from leave of absence, the money can be refunded.

### **XIII. THANKSGIVING HOLIDAYS**

AMC Year 1, Year 2, Year 3, and Year 4 students have Thanksgiving Day, Friday, Saturday and Sunday as vacation days.

### **XIV. MATCH DAY RESPONSIBILITIES**

Graduating students do not need to report to their clerkship on Match Day. No examinations should be administered on Match Day or the day after Match Day. Students do not have to return to their clinical rotation after the noon Match Day Event. Students should not be expected to take call either on the evening of Match Day or Saturday or Sunday following the match. Students resume normal clerkship schedules on the Monday following the match.

### **XV. SCHEDULE CHANGES FOR RELIGIOUS REASONS**

Students **must** put their requests for schedule changes in writing. They **must submit** the request to the Assistant Dean for Phase 1 Medical Education or the Associate Dean for Medical Education, as appropriate. The medical education Dean will review the request and determine the most efficient way to accommodate the student while fulfilling curricular requirements.

### **XVI. CPR - TRANSCRIPT**

Students who complete American Heart Association trainings, such as Basic Life Support (BLS) and Advanced Cardiac Life Support (ACLS) are responsible for maintaining their own records and proof of completion of these certifications

### **XVII. USMLE POLICIES**

All students **must pass** the USMLE Step 1 and USMLE Step 2CK to graduate and participate in the Residency Match. Gaps in medical education due to USMLE delays and failures may be problematic when it comes to a successful Match in the fourth year. Delays should only be considered if the student is at risk of not passing the exam.

## USMLE POLICIES

Multiple USMLE failures may limit a physician's ability to obtain licensure in certain states. Students are permitted a maximum of four attempts on each USMLE Step exam. If a student fails Step 1 or Step 2 on their fourth attempt, they will be referred to the Promotions Committee for dismissal.

### **A. USMLE Step 1**

All students must pass USMLE Step 1 in order to advance and progress to the Phase 2 curriculum. All rising Phase 2 students must sit for the USMLE Step 1 exam prior to beginning the Clinical Bridge Block. Extenuating circumstances that prevent a student from taking USMLE Step 1 on time must be reported in a written request for permission to delay the exam that is submitted to the Phase 1 to Phase 2 Progress Committee, which consists of the Associate Dean for Medical Education, the Associate Dean for Student Affairs, the Registrar, and the Assistant Dean for Phase 1 Medical Education or their delegate(s). Students who delay taking USMLE Step 1 will thereby delay the start of Phase 2. This would necessitate participation in the Clinical Bridge Block, then taking additional time to prepare for the USMLE Step 1 examination. To exercise this option, the student would need to do both of the following:

1. Sit for the examination in time to resume clerkship activity within eight weeks after the start of the clinical portion of Phase 2, which is the length of the longest core clerkship
2. Receive a passing score prior to joining a core clerkship rotation.

This pathway requires a decelerated schedule in Phase 2, and possibly Phase 3, which may result in a one-year delay to graduation. Students who do not have a passing USMLE Step 1 score within eight weeks of the core clerkship start of Phase 2 will need to go on an academic leave of absence.

Students failing USMLE Step 1 on the first attempt must meet with their Advising Dean and develop a written plan that must be signed by the student and approved by the Phase 1 to Phase 2 Progress Committee. Students who receive a failing score on USMLE Step 1 while they are on a clerkship will be withdrawn from the clerkship. For a student to resume the clerkship track schedule, they must retake the exam within eight weeks of the core clerkship start of Phase 2 and earn a passing score. Again, this option would result in a decelerated schedule for Phase 2, and potentially Phase 3, which may lead to a one-year delay in graduation.

Students who fail to obtain a passing Step 1 score within eight weeks of the core clerkship start of Phase 2 will be required to change status from deceleration to a leave of absence (LOA). These students MUST receive a passing score on USMLE Step 1 no later than December 31<sup>st</sup> of

## USMLE POLICIES

the same calendar year. Students passing USMLE Step 1 by December 31<sup>st</sup> must return to take the Clinical Bridge Block, even if the student has taken it before, to refresh their clinical skills prior to starting clinical clerkships. Students who do not pass USMLE Step 1 by December 31<sup>st</sup> will be required to extend their LOA an additional year, unless the student will not be making Satisfactory Academic Progress, as outlined above. In this scenario, the student will be referred to the Promotions Committee for dismissal.

### **B. USMLE Step 2CK**

All students must pass USMLE Step 2 CK to meet graduation requirements and must have a passing score to be certified for the NRMP residency match. All students are encouraged to take the USMLE Step 2 CK before the end of August, as further delay will result in incomplete ERAS applications early in the interview season.

Students may take USMLE Step 2 CK only after completing Phase 2. Any request for a variance from this policy must be made in writing and approved by Associate Dean for Medical Education and the Senior Associate Dean of Academic Administration.

Students going on a leave of absence to do research or to study for an advanced degree before returning to Phase 3 must take USMLE 2 CK *prior* to going on leave. Requests to alter this sequence must be made in writing and approved by the Associate Dean of Medical Education and the Senior Associate Dean of Academic Administration. Students who delay taking USMLE Step 2 CK for any reason must take the exam before the next academic year in which they would be a Phase 3 student. There must be a written plan developed with their Advising Dean laying out a timeline. Failure to sit for the exam or failure to receive a passing score allowing them to join the next graduation class may result in the student being administratively withdrawn.

Students who receive a failing USMLE Step 2 CK score will be advised to withdraw from the rotation to which they are assigned and will be placed in a credit-bearing study period. The student must meet with their Advising Dean and develop a written plan signed by the student and the Advising Dean to be approved by the Associate Dean for Medical Education. Because a Step 2 CK score is necessary for certification to participate in the NRMP Match, any student wishing to remain in the Match should take the exam within four (4) weeks of receiving a failing score. Any deviation from this protocol must be approved by the Deans' Committee. Each Advising Dean will monitor timing and curriculum requirements of each of their students to determine whether the student will need to decelerate, thereby resulting in a one-year delay to graduation. Students failing USMLE Step 2 CK must retake the exam and have received a passing score to be certified to participate in the Match.

## CURRICULAR ADJUSTMENT FOR PARENTAL LEAVE

Students failing USMLE Step 2 CK on the second attempt must go on a leave of absence until the exam is retaken and a passing score is posted. Once a passing score is posted, the student may return to school as a Phase 3 student on a decelerated schedule, taking up to two years to complete the Phase 3 curriculum. Students must take and pass the exam in no more than one year after the date of notification that they failed a second time.

## **XVIII. CURRICULAR ADJUSTMENT FOR PARENTAL LEAVE**

Students may request an official leave of absence for the birth, fostering, or adoption of a child, utilizing the leave of absence protocol found in the Rules for Promotions Committee document. Parental leave may be for a whole year or part of a year. Students may negotiate curricular time adjustments with their Advising Dean and the Assistant Dean for Phase 1 Medical Education or the Associate Dean for Medical Education, as appropriate. It is possible to arrange to take any year over two years as one method of accommodation. Each case will be considered individually.

## **XIX. HONOR CODE CONSIDERATIONS**

Students are expected to take examinations in their assigned room except to accommodate learning disabilities or other specific circumstances approved by the Deans Committee, which consists of the Senior Associate Dean of Academic Administration and the Associate Deans in the College. It is expected that the students have already committed to the principles of the Honor Code. Before each exam, students may be reminded that the code is in effect.

1. Conditions for practical exams should be such that only one student views an exam specimen at a time.
2. A member of the faculty or a designee of the Office of Medical Education is responsible for supervising the collection of any written exams. NBME Shelf Exams are proctored in accordance with the rules required by the NBME.
3. In all years (1-4), it is the faculty's responsibility, with the aid of the Office of Medical Education, to arrange for a specified examination location which offers students an appropriate environment for taking exams in either a written or computer-based format.
4. Electronic exams will be delivered in multiple versions of the exams (with questions in different order)

## **XX. ADMINISTRATIVE PSYCHIATRY REVIEW**

An Administrative Psychiatric Review may be required for a student to continue in the Undergraduate Medical Education program for one of the following reasons:

1. Academic performance may be influenced by emotional, psychological or social issues that may need to be addressed in order to ensure completion of the requirements for the M.D. degree.
2. There may be occasions when a student's professional demeanor or personal behaviors and activities may raise serious questions about the individual's ability to pursue a career in medicine.

The psychiatric evaluation must be performed by a Board-Certified Psychiatrist. The individual being reviewed must understand that the evaluation is not a confidential medical record but rather a summative report that is utilized to determine a plan of action necessary to allow the individual to successfully complete the course of study. The summative report becomes part of the student's confidential academic record. Failure to undergo an Administrative Psychiatry Review may result in dismissal from the Medical School. Failure to adhere to any ongoing recommendations or requirements determined by an Administrative Psychiatric Review may also result in dismissal.

## **XXI. AMC STUDENT HEALTH AND PSYCHOLOGICAL SERVICES: NON-INVOLVEMENT IN ACADEMIC ASSESSMENT OR PROMOTION**

Medical students on clinical rotations should not be assigned to faculty whose primary practice roles include the AMC Student Health Clinic and/or the AMC Student Psychological Services. The clinical faculty in these service areas may not serve on the Promotions Committee or in Advising Dean roles in the medical school.

As well, members of AMC Clinical Departments who provide patient care, clinical assessments, treatments, and/or mental health care for medical students will not participate in the academic evaluation of students for whom they are providing treatment or for whom they have provided treatment in the past, including psychiatric or psychological evaluations.

In situations where an unexpected overlap of roles develops, the clinical faculty member must recuse themselves from any and all evaluator roles with that student. Additionally, students may request from either the Clerkship Director or Clerkship Coordinator, a change of preceptor if

## FINANCIAL AID ELIGIBILITY REQUIREMENTS BASED ON SATISFACTORY ACADEMIC PERFORMANCE

they feel there is a potential conflict of interest or where a conflict of roles may potentially arise regarding their own personal medical treatment providers.

### **XXII. FINANCIAL AID ELIGIBILITY REQUIREMENTS BASED ON SATISFACTORY ACADEMIC PERFORMANCE**

The Albany Medical College is required by law to ensure that students receiving financial aid are making satisfactory academic progress in their degree programs. Satisfactory academic progress is outlined above and in the “Albany Medical College Guidelines for Promotions Committees.” If the Promotions Committee determines that a student does not meet these minimum standards, s/he will be ineligible to receive financial aid assistance. The progress of each student who is working towards a degree will be monitored by the appropriate promotions or progress committee and their Advising Dean. Note that any student on Leave of Absence or Extended Curriculum is not eligible for financial aid from Albany Medical College.

A student who does not satisfactorily complete all program requirements for a given year may be permitted to remediate as outlined in the Policy for Remediation within the Albany Medical College Guidelines for Promotions Committee. During the period of remediation, the student will remain eligible for financial aid. If a student does not successfully complete remediation, the student will be considered for dismissal. Students may also be dismissed without the possibility of remediation. The student will continue to receive financial aid while appealing a dismissal decision. Once dismissal is official, all financial aid will be terminated.

Maximum financial aid eligibility for medical students is six (6) years, unless the student is pursuing an additional degree or their time to graduation is negotiated due to rare and exceptional circumstances. Funding beyond the maximum timeframes will be provided only if negotiated and approved by the Dean or the Dean’s designee.

Advanced degrees outside of the medical college do not qualify for financial aid funding through Albany Medical College. A student who has completed degree requirements, with the exception of ACLS and the National Boards, will not be eligible for financial aid funding.

## **XXIII. AMC FINANCIAL AID OFFICE INSTITUTIONAL SCHOLARSHIP PROCEDURES**

### **A. Albany Medical College MD Tuition Policy**

All Albany Medical College MD students pay full tuition for each semester that they are enrolled in the College.

### **B. Albany Medical College MD Institutional Aid Policy**

- Students who repeat an academic year are eligible to receive an AMC institutional scholarship to cover up to one half of the repeated year's tuition charges. (ZRAID = AMC Remediation Aid)
- Students who do not repeat an academic year but are enrolled for more than four (4) years (eight semesters) are eligible to receive an AMC institutional scholarship to cover all but \$5,000 for their final (fifth year) of study. (ZAAID = AMC Administrative Fee Aid)
- Students who repeat an academic year but are enrolled for more than five (5) years (ten semesters) are eligible to receive an AMC institutional scholarship to cover all but \$5,000 of the tuition charges for their final (sixth year – semesters 11 and 12) of study. (ZAAID = AMC Administrative Fee Aid)
- Students in the MD/PhD program pay full medical school tuition for the first two years of medical school. During years of PhD program participation, the student is eligible to receive an AMC institutional scholarship that covers tuition, AMC (single) health insurance, and institutional fees costs. Upon completion of the requirements for the PhD Program, the student is eligible for an AMC institutional scholarship that covers 100% of the tuition costs for the final two years of medical school. (ZMAID = AMC MD/PhD Scholarship)
- Students who do not repeat an academic year but who are enrolled for more than four (4) years (eight semesters) and students who repeat an academic year but are enrolled for more than five (5) years (ten semesters) are eligible to request from the Senior Associate Dean of Academic Administration an AMC institutional scholarship to cover up to 100% of tuition costs for their final year(s) of study. (ZXAID = AMC Completion Aid).

## **XXIV. ACCESS TO STUDENT RECORDS**

Albany Medical College maintains compliance with the Family Educational Rights and Privacy Act (FERPA) to protect the privacy of student grades and records.

- Course faculty will be able to access all course, block, and clerkship grades.
- The student's total file will be available to the Senior Associate Dean of Academic Administration, the Associate Dean for Medical Education, the Associate Dean for Student Affairs, , and the Chair of the Promotions Committee of the Undergraduate Medical School program.
- Faculty and Faculty Advisors will need permission from the Senior Associate Dean of Academic Administration or the student to access anything other than course-related data.
- After graduation and for purposes of letters of recommendations students must sign permission for record accessibility. They may designate the whole file or particular parts of the file.

## **XXV. ALBANY MEDICAL COLLEGE GUIDELINES FOR PROMOTIONS COMMITTEES, DISCIPLINARY HEARING PANELS, & APPEALS COMMITTEE**

### **A. Introduction**

The Faculty of Albany Medical College has a responsibility not only to its students but also to the public that its students will eventually serve. A basic part of that responsibility is to see that our students perform in a manner consistent with the most appropriate standards of scholarship and professional behavior accepted by society and the medical profession. It is sometimes necessary for the faculty to consider instances in which students appear not to meet an appropriate level of professional competence or performance, whether due to inadequate scholastic achievement or unprofessional behavior. These guidelines have been established so that such students may be treated fairly and judged in a consistent manner. The ultimate responsibility for decisions affecting the status of any student has been delegated by the Trustees of the Albany Medical College to the Academic Governing Council. The UME Council has, in turn, delegated that responsibility to standing and ad hoc committees of the faculty, such as Promotions Committees, Disciplinary Hearing Panels, the Student Honor Committee, the Associate Deans Committee, and the Committee on Student Appeals. The Committee on Student Appeals is a subcommittee of the Academic Governing Council.



ALBANY MEDICAL COLLEGE GUIDELINES FOR PROMOTIONS COMMITTEES,  
DISCIPLINARY HEARING PANELS, & APPEALS COMMITTEE

## **B. Definitions:**

- **Phase 1** refers to the 18-month Scientific Foundation phase of the curriculum. Previously referred to as Year 1 and Year 2 – use course/block/theme to indicate submission of final grade
- **Phase 2** refers to the Core Clinical Experiences – use clerkship to indicate submission of final grades
- **Phase 3** refers to Advanced Clerkships – use clerkship to indicate submission of final grades
- **Traditional Curriculum** – for the 23-24 AY this refers to the curriculum for the Classes of 2024, 2025 (Year 3 and Year 4 Clinical Rotations)
- **New Curriculum** – for the 23-24 AY this refers to the curriculum for the Classes of 2026, 2027
- **Longitudinal Themes/Clerkships** – CSK, EBH, HCS, LEBHC, LMI, NUT

## **Guidelines for Grade Designation:**

- **Traditional Curriculum** (based on z-scores)
  - Excellent with Honors (EH) z-score > 2.0
  - Excellent (E) z-score 1.5 to 2.0
  - Good (G) z-score -1.5 to 1.5
  - Marginal (M) z-score -2.0 to -1.5
  - Unsatisfactory (U) z-score < -2.0
- **New Curriculum** – Phase 1 (based on final percent scores)
  - Honors (H) – top 15% of the class at the end of a block/course
  - Pass (P) – a final score of >60%
  - Fail (F) – a final score of <60% - if more than 10% of the class achieves less than a final score of <60%, a grade of Fail (F) will be determined using two SD from the final mean of the block

## **C. Synopsis of Grading System and Guidelines for Promotions Committees**

### **i. Reporting of Grades**

- **Phase 1**
  - Student grades should be forwarded to the Student Records Office no later than seven days after the end of a course/block/theme.

## ALBANY MEDICAL COLLEGE GUIDELINES FOR PROMOTIONS COMMITTEES, DISCIPLINARY HEARING PANELS, & APPEALS COMMITTEE

- Evaluations of professional behavior, including but not limited to attendance, attitude, integrity, and ethical conduct, may be forwarded to the Promotions Committee by faculty conducting courses in Phase 1 of the curriculum. These evaluations will become part of the student's record. The evaluations are available for review in accordance with regularly established procedures.
- Evaluation of professional behaviors will be included in assignment of grades
- **Year 3 and Year 4 (Traditional Curriculum) and Phase 2 and Phase 3 (New Curriculum)**
  - Student grades should be forwarded no later than five weeks after the end of a required course, clerkship, or elective. A mandatory faculty evaluation of student overall performance, including evaluation of professional competence demonstrated by academic achievement, attitude, integrity and ethical conduct, will be recorded for students in Phase 2 and 3 of the new curriculum or Year 3 and Year 4 of the traditional curriculum.
  - Evaluation of professional behaviors will be included in assignment of grades.
- All students will receive their final grade and evaluation recorded in Student Records on Sakai or One45 platforms.

### ii. Grade Definitions

- **Phase 1** – Final grades permitted are:
  - Honors (H)
  - Pass (P)
  - Fail (F)
  - The grade of I (Incomplete) may be assigned if a student has not completed all requirements at the time of course/block completion. A grade of I must have Prior approval of the Dean's Office designee. The Office of Student Records will be notified of the Incomplete grade. Within two (2) weeks of receipt of an Incomplete grade, the student must have a plan approved by the course or rotation director that will allow completion of requirements. The plan must be registered in the Office of Student Records. Failure to develop an approved plan within 2 weeks or failure to complete the requirements based on such a plan will result in the assignment of a grade of Fail (F)
- **Class of 2025** (traditional curriculum 23-24 AY Year 3) – Final grades permitted are:
  - EH (Excellent with Honors)
  - E (Excellent)
  - G (Good)
  - M (Marginal)
  - U (Unsatisfactory)
  - Longitudinal Themes (CSK, EBHC, HCS, LMI, NUT) will be graded P (Pass) or F (Fail).

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- The grade of I (Incomplete) may be assigned if a student has not completed all requirements at the time of clerkship completion. A grade of I must have Prior approval of the Dean's Office designee. The Office of Student Records will be notified of the Incomplete grade. Within two (2) weeks of receipt of an Incomplete grade, the student must have a plan approved by the course or rotation director that will allow completion of requirements. The plan must be registered in the Office of Student Records. Failure to develop an approved plan within 2 weeks or failure to complete the requirements based on such a plan will result in the assignment of a grade of Unsatisfactory (U).
- **Class of 2024** (traditional curriculum 23-24 AY Year 4) – Final grades permitted are:
  - EH (Excellent with Honors)
  - E (Excellent)
  - G (Good)
  - M (Marginal)
  - U (Unsatisfactory)
  - Longitudinal Themes (CSK, EBHC, HCS, LMI, NUT) will be graded P (Pass) or F (Fail).
  - The grade of I (Incomplete) may be assigned if a student has not completed all requirements at the time of clerkship completion. A grade of I must have Prior approval of the Dean's Office designee. The Office of Student Records will be notified of the Incomplete grade. Within two (2) weeks of receipt of an Incomplete grade, the student must have a plan approved by the course or rotation director that will allow completion of requirements. The plan must be registered in the Office of Student Records. Failure to develop an approved plan within 2 weeks or failure to complete the requirements based on such a plan will result in the assignment of a grade of Unsatisfactory (U).
- A student who does not take an examination in a course/block/clerkship and does not have permission from the proper authority as outlined in the document entitled "Rules of Classroom Activities" will receive a grade of 0 on the examination and a Final grade of U/F for the course/block/theme/clerkship.
- When a final grade of U has been submitted, remediation may be permitted as outlined in Policy for Remediation.

### D. Operation of Promotions Committee

- The Dean, or the Dean's designee, shall appoint the Chair, Vice Chair, and members of each Promotions Committee. Neither the Chair nor the Vice Chair need be a course/block/theme or clerkship director.

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- Voting members of the Promotions Committee shall, generally, be drawn from among the course directors, block leaders, clerkship directors and other faculty actively engaged in undergraduate medical education.
- Members of the Academic Governing Council may serve on the Promotions Committees only if they are themselves course or clerkship directors.
- Non-voting members are regularly invited guests including, but not limited to, the Senior Associate Dean of Academic Administration, Associate Dean for Medical Education, Assistant Dean for Phase 1 Medical Education, Associate Dean for Student Affairs, Assistant Dean for Curriculum Assessment, Assistant Dean for Accreditation Compliance, Advising Deans, Director of Student Affairs, Registrar and Associate Registrar.
- The Promotions Committee shall meet monthly or as needed.
- A quorum, defined as one-half of the voting membership of the Committee, plus one, must be present for the Committee to conduct official business. In absence of a quorum, the Senior Associate Dean of Academic Affairs or the Associate Dean of Medical Education may be considered a voting member.
- Decisions of the committee are made by a majority vote of the members present at an official meeting
- The Promotions Committee will act on all grades for Phase 2, Phase 3 (Year 3 and Year 4) to assign appropriate actions.
- For Phase 1 of the curriculum, designation of Academic Concern and Academic Warning will be decided by the Chair and Vice Chair of the Promotions Committee and the Assistant Dean of Phase 1 Medical Education.
- The Promotions Committee will act on adverse actions such as Probation status and repeat of year with final grades for Phase 1 of the curriculum.
- Promotions Committee actions will be promptly communicated to the student and respective Advising Dean after each meeting.

### **E. Actions of Promotions Committee**

- **Academic Concern:**
  - **New Curriculum:**
    - A letter of Academic Concern may be based on an INTERIM failing performance in the first half of one academic block
  - The letter should indicate the meaning of Academic Concern and urge the student to meet with the Learning Specialist, their Advising Dean, the Assistant Dean for Wellness, and/or a mental health provider, as appropriate. A psycho-educational evaluation may be appropriate for some students, and this can be facilitated by Student Psychological Services.

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- A copy of this letter will be sent to the student's Advising Dean and will become a part of the student's record.
- No remediation is needed for Academic Concern
  
- **Academic Warning:**
  - **Traditional Curriculum:**
    - A letter of Academic Warning may be based on a grade of M in any Year 3 or Year 4 clerkship
  - **New Curriculum:**
    - A letter of Academic Warning may be based on continued failing performance on exams after the midterm, but before the final exam, in a block OR failing performance at the midterm of a block containing only two (2) exams.
  - A letter of Academic Warning will indicate that the student is in academic jeopardy and that continued performance at that level could lead to the student being placed on Academic Probation.
  - The letter should indicate the meaning of Academic Warning and urge the student to meet with the Learning Specialist, their Advising Dean, the Assistant Dean for Wellness, and/or a mental health provider, as appropriate. A psycho-educational evaluation may be appropriate for some students, and this can be facilitated by Student Psychological Services.
  - A copy of the letter will be sent to the student's Advising Dean and will become a part of the student's record.
  - No remediation is needed for Academic Warning
  
- **Academic Probation:**
  - **Traditional Curriculum:**
    - A letter of Academic Probation may be based on one or more FINAL grades of U in a clerkship or two or more M grades in clerkships.
    - Decisions of the Promotions Committee will include one of the following:
      - For one final grade of U or two M grades in Year 3 or Year 4, the student will remediate the clerkship designated by the Promotions Committee after completion of the year at a time and manner determined by the clerkship in consultation with the Associate Dean for Medical Education
      - For more than one final grade of U or more than two M grades in Year 3 or Year 4, the student will repeat the year in its entirety. This will require the student to delay graduation by one year.

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- The Promotions Committee may choose not to offer remediation if it considers the deficiency to be one that is not amenable to remediation.
- Probationary status will continue until the end of the academic year, at which time the Promotions Committee should make one of the following determinations:
  - That the student, having achieved satisfactory grades in all other clerkships and has successfully remediated unsatisfactory clerkships, should be removed from probation and promoted to the next academic year OR
  - In exceptional circumstances, the student should be promoted to the next academic year but remain on probation
- **New Curriculum:**
  - A letter of Academic Probation may be based on a final grade of Fail (F) in a block/course in the Phase 1 of the curriculum OR accumulation of more than one incomplete with Academic Concern and/or Academic Warning designation
  - Once a determination of Academic Probation has been decided, a letter to the student will indicate one of the following:
    - For one final grade of Fail (F) in block/course in Phase 1, the student will remediate the block/course during the summer or prior to Step 1 dedicated review period
    - For two final grades of Fail (F) in block/courses (August to May of Year 1 OR August to December of Year 2) in Phase 1, the student may remediate two blocks or have to repeat the August to May of Year 1 OR August to December of Year 2 of the Phase 1 curriculum with the next class.
    - For more than two final grades of Fail (F) in block/courses in Year 1 of the Phase 1 curriculum, the student may need to repeat the entire year
    - For more than one incomplete with the designation of Academic Concern and/or Academic Warning in Phase 1 of the curriculum, the student may need to repeat the entire year.
    - The Promotions Committee may choose not to offer remediation if it considers the deficiency to be one that is not amenable to remediation.
  - Probationary status will continue until the end of the academic year, at which time the Promotions Committee should make one of the following determinations:

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- The student, having continued to do failing work in more than two block/courses, should repeat the academic year OR
  - The student, having continued to do failing work in more than two block/courses, should be dismissed OR
  - The student, having achieved satisfactory grades in all other block/courses and successfully remediated failing block/course, should be removed from probation, and promoted to the next academic year OR
  - In exceptional circumstances, the student should be promoted to the next academic year but remain on probation
- A letter of Academic Probation will be sent to the student to indicate the action of the Promotions Committee.
  - The letter should indicate the meaning of Academic Probation and urge the student to meet with the Learning Specialist, their Advising Dean, the Assistant Dean for Wellness, and/or a mental health provider, as appropriate. A psycho-educational evaluation may be appropriate for some students, and this can be facilitated by Student Psychological Services.
  - A copy of the letter will be sent to the student's Advising Dean and will become a part of the student's record.
  - No remediation is needed for Academic Warning
  - Students who have been on Academic or Non-academic probation must receive permission from the Promotions Committee to do away electives.
- **Non-Academic Concern, Warning or Probation:** The Status of Non-Academic Concern, Warning or Probation shall be based on reports relating to attendance, attitude, integrity and ethical conduct, or other measures of professional conduct.
    - Course/Block or Clerkship Directors may write a letter to the Promotions Committee outlining non-academic issues relating to attitude, integrity and/or ethical conduct of professionalism. Supporting data must be documented and sent with the letter. Supporting data can include, but is not limited to, feedback, emails, supporting letters from faculty/staff/peers, timestamps, photos/videos, etc.
    - The Promotions Committee will issue a letter of non-academic status after determining the severity and pattern of unprofessional behavior.
    - The Committee may also recommend to the Dean or the Dean's designee that such behavior be investigated for possible disciplinary action, which may include dismissal.
    - The Committee may require the student to undergo an Administrative Psychiatric Evaluation.
    - Students who have been on Non-Academic Probation must receive permission from the Promotions Committee to do away electives

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## F. Remediation Policies

Remediation of Unsatisfactory (U), Fail (F), and Marginal (M) grades:

- Remediation of an Unsatisfactory (U), Fail (F), or Marginal (M) grade may be accomplished, at the discretion of the Promotions Committee, as described above, by reexaminations or other required remedial work to be determined by course/block leaders. The opportunity to remediate may be granted only by action of the Promotions Committee.
  - a) Students in Phase 1 of the new curriculum may be granted the opportunity to remediate no more than two grades of F
  - b) In the third and fourth years a student may be granted the opportunity to remediate an M or U grade in no more than one clerkship.
  
- **Guidelines for the administration of reexamination:**
  - a) In Phase 1 of the curriculum, the remediation of a block/course will require a written examination that may include a practicum. The reexamination will be comparable in form and degree of difficulty to that administered in the block/course/theme.
    1. In the Phase 1 curriculum, a student may not be reexamined earlier than three (3) weeks after the end of the year. If a student is required to remediate two courses/blocks, a second three-week period is allocated for this purpose.
    2. Remediation and reexamination shall take precedence over any other summer plans a student shall have made.
    3. A student shall be entitled to only one opportunity to be reexamined in any one course/block per year.
    4. For successful remediation, the student must achieve a score determined by the block leaders. If the student is successful upon reexamination, the transcript will show the original grade/pass (e.g., “F/P”).
    5. Unsuccessful remediation may result in a student repeating the year or dismissal by the Promotions Committee. The transcript will show the original grade/fail (e.g., “U/F”, “F/F”)
  - b) In the third and fourth years, remediation will be determined by the Promotions Committee in collaboration with the student’s Clerkship Director and the Associate Dean for Medical Education upon consideration of the nature and extent of the deficiency. Students may be asked to take an exam over or repeat any portion(s) or all components of a clerkship.
    1. The student may be required to repeat the entire clerkship.



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2. Upon completion of the remedial work, the transcript will show the original grade/pass (e.g., “U/P”).
  3. Unsuccessful remediation of the clerkship may result in repeat of the year or dismissal by the Promotions Committee. The transcript will show the original grade/fail (e.g., “U/F”).
- c) Removal from Academic Probation and continual academic probation status may only be accomplished as described for remediation and by action of the Promotions Committee.
1. In Phase 1 of the curriculum, the course/block in which reexaminations will be taken, will be determined by the Chair of the Promotions Committee and the course/block directors in which the student obtained a F grade. Reexamination will be allowed in no more than two course/blocks. Failure to remediate F grades successfully will necessitate repetition of the year in its entirety, if permitted by the Promotions Committee.
  2. In years three and four a student may only remediate one clerkship, if permitted by the Promotions Committee.
- **Guidelines for students repeating a year:**
- a) In the Phase 1 curriculum, the Promotions Committee may consider the following guidelines:
    1. Students receiving failing scores midway through a block will be placed on academic Warning instead of Academic Concern during a repeat year
    2. Students may be dismissed upon receipt of a grade of F in a course/block during the repeat year.
  - b) For students **repeating** a clinical year, the Promotions Committee may consider the following guidelines:
    1. Students may be dismissed upon receipt of a grade of U or more than one grade of M in clerkships
    2. Students may be granted an opportunity to remediate one M grade.
  - c) Students matriculated for the MD degree at Albany Medical College will not be permitted to repeat more than one of the four academic year in the traditional curriculum or more than one of the three academic phases in the new curriculum.

## **G. Promotion to the Next Year**

Upon completion of each academic year students who have successfully completed all academic requirements will be considered for promotion to the next year or for graduation.

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## **H. Appeal of Repetition or Dismissal Decisions**

When the Promotions Committee determines that a student must repeat an academic year, or be dismissed, that student shall be notified in writing and shall have ten (10) business days in which to present, in writing to the Promotions Committee, reasons why its determination should not be carried out. During this period, the student may request a personal conference with an Ad Hoc subcommittee of the Promotions Committee. Such request shall be submitted to the Chair in writing. In such cases, a subcommittee of three regular members of the Promotions Committee will be appointed by the Chair. The Chair, as appropriate, will be guided by the involvement of the individual members of the Promotions Committee in the matters at hand when selecting the members of the Subcommittee. The Subcommittee will report its findings to the Promotions Committee for consideration during Promotions Committee deliberations. There will be no hearing before the entire Promotions Committee. The Promotions Committee will rule on the appeal no later than its next regularly scheduled meeting. The final determination of the Promotions Committee shall be forwarded for implementation to the Office of the Dean or Dean's Designee. After notification of the final determination by the Promotions Committee, the student may request in writing that the case be reviewed by the Committee on Student Appeals.

## **I. Committee on Student Appeals**

1. The Committee on Student Appeals shall consider appeals from students of sanctions imposed by the Academic Governing Council, the Promotions Committee, the interaction of the Student Honor Committee and the Dean pursuant to the Student Honor Committee recommendations, or a Disciplinary Hearing Panel. The Committee on Student Appeals may, in its sole discretion, decide whether to hear the appeal and, if so, whether to hear it in depth as provided in paragraph C immediately below or conduct a formal hearing. At a minimum, however, the Committee shall consider the student record as well as any relevant substantive information the student may offer within his or her appeal request.
2. The Committee shall be a subcommittee of the Academic Governing Council, appointed by and serving at the pleasure of the Dean, and shall be composed of five (5) members of that Council, and chaired by one of these members as designated by the Dean. In order to provide the appropriate continuity in the deliberations of this standing committee, there will be no fixed terms for its members. Membership shall, however, be reviewed annually by the Dean and the Senior Associate Dean of Academic Administration.
3. A diligent effort shall be made to schedule a meeting of the Committee on Student Appeals not less than three (3) nor more than twelve (12) business days following actual receipt of the student's request for an appeal.

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4. The Committee on Student Appeals shall not conduct its business in an adversarial fashion. If the Committee exercises its discretion to hear the appeal in depth, it shall consider only the written material submitted by the student, written documentation from the Promotions Committee, the student record, and in some cases additional information collected by the Committee in connection with any formal, non- adversarial hearing it may convene, or any personal appearance by the student or any other person(s) the Committee or its designee(s) may decide to interview. The Committee may only consider the following questions to guide its deliberations:
  - a) Were the requisite sanction procedures followed appropriately up to the time of the appeal? Is there any potentially useful evidence that had not been available for consideration?
  - b) Was the sanction imposed in good faith and neither arbitrary, capricious nor clearly unreasonable?
5. On appeals from actions of the Promotions Committee, the Committee on Student Appeals shall report within 24 hours, in writing, the results of its determination to the Senior Associate Dean of Academic Administration for implementation. The Senior Associate Dean shall notify the student involved.
6. On appeals from actions of the Academic Governing Council, Student Honor Committee, or Disciplinary Hearing Panel, the Committee on Student Appeals shall report within 24 hours, in writing, the results of its determination to the Senior Associate Dean of Academic Administration or the Dean's designated representative and the student(s) involved.
7. If it has considered the appeal in depth, the Committee on Student Appeals shall report separately on each of the three questions it is to consider (Items C1, 2, 3) and may confirm the prior action or recommend to the Dean or the Dean's designee a rehearing of the case by the initiating body, a modification of the determination, or a modification of any sanctions imposed.
8. The Dean shall then make final and binding disposition of the matter concerning Academic Governing Council actions, Student Honor Committee actions, and Disciplinary Hearing Panel actions.

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**J. Disciplinary Hearing Panels**

There will occasionally be incidents or reports of conduct on the part of a student occurring outside the academic realm or usual purview of Albany Medical Center that cannot be resolved through interaction of the Promotions Committee or the Student Honor Committee and that may raise serious questions about the fitness of the student to continue in the study and eventual practice or teaching of medicine. Such matters shall first be referred to the Dean or the Dean's designee, who shall undertake an investigation, with which the student shall be required to fully cooperate, and thereafter recommend appropriate action. If that recommendation is for dismissal, or if the Dean or the Dean's designee considers the matter of sufficient moment, the Dean or the Dean's designee may convene a disciplinary hearing panel to consider all aspects of the matter. The subject student is entitled to a hearing before a Disciplinary Hearing Panel (DHP) under these circumstances in order to present his or her case. The student must make a written request for a DHP hearing within five (5) business days of such recommendation or be deemed to have waived it.

The DHP shall consist of seven (7) members as follows: three (3) faculty members of the Academic Governing Council, three (3) other faculty, and the President of the Student Council. If a quorum of five (5) faculty members of the DHP is not available, the Dean may appoint ad hoc members for a meeting. If the President of the Student Council is unable to attend a meeting, the Vice President of the Student Council may substitute. The Dean shall appoint a Chair from the membership for each case.

Faculty members of the DHP shall serve three-year terms with two members being replaced each year. In order to establish this rotation, the Committee shall initially have two (2) faculty members serving one-year terms, two (2) serving two-year terms, and two (2) serving three-year terms. No member of the Committee may serve more than two (2) consecutive terms.

To derive sufficient information upon which to base a recommendation, the DHP may interview the student and any other person appropriate to the matter at hand.

The DHP hearing shall be conducted in most cases according to the following general guidelines, which shall be subject to adjustment at the reasonable discretion of the Chair.

1. A reasonable attempt shall be made to notify the student in writing by personal delivery or by certified mail to his or her last local address as shown in the records of the College that the DHP will conduct a hearing. The notice shall contain a full and fair summary of the information or charges against the student, sufficient to enable the student to formulate a response, as well as notice as to the date, time and location of the hearing.

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2. A diligent effort shall be made to schedule the hearing not less than seven (7) nor more than twenty-one (21) business days following personal delivery or certified mailing of the notice.
3. The notice of the hearing shall (through sending the student these guidelines) inform the student of the following:
  - a) The student has the right to be present at the hearing and is, in fact, is expected to be present.
  - b) The student may be accompanied at the hearing by legal counsel (one person) and, in addition, by his or her faculty advisor. The legal counsel may confer with and advise the student but may not interfere with or participate in the proceedings. The student's counsel shall not interview witnesses.
  - c) The College may have legal counsel present to confer with and advise the Committee and College personnel, but such counsel may not interfere with the proceedings and shall not interview witnesses.
  - d) A record or transcript will be made of the hearing and the student has the right to review such record or to obtain a copy or copies of such record upon payment of the cost of its reproduction.
  - e) The student has the right to present such evidence, testimony, affidavits, exhibits, and witnesses as are relevant to the stated purposes of the hearing or to the charges upon which the recommendation for the hearing was based.
  - f) Prior to the hearing, the student has the right to review his or her official Student Record as defined by applicable law and any additional material upon which the recommendation for the hearing has been based. Copies of items in the student record and copies of other pertinent materials may be obtained by the student upon payment of the reproduction costs.
4. Upon completion of the evidentiary portion of the hearing, the DHP shall proceed in executive session to determine the validity of the charge(s) and to recommend to the Dean appropriate action, as decided by simple majority vote. A minority report may, if desired, also be presented to the Dean. The minutes of the DHP in executive session shall not constitute part of the record of the hearing. Only the vote reached in such a session shall be included in the record. If a request is made for a minority report to the Dean, that fact, too, shall be included.

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5. The recommendation of the DHP shall be transmitted in writing within 72 hours of the adjournment of the executive session of the hearing to the Dean and to the student(s) involved. The letter of notification to the student shall inform him or her of the right to apply in writing within seven (7) days to the Chairman of the Committee on Student Appeals for permission to appeal the decision of the DHP. Failure to submit such application within the specified time period shall constitute a waiver of the student's right to further appeal.

## **K. Interim Actions**

At any time during the preliminary investigation process, the hearing process or the appeals process, the Dean or the Dean's designee may suspend or remove a student from normal academic activities if such action is deemed to be in the interest of maintaining the normal function and atmosphere of the College. Such suspension or removal shall automatically be reviewed at the time of the next proceeding in any case and a recommendation for its continuation or termination made to the Dean.

Upon recommendation of any of the individuals or committees listed below, the Dean or the Dean's designee may require appropriate educational, psychometric, psychiatric, or medical evaluation of a student in order to help determine his or her academic, behavioral, or emotional fitness for continuation as a medical student:

1. The Senior Associate Dean of Academic Administration
2. The Associate Dean for Student Affairs
3. A Promotions Committee
4. The Disciplinary Hearing Panel
5. The Committee on Student Appeals