



THIS BOOK BELONGS TO:

STREET ADDRESS, CITY, STATE, ZIP

TELEPHONE / EMAIL

Notes:

WELCOME TO THE UNIVERSITY— MESSAGE FROM THE DEAN

Welcome to “America’s Medical School”—the F. Edward Hébert School of Medicine at the Uniformed Services University of the Health Sciences. This phrase is more than a slogan; it is an expression of our commitment to the citizens of the United States, our fellow men and women in uniform and to all who go in harm’s way. Our students are drawn from across the nation and serve around the world. Our more than 5,000 USU alumni have made remarkable contributions through patient care, research, teaching, and leadership. As a graduate of USU, you will too.

USU is more than a medical school. We are the leadership academy for American medicine. In addition to mastering the same curriculum every medical student learns; you’ll acquire the skills to be a highly effective medical officer in the Army, Navy, Air Force or Public Health Service. Our goal is to prepare you to be an outstanding clinician in any setting—from a tertiary care military hospital to a refugee camp.

You won’t make this transition alone. You’ll be taught by an exceptional faculty, assisted by a highly capable staff, and regularly interact with military officers and enlisted personnel who consider your education and professional development (and that of your nursing, dental and graduate student peers) their most important responsibility. At USU, education isn’t a solitary pursuit; it is a team sport.

The pages of this handbook are packed with information to help you on this journey, from the School’s honor code, to information about student affairs, academics, the military, and student travel. Take time to become familiar with this material so you know how to find what you need.

In the weeks and years to come, your class will experience extraordinary changes together. Along the way, make sure you look out for each other. The exceptional men and women who comprise your class represent the diversity of backgrounds, disciplines, and cultures that make America great. You’ll learn as much from each other as you do from us. You and your classmates will likely work together long past medical school as you become part of the finest military healthcare system in the world.

Throughout it all, remember why you are here. It’s not to make a particular grade or generate a top score on a particular test. It’s to acquire the knowledge, skills and values you’ll need to be an exceptional officer, and provide outstanding care to your patients—the men and women of our Armed Forces, their families, and military retirees. They deserve nothing less than your best.

Arthur L. Kellermann, MD, MPH

Dean, F. Edward Hébert School of Medicine—“America’s Medical School”

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Academic Calendars may be viewed at
<http://www.usuhs.edu/students>

OATH OF HIPPOCRATES

I ... do solemnly swear

That I will be loyal to the profession of medicine and just and generous to its members, that I will lead my life and practice my art in uprightness and honor;

That into whatever home I shall enter it shall be for the good of the sick and the well to the utmost of my power and that I will hold myself aloof from wrong and from corruption and from the tempting of others to vice;

That I will exercise my art solely for the cure of my patients and the prevention of disease and will give no drugs and perform no operation for a criminal purpose nor suggest such a thing;

That whatsoever I shall see or hear of the lives of men which is not fitting to be spoken, I will keep inviolably secret;

These things I do promise and in proportion as I am faithful to this oath, may happiness and good repute be ever mine, the opposite if I shall be forsworn.

COMMISSIONING OATHS OF ARMY, NAVY, AIR FORCE, AND PUBLIC HEALTH SERVICE OFFICERS

I ... do solemnly swear

That I will support and defend the Constitution of the United States against all enemies, foreign and domestic;

That I will bear true faith and allegiance to the same;

That I take this obligation freely, without any mental reservation or purpose of evasion;

And that I will well and faithfully discharge the duties of the office upon which I am about to enter,

So help me God,

PROFESSIONAL DUTY

The uniformed and medical professions traditionally have enjoyed a highly respected position in our society. Being commissioned as an officer in one of the uniformed services and having matriculated at the Uniformed Services University of the Health Sciences, you are uniquely vested as both a uniformed and a medical professional. As such, you have rightfully been identified as having a combination of natural and acquired gifts that place you among those who must exercise extraordinary responsibility to all people, organizations, and communities wherever you may serve. Therefore you are not only expected to exceed common standards for exercising your role in society, but will be measured against these higher standards throughout your career.

As an officer and student in the School of Medicine, you are expected to embrace the values, practices, and professional behaviors outlined in the following documents:

- The Oath you have already received when commissioned to a uniformed service
- The Oath of Hippocrates
- The Professional and Officership Objectives outlined in the F. Edward Hébert School of Medicine Objectives of the Medical Student Educational Program
- The Uniformed Code of Military Justice (UCMJ)
- The USUHS School of Medicine Honor Code

The professional attributes that are expected of all USUHS medical students can be broadly remembered by the mnemonic **PROFESSIONAL**:

- **Personal courage** for both physicians and officers is the ability to interpret, investigate, and analyze potential courses of action and the mental or moral fortitude to follow that course through to completion.
- **Respect** for others including patients, families, fellow students, faculty, paraprofessionals, the military chain of command, institutional employees, and professional colleagues.
- **Openness** is being receptive to new or different diagnostic or therapeutic plans about caring for patients that are espoused by colleagues, nurses, and other paraprofessionals leading to a culture of teamwork.
- **Fairness** is the responsibility of uniformed caregivers to advocate for and be responsive to the needs of our patients, in particular those who are disadvantaged by virtue of their economic status, age, gender, religion, or mental or physical impairment.
- **Empathy** for all who may be in need, especially your patients, their families, and your classmates is an indispensable element of professionalism.
- **Self-improvement** entails a commitment to your education and lifelong learning, accompanied by ongoing self-assessment directed at achieving sustained excellence in patient care.
- **Social responsibility** encompasses the idea that societies place physicians in unique positions with the ability to influence our patients' and their families' wellbeing. Physicians must conduct themselves in ways that are worthy of trust.
- **Integrity and honor** form the critical core of your professional identity and define standards of behavior demanded by personal, professional, and uniformed codes. For students this means honesty in all academic and clinical work, strict adherence to the student honor code, and the absolute rejection of any action that may compromise the welfare of your patients, fellow students, and institution.
- **Officership** is a learned set of principles and values that guide an officer's judgment, decisions, behavior, philosophy, and vision. While the list of principles and values that contribute to officership may vary, the expectation is that our medical students will hone and develop some of these principles while at USUHS.
- **Non-judgmental** is an essential characteristic of uniformed caregivers so that they can advocate for and be responsive to the needs of their patients, in particular those who are discriminated against by virtue of their economic status, age, gender, religion, or mental or physical impairment.
- **Altruism** accompanied by compassion forms the essence of medical and military professionalism. Place the highest value to this characteristic.
- **Leadership** is the art of motivating a group of individuals to act toward achieving a common goal whether that is in the clinical or operational setting.

STUDENT AFFAIRS

THE OFFICE FOR STUDENT AFFAIRS

Student Affairs is a broadly conceived area in the School of Medicine, touching the life of every student from application through graduation and beyond. The Office of Admissions is charged with processing applications for review by the School of Medicine's Admissions Committee and subsequently notifying applicants of their acceptance to the university. The Office for Student Affairs serves as the official liaison between the student body and the university faculty and administration, along with serving various student needs in cognitive and non-cognitive areas of growth; it coordinates the School of Medicine's curriculum and educational programs, and oversees the academic performance of each medical student, and his or her preparation for graduate medical education. The Associate Dean for Student Affairs plays an integral role in the administration of these diverse but related functions, thus both supervising the quality of student life and representing the student body in the administration.

MISSION

To supervise the integrated academic program, professional formation, and quality of life for all students of medicine, while attending to both content and process. Particular attention is given to learning styles, role development, academic progress, clinical identity and expertise, and all matters regarding professional comportment.

VISION

Through our mentoring, policies, and practices, we are viewed by students of medicine as the organization that most thoroughly understands their personal and evolving professional dimension in their multiple roles as students, family members, individual persons, and members of a specific uniformed service and graduating class. Our consultation, interaction, and services contribute a significant foundational building block on the pathway to their final identity as a military physician.

GUIDING PRINCIPLES

Advocacy

We serve as the ombudsman for the student body. We make certain the student viewpoint and experience is a part of the administrative fabric of both the university and its school of medicine and the uniformed-service-specific organizations that affect professional development and career choice.

Access

We are available and "on call" every day of the year and are located in the Student Community Center where both formal and informal interaction can occur.

Timeliness

We respond immediately to student requests and issues with a primary sense of responsibility to get things done.

Communication

We act as an efficient and accurate switchboard to receive and funnel communication between students and their communities. In any case of emergency or crisis, we stop what we are doing and act to assist that particular student.

Understanding

We are responsible for actualizing the concept of role-reversal with students, so our perception of their perspective is always a central feature of our interactions.

Sensitivity

Faculty, staff, and students have feelings. We place great value on paying attention to each other's individuality and place in the system. In knowing each other and working together, we realize that negotiation, compromise, and adaptation are healthy for working and learning.

Patience

We take whatever time is necessary to listen, placing each student's issue in balance with whatever work we are doing. We do not place our interests ahead of a student's perception of need.

Discretion

We frequently deal with very private, personal, and confidential information about students. Respecting the privacy of students is a cornerstone of our professional comportment.

Knowledge

We know the university, the school of medicine, the local community, and all appropriate policies, procedures, rules, and regulations that affect students. We are willing to share our knowledge to help students navigate through the systems they encounter as a member of the academic, military, and local communities. If we don't know something, we will work to find the answers in a timely fashion.

Follow-through

In all actions, we make certain our involvement goes through the full course of working through the issue, including appropriate referrals.

RESPONSIBILITIES AND FUNCTION

The Office for Student Affairs is the official liaison between the student body and the university faculty and administration. The Student Affairs staff, together with student groups/leadership, faculty and staff, seek to foster and facilitate the university's growth by achieving balance and mutual understanding around the critical issues that impact on students. This goal places the primary office staff in the positions of counselors and interpreters for both students and administration in many significant areas determined by the experiences of working and learning together.

The Associate Dean for Student Affairs (ADSA) is responsible for supervising the quality of student life and, in an ombudsman role, is expected to understand and represent the student viewpoint whenever policy is made or needed. The ADSA serves on standing committees that directly affect students, including the Curriculum Committee, Student Promotions Committee, Awards Committee (Chair), and Board of Review for Interservice Transfers. The ADSA is also the Dean's staff representative in national organizations that have student involvement, such as the Association of American Medical Colleges (AAMC).

The Assistant Dean for Clinical Sciences (ADCS) coordinates the School of Medicine's curriculum and educational programs in the clinical years, the academic performance of students, and the subsequent graduate medical education of our students. Both the ADSA and the ADCS are responsible for the School of Medicine's academic standard in the clinical sciences as well as the continued personal and professional growth and development of individual students throughout their clinical years. As a result, the office provides the official liaison between students at the School of Medicine and the university faculty and administration in matters pertaining to clinical programs, and represents the university to all organizations regarding graduate medical education. The ADCS also serves on all standing committees that directly affect students, including the Admissions Committee, Curriculum Committee, Student Promotions Committee, and the Board of Review for Interservice Transfers.

The Assistant Dean for Academic Support Services (ADASS) directs the academic support program, providing services that address specific academic needs of the students. Services under this program range from time management and study skills training to developing an organized approach to preparation for United States Medical Licensure Examinations. The ADASS also serves as a liaison between students and module directors, and in this role is responsible for monitoring the academic progress of students in the Pre-Clerkship curriculum and for understanding and voicing student issues to faculty members. In keeping with the priorities of the Office for Student Affairs, the ADASS's primary concern is the quality of student life, and as such the ADASS's duties and responsibilities reflect current student issues and needs. The ADASS also directs the student activities program and coordinates the administration of various student support programs (i.e., Host, Sponsor, Orientation, and Awards) which fall under Student Affairs.

JULY - AUGUST 2014

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The Office for Student Affairs keeps up with students as the many new situations, responsibilities, challenges and stresses of medical school unfold and are confronted. Students have the major responsibility for managing their personal lives and for meeting the requirements of the School of Medicine. Student Affairs has the responsibility to assist them to realize their goals, thereby maximizing their potential for excellence as a physician, officer, and human being. A visible, pragmatic concern exists for the well-being and success of students. Student Affairs will interact with individuals and groups as indicated or requested, and services are available for assistance at any time.

GUIDANCE AND ASSISTANCE

Since the primary function of a medical school and its faculty is to provide a rich and stimulating environment for learning, the major concern of the Office for Student Affairs is to ensure that students are provided with appropriate opportunities throughout their medical school education to achieve their individual potential as future physicians. Such opportunities have been designed by each department—basic science and clinical—to promote and enhance the scholarly activity of our students.

The ADSA, with the assistance of the ADCS, provides general, day-to-day supervision of the integrated academic schedule for all students. The ADSA and ADCS work closely together so that every student has maximum opportunity to receive an outstanding medical education.

In order to help students achieve these goals, the Office supervises and reviews the overall academic performance and progress of students throughout their medical education, helps students individualize their Clerkship and Post-Clerkship curriculum, and provides guidance concerning student career plans and graduate medical education. Thus, the ADSA and ADCS are also responsible for writing the Medical Student Performance Evaluation (MSPE) for graduating students, and represent the university to each uniformed service's Office of Graduate Medical Education and Training.

In addition to academics, the Office for Student Affairs is intimately familiar with the many other facets of life as experienced by students during the four years of medical school. At one time or another, nearly everyone can feel overwhelmed, unusually stressed, disorganized or troubled because of personal, social, medical, or academic problems. The office staff is available to help students develop personal strategies for coping with these situations. This can range from simple advice to referral to various other individuals as appropriate.

Each academic department offers its own unique approach for those students experiencing course and study difficulties. Faculty are happy to consult with students, and believe that the earlier a problem is made visible and shared, the faster it will be solved. The Office for Student Affairs strongly supports the

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initiatives of each academic department and keeps in close communication as indicated. The office staff is also interested in counseling students on various approaches to handling objective examinations and improving study skills, and periodically provides workshops on developing these skills.

The office staff wants to help students mobilize themselves quickly and sensibly in times of personal crisis. The office is designed to be a safe and dependable place for sharing and discussion whenever it is needed.

STUDENT BODY ORGANIZATION AND CLASS LEADERSHIP AND GOVERNMENT

The Office for Student Affairs is responsible for facilitating and coordinating student government in the School of Medicine. The Student Advisory Council (SAC) is the primary executive body that represents student issues to the Dean, School of Medicine. In addition, each medical school class has its own slate of elected officers who have the responsibility for management of individual class issues. The Chair of the SAC and the individual class presidents are consulted frequently by the administration so the student viewpoint is a part of the decision-making process. Students are represented on several standing committees of the School of Medicine. A copy of the USU Medical Student Government Constitution and Bylaws is in this handbook.

STUDENT ACTIVITIES

The Office for Student Affairs also coordinates and facilitates many student activities, such as class welcome and orientation, meetings of student chapters of national organizations, social events, and all other organizational/club issues related to students. As each group forms its own organization and leadership, the Student Affairs staff assists to make everything a success and a source of pride for the university.

AVAILABILITY

The Office for Student Affairs is committed to enhancing the university's rich and stimulating environment for individual growth, development, and learning. One way to accomplish this is by simply being available, and the staff welcomes the opportunity to have students call upon them at any time. The Deans observe an "open door" policy, and they encourage students to stop by the office for informal visits.

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CAREER GUIDANCE AND PERSONAL DEVELOPMENT

Your professional and personal development as medical officer candidates is a matter of interest and responsibility for everyone at USU. Advising and supporting students throughout medical school—from the personal side to career guidance—is a multidimensional process involving the faculty, the several deans, and the military leadership. Students experience many challenges and changes during their time in medical school, beginning with the initial transition from college or previous profession, followed by study, training, development, graduation, and graduate medical education. Sensitivity to this ongoing and evolving process is a key ingredient of your medical education at USU. Students must cope with the present, and constantly look forward to their eventual identity as clinicians and uniformed officers. This section is intended to highlight information presented throughout this Handbook, so students can construct their preferred approach to professional guidance and personal support.

THE OFFICE FOR STUDENT AFFAIRS

During the Pre-Clerkship period of medical school, there is much focus on course and lab work, along with solid exposure to classic clinical medicine and military medicine. During this time, the Office for Student Affairs will be of unique importance to you. This office is primarily designed to assist in your transition into medical school, advise you on your academic/personal development as a physician, and counsel you about your progress. As such, the Associate Dean for Student Affairs (ADSA) supervises the boundaries between the students and their many responsibilities. The office willingly makes direct referrals to individuals who may further assist you and/or offer opportunities for exposure to areas of perceived interest.

Early in the clinical years, each student may meet with either the ADSA or the Assistant Dean for Clinical Sciences (ADCS) to develop individual career plans in clinical medicine. These discussions will continue throughout your clinical years and include the following topics: (1) needs and interests; (2) choosing your internship; (3) maximizing opportunities to enhance your selection for the internship of your choice; and (4) choosing your subsequent specialty training.

Counseling about general, everyday personal issues and the overall impact of the medical student role is also available through the Office for Student Affairs. Most matters that affect student life are well-known to the professionals in these offices, and the support of students is the centerpiece of our work. Some students may desire counseling services beyond the scope of these offices. In such situations, the offices will assist in referral to the University Health Center, where an extensive service network is available. Students may also access the Center directly.

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THE OFFICE OF THE COMMANDANT

The Commandant serves as the F. Edward Hébert School of Medicine senior military officer in charge of assigned students and is assisted by service-specific Company Commanders and Senior Enlisted Advisors. The Commandant reports to the Brigade Commander for issues of professionalism and chain of command accountability, and is an advisor to the Dean and the Associate Dean for Student Affairs.

The Brigade Commander is the senior military Commander of all active duty service members assigned to USU. The medical student battalion is an element of the USU Brigade. USU students work within academic departments and receive their academic direction from module directors. The Commandant and subordinate Commanders direct command/control issues and service-specific mandated programs for the university. Physical fitness, weight control, urinalysis drug testing, officer development and equal opportunity are examples of programs under Commandant direction. The Commandant and the Company Commanders carefully coordinate their actions, programs and requirements so they are compatible with the requirements of the Dean and each student's academic progress.

The Associate Dean for Student Affairs and the Commandant work closely together to provide students with every means possible for success in their combined role as officers and students of medicine.

Other university elements working for the President and/or Dean to provide direct support to students are: The offices of the Vice President, Recruitment and Admissions; General Counsel; Military Personnel; and others. Since all of these USU staff elements work in close concert, any of them can, without difficulty, direct students to the office most able to provide the needed support.

Under the Commandant, the Company Commanders are the service-specific commanders of the medical students. The Company Commander is one resource among many at USU, available as a military career counselor, sounding board, source of information about military and school functions, and a facilitator of administrative requirements. The Company Commanders each may hold academic appointments and teach leadership and other subjects both in the classroom and during field exercises.

THE FACULTY

The faculty has major interest in and impact on your development, and they are extensively available for advice and counsel in the pre-clinical and clinical sciences. Faculty in each basic science department are available and interested in directly advising students about the (1) professional nature of the discipline; (2) research opportunities in the discipline; and (3) approaches to mastering knowledge of the discipline. Basic science faculty in general and module directors in particular are available for consultation by direct access.

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Clinical faculty members appear early in the curriculum as teachers and are initial role models with whom students can identify. During the Pre-Clerkship period of medical school, students have extensive exposure to clinicians in small and large group settings. Students are always welcome to discuss professional development with any of these faculty members. Here, too, the Deans work closely with faculty members and students to bridge your transition into the clinical years by individual meetings and a series of presentations to the entire class. This lays an initial foundation for decision making about building a clinical career pathway. Students have ample opportunities to meet the individual specialty clerkship directors, who are always available for discussion of professional matters, the clinical curricula, and graduate medical education in general.

OFFICE OF THE BRIGADE CHAPLAIN

Welcome to the F. Edward Hébert School of Medicine. We hope to support you and your family's faith while you prepare to serve. We may assist you by:

- Helping you locate a place of worship—military or civilian,
- Leading, offering advice, and assisting in weddings and other ceremonies,
- Providing or recommending types of religious instruction,
- Providing pastoral care,
- Providing pastoral counseling—personal, military, leadership, moral, ethical, religious, crisis, grief, pre-marriage, marriage, etc.

Your free exercise of religion is a constitutional right. We facilitate this right for military personnel and their families. The Chaplain and Religious Programs Specialist support the Brigade Commander's religious program. We also seek to assist in your individual faith needs as well. Please let us know if you have any religious accommodation requirements or questions for which you need help.

Since the University mission revolves around our students, so does the design of our religious program. Several faith-specific student associations are currently formed and others can form as needed. Assisting you in taking leadership positions in these groups is very important to us.

We want to support your spiritual growth while you are in medical school. If something is distracting you from doing this, your chaplain is a safe and caring place to start. We have plenty of potential resources to help, regardless of your faith group.

We are located near the Building C lobby, in Room C1099, phone: (b)(6). For more information or questions, our website is at www.usuhs.edu/bde/chaplain.html.

SEPTEMBER 2014

MONDAY 1

September

Labor Day

TUESDAY 2

WEDNESDAY 3

THURSDAY 4

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SATURDAY 6

SUNDAY 7

Grandparent's Day

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YOUR PEERS

It is also important to clearly recognize that students' helping other students is a valuable and healthy process. The bonding of the student body creates a supportive network that nourishes the well-being of everyone. In addition to the regular bonding that helps everyone meet the daily challenges of a medical education, USU students play an important role in helping classmates who are experiencing difficulties. The Peer Development and Consultation Committee (PDCC) is one example of a student-led organization which provides responsive support in a variety of personal and professional situations.

CONCLUSION

These are some of the ways in which USU demonstrates its important role in supporting your development, not only as medical students, but also as individuals. Each of you, in turn, must recognize that your professional and personal development is your major responsibility. As modules and clerkships pass by, your attention to these matters—the broader concepts of a medical education—is just as important as your studies. While there are many responsibilities in the present, you must constantly prepare for the future. The staff, faculty and your peers are accessible and available for consultation and advice. Use them often!

SEPTEMBER 2014

MONDAY 8

TUESDAY 9

WEDNESDAY 10

THURSDAY 11

Patriot Day

FRIDAY 12

SATURDAY 13

SUNDAY 14

AUGUST 2014						
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THE HONOR SYSTEM AND YOUR PERSONAL INTEGRITY

PHILOSOPHY

As a commissioned officer of the United States, and a candidate for the degree Doctor of Medicine, USU medical students are subject to the highest possible standards of integrity and must demonstrate uncompromising personal comportment in their relationships with each other, the faculty and staff, patients, people in general and institutions. Medical officer candidates serve having sworn their pledge to the commissioning oath and the Oath of Hippocrates. In addition, general standards for conduct, academic integrity and personal behavior are clearly defined in the guidance provided in two major documents: (1) The Uniform Code of Military Justice [Appendix 2, Subchapter X], and (2) USUHS DPM-004-2014: “USUHS School of Medicine Medical Student Promotions Committee” (June 9, 2014). These documents, along with the USU Honor Code, provide a unifying theme of guidance to give the USU Community an environment of quality and mutual respect that nourishes the study/practice of medicine and science, and the development of officership. Maintaining such an environment requires the active engagement of all students in this process; passivity—leaving it to someone else—undermines the momentum that makes our community flourish!

At USU the honor system is not an isolated program solely directed at academic matters. Honor and personal integrity are the foundational elements of commissioned officership and the study and practice of medicine, and represent a signature essential feature of personal and professional identity.

TERMS

The following paragraphs are designed to provide students with information about matters specific to the study of medicine in classroom, laboratory and clinical settings.

Student Promotions Committee (SPC): The SPC is the official School of Medicine body that reviews matters of serious concern for violations of personal integrity and professional comportment. USUHS DPM-004-2014 (cited previously) charges the SPC with the responsibility for reviewing cognitive and non-cognitive performance.

Cognitive Performance: Skills and behaviors judged by objective examination and evaluation procedures.

Non-Cognitive Performance: Skills, behaviors, attitudes, and attributes that, while seldom susceptible to the usual objective examination and assessment procedures, are judged by the faculty to be important for success as a physician. They include such areas as honesty, professional and academic

SEPTEMBER 2014

MONDAY 15

TUESDAY 16

WEDNESDAY 17

Citizenship Day

THURSDAY 18

FRIDAY 19

SATURDAY 20

SUNDAY 21

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integrity, reliability, perception, sensitivity, balanced judgment, personal insight, and the ability to relate to others.

Minimum Expectations: USUHS DPM-004-2014 contains the following specific guidance about examinations and academic work:

“Students may not:

- 1) Use, attempt to use, or copy any unauthorized materials/aides during any examination or graded exercise in any setting to include classroom, laboratory, simulation center, clinical environment or field training.
- 2) Knowingly provide false information in any academic or clinical document or exercise.
- 3) Knowingly present someone else’s work as his/hers.
- 4) Forge or alter for expediency or advantage any academic or clinical document.
- 5) Knowingly disregard instructions for proper performance in any examination or graded exercise.
- 6) Intentionally impede or interfere with the ability of fellow medical students to use academic, clinical or research materials to complete required assignments.
- 7) Make any attempt to compare answers with any form of examination of another medical student. In particular, during an active examination sequence of hours or days when students are examined in rotating groups or time periods, examination contents may not be shared or discussed.
- 8) Download copyrighted material into a personal work product presented as one’s own.
- 9) Knowingly assist a fellow student in any of the activities described above.”

The USU Honor Code

“We do not lie, cheat, or steal, nor do we tolerate those who do.”

Rules of Thumb (*Adapted from the United States Military Academy at West Point, with permission*)

- 1) Does this action deceive anyone, or allow anyone to be deceived?
- 2) Does this action gain or allow the gain of privilege or advantage to which I or someone else would not otherwise be entitled?
- 3) Would I be dissatisfied by the outcome if I were on the receiving end of this action?
- 4) Is this action in keeping with the highest standards of my profession?

MONDAY 22

TUESDAY 23

Fall begins

WEDNESDAY 24

Rosh Hashanah
begins at sundown

THURSDAY 25

FRIDAY 26

SATURDAY 27

SUNDAY 28

SEPTEMBER 2014

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Guiding Principles

As commissioned officers in the Uniformed Services and/or candidates for degrees in the biomedical sciences, medical students in the F. Edward Hébert School of Medicine—America's Medical School—are subject to the highest possible standards of integrity and must demonstrate uncompromising personal comportment in their relationships with each other, the faculty and staff, patients, people in general, and institutions. This Honor Code forms the baseline of our Honor System. This System is student-owned and run, and largely student-enforced. The System consists of this Code and a school of medicine culture which encourages honor in all actions. The Code is intended to guide behaviors and choices both in and out of the classroom. The Code is not intended to supersede the UCMJ, only to complement it. The Honor Code is not a professional code of ethics, and as such, does not specify how officers and professionals must behave. Following this Code is, however, part of the minimum standard for officership and professionalism.

The School of Medicine Honor Code is intended to foster a collaborative environment wherein students help each other to make the right decisions. The military and the biomedical professions have a high standard for integrity, and all students are expected to meet it. Living honorably is an important part of our culture. It is the foundation of professional trust among colleagues. Our Honor Code simply states that a USU School of Medicine student must never lie, cheat or steal, nor tolerate those who do. Living by this Code should be a baseline for all those in the biomedical professions.

Architecture of the Honor System

The architecture described below preserves student involvement in and ownership of the Honor Code to the maximum extent possible, while maintaining appropriate oversight and authority of academic and military leadership. Student ownership of the Honor Code is meant to facilitate a culture where Honor is valued, and where deviations from this norm are not tolerated by the student body.

All student Classes/Cohorts, in all educational programs in the School of Medicine, will elect two Honor Representatives (HR). These HRs will: 1) Educate their classes about the Honor Code, 2) Brief incoming students on what the Code means and how it should function, 3) Conduct continuing education briefings to their peers, 4) Serve as investigative officers of any potential violation of the Code, 5) Serve as impartial presenters during Honor Boards, as outlined below.

The mantra, borrowed from the Naval Academy, of “Observe, Confront, Report” should guide a student's actions upon witnessing a possible violation. A student who has observed or is aware of a potential violation should confront the offender to discuss what s/he saw or knows. If the accuser is uncomfortable with direct confrontation, s/he should approach the HRs with his/her concerns. If the students involved are unable to resolve the situation,

SEPTEMBER - OCTOBER 2014

MONDAY 29

TUESDAY 30

September

WEDNESDAY 1

October

THURSDAY 2

FRIDAY 3

Yom Kippur
begins at sundown

SATURDAY 4

SUNDAY 5

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the accused must be given the opportunity to report himself or herself to one of the class HRs. If the accused refuses, the accuser must do so. Faculty members who have concerns about a potential student violation of the Honor Code should notify the Class/Program HRs, and proceedings will occur as outlined below. The two HRs will decide which representative will take responsibility for the case, and that HR will investigate the matter thoroughly. When the HR is satisfied that s/he has collected all the details of the case, s/he will present them to the Class/Program President, who, together with the appropriate student-management authority, will determine whether an Honor Board needs to be convened. A Board will not be convened without the approval of the appropriate student-management authority. If an Honor Board is convened, it will consist of:

- 1) Four randomly-selected classmates/peers and two alternates: Those selected will be voting members of the board. Peers to the accused with respect to duty status and rank will be selected, e.g., all civilians for an accused GEO civilian student. Those selected will be interviewed by both HRs and by the accused student. The questions should be selected to determine whether there is bias for or against the accused student. Biased members will be dismissed.
- 2) Either the Class/Program President or Vice President: This individual serves as Chair of the board and will vote only in the event that a tie-breaking vote is needed. These two officers will decide amongst themselves whom will sit on a convened Board.
- 3) Faculty Advisor within the accused's program: This individual serves as a non-voting, advisory member.
- 4) The investigating HR as impartial presenter of facts before the Board: This individual serves as a non-voting member of the Board.

The accused has the right to refuse a hearing before an Honor Board. If a student exercises this right, findings from the investigating HR will be forwarded to the appropriate student management authority, and no board will take place. If the accused should desire a hearing, s/he is not required to make statements. However, remarks made may be cited at any subsequent disciplinary proceedings.

If convened, the Board will hear statements from the investigating HR, the accused, and any witnesses, including character witnesses, the investigating HR or accused may wish to call or present. After considering this information, the Board will vote on two things, based on a simple majority: 1) Honor code violation founded or not, 2) If a violation is founded, a recommendation to retain with remediation or consider disenrollment.

A vote to "consider disenrollment" is just that: a recommendation to the University to consider the action. Students do not have the authority to expel classmates. The vote is intended to serve as a statement of the severity with which the accused's peers—fellow students—view the offense, and its

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TUESDAY 7

WEDNESDAY 8

THURSDAY 9

FRIDAY 10

SATURDAY 11

SUNDAY 12

SEPTEMBER 2014

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potential impact on the School, the profession and future patients. Any action to pursue disenrollment will require review by the appropriate authorities within the School of Medicine.

The Board Chair, with the Board's assistance, will write a summary of findings, consisting of the Board's reasoning, concerns raised by Board members and the Board's sense of the student's potential for remediation. This summary will be sent to the respective program's student-management authority.

If the Board determines the accusation is founded, the Chair will present the Board's findings and recommendations to its respective Program's student-management authority. This authority (OSA or the Commandant for medical students, GEO for graduate students) may choose to forward cases to the Student Promotions Committee/Graduate Education Committee or for further military disciplinary action.

To educate the Class/Program about those behaviors deemed unacceptable by the Honor Board, HRs may inform the accused student's or future Classes/Cohorts of the Board's findings. This presentation will not refer to students by name and is intended as an educational experience for the Class/Program, rather than as an embarrassment for the student. The format and timing of these presentations will be left to the discretion of the HRs, but they will not be presented before all proceedings regarding the case are resolved within the University system. Every effort will be made to protect the identity of the individuals involved in the case.

All proceedings of an Honor Board will be confidential. Outside of official presentations to the affected Class/Program, cases will not be discussed with students who are not members of the Board. If a Board member is found to have discussed the case with a classmate after a Board, that person will be referred to the appropriate student-management authority for a violation of professionalism. Honor Board proceedings may not be discussed over email.

Honor Boards are not legal proceedings, and no punishment can result directly from them. As these boards are only intended to be used in situations where the UCMJ will not be used, UCMJ Article 31 (regarding protection from self-incrimination) does not apply. The Chair will not apply technical exclusionary rules of evidence followed in judicial proceedings nor entertain technical legal motions. Only testimony based on personal observation will be heard. Reasonable rules of relevance will guide the Chair in ruling on the introduction or presentation of evidence.

Roles and Responsibilities

Board Chair: Either the Class/Program President or Vice President. His/her initial function is to work with the HR to determine whether or not a Board need be convened. The Chair will work with the appropriate student management authority to devise a method for randomly selecting four class Members-at-large to sit on the Board. The Members-at-large will have the right to recuse themselves, and the accused will have the right to challenge

MONDAY 13

Columbus Day (observed)

Thanksgiving Day (Canada)

TUESDAY 14

WEDNESDAY 15

THURSDAY 16

FRIDAY 17

SATURDAY 18

SUNDAY 19

SEPTEMBER 2014

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any appointments. The Chair will cast the deciding vote if the Members-at-large vote is evenly split. S/he will decide when and where to hold the Board.

Members-at-large: Four randomly selected members of the class who will be present for the board, listen to the presentation from the HR, the accused, and witnesses. They will vote to determine the nature of the accusation, founded or not founded, and to recommend retention or disenrollment in the event of a founded accusation. They may recuse themselves, before a case begins, if they feel they are biased.

Honor Representative: S/he must keep the Class/Program President apprised of all on-going investigations. Prior to an Honor Board, the HR will gather information (to include written statements) about the case from all individuals involved. S/he will listen impartially to all sides and present a factual, non-biased case to the Board. S/he may call witnesses during the case, at the discretion of the Chair. S/he will also advise School/Program leadership in selecting a Faculty Advisor. S/he will provide all written evidence and the names of the Members-at-large and alternates to the accused student at least two business days prior to the day of the Board.

Faculty Advisor: To be selected by School/Program leadership, from a pool of faculty volunteers. The Faculty Advisor will be a non-voting, impartial member of the Board, free to offer advice at any time during the proceedings. S/he will also assist the Board in writing a summary of findings for those individuals whose accusations are founded.

Accused: S/he may present his/her side of the case before the Board. The accused may also challenge the appointment of any of the Members-at-large or of the Chair. In the event that the Chair is challenged, a Class Officer whom the accused student and the investigating HR both approve of will be appointed. The Chair of the Board and the Faculty Advisor will consider any challenges and decide whether to uphold them, with the Faculty Advisor having the final say. The accused may call witnesses as desired, at the discretion of the Chair. The student may ask a student advocate to attend the hearing but the advocate may not act in a manner similar to a defense attorney. The advocate may not question witnesses, introduce evidence, provide explanations for the behavior, etc. The student advocate may attend in an advisory and supportive role.

Student Responsibilities *(Adapted from the UC-Denver SOM, with permission)*

Student Responsibility to Report Honor Code Violations: The Honor Code relies on the commitment of each member of the School of Medicine to uphold its principles. In matriculating at the F. Edward Hébert School of Medicine, all students are bound to abide by and enforce the Honor Code. It is a violation of the Code to ignore an observed violation by another student and it is a violation to report incidents falsely. The Code does not endorse a timeline for reporting a violation. A standard of reasonableness, to be determined on a case-by-case basis by each Board, against which to measure the time it takes for a student to report a violation, should be applied. It is expected that all violations will be reported in an expeditious manner. The

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TUESDAY 21

WEDNESDAY 22

THURSDAY 23

FRIDAY 24

SATURDAY 25

SUNDAY 26

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intent is not to punish students, but to encourage students to hold each other to the high standard of Honor which is demanded by their chosen profession.

Student Responsibility to the Honor Code: It is the responsibility of each student to be aware of the rules, regulations and procedures of the Honor Code and Honor Board as well as their individual rights and responsibilities. The Honor Representatives are available to answer any questions students may have.

Student Responsibility to Prevent Harassment: If any member of the Honor Board, an accused student, someone who reports a potential violation or any member of the University community is harassed as a result of the Honor Code process this will be considered a violation of professionalism.

Faculty and Staff Responsibilities *(Adapted from the UC-Denver SOM, with permission)*

Faculty Responsibility to the Honor Code: While the Honor Code and Honor Board have been created for and by the student body it is only with the support of the USU faculty and staff that the Honor Code can be properly upheld. It is expected that each faculty member will understand the rules, regulations and procedures of the Honor Code.

Faculty Responsibility to Report Honor Code Violations: If a faculty member observes a student potentially violating the Honor Code, the faculty member must take further action. The faculty or staff member must first clarify the situation with the student and give the student an opportunity to explain their actions. If the explanation is inadequate the faculty member must contact the appropriate student management authority to report the violation. The student management authority will encourage the faculty to include the appropriate HR and to convene an Honor Board as necessary.

Faculty Responsibility to Maintain Confidentiality: When reporting a suspected violation, student confidentiality must be maintained. The faculty or staff member should not conduct his/her own investigation of the event but should discuss details of the violation with the appropriate student management authority only.

Faculty Responsibility to Treat Accused Students Fairly: After reporting a potential Honor Code violation or becoming aware of an ongoing Honor Code investigation faculty are expected to treat an accused student with the fairness extended to all other students.

Faculty Responsibility to Use Clear Guidelines: To help avoid inadvertent Honor Code violations it is expected that faculty members will issue clear guidelines during any student evaluation process, test, or assignment. Examples of guidelines include clearly stating and noting time limits and instructions on all examinations, clearly noting any restrictions (closed book examination, etc.) on all examinations, avoiding the reuse of examinations if possible, clearly stating and discussing guidelines for clinical case write-ups and clinical work, and clearly explaining all course objectives, requirements, and grading criteria. The above are meant to serve only as examples and are by no means a complete listing of clear guidelines.

OCTOBER - NOVEMBER 2014

MONDAY 27

TUESDAY 28

WEDNESDAY 29

THURSDAY 30

FRIDAY 31

October

Halloween

SATURDAY 1

November

SUNDAY 2

Daylight Saving Time ends

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STUDENT ORGANIZATIONS

The Office for Student Affairs coordinates and facilitates most student activities at the university. The wide range of activities and organizations in which medical, nursing and graduate students are involved reflects the diversity of interests in the student body. Below is a list of student organizations currently registered with the Office for Student Affairs, which maintains a list of student and faculty/staff contacts for each.

ACADEMIC

Alpha Omega Alpha (AOA): AOA is the only national medical honor society, and its singular purpose is to recognize and perpetuate excellence in the medical profession. Election to AOA is an honor signifying a lasting commitment to scholarship, leadership, professionalism, and service. A lifelong honor, membership in the society confers recognition for a physician's dedication to the profession and art of healing. Students are eligible for election to the society in the spring of their third year and fall of their fourth year. Criteria for election include overall academic achievement, contributions to the university and the community, and a high standard of character and personal conduct. An induction fee payable to the national office is required, as are modest annual national and local dues which include a subscription to *Pharos*, the society's publication.

Academic Support Programs: As part of the medical school class governance system, each class elects an academic representative who helps develop academic support programs. These representatives work closely with the Office for Student Affairs to assess the peculiar needs of their respective classes and implement programs which will best meet these needs. Examples of past activities by various classes are study groups, a "study buddy" program, student-led reviews, note exchanges, and study skills presentations.

PROFESSIONAL

American Medical Association—Medical Student Section (AMA-MSS): The primary functions of AMA-MSS are to keep students informed on national issues concerning medical education, to provide an outlet for voicing ideas, and to aid in career planning. This year, the group will aim to focus on service, both to the students and to the school. The organization is an affiliate of the AMA and the Medical and Chirurgical Society of Maryland. Meetings are held every one or two months.

Association of American Medical Colleges—Organization of Student Representatives (AAMC-OSR): The AAMC coordinates the medical educational system, from national board exams to the standards that accredit medical schools. The OSR is the student voice to the AAMC. As a student representative you would represent the unique perspective of USU students at national and regional conferences. Once becoming a representative, there

MONDAY 3

TUESDAY 4

Election Day

WEDNESDAY 5

THURSDAY 6

FRIDAY 7

SATURDAY 8

SUNDAY 9

OCTOBER 2014

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are many opportunities to participate in higher levels of leadership to help the promotion of medical education.

Association of Military Surgeons of the United States (AMSUS):

AMSUS is the premier association supporting and representing military and other federal healthcare professionals. AMSUS accomplishes its mission and goals primarily through its large Annual Meeting that promotes effectiveness, cohesiveness, and esprit de corps of the federal healthcare services. In addition, its monthly journal *Military Medicine* publishes peer-reviewed original scientific papers, case reports, and editorials. Medical student submissions are encouraged and go through the traditional peer review process. Medical student membership in AMSUS is free of charge for the first year and in subsequent years the annual fee is sharply discounted until graduation from medical school. Students receive the Journal electronically and can attend the annual meetings. In addition, AMSUS sponsors a highly prestigious award for The Outstanding Graduating USUHS Medical Student annually. Student membership application: www.amsus.org/free-student-membership-application

STUDENT GOVERNMENT

Class Governance: Each medical school class elects officers to manage class business and activities and to represent and advocate student interests in the USU community. Class elections are conducted at the start of the Pre-Clerkship period and again before the start of the Clerkship period, with the following positions being filled: President, Vice President, Secretary, Treasurer, Academic Representative, Social Representatives, Peer Development/Honor Representatives, and Information Technology Representative.

Student Advisory Council (SAC): The SAC is the executive student leadership group designed to study and manages issues across class boundaries and provides a student body consensus which may be communicated to responsible USU officials. The president, vice president and academic representative of each class are members of the SAC. The SAC is advisory to the Dean.

SERVICE/SOCIAL

Apollo Society: The Apollo Society is an organization dedicated to sharing and celebrating the artistic talents of the USUHS community. We host four Open-Mic events per year with the generous support of the Family Medicine Interest Group.

Asian Pacific American Student Association (APAMSA): This national organization's goal is to address those issues important to Asian American medical students. They are interested in both directly promoting the health and well-being of the Asian community as well as helping health care providers working with these communities understand how to care for the Asian patient in a culturally sensitive manner. APAMSA provides a forum

MONDAY 10

TUESDAY 11

Veterans Day

WEDNESDAY 12

THURSDAY 13

FRIDAY 14

SATURDAY 15

SUNDAY 16

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for APA medical students to meet, exchange information and experiences and develop personally and professionally. Membership is open to the entire student community.

Catholic Medical Student Association (CMSA): The Catholic Medical Student Association serves to bring the Roman Catholic community together at USU. The goal of the CMSA is to engage each Catholic student spiritually, intellectually, and religiously. CMSA hosts several speakers throughout the academic year on topics related to the Church, medicine, and the military. In addition, CMSA hosts small-group lunch meetings where discussions range from topics of faith to controversial issues in bioethics. Finally, CMSA wants to bring the Catholic community together outside the confines of USU through community service, outreach, and social events. Membership is open to the entire USU community.

Christian Medical Association (CMA): CMA is the USU chapter of the national organization: Christian Medical & Dental Association (CMDA). The purpose of the national CMDA organization is to motivate and equip Christian doctors and medical students to practice their faith in Jesus Christ in every aspect of their lives. The USU chapter (CMA) is specifically dedicated to providing opportunities for students, faculty, and staff to grow spiritually, encourage one another through Christ-centered relationships, and reach out to our communities. CMA at USU offers weekly Bible study and fellowship, regular family gatherings and other opportunities for community service. There are no dues for CMA and medical students can join the national CMDA for no cost. For more information, please refer to www.cmda.org (national CMDA) and the bulletin board outside the Student Community Center (USU chapter).

Dermatones: The Dermatones is an a cappella singing group, consisting of both men's and women's voices in barbershop and traditional choral arrangements. The group performs at numerous university functions throughout the year (including mess dinners, social occasions, and memorial services) and special functions (such as Christmas caroling at the Soldiers and Airmen's Home of Washington, D.C.). The Dermatones meet weekly for practice and enjoyment. No dues.

Humanitarian Assistance/Disaster Response Interest Group: The HA/DR Interest group is sponsored by CDHAM and designed to support students in the SOM, GSN and other graduate programs interested in HA/DR medicine. We provide a variety of networking, educational, and service opportunities through lectures, workshops, and service projects.

Latter-Day Saint Student Association (LDSSA): The LDSSA is an approved program of the Church of Jesus Christ of Latter-day Saints. It serves to help all Latter-day Saint students stay closely affiliated to the Church, find fellowship among those of common belief, succeed in their studies, and balance their secular education with spiritual development. The

NOVEMBER 2014

MONDAY 17

TUESDAY 18

WEDNESDAY 19

THURSDAY 20

FRIDAY 21

SATURDAY 22

SUNDAY 23

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organization acts to motivate each student to become a powerful influence for good on the campus and in the university's affiliated hospitals. The LDSSA also attempts to provide students with service opportunities, as well as meaningful social activities which are consistent with the standards of the Church. All members of the Church of Jesus Christ of Latter-day Saints who are students at USU are automatically members of LDSSA at USU. Membership is also open to the entire student community.

One Nation: One Nation is the indigenous health interest group led by the Indian Health Service students at USUHS. We meet monthly with subject matter experts and IHS administrators to discuss issues relevant to Native American and Alaska Native health, such as traditional medicine, diabetes prevention, and preventing violence and substance abuse in the postcolonial context. In addition, we connect students to mentors in the field, resources for learning, indigenous events in the DC area, and on-site shadowing opportunities. Our goal is to improve USUHS medical students' ability to lead in the IHS and, as outlined in the IHS mission, "to raise the physical, mental, social, and spiritual health of American Indians and Alaska Natives to the highest level." We welcome anyone with an interest in improving healthcare for indigenous peoples to attend. Events are held at USUHS or at IHS headquarters in Rockville. Participation is free of charge.

Student Spouses' Club: The Student Spouses' Club is an organization for the spouses and significant others of the students at USU. The primary goal of the club is to provide support, friendship and community for student families through a variety of social and service activities throughout the year. The club holds monthly membership meetings, as well as numerous barbecues, adult socials, parent-child activities, and raises funds for Wounded Warriors through a 5k and 10k run. SSC also publishes a blog, and hosts Information Sessions to help students and spouses learn more about life in the military and what to expect while at USU. All spouses and significant others of any SOM, nursing or graduate student or any other non-medical officers stationed at USU are welcome to join.

SPECIALTY INTEREST

Aerospace Medical Student and Resident Organization (AMSRO): is an affiliate of the Aerospace Medical Association (ASMA). The USU chapter's goal is to advance the science and art of aviation and space among medical and graduate students by educating about career opportunities, disseminating knowledge through lectures, and providing experience through research and clinical clerkships. The club meets on a monthly basis and features guest speakers on a number of topics including dive medicine, air evacuation, space medicine and the pilot's perspective on flight medicine.

Anesthesiology Interest Group (AIG): The Anesthesiology Interest Group (AIG) is a partnership between the SOM students and the Anesthesia Department, and, by extension, the military anesthesia community. Our

NOVEMBER 2014

MONDAY 24

TUESDAY 25

WEDNESDAY 26

THURSDAY 27

Thanksgiving

FRIDAY 28

SATURDAY 29

SUNDAY 30

November

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goals are to: 1) serve as a resource for students interested in Anesthesiology, 2) support informed specialty choice for students who are considering Anesthesiology among other options, with the objective of helping the student discover which specialty fits them best 3) facilitate learning of Anesthesia knowledge and skills relevant to all military physicians, including airway management, resuscitation, clinical pharmacology, critical care, venous access, medicine in austere environments, human performance, and perioperative medicine, 4) offer mentoring and sympathetic nonjudgmental advice to any student, at any time, for any purpose. We can provide speakers for meetings on diverse topics, arrange flexible shadowing and early clinical exposure, and match faculty up with students who need mentoring at any time during the curriculum. Currently, the POC and faculty advisor is (b)(6)

(b)(6)

Dermatology Interest Group: The Dermatology Interest Group strives to provide students interested in dermatology with the most up to date and relevant information regarding residencies and sub-specialties within the field. A shadowing program is available for those wanting to observe dermatologists at work, and a variety of dermatologists are invited to speak about their career choice, family life and day to day work routine. Meetings are held a couple of times a year and we hope to see you there.

Emergency Medicine Interest Group: EMIG exists to foster interest in the medical specialty of emergency medicine. With regular meetings, EMIG will discuss relevant topics in emergent care focused on paralleling real medicine with that which is learned in USU classes by utilizing EM physicians, journal articles and students' experiences. We also sponsor a program whereby students may shadow an emergency medicine physician to see the specialty in action.

Family Medicine Interest Group (FMIG): The goal of the FMIG is to serve the interests of USU students with respect to community service, career development, and medical education. Activities and events increase exposure to the specialty of family medicine, a discipline which stresses the comprehensive and continuous care of patients and their families. The club is an affiliate of the American Academy of Family Physicians (AAFP) and the Uniformed Services Academy of Family Physicians (USAFP). Through community activities and department workshops, members learn about the diverse field of family medicine, its residency programs, and the challenges facing future primary care physicians. Meetings and programs occur throughout the year, and more information on individual programs can be found on their website at <http://www.facebook.com/USUHSFMIG>.

Genomic/Personalized Medicine Interest Group: The group's overarching goal is to help bring genome-informed, personalized medicine to the Uniformed Services University of the Health Sciences and the Department of Defense by introducing medical students to genomics and its myriad of clinical implications early in their careers. The aforementioned is to be

MONDAY 1

December

World AIDS Day

TUESDAY 2

WEDNESDAY 3

THURSDAY 4

FRIDAY 5

SATURDAY 6

SUNDAY 7

Pearl Harbor

Remembrance Day

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accomplished by identifying and discussing advances in genomic medicine; creating opportunities for rotations and workshops in genetics/personalized medicine; and attending lectures by guest speakers involved in personalized clinical medicine and research. Further, it is the group's intention to create avenues of access to research opportunities in informatics, clinical and preventive genomics.

Global Health Interest Group: The Global Health Interest Group (GHIG) is a student-run group designed to foster an interest in global health and development among the USU community. GHIG not only offers its members access to scientific and operational knowledge, but also offers students a channel to communicate and connect with a wide range of global health experts.

Internal Medicine Interest Group: IMIG exists to bring together senior faculty members and students for the purposes of learning about internal medicine careers, lifestyles, and gratification. The group meets once or twice a month for discussions led by military internists, interactive clinical scenarios, and clinical workshops. The group also arranges for interested students to make rounds with doctors in hospitals, and to identify a mentor to help guide your future in internal medicine. For those interested and motivated students, research opportunities are also available. No dues; everyone welcome!

OB/GYN Interest Group: The OB/GYN Interest Group holds meetings for students to learn about women's health and the various opportunities within the specialty. Guest speakers are invited to discuss relevant OB/GYN topics, deployment opportunities as an OB/GYN, current women's health issues, the diversity of the specialty, lifestyle of an OB/GYN and residency pathways. Pre-clerkship members have opportunities for hands-on clinical experiences through shadowing at WRNMMC and participation in the student-patient partnership program. No dues are charged and the group is open to all interested.

Operational Medicine Interest Group: The mission of the OMIG is to assist medical students in gaining exposure to and information about opportunities to practice medicine within the Special Operations Communities of the various services. The OMIG facilitates training opportunities, provides guest speakers, and serves as an information source for the USUHS community.

Orthopaedic Interest Group: The goal of the Orthopaedic Interest group is to provide students who are interested in the field of Orthopaedics exposure and access to this surgical specialty early on in their medical school careers. Unique opportunities for members include small group lectures given by orthopaedic attending or resident physicians immediately followed by shadowing in the OR, sawbone labs to allow students to practice surgical technique using orthopaedic instrumentation, and individual opportunities for research. In addition to these hands on learning experiences, we strive to

MONDAY 8

TUESDAY 9

WEDNESDAY 10

THURSDAY 11

FRIDAY 12

SATURDAY 13

SUNDAY 14

NOVEMBER 2014
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hold monthly meetings with physicians from different sub-specialties within Orthopaedics to provide an encompassing view of this great field.

Pathology Interest Group: The purpose of the Pathology Interest Group is to inform students about careers in Pathology while teaching them skills that will be helpful in medical school and beyond. The group is intended for all medical students, not just those who have a long-term interest in pathology. The group meets once a month, schedules permitting. There are no dues, just the hope that members will show up, eager to learn and gain new experiences. Many students who attend P.I.G. meetings tend to take pathology selectives and electives during their Clerkship and Post-Clerkship periods, respectively. In addition to guest speakers, the group offers shadowing opportunities in anatomic, clinical and forensic pathology.

Pediatric Interest Group: The purpose of the Pediatric Interest Group is to provide students with information about a possible career in military pediatrics. The group sponsors monthly lunch meetings, plans several community service projects, offers mentoring opportunities with staff pediatricians, coordinates research experiences, and encourages collaboration with other student interest groups.

Preventive Medicine Interest Group: The Preventive Medicine Interest Group meets periodically to learn more about the specialty and to explore issues in public health and the prevention of disease. Guest speakers are invited to discuss relevant and current preventive medicine and health promotion topics, including international health, operational medicine, outbreak investigations, disaster relief, humanitarian assistance, health policy and advocacy, and more. Specialty training and career opportunities in preventive, occupational, and aerospace medicine are included. Pre-clerkship student members are encouraged to recognize the impact of preventing disease in both military and civilian populations. Anyone wishing to explore their interest in practicing preventive medicine and applying preventive medicine strategies to any other medical discipline is encouraged to attend. No dues.

Psychiatry/Neurology Interest Group: The purpose of the Psychiatry/Neurology Interest Group is to educate students about specialties including Psychiatry, Neurology, Neurosurgery, and related fields, and to explore major issues and current topics within these fields. The group also serves to provide a way for students to get in contact with professionals to further pursue their interests. Finally, the Psych/Neuro Interest Group will disseminate information about opportunities that become available to students interested in these specialties. Meetings are held once per module.

Radiology Interest Group: The purpose of the Radiology Interest Group (RIG) is to inform students about all the different career paths in Radiology, including diagnostic radiology, radiology oncology, and interventional radiology. We host general information meetings, as well as tours of various

MONDAY 15

TUESDAY 16

Hanukkah begins at sundown

WEDNESDAY 17

THURSDAY 18

FRIDAY 19

SATURDAY 20

SUNDAY 21

Winter begins

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radiology departments at WRNMMC. The group is intended for all medical students. There are no dues—all that is required is interest and/or curiosity! There is no set schedule, but medical students will be given notification of RIG events via e-mail.

Sports Medicine Interest Group: The Sports Medicine Interest Group's goal is to provide USUHS medical students exposure to the principles and practice of sports medicine in both military and civilian medicine and to create opportunities for students to receive didactic and shadowing experiences in the application of sports medicine principles in relevant medical fields and specialty settings. Dues are not required though some specific activities may require a fee if students choose to participate in them. The group meets about once every two months and sponsors other activities as needed and based on student interests, some on an ongoing basis. The focus of the group is mostly to get the students outside the classroom and lecture halls as they learn and practice new skills.

Students Interested in Nutrition Group: The goal of the Students Interested in Nutrition Group (STING) is to facilitate the nutritional knowledge and experiences of USU medical students in order to promote and emphasize the importance of nutrition in personal and family health, as well as in clinical practice. The group specifically advocates for improvements in nutrition across USU, WRNMMC, and other organizations within the DoD and local area community. STING members aim to obtain nutritional knowledge and skills through experiences organized by the group to effectively incorporate in all aspects of person, space and clinical practice.

Surgery Interest Group: The Surgery Interest group seeks to provide students interested in pursuing a career in surgery with the latest and most pertinent information about residencies and sub-specialties within the field. Regular lunchtime lectures from practicing surgeons elucidate everything from the work of various specialties to the lifestyle of a surgeon. A shadowing program is available for those wanting to see surgeons at work, and periodic skills labs allow students to begin to learn and practice the craft of surgery. Opportunities are also available to work with Wounded Warriors on base, allowing students to learn about and serve our most worthy patients. Join SIG and get on the cutting edge of surgery!

MONDAY 22

TUESDAY 23

WEDNESDAY 24

Christmas Eve

THURSDAY 25

Christmas Day

FRIDAY 26

Boxing Day (Canada)

Kwanzaa begins

SATURDAY 27

SUNDAY 28

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MEDICAL STUDENT GOVERNMENT CONSTITUTION AND BYLAWS

(Revised as of December 2009)

PURPOSE AND AUTHORITY

The Dean of the School of Medicine authorizes each medical school class to elect officers for the purpose of managing class business and activities, and for representing and advocating student interests in the USU community. The following positions are authorized for each class:

- President
- Vice President
- Academic Representative
- Secretary
- Treasurer
- Peer Development and Honor Representatives (2)
- Social Representatives (2)
- Information Technology Representative

Class officers of each class and the SAC exist to represent the USU student body, and are not elements of the military chain of command. Class officer positions are sanctioned by the university leadership, but are not extensions of the administration.

The Associate Dean for Student Affairs (ADSA) serves as faculty advisor for all class officer groups. The ADSA may share this responsibility with other faculty/staff members.

PRINCIPLES OF OPERATION

The class officers of each medical school class will operate independently for all class-specific issues. These class officers have the authority to establish and manage specific medical student class funds, individual class programs and activities. Class officers are responsible for accurately representing the interests of their classmates and must ensure that communication, dialog and information sharing occurs in a timely fashion to support the well-being of the class and give the class its particular identity in the USU community. Class officer meetings should occur at least once monthly, and provide feedback to students within one week of each meeting. Entire class meetings should be held as determined by the class officers in response to particular issues deserving attention of all students.

DUTIES OF MEDICAL STUDENT CLASS OFFICERS

President: Elected representative of the medical student class and major link between other major entities at the university. Acts as the advocate for the medical student class as a whole. Serves as voting member of the Student Advisory Council (SAC). Acts as the Commanding Officer for the student battalion during all military exercises.

DECEMBER - JANUARY 2015

MONDAY 29

TUESDAY 30

WEDNESDAY 31

December

New Year's Eve

THURSDAY 1

January

New Year's Day

FRIDAY 2

SATURDAY 3

SUNDAY 4

DECEMBER 2014						
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MARCH 2015						
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Vice President: Acts as an extension of the President, replacing him/her in an official capacity during the President's absence, either temporary or permanent. Works closely with the President and class officers and is responsible for special projects as designated by the President. Serves as voting member of the Student Advisory Council (SAC). Acts as the Executive Officer for the student battalion during all military exercises.

Academic Representative: Serves as the liaison and advocate for students in academic matters. Organizes and directs class Academic Council and action officers. Serves as voting member of the Student Advisory Council (SAC).

Secretary: Records and publishes minutes of the officer meetings and disseminates information as appropriate.

Treasurer: Manages the finances of the class. Submits an annual class budget, oversees the collection of dues, and disseminates funds as approved by the class officers.

Peer Development/Honor Representatives (2): Serves as the class representative to the Peer Development and Consultation Committee (PDCC) and oversees ethical matters relevant to the class.

Social Representatives (2): Plans and executes class social functions and participates in the planning and execution of university/school functions in which the class participates or from which it benefits (e.g., Dining-In/Dining-Out and Graduation).

Information Technology Representative: Serves as the liaison and advocate for students in information technology matters. Organizes and directs Technology Council and the Information Technology Action Officers. Coordinates curriculum support through the Academic Representative. Ensures compliance with applicable Department of Defense and university information support instructions and policies.

COMMITTEES

Any class officer may establish a committee to assist him/her in the execution of his/her duties. The officer must notify the other class officers during the class officer meeting.

ELECTION OF CLASS OFFICERS

Class officers shall be elected by a plurality class vote in the fall of their first academic year, as directed by the Office for Student Affairs (OSA). The term of these initial class officers will extend from this fall election until the completion of their Pre-Clerkship curriculum. A second election should be held at the end of their Pre-Clerkship time with these representatives serving as class officers effective until graduation from the University. Students desiring to run for office will submit to the OSA a statement describing why they should be elected. OSA will post all election statements for several days prior to elections, conduct the elections, certify, and post the results.

MONDAY 5

TUESDAY 6

WEDNESDAY 7

THURSDAY 8

FRIDAY 9

SATURDAY 10

SUNDAY 11

DECEMBER 2014						
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AMENDMENT

If any elected officer is unable to complete his/her term, he/she must make a formal declaration of their resignation in writing to the Office for Student Affairs. Once this statement has been accepted, the resignation is final.

All vacant positions, with the exception of the office of President, will be filled by class election. It is the responsibility of the class President to coordinate and supervise the election of new officers to vacant positions with the assistance of the Office for Student Affairs. This election will follow the standard election format and will be conducted at the soonest feasible and reasonable time as determined by the class President.

If a class President officially resigns or is removed from office, the class Vice-President automatically assumes the title, role, and responsibility of the class President, in accordance with the job description of the Vice-President. It is the responsibility of the new President to supervise the filling of the vacant Vice-President position. If, for any reason, the Vice-President is unable to fulfill the new role of President, they should submit their resignation in writing. If they wish to remain Vice-President, they may compete for the position in the new election. If this occurs and the office of President is vacant, the elections will be supervised by the next filled class officer position in the following order of precedence: Academic Officer, Secretary, Treasurer, Honor Representatives, Social Representatives, or Information Technology officer. Upon election of the new President and Vice President, the supervising class representative will resume his or her original class officer position.

If a class officer wishes to run for a class office position that has become vacant, they must first officially resign their current position. This will create another vacant position to be filled during the election. An individual may only run for one office during any election.

All resignations are final and individuals will not revert back to their original positions if they fail to get elected in the new office. Individuals may only hold one class office at any one time.

RECALL OF CLASS OFFICERS

Petition by 25% of a class will authorize a recall for an officer in that class. Recall of a specific officer requires a two-thirds vote of the class.

Amendment added 7 November 2007

The class recall of an elected officer(s) is an action that is usually reserved for misconduct during his/her term in office. This conduct includes, but is not limited to; Honor violations as defined in the student handbook, personal misconduct resulting in non-judicial punishment or a finding of guilty by court martial, and personal acts of misconduct that could lead to conviction in civilian court.

MONDAY 12

TUESDAY 13

WEDNESDAY 14

THURSDAY 15

FRIDAY 16

SATURDAY 17

SUNDAY 18

DECEMBER 2014
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JANUARY 2015
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Prior to initiating a petition for a recall vote:

Individuals who desire to initiate a recall should first attempt to resolve their complaints through the class Peer Development/Honor Representatives.

The procedure for the petition to recall a class officer is as follows:

A petition is defined as a public document signed by members of the class. The petition will state clearly and specifically the fact(s)/reason(s) for the proposed recall. The class officer subject to the petition may present evidence in defense if he/she wishes. Those circulating the petition and those objecting to it will abide by University rules regarding use of email, government equipment, etc.

Class officers (appointed and/or elected) are reminded that in a military environment they may be viewed as holding a position of authority over junior members of the class, therefore normally they should not be actively taking a public position for or against a recall.

A copy of the petition that provides the basis for the recall and the date of initiation shall be posted in the Office for Student Affairs (OSA). Those opposing the recall may post the basis of their objection alongside the recall petition in OSA. Students who wish to sign the petition must print and sign their name, and provide their USUHS badge number (not to be confused with their student number). Students shall have ten (10) duty days (the first day of which will be the day following the date of initiation; therefore, absent holidays or school closure, a petition posted in OSA on the Monday the first day of the month would close for signatures on Monday the 15th) to sign the petition. Petitions will be delivered to OSA no later than 1600 hours on the date the petition closes. The following business day, OSA will tally the signatures and announce the results. If 25% of the class signs the petition as is required by the student handbook, the matter will be referred to an anonymous recall vote by the class. NOTE: Petitions may not be signed or circulated before they are posted in OSA.

The procedure for a class recall vote is as follows:

The voting ballot shall be created by the Office for Student Affairs in a manner which makes it distinct, and have printed on it the name of the class officer being considered for recall. The ballot will have three (3) options for the student to choose from:

- A. Yes, I want to recall.
- B. No, I do not want to recall.
- C. I abstain from voting.

The vote shall take place during a mandatory formation. The votes shall be tallied by OSA and published to the class via email. If two-thirds majority of the votes are cast FOR the recall (abstentions not being counted), then the class officer is immediately recalled and a new election will be held for the vacated position. The results of the vote are final.

MONDAY 19

Martin Luther King Jr. Day

TUESDAY 20

WEDNESDAY 21

THURSDAY 22

FRIDAY 23

SATURDAY 24

SUNDAY 25

DECEMBER 2014						
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Amendment to election proceedings:

During initial balloting, if no candidate for an elected position, other than Class "Peer Development/Honor Representatives" and/or "Social Representatives," receives more than 50% of the total votes cast, there shall be a run-off election between the two candidates receiving the highest number of votes. OSA will administer the final election between the last two candidates. Once OSA tallies the final votes the winners will be announced in each category. These results are final.

BUDGET

A two-thirds vote of the class officers is needed to approve a class budget. The class budget will be the sum of the student dues. Dues will be used to fund class specific activities, functions, and graduation festivities. Each class will adopt a dues policy that is fitting to the personality of the class.

REPRESENTATIVE BODIES

From the slate of officers representing each class, the following additional student representative bodies are authorized:

STUDENT ADVISORY COUNCIL (SAC)**PURPOSE**

The Student Advisory Council (SAC) is an organization representing the medical students of the School of Medicine (SOM). It is designed to study student issues across class boundaries and provide a student body consensus which may then be communicated to the Dean, SOM, and other responsible school officials. The SAC will also facilitate the transfer of information on matters or problems common to each student class or group.

ORGANIZATION

The SAC will be composed of the President, Vice President and Academic Representative from each of the four medical school classes. SAC members represent the consensus of their respective class at SAC meetings. The Associate Dean for Student Affairs (ADSA) will serve as the faculty advisor to the SAC.

Chairperson: The Chairperson of the SAC will be the fourth-year class President. The chairperson will supervise meetings, coordinate discussions and votes to establish a consensus representation of the entire student body. The SAC Chairperson may establish a committee to assist in the execution of duties with 2/3 consent of the SAC. Such committee assignments terminate at the end of the SAC chairperson's term.

JANUARY - FEBRUARY 2015

MONDAY 26

TUESDAY 27

WEDNESDAY 28

THURSDAY 29

FRIDAY 30

SATURDAY 31

January

SUNDAY 1

February

JANUARY 2015						
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Vice Chairperson: The Vice Chairperson of the SAC will be the second-year class President. (Amended, December, 2009)

Secretary: The Secretary for SAC will be the second-year class Vice President (Amended, December, 2009) who will provide an agenda for each SAC meeting consisting of input from the other SAC members. The Secretary will record and publish minutes of each SAC meeting and notify SAC members of the time and location of such meetings.

Regular Business Meetings: The SAC will meet at least monthly. Approval of any issue requires a 2/3 vote by SAC members. Matters discussed and decided by vote at SAC meetings will be binding and represent the “official” student position in discussions with faculty and administrative officials.

Emergency Meetings: The SAC Chairperson can, at any time, call an emergency meeting to discuss problems requiring immediate attention.

Meetings with the Dean, SOM: The SAC will meet with the Dean, SOM, and ADSA twice a year to discuss issues concerning or confronting the council or students at large.

2009 Amendment to the Constitution: Creation of the Combined Student Council

The Combined Student Council (CSC) will be composed of the class presidents of the SOM and the GSN and the President of the Graduate Student Council. The Combined Student Council will meet on an as-required basis. The CSC may arrange open sessions for student exchange as needed.

The primary purpose of the Combined Student Council is to facilitate information flow in both directions between the USU Administration and USU Student Body. To achieve this goal, representatives of the Combined Student Council will have a working relationship with the USU President comparable to that currently existing between the USU President and the Faculty Senate Presidents.

This working relationship will consist of 3 primary components:

Once a month, the USU President or a senior administration official (Senior Vice President or Chief of Staff) will have a working lunch with the Class Presidents, or designated representatives of the SOM, GSN and Graduate School.

The Combined Student Council, Student Advisory Council, the GSN council or Graduate School Council may request the audience of the President or a senior administration official (Chief of Staff or Vice President) at their regular meeting on an as-needed basis.

FEBRUARY 2015

MONDAY 2

Groundhog Day

TUESDAY 3

WEDNESDAY 4

THURSDAY 5

FRIDAY 6

SATURDAY 7

SUNDAY 8

JANUARY 2015						
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Representatives on the Combined Student Council may request an audience with the USU President as needed for emergent matters of great importance.

Additional responsibilities of the CSC will include selection of Student Representatives to University wide committees as well as Student liaisons to the Faculty Senate and other University wide organizations as needed.

Amendments

Any student may propose an amendment to the Constitution at the annual Policy Review Meeting to be held by the SAC each February. In emergency situations the SAC may review and vote on amendments requiring immediate attention. To become effective, an amendment must be passed by both a two-thirds majority of the SAC membership and a two-thirds majority of the elected officers from each medical school class, followed by approval of the ADSA and Dean, SOM.

FEBRUARY 2015

MONDAY 9

TUESDAY 10

WEDNESDAY 11

THURSDAY 12

FRIDAY 13

SATURDAY 14

Valentine's Day

SUNDAY 15

JANUARY 2015						
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QUALITY OF STUDENT LIFE

FOUNDATION FOR QUALITY OF LIFE AND WELL-BEING OF MEDICAL STUDENTS

The purpose of this section is to outline the School of Medicine philosophy and approach to maintaining quality of life and well-being for the student body, and to describe the network foundation for student support services. It applies to all medical students and those in authority to manage student programs.

PHILOSOPHY

The total experience of medical students must be viewed as a process that crosses multiple boundaries within the school, encompassing far more than the institution's responsibility to provide a well-orchestrated and comprehensive educational program. Accordingly, the institution recognizes the individuality of students and their reactions to the total experience of becoming physicians and commissioned officers. Medical students are people who have chosen one of the most treasured vocations of humankind. Throughout their development as professionals and practitioners of medicine, and as commissioned officers, they will be exposed to great expectations by colleagues, superiors and society. These expectations stimulate us to serve, but may also contribute stress and hardship to our lives. A balanced understanding must be created about the satisfaction and demands of the role we have chosen for life. This process must begin in medical school. In order to help students accomplish their task, their supervisors must be encouraged to reverse roles with them and understand the complete impact of the total student experience.

STUDENT SUPPORT NETWORK

The overall program consists of several intersecting elements designed to ensure that students are understood and cared about as individuals, and not viewed in limited terms framed by their requirements to meet academic responsibilities.

At USU, this begins with the admissions program, interview process, and matriculation, where attention is given to peer relationships. Applicants invited to interview are given the opportunity for overnight hosting by a student. On interview day, applicants spend time with students and are encouraged to meet with members of the administration who observe an "open door" just for them. Once accepted, applicants are immediately linked with a student sponsor who assists in guiding them through the several months prior to matriculation. The SOM requires summer officership training for 4 to 6 weeks prior to matriculation; this training serves to unify the class prior to on-campus life. By the first day of school, students know each other well, have had substantial exposure to more experienced students, and have embraced a very simple message: working together and caring about each other helps

MONDAY 16

Presidents' Day

TUESDAY 17

WEDNESDAY 18

Ash Wednesday

THURSDAY 19

Chinese, Korean, and
Vietnamese New Year
(Sheep)

FRIDAY 20

SATURDAY 21

SUNDAY 22

JANUARY 2015						
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everyone succeed, and reminds everyone about our obligations to each other, our program, and those we serve.

Students are required to prepare brief biographies following a general format provided by the Office for Student Affairs. These biographies, along with individual pictures, are available to faculty, staff and classmates. This simple process immediately gives each student an individual identity in the first week of school and follows them for four years.

Students receive all benefits of commissioned officers including full salary, complete—24 hour/day—medical and psychological services for themselves and their families, and a tuition-free medical education that is paid for by service to populations all over the world. There is, therefore, a direct linkage between their acceptance of extensive benefits as students and their providing considerable service to others in the future.

Student leadership in the school follows traditional lines and is elected separately for each class. The Student Advisory Council is an executive body of students from all four classes and has the responsibility to advise the Dean on all issues of importance to students. Medical students are fully informed about institutional issues and activities and are involved in the process; they participate on numerous standing committees. Therefore, students are folded into the administrative life of their institution in all critical areas including admissions, promotion and academic review, curricular development, activity programs, military programs, and personal care and management.

Students are both commissioned officers and physician candidates. The Office for Student Affairs and the Brigade administer numerous programs designed to support students' personal growth, professional development, and academic responsibilities. The Office for Student Affairs conducts the annual orientation to medical school and periodic class meetings throughout each academic year to insure that students are exposed to issues of importance that extend beyond—or enhance—the basic elements of the curriculum. Examples of such issues include quality of life, officer development, and leadership in various systems, academic management and enhancement, licensure examination preparation, mistreatment and impairment, stress management, integrity, transition issues from one level of training to another, human relations, and numerous others.

The Office for Student Affairs manages extensive aspects of the academic, professional and personal lives of students in a highly visible, interactive, open network that includes a particularly personal one-on-one relationship for every student throughout the four years of medical school. The Service Commanders are fully available to all students and provide continuous advice and consultation about development as commissioned officers. This dialog is open, informal, non-intrusive, and interactive on a daily basis. The Office for Recruitment and Admissions addresses issues for minority and majority students. Student Affairs, the Brigade, and Recruitment and Admissions

FEBRUARY - MARCH 2015

MONDAY 23

TUESDAY 24

WEDNESDAY 25

THURSDAY 26

FRIDAY 27

SATURDAY 28

February

SUNDAY 1

March

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unify to manage the professional development and career guidance for all students. Openness and constant availability of the 11 professionals who staff these functional areas provide the students with a dependable leadership group and advisory system that is linked directly to the faculty and staff, so problems or difficulties can be addressed with dispatch and authority.

In the area of academic management, the interactive nature of the Office for Student Affairs, academic departments, and student leadership offers opportunity for each group to view and learn from each other. The Deans meet regularly in small group settings with current module and clerkship directors. Students also meet with module and course directors and other faculty throughout the year in a sharing and open dialog. This network provides several forums for discussion about each other's roles and work across boundaries. As a result, this system keeps everyone well informed about each other's perspective.

The student body has developed a program known as the Peer Development and Consultation Committee (PDCC). This elected body of peers provides a system for addressing quality of life issues in the student body, with a particular focus on mistreatment and impairment of medical students. A protocol exists for the philosophy and work of this group, adding a further positive support program for students. Similarly, a mirror-image group, the Student Support Services Group (SSSG), exists within the administration and consists of the Associate Dean for Student Affairs, the Assistant Dean for Clinical Sciences, the Commandant of Students, the Assistant Dean for Recruitment and Admissions, the Chair of the Department of Family Medicine, and the Director of Student Mental Health. While students may use many avenues to make concerns about mistreatment or impairment visible—including the PDCC—the SSSG regularly addresses all reported instances of mistreatment or impairment to insure that students receive personal attention immediately. More routine matters related to academic, personal, or emotional issues are addressed through a wide variety of highly visible service systems. Some situations are particularly complex and require discussion by the SSSG so that a sensible student support plan can be effectively developed. In such instances, involved students will be consulted prior to SSSG discussion. Also, many students find their personal relationships with their physicians in the university's health center a good source of support. A social worker and chaplain also serve students.

Additionally, the environment at USU provides many other elements designed to enhance teamwork and bonding and to prevent isolation, stress, personal distress, ignorance or failure. These include activity programs, spouse programs, faculty resource advisors, total unit events, community programs and national organizations. The openness of leadership in the administration, faculty and student body is a strong feature of the School of Medicine that benefits students, prevents problems, and identifies problems early enough so that non-intrusive, supportive plans can be developed.

MONDAY 2

TUESDAY 3

WEDNESDAY 4

THURSDAY 5

FRIDAY 6

SATURDAY 7

SUNDAY 8

Daylight Saving Time begins

FEBRUARY 2015						
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At USU, the Oath of Hippocrates is provisionally administered to our new students and again at graduation because we believe that everything in this oath applies to students of medicine, along with physicians. Such a philosophy obligates the administration and faculty to know our students as our colleagues, now and for the future. They are a part of us, and we are a part of them. Together we must serve each other well, setting the high standards of service to others.

AAMC STATEMENT: MEDICAL STUDENT RESPONSIBILITIES

(Recommendations & Guidelines from Students, Organization of Student Representatives OSR/AAMC)

RESPONSIBILITIES:

A student shall be dedicated to providing competent medical service with compassion and respect for human dignity. In all instances, the student must maintain the dignity of the person, including respect for the patient's modesty and privacy.

1. NON DISCRIMINATION

It is unethical for a student to refuse to participate in the care of a person based on race, religion, ethnicity, socioeconomic status, gender, age or sexual preference. It is also unethical to refuse to participate in the care of a patient solely because of medical risk, or perceived risk, to the student. It is not, however, unethical for the pregnant student to refuse to participate in activities that pose a significant risk to her fetus.

2. CONFIDENTIALITY

The patient's right to the confidentiality of his or her medical record is a fundamental tenet of medical care. The discussion of problems or diagnoses of a patient by professional staff/medical students in public violates patient confidentiality and is unethical. Under no circumstances can any medical record be removed from the institution, nor is photocopying of the record permitted. For presentations or rounds, students are permitted to extract information but not copy wholesale parts of the chart.

3. PROFESSIONAL DEMEANOR

The student should be thoughtful and professional when interacting with patients and their families. Inappropriate behavior includes the use of offensive language, gestures, or remarks with sexual overtones. Students should maintain a neat and clean appearance, and dress in attire that is generally accepted as professional by the patient population served. Under pressure of fatigue, professional stress, or personal problems, students

MONDAY 9

TUESDAY 10

WEDNESDAY 11

THURSDAY 12

FRIDAY 13

SATURDAY 14

SUNDAY 15

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should strive to maintain composure. The student should seek supportive services when appropriate.

4. MISREPRESENTATION

A student should accurately represent herself or himself to patients and others on the medical team. Students should never introduce themselves as “Doctor” as this is clearly a misrepresentation of the student’s position, knowledge, and authority.

5. HONESTY

Students are expected to demonstrate honesty and integrity in all aspects of their education and in their interactions with patients, staff, faculty, and colleagues. They may not cheat, plagiarize, or assist others in the commission of these acts. The student must assure the accuracy and completeness of his or her part of the medical record and must make a good-faith effort to provide the best possible patient care. Students must be willing to admit errors and not knowingly mislead others or promote himself or herself at a patient’s expense. The student is bound to know, understand, and preserve professional ethics and has a duty to report any breach of these ethics by other students or health care providers through the appropriate channels. The student should understand the protocol of these channels.

6. CONSULTATION

Students should seek consultation and supervision whenever their care of a patient may be inadequate because of lack of knowledge and/or experience.

7. CONFLICT OF INTERESTS

When a conflict of interest arises, the welfare of the patient must at all times be paramount. A student may challenge or refuse to comply with a directive if its implementation would be antithetical to his or her own ethical principles, when such action does not compromise patient welfare.

Gifts, hospitality, or subsidies offered by medical equipment, pharmaceutical or other manufacturers or distributors should not be accepted if acceptance would influence the objectivity of clinical judgment. Student interactions with commercial interests should conform to the American Medical Association (AMA) guidelines.

8. SEXUAL MISCONDUCT

The student will not engage in romantic, sexual, or other nonprofessional relationships with a patient, even at the apparent request of a patient, while the student is involved with the patient’s care. The student is not expected to tolerate inappropriate sexual behavior on the part of other medical personnel or patients.

MONDAY 16

TUESDAY 17

St. Patrick's Day

WEDNESDAY 18

THURSDAY 19

FRIDAY 20

Spring begins

SATURDAY 21

SUNDAY 22

FEBRUARY 2015						
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9. IMPAIRMENT

The student will not use alcohol or drugs in a manner that could compromise patient care. It is the responsibility of every student to protect the public from an impaired colleague and to assist a colleague whose capability is impaired because of ill health. The student is obligated to report persons of the health care team whose behavior exhibits impairment or lack of professional conduct or competence, or who engage in fraud or deception. Such reports must conform to established institutional policies.

10. CRITICISM OF COLLEAGUES

It is unethical and harmful for a student to disparage without good evidence the professional competence, knowledge, qualifications, or services of a colleague to a review (judicial) body, staff, students, or a patient. It is also unethical to imply by word, gesture, or deed that a patient has been poorly managed or mistreated by a colleague without tangible evidence. Professional relations among all members of the medical community should be marked with civility. Thus, scholarly contributions should be acknowledged, slanderous comments and acts should be avoided, and each person should recognize and facilitate the contributions of others to the community.

The medical student will deal with professional, staff, and peer members of the health team in a cooperative and considerate manner.

11. RESEARCH

The basic principle underlying all research is honesty. Scientists have a responsibility to provide research results of high quality; to gather facts meticulously, to keep impeccable records of work done; to interpret results realistically, not forcing them into preconceived molds or models; and to report new knowledge through appropriate channels. Coauthors of research reports must be well enough acquainted with the work of their coworkers that they can personally vouch for the integrity of the study and validity of the findings, and must have been active in the research itself.

Plagiarism is unethical. To consciously incorporate the words of others, either verbatim or through paraphrasing, without appropriate acknowledgment is unacceptable in scientific literature.

12. EVALUATION

Students should seek feedback and actively participate in the process of evaluating their teachers (faculty as well as house staff). Students are expected to respond to constructive criticism by appropriate modification of their behavior.

When evaluating faculty performance, students are obligated to provide prompt, constructive comments. Evaluations may not include disparaging remarks, offensive language, or personal attacks, and should maintain the

MONDAY 23

TUESDAY 24

WEDNESDAY 25

THURSDAY 26

FRIDAY 27

SATURDAY 28

SUNDAY 29

Palm Sunday

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same considerate, professional tone expected of faculty when they evaluate student performance.

13. TEACHING

The very title “Doctor”—from the Latin *docere*, “to teach”—implies a responsibility to share knowledge and information with colleagues and patients. It is incumbent upon those entering this profession to teach what they know of the science, art, and ethics of medicine. It includes communicating clearly with and teaching patients so that they are properly prepared to participate in their own care and in the maintenance of their health.

14. DISCLOSURE

In general, full disclosure is a fundamental ethical requirement. The patient must be well informed to make health care decisions and work intelligently in partnership with the medical team. Information that the patient needs for decision making should be presented in terms the patient can understand. If the patient is unable to comprehend, for some reason, there should be full disclosure to the patient’s authorized representative.

15. INFORMED CONSENT

Students are to understand the importance of the obligation to obtain informed consent from patients, but are not responsible for obtaining such consent. It is the physician’s responsibility to ensure that the patient or his/her surrogate be appropriately informed as to the nature of the patient’s medical condition, the objectives of proposed treatments, treatment alternatives, and risks involved. The physician’s presentation should be understandable and unbiased. The patient’s or surrogate’s concurrence must be obtained without coercion.

GUIDELINES FOR ADDRESSING AND MANAGING STUDENT MISTREATMENT

Extensive programs are in place at USU to support the well-being of students and their families. The entire undergraduate educational experience brings students into contact with hundreds of professional and technical personnel whose roles and authority influence student training, affect the educational environment and its processes, and contribute to one’s sense of professional/personal image. Exposure to such a wide variety of personnel usually enhances the educational process. Occasionally, some personnel may undermine the educational program through behavior patterns that are clearly perceived as abusive by students. Examples of such student mistreatment include sexual harassment, psychological provocation, punitive assessment, humiliation, excessive time demands, and any form of discrimination. Students are particularly vulnerable in these situations because their authority is limited, and they may fear consequences from those they accuse and those to whom they may appeal.

MARCH - APRIL 2015

MONDAY 30

TUESDAY 31

March

WEDNESDAY 1

April

April Fool's Day

THURSDAY 2

FRIDAY 3

Good Friday

Passover begins at sundown

SATURDAY 4

SUNDAY 5

Easter

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The Association of American Medical Colleges has asked that each medical school appoint an individual as a contact person for students who perceive they are being mistreated. At USU, the Associate Dean for Student Affairs (ADSA) has been appointed that contact person. The ADSA's responsibilities include availability, willingness to listen, willingness to investigate, and follow-through by advising students and faculty about action which is responsive to the issue. Students are also advised that they may bring such matters to the attention of any individual with whom they are particularly comfortable, including the student-managed Peer Development and Consultation Committee (PDCC). The matter may subsequently be brought to the attention of the ADSA. Following discussion, review and the consent of the student, the ADSA will convene the USU Student Support Services Group (SSSG) for development of an action plan directed at resolving the issue. The SSSG consists of the following faculty members:

Associate Dean for Student Affairs
(Professor, Medicine)

Assistant Dean for Clinical Sciences
(Associate Professor, Surgery)

Chair of the Department of Family Medicine
(Professor, Family Medicine)

Director, Student Mental Health Services
(Associate Professor, Psychiatry)

Assistant Dean for Recruitment and Admissions
(Assistant Professor, Family Medicine)

Commandant of Students

This group will make every effort to fully understand the complete situation, follow all appropriate DoD/Federal regulatory guidance, and create an action plan that is responsive to the issue.

Students, faculty, and house staff making reports of mistreatment can expect their concerns to be addressed in a timely and sensitive fashion that includes:

- Protection of the rights of all parties involved
- Evaluation and resolution within 60 days of report
- Sensitivity to the role and responsibilities of each person involved, with particular sensitivity to the role of medical officer candidate
- Protection from retribution
- Personal support
- Frequent information feedback

Students are reminded that multiple avenues exist for discussion of any personal matter that affects quality of life. These include the Associate and

MONDAY 6

TUESDAY 7

WEDNESDAY 8

THURSDAY 9

FRIDAY 10

SATURDAY 11

SUNDAY 12

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Assistant Deans, the military chain-of-command, physicians in the university health center, faculty members, house staff, the university Chaplains, the social work officer, and fellow classmates, including the PDCC. The Dean, School of Medicine, has final responsibility for making decisions about action plans that address the well-being of students. In some situations this responsibility may involve the authority of the military services, the public health service, and/or military command structure.

IMPAIRMENT OF MEDICAL STUDENTS

The purpose of this section is to provide students, faculty, house staff and administrative staff with guidelines for supporting students whose personal and professional comportment has become an object of concern by colleagues and friends.

BACKGROUND

Students and practitioners of medicine work and study in a demanding profession that expects much from its members. In the last decade, the medical profession has been much more sensitive to the impact of professional responsibilities on the quality of a physician's life. In particular the AMA, State licensing boards, hospital and community professional credentialing committees, and the AAMC have developed an open dialog about physical, mental and behavioral impairment in physicians, giving particular attention to job stress, alcoholism, drug abuse, depression, suicide, divorce, and inappropriate relationships between a physician and his or her patients. Medical school itself can be a contributing factor to student impairment. Therefore, schools must be sensitive to these issues, and organized to promote healthy lifestyles while students meet their many requirements. Programs and services must be in place to decrease those situations that foster development of impairment. If problems develop, mechanisms must exist to assist in ways that protect students, the medical profession, and patients.

Even in the presence of a supportive environment, the requirements of medical school and the responsibilities of adult life may lead to the development of problematic behavior, attitudes and practices among medical students, which may become an object of concern for friends, peers and professional colleagues. Most people can recognize overt alcohol abuse, severe depression, and outright substance abuse, and see the relationship of such behavior to impairment and the need for treatment. However, the earlier signs of impending difficulties may be much more difficult to identify and confront.

The stress of medical school often causes students to experience frustration, anxiety, tension, and anger. For some students these emotions may intrude upon relationships with other people, diminish sensitivity for the views and needs of others, provoke isolation and unexplained absences, or create

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TUESDAY 14

WEDNESDAY 15

THURSDAY 16

FRIDAY 17

SATURDAY 18

SUNDAY 19

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clearly recognized changes in the tempo of daily life. When such behaviors become visible in the community, they are frequently misunderstood by the students experiencing them, or not addressed by those who notice them. Sometimes a 'denial shield' will be erected by students experiencing these early signs of impairment; this makes a worthy effort to assist very difficult.

Students are strongly encouraged to support the well-being of each other and to offer assistance in times of difficulty, including possible referral to an appropriate health care professional. Indeed, it is their responsibility as both officers and future physicians to do so. Faculty, staff and house staff are also encouraged to recognize and address those issues that may represent early or overt signs of impairment.

The following flow diagram is intended to provide a pathway for providing assistance:

STEP ONE: Individuals in a position to observe (students, spouses, friends, faculty, deans, commandants, members of the staff) notice behaviors of concern.

STEP TWO: The observing individuals establish dialog with the student. Consultation about making such a dialog constructive and helpful may be obtained in advance from fellow student members of the PDCC and/or members of the Student Support Services Group (SSSG).

STEP THREE: Dialog occurs.

- a) Individuals conclude observed behavior is not of concern. No action is taken.
- b) Individuals conclude observed behavior is of concern, and encourage student to seek assistance. Student agrees, and personally brings issue to the attention of an SSSG member. Alternatively, a student may first choose to discuss the issue with the PDCC, and then bring it to the attention of the above.
- c) Individuals conclude behavior is of concern, but student flatly rejects these concerns. Individuals should seek further consultation with the PDCC or a member of the SSSG, and then meet with the student again. (1) If the student then agrees to seek assistance, no further direct action takes place. (2) If the student still refuses to seek assistance, then individuals should report their concerns directly to any dean or commandant, or the PDCC, and request that an action plan be developed; out of concern for the well-being of the student, observing individuals may bring the matter in confidence directly to the Associate Dean for Student Affairs or the Assistant Dean for Clinical Sciences.

NOTE: If observing individuals are faculty, staff or house staff, behaviors of concern should be reported to the Associate Dean for Student Affairs or the Assistant Dean for Clinical Sciences.

MONDAY 20

TUESDAY 21

WEDNESDAY 22

Earth Day

THURSDAY 23

FRIDAY 24

SATURDAY 25

SUNDAY 26

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This flow diagram is intended to describe several means by which students and faculty can address impairment in a constructive fashion that protects the dignity of everyone concerned. At the same time, it provides for initiation of a response designed to protect the health and well-being of the student while promoting his or her personal and professional growth. Signs of impairment represent a serious problem requiring an individualized plan, cooperatively developed between the individual, peers, and the SSSG. In addition, the Uniformed Services' regulations provide specific guidance in certain areas, such as alcohol and drug abuse.

AMA-MEDICAL STUDENT SECTION PRIMER ON MEDICAL STUDENT IMPAIRMENT

(Published by the American Medical Association)

Red Flag Warning Signs of Impairment in Medical Students

The impaired student is one who is in danger of harming him/herself because of personal difficulties. The key to detection is a significant change in a given behavior or behaviors. The items listed below do not automatically indicate impairment in the student, but should be used as indicators of the potential for impairment.

Physical

- Sleep disorders
- Deterioration in personal hygiene or appearance
- Multiple physical complaints
- Accidents
- Eating disorders

Family

- Fights
- Disturbed spouse
- Sexual problems—impotence, extramarital affairs
- Separation or divorce proceedings
- Withdrawal from family members

Social

- Withdrawal from outside activities
- Isolation from peers
- Embarrassing or inappropriate behavior at parties
- Interaction with police
- Driving while intoxicated
- Unreliability and unpredictability
- Excessive behavior; zealotry

Depression, Drug And Alcohol Use

- Mention of death wish/suicide
- Slowed behavior and attention

APRIL - MAY 2015

MONDAY 27

TUESDAY 28

WEDNESDAY 29

THURSDAY 30

April

FRIDAY 1

May

SATURDAY 2

SUNDAY 3

APRIL 2015						
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- Chronic exhaustion off and on work
- Risk-taking behavior
- Tearfulness
- Flat or sad affect
- Excessive agitation, edginess
- Dilated or pinpoint pupils
- Wide swings in behavior or mood
- Self-medication with psychotropic drugs
- Stereotypic behaviors
- Alcohol on breath at work
- Uncontrolled drinking at social events
- Blackout drinking
- Complaints/nervousness of spouse, re: social drinking

Hospital

- Unexplained absences
- Spending excessive time at hospital
- Coming in late inappropriate to caseload or needs of peers
- Decreasing quality of or interest in work
- Inappropriate orders given student's knowledge
- Inappropriate responses to telephone calls
- Marked behavioral changes
- Moroseness and increasing difficulties with other staff

Ideally, identification should come from the student realizing that he/she has a problem and voluntarily seeking help. This requires education and insight on the part of the student, classmates, family, and the medical school.

MONDAY 4

TUESDAY 5

Cinco de Mayo

WEDNESDAY 6

THURSDAY 7

FRIDAY 8

SATURDAY 9

SUNDAY 10

Mother's Day

APRIL 2015						
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ACADEMICS

ACADEMIC OVERVIEW

EDUCATION IN THE PRE-CLERKSHIP CURRICULUM

The first eighteen months of medical school encompass the Pre-Clerkship curriculum. It is designed to enable students to establish a strong foundation in the scientific approach to understanding the mechanisms of human disease, and the latest approaches to prevention and therapy. At the same time, students will develop their professional identities as officers and physicians, so that they may ultimately fulfill the promise of duty and expertise to their patients and military units. They will be nurtured by faculty, with an emphasis on personal values, and by the acquisition of the skills needed to master the key elements of basic and clinical sciences, as well as the social and epidemiologic principles needed for patient care. The Pre-Clerkship period begins with a seven week “fundamentals module” which will introduce key concepts in basic science and clinical medicine, and allows students to acquire the tools to master the materials and develop the skills presented in five subsequent organ-system based modules. These include the following grouped systems: musculoskeletal and skin; cardiopulmonary-renal; neuroscience and psychiatry; gastrointestinal, hepatobiliary, metabolism and nutrition; and reproduction and endocrinology. The final, “complex and multisystem disease module” will prepare students to understand the intricacies of modern clinical medicine as they move into the next phase of their education: their Clerkship Period. In this transitional module, students will elevate their problem solving skills to manage the interplay of multiple systems in serious illness as well as recognize the roles of the host response and the impact of social and environmental influences on disease outcomes. The diverse challenges addressed by the specialties of global and military medicine will be emphasized here.

ASSESSMENT IN THE PRE-CLERKSHIP CURRICULUM

(Excerpted in part from USUHS DPM-003-2014)

Assessment is the process by which information is gathered about student performance in the curriculum. Ascribing a meaning or value to those assessments is the process of evaluation, and an administrative decision about assessments and evaluation leads to a grade.

Formative Assessments provide feedback to students as to their growing mastery of a given topic. Periodic online quizzes represent an example of a formative assessment. Formative assessments are for learning.

Summative Assessments are used to evaluate an individual's progress through a curriculum and provide evidence of learning; midterm and final examinations are examples of summative assessments.

MONDAY 11

TUESDAY 12

WEDNESDAY 13

THURSDAY 14

FRIDAY 15

SATURDAY 16

SUNDAY 17

APRIL 2015

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MAY 2015

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JUNE 2015

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JULY 2015

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Methods of Assessment: The forms and methods of assessment used within a given Pre-Clerkship module will be tailored to the specific goals and objectives of the module. For example: Several modules will have content that will require a Practical Examination, but such content, and thus such assessment, will not be in all modules. Similarly, some modules may have larger, summative clinical skills assessments, such as an Objective Structured Clinical Examination (OSCE) in the Multisystem module. At the beginning of each module, the Module Director will provide students a detailed description that will address the types and timing of assessments to be used, and how the assessments contribute to the module grade.

General Pacing of Assessment: During each module, there will be examinations at the midpoint and in the final week of the module, consisting of a National Board of Medical Examiners (NBME) customized examination in basic science. There may also be faculty developed examinations (to include formats such as single best answer, short answer, essay, problem solving, practical examinations, and military exercises). Within a module, there will typically be several small group assessments, to include faculty assessment of student performance, and possibly peer assessment, as well as periodic clinical skills assessments (approximately every few weeks). There will also be frequent opportunities for formative assessment within the modules. Student assessment in the USUHS Pre-Clerkship Curriculum is designed to determine whether students are meeting educational goals and learning objectives, to promote independent study and inquiry, and to foster the unique professional development as a physician and officer. The following assessments apply in the Pre-Clerkship timeframe:

1. **To Assess Mastery of Basic Concepts:** NBME Customized Basic Science Examinations. Within each Pre-Clerkship module, examinations using questions purchased from the NBME will be used at least at the midpoint and final week of the module as summative assessments. Given that exams are cumulative both within and across modules, as the academic year progresses, key concepts from prior Pre-Clerkship modules will be incorporated into the NBME customized examinations for subsequent modules. Faculty Developed Examinations will also be used as an additional tool for the assessment of basic science concepts.
2. **To Assess Mastery of Basic Concepts and Clinical Applications:** Practical Examinations. These assessments will occur at the midpoint and/or final week of modules, focusing on questions that require localization of anatomy and neuro-anatomy. Practical examinations of histo-pathology and radiological assessment will be incorporated throughout the other modules.
3. **Fundamentals of Military Medical Practice and Leadership:** Unique experiences in Military Medicine include a field exercise in which students are assessed in leadership performance, problem solving, and operational medicine by peers and faculty. Additional assessments include small group practical exercises, leadership and professionalism assessment using a standardized rating form, and written multiple choice question examinations.

MONDAY 18

TUESDAY 19

WEDNESDAY 20

THURSDAY 21

FRIDAY 22

SATURDAY 23

SUNDAY 24

APRIL 2015

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JUNE 2015

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JULY 2015

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4. Student Progress in Clinical Skills (Foundations in Doctoring) is assessed by small group facilitators in the small group sessions, through direct observation of skills, evaluation of patient-based activities, direct observation of communication skills, and OSCEs.
5. Physician in Society: A variety of assessments will be used to assess student progress in the Physician in Society theme of Foundations in Doctoring, including reflective writing, small group exercises, and written examinations (which may include faculty developed examinations and/or NBME customized basic science examination questions).
6. Overall Grading Format: The overall grading framework for the curriculum will be Honors (H), Pass (P), Marginal Pass (MP), and Fail (F). In the Pre-Clerkship timeframe, the exception to this is the Fundamentals Module, for which the grading framework will be Pass (P), Marginal Pass (MP), or Fail (F).
 - The grade of “H” (Honors) is reserved for exceptional mastery of the material. It recognizes excellence.
 - The grade of “P” (Pass) is a satisfactory grade and is given to those students who have met expectations and requirements.
 - The grade of “MP” (Marginal Pass) designates minimally satisfactory (borderline) performance; its main use is to track a student’s performance over time to enable the School of Medicine to offer additional assistance to the student at the earliest reasonable opportunity. In most cases this designation will be used to identify students whose cumulative grade is in the range of 65-69%. However it can also be used to identify students whose professional conduct falls in the category of minimally satisfactory as well. This grade is reported on the official transcript as a “pass.”
 - The grade of “F” (Fail) is a failing grade and must be remediated. It is an unsatisfactory grade and is given to students who have failed to meet expectations.
 - The grade of “I” (Incomplete) signifies that requirements have not been satisfied (examples include, but are not limited to, excused absences for emergencies, not taking a final examination, not fulfilling a required task or assignment, or needing to make-up a previously scheduled examination). The grade of Incomplete is assigned in coordination with the Dean’s Office (OSA). A grade of Incomplete must be accompanied by a written plan and timetable for completion of all elements that determined the grade of Incomplete; the plan is to be submitted to the Dean’s Office (OSA). The plan should specify how and by what date the temporary “I” grade will be converted to a permanent grade. See USUHS Instruction 1105 for additional guidance regarding grades of “I”.
 - The grade of “W” (Withdrawal) will be issued when a student cannot continue in the academic activity and terminates completely. In such case, there is no credit for the activity.

MONDAY 25

Memorial Day (observed)

TUESDAY 26

WEDNESDAY 27

THURSDAY 28

FRIDAY 29

SATURDAY 30

SUNDAY 31

May

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- The grade of “INV” (Invalid) may be issued as a final grade when violations of academic integrity or professionalism are proven. INV may not be removed from the transcript, but may require remedial activity to satisfy academic requirements. See USUHS Instruction 1105 for additional details.

The final grade within the module is determined by the assessments used within the module. Just as caring for a patient involves the integration of knowledge, skills, and professional attitudes, so will successful completion of a Pre-Clerkship module. The extent to which a given assessment contributes toward the final grade may vary among modules, but several important principles apply:

- Assessment may be compensatory within a set of assessments, for example, scores on midterm and final knowledge based examinations can be averaged together, but are non-compensatory across assessments. In other words, excellent performance on knowledge based examinations will not compensate for deficiencies in clinical skills or professionalism. Similarly, outstanding professionalism does not compensate for poor examination performance.
- Successful completion of Pre-Clerkship modules, to include the Fundamentals of Military Medical Practice, requires successful completion of all requirements, regardless of the degree to which the requirement or assessment contributes to the final grade.
- Failure to meet expectations within any area of assessment will lead to a review of the student’s entire Pre-Clerkship module performance, which may lead to a grade of Fail for a module.
- Marginal or concerning performance in any area of assessment may lead to a review of the students’ entire Pre-Clerkship module performance to determine the student’s grade and whether any remediation or additional experience is necessary to ensure the student is progressing. In such cases, a grade of Incomplete or Fail may be assigned.

EDUCATION IN THE CLERKSHIP PERIOD

Following a weeklong core clerkship introductory session in which students are introduced to working within the clinical environment, students engage in a total of 48 weeks of required clinical clerkships, which are accomplished in three sequences of clinical rotations or tracks, each four months long. The tracks may be completed in any order, but include a pairing of two clinical clerkships, each of which incorporate the integration of key clinical and basic science themes or “threads” (see Table below).

Leave periods are provided after the first track, in early May, and after completion of the two other tracks in December. The basic science “threads” build on many of the fundamental anatomic, physiologic and pathologic

MONDAY 1

June

TUESDAY 2

WEDNESDAY 3

THURSDAY 4

FRIDAY 5

SATURDAY 6

SUNDAY 7

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concepts that were introduced in the pre-clerkship modules. Clinical threads will focus on topics of medical professionalism, ethics, patient safety, quality improvement, the skills necessary to practice life-long learning, and on evidence-based medicine.

During the Clerkship Period, students become integral members of a team of physicians assigned primarily to either an inpatient hospital ward or to an outpatient clinic. Collectively, these physicians are referred to as “staff” and “housestaff”; the former include “attending physicians” and “preceptors,” while the latter include junior physicians in various stages of their post graduate training and are referred to as “interns”, “residents”, and “fellows.” “Attending Physicians” are members of the hospital staff who are board-certified in a particular specialty, who are legally responsible for all patient care delivery, and who supervise interns, residents, and medical students. “Preceptors” are also board-certified staff physicians who direct their teaching and supervision exclusively to the medical students. The period of postgraduate training leading to board certification in a particular specialty is known as a “residency” and may last 3 to 7 years depending on the specialty. Therefore, an “intern” is a resident in his or her first year of postgraduate training (designated “PGY1” or “R1”); analogously, an “R2” (or PGY-2) or “R3” (or PGY-3) is a resident in his or her second or third year, respectively, of postgraduate training, etc. A fellow is a physician who has completed a primary residency, and has chosen further graduate medical training in a more focused area of their specialty. A typical clerkship team consists of two to four medical students, one or two interns, a PGY2 or PGY3 resident, one or more attending physicians, and a preceptor.

Clerkship Period Sample Sequence:

Track 1	Inpatient Medicine	Outpatient Medicine	Psychiatry
Track 2	Family Medicine	Pediatrics	Selective Rotation
Track 3	General Surgery	Surgical Specialties	Gynecology

REQUIRED CLINICAL CLERKSHIPS

Family Medicine:

The family medicine clerkship is designed to provide students with a solid background in the principles and practice of family medicine. Students are exposed to a model of comprehensive, compassionate and personal healthcare where the physician’s continuing responsibility is limited neither by a patient’s age or sex nor by a particular organ system or disease entity.

The importance of the family unit and the community context are emphasized. The predominant focus of the five-week rotation is ambulatory family medicine during which students have direct contact with patients and provide

MONDAY 8

TUESDAY 9

WEDNESDAY 10

THURSDAY 11

FRIDAY 12

SATURDAY 13

SUNDAY 14

Flag Day

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primary care under the supervision of faculty family physicians and senior residents. The clerkship also exposes students to primary care sports medicine, inpatient family medicine care, family-centered maternity care and other on-call experiences. Interactive workshops, clinical case discussions, clinical and ward rounds, behavioral science seminars, required readings, and an assigned family study enrich this in-depth exposure to family medicine.

Medicine:

The internal medicine clerkship focuses on the care of adult patients. It fosters clinical problem solving for and with patients as they experience a wide variety of problems, allowing students to become clinicians who embrace complexity, yet act with simplicity. Students spend five weeks in the outpatient setting and five weeks on an inpatient service. Clinic students work directly with faculty in the care of patients. Students on wards are junior members of teams consisting of attending physicians, residents, interns, and students. Under supervision, they participate actively in patient care, including nighttime and weekend call. All students attend teaching conferences and work directly with teaching preceptors in the analysis and synthesis of clinical information. Growing independence of the learner along with fulfilling the promise of duty and expertise represents the core goal of this clerkship. In both settings, students are expected to become reliable "reporters" who are making the transition to active "interpreters" for their patients, and ultimately to the "manager/educator" level.

Obstetrics and Gynecology:

The clinical clerkship in obstetrics and gynecology is designed to fulfill the dual objectives of providing all students with the core knowledge and skills required to address the health needs of women in primary care settings as well as to stimulate in some students a long-term interest in the clinical and academic excitement and challenges of this surgical and women's healthcare specialty.

During much of the five weeks, students are members of the healthcare team through the traditional inpatient and outpatient services of obstetrics, gynecology, reproductive endocrinology, or gynecologic oncology.

Additionally, at all clerkship sites students have ample opportunity to evaluate patients and develop management skills in the ambulatory care setting.

Case discussions on rounds, problem-based learning discussion groups, simulation sessions, clinical skills sessions, and independent study assignments assure exposure to the knowledge and principles of the specialty. The on-site clerkship coordinators are responsible for the cognitive and non-cognitive assessments of students' performance. The onsite coordinators, clerkship director, and the department chairperson are readily available to provide career counseling to further stimulate the interest of students in the numerous professional challenges in obstetrics and gynecology.

MONDAY 15

TUESDAY 16

WEDNESDAY 17

THURSDAY 18

FRIDAY 19

SATURDAY 20

SUNDAY 21

Summer begins

Father's Day

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Pediatrics:

The pediatric clerkship addresses issues unique to childhood and adolescence by focusing on human growth and development, principles of health supervision, and recognition and treatment of common health problems. Additionally, it emphasizes the impact of family, community, and society on child health, well-being, and illness. The experience emphasizes aspects of general pediatrics important for all medical students and provides a foundation for those students who elect further study in the healthcare of infants, children, and adolescents.

Students have an opportunity to participate in clinical activities of both general and subspecialty pediatric services, but the emphasis in all services is placed on fundamental and common issues. The Department of Pediatrics utilizes a nationally accepted curriculum that guides students through knowledge acquisition concerning the diverse areas of pediatric medicine. Throughout the clerkship, the essentials of pediatric history-taking and physical examination are stressed.

In addition, the department places a strong emphasis on clinical problem solving and provides students with a structured learning environment, incorporating quality clinical teaching by motivated preceptors and utilizing computer-simulated case studies. The educational goal of the department is to provide each student with a comprehensive learning experience and the self-directed learning skills necessary to provide a lifetime of current, compassionate, and committed healthcare.

Psychiatry:

Students participate in practical clinical work, individual supervision, and seminars and case conferences. In their daily work on inpatient, partial hospital, consultation-liaison, and/or outpatient services, students are supervised by psychiatry residents and staff. The department strongly emphasizes the bio-psychosocial model, integrating biological, psychological, and socio-cultural knowledge in understanding behavior and disease. The development of clinical interviewing, diagnostic, and treatment planning skills are central to the clerkship.

Particular attention is given to disorders often seen in the international focus of military medicine. Each student meets weekly with a senior clinician preceptor for review and discussion of case histories. Mandatory seminars and case conferences consider both practical and theoretical aspects of emotional disorders.

Surgery:

The Surgery clerkship is designed to introduce all USUHS students to the fundamental principles of the discipline of surgery that all military physicians need to know. The rotation consists of five weeks of general surgery, and two two-and-a-half week blocks in a surgical subspecialty of the student's choice. Students are expected to function as integral members of a surgical team that

MONDAY 22

TUESDAY 23

WEDNESDAY 24

THURSDAY 25

FRIDAY 26

SATURDAY 27

SUNDAY 28

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includes interns, residents, and supervising surgical attendings. Students see patients in the outpatient clinic setting, make ward rounds, assist in the operating room, take overnight call, and attend departmental conferences related to all aspects of care of the surgical patient. Lectures and small group discussions designed specifically for the clerkship are conducted daily and cover a variety of surgical topics in which the integration of the basic sciences is emphasized. Student clinical performance is evaluated by the teaching staff, and final assessment includes the NBME shelf exam as well as an Objective Standardized Clinical Exam and an Objective Standardized Assessment of Technical Skill.

EDUCATION IN THE POST-CLERKSHIP CURRICULUM

The major objectives of the Post-Clerkship period are to prepare students for graduate medical education (residency training), and to foster advanced clinical decision making skills as students move from being able to Report medical information, to being able to Interpret information, in the interest of Managing and Educating patients in accordance with the "RIME" model of medical education. The first six weeks of the Post-Clerkship phase of the USU curriculum will be used to help students prepare for successful completion of Step 1 of the USMLE exam. Students will then have a six week period of advanced curricular instruction entitled "Bench to Bedside and Beyond" (B3). B3 is an opportunity for students to further integrate basic science and clinical concepts in an advanced context. Emphasizing case-based examples, B3 will also incorporate topics such as patient safety, team-based care delivery (patient-centered medical home), professionalism and evidence-based clinical decision making. After B3, Post-Clerkship students will have an extended period of advanced clinical electives. This will allow time for several 'audition' rounds with prospective residency sites and will further enhance students' clinical skills and opportunities. Offerings include ambulatory and inpatient medical rotations, research electives, operational medicine electives, community based medical electives as well as traditional sub-internships. During this period, students will complete the second part of their board examination series (USMLE Step 2 CS and CK).

Another Post-Clerkship opportunity involves the opportunity to complete a Capstone Project. The Capstone is a longitudinal project in an area of scientific inquiry of the student's choosing. Capstone projects can range from traditional basic science projects to integrative or translational clinical projects. Students completing Capstone projects will have elective time in the Post-Clerkship period dedicated to this scientific inquiry.

Students plan their own Post-Clerkship schedules based upon individual discussions with the Associate Dean for Student Affairs and the Assistant Dean for Clinical Sciences. These discussions focus on the student's own educational needs and goals for postgraduate training.

JUNE - JULY 2015

MONDAY 29

TUESDAY 30

June

WEDNESDAY 1

July

Canada Day

THURSDAY 2

FRIDAY 3

SATURDAY 4

Independence Day

SUNDAY 5

JUNE 2015						
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The Post-Clerkship curriculum combines a broad range of required, selective and elective clerkships in the clinical and/or basic sciences including multiple opportunities for highly individualized experiences and research. All required, selective, and elective clerkships for the Post-Clerkship curriculum are listed in the School of Medicine's Post-Clerkship Catalogue. The procedures to be followed for registering for all such courses are also detailed in the catalogue, which can be found at the Registrar's website: www.usuhs.edu/reg/catalogue.html.

The required courses in the Post-Clerkship curriculum include four-week clerkships in Neurology or Neurosurgery (if not done in the core clerkship year), Military Contingency Medicine, Emergency Medicine, and Anesthesiology (if not done as a selective in the clerkship year). In addition, all students are required to complete two four-week subinternships (one in the surgical domain, and one in the medical domain) during which the student assumes all the responsibilities of an intern, but for a somewhat smaller number of patients. Subinternships are offered by the Departments of Internal Medicine, Obstetrics and Gynecology, Pediatrics, Psychiatry, and Surgery, as well as the Department of Neurology, Neurosurgery, and Family Medicine.

Students must also complete an additional four weeks of "Medical" experiences (in addition to the required sub-internship), and an additional four weeks of "Surgical" experiences (in addition to the required sub-internship). "Medical" experiences typically include Dermatology; Family Medicine; Internal Medicine or one of its subspecialties such as Cardiology and Nephrology; and Pediatrics or one of its subspecialties such as Endocrinology and Hematology/Oncology. Similarly, "Surgical" experiences typically include General Surgery or one of the Surgical Specialties such as Ophthalmology, Orthopedics, or Urology. Anesthesiology and Obstetrics and Gynecology or one of its specialties, such as maternal/Fetal Medicine and Reproductive Endocrinology are also considered "Surgical" experiences.

GUIDELINES FOR CLINICAL TRAINING

Medical students, regardless of their individual level of competence, are not licensed or credentialed for the independent practice of medicine. Whatever medical practice is done as part of their training and experience is the responsibility of those physicians under whose authority they are practicing. In most instances, these physicians include interns and/or residents as well as attending staff physicians. The following guidelines for the LIMITED AND SUPERVISED PRACTICE of medicine by medical students reflect the policy of the Walter Reed National Military Medical Center. Although these guidelines are also representative of the general policies at our other primary teaching hospitals, specific policies vary among the services, individual hospitals, and individual departments within the same hospital. Therefore, please note that it is your responsibility to obtain clarification

MONDAY 6

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THURSDAY 9

FRIDAY 10

SATURDAY 11

SUNDAY 12

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from your supervising resident, your attending staff physician, or from the department to which you are assigned should any uncertainty exist.

- a) *History and Physical.* Histories and physicals done by Clerkship students are generally done on the standard hospital forms, but do not become the “official” admission histories and physicals. If, on review by the responsible physician, the student’s history and physical is considered to be of high quality and is accurate, it may be countersigned by the physician and added to the patient’s chart as part of the permanent record. Admission histories and physicals performed by Post-Clerkship students may become the “official” admission records. In this case, the student’s work-up must be countersigned by a physician.
- b) *Progress Notes.* Progress notes may be written and signed by students. They supplement, but do not replace, the progress notes of the supervising physician and must be co-signed by the latter.
- c) *Performance of Procedures.* Minor procedures may be done by students under direct supervision of the responsible physician until that physician has documented the student’s competence to perform such procedures. However, it is the responsibility of the physician who is to perform or supervise the procedure to counsel the patient and/or the consenting individual as to the nature and expected results of the proposed procedure. Consent forms will clearly indicate who will perform the procedure. **STUDENTS ARE NOT AUTHORIZED TO OBTAIN INFORMED CONSENT OR TO FORMALLY COUNSEL PATIENTS OR LEGAL GUARDIANS FOR SUCH A PURPOSE.** Clerkship students may perform unsupervised superficial venipuncture on adults when the responsible physician is satisfied as to their competence. Venipuncture will be performed on children only under direct supervision of a physician. After appropriate instruction, Clerkship students may perform other minor procedures, such as lumbar punctures, under supervision. Post-Clerkship students may perform superficial venipuncture on adults and children independently when the responsible physician is satisfied as to their competence.
- d) *Record of Procedures.* Record of procedures may be prepared and signed by students, but must indicate who performed and who supervised the procedure. The record will be countersigned by a physician.
- e) *Order for Diagnostic Procedures, X-Rays and Laboratory Requests, and Consultations.* Orders for these will not be written in the chart by Clerkship students. Based on a valid order in the chart by a physician, request slips may be filled out by the student but will be signed by the responsible physician. Post-Clerkship students acting as sub-interns may order diagnostic tests but these orders must be countersigned by a physician.

MONDAY 13

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SATURDAY 18

SUNDAY 19

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ACADEMIC ADMINISTRATION

NON-ATTRIBUTION AND ACADEMIC FREEDOM

Lectures, discussions and all variety of presentations by guest speakers, seminar leaders, and panelists, including renowned public officials and scholars, constitute an important part of university curricula. So that these guests, as well as faculty and other university officials, may speak candidly, the university offers its assurance that their presentations at the Colleges, or before other USU-sponsored audiences, will be held in strict confidence. This assurance derives from a policy of non-attribution that is morally binding on all who attend: without the express permission of the speaker, nothing he or she says will be attributed to that speaker directly or indirectly in the presence of anyone who was not authorized to attend the lecture.

USU students have the privilege of debate with discretion on any subject related to the USU curriculum within the college classrooms and auditoriums. Indeed, one of the goals of professional military education is to develop officers who can employ innovative thinking when confronted with changing situations. It is imperative the university provide a learning environment that encourages officers to cast a critical eye on traditional or accepted concepts. In this regard, the university is a safe and proper setting for officers to practice the art of communicating innovative and non-traditional concepts; as officers, students are expected to debate their viewpoint in a manner that reflects their own officership; showing appropriate military courtesy and respect for others.

COPYRIGHT AND FAIR USE BASICS FOR MEDICAL STUDENTS

Information is critical in the field of medicine and you will utilize many sources during your time at USU. One of the rights accorded to those that create learning materials is the right to reproduce or to authorize others to reproduce a work. This right is subject to limitations found in sections 107 through 118 of the copyright law (title 17, U.S. Code). In the education field, one of the most important limitations is the doctrine of "fair use".

The "fair use" doctrine allows for reproduction of copyrighted material in certain settings including criticism, commentary, new reporting, teaching, and research. Sometimes the distinction between what qualifies as "fair use" and what does not is confusing. There are not a set number of words or lines that may safely be taken without the permission of the author. Furthermore, acknowledgement of the source does not substitute for obtaining permission.

USU instructors create educational materials for the sole purpose of teaching our medical students. Materials may include documents, presentations, and other course materials that they create or that they have been granted permission to use. Students are reminded that content posted on Sakai may not be copied, re-distributed, or disseminated without permission. This includes publication or posting to the Internet. If you intend to share any educational material with someone other than your classmates, the safest

MONDAY 20

TUESDAY 21

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THURSDAY 23

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SATURDAY 25

SUNDAY 26

Parent's Day

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course is to obtain permission from your instructor. More information on copyright policy can be found at www.usuhs.edu/copyright.

ADVANCEMENT AND PROMOTION

To be eligible for promotion to the next level, students must pass all modules or clerkships taken in the preceding academic level. Students who fail to meet these standards will be considered for academic dismissal at the recommendation of the Student Promotions Committee to the Dean, School of Medicine, who will make the decision. Academic performance requiring review by the Student Promotions Committee includes, but is not limited to:

- a) Receiving a single grade of F in any Pre-Clerkship module or Clinical Clerkship
- b) Receiving a grade of "I" in two or more Pre-Clerkship modules or Clinical Clerkships
- c) Receiving two or more Marginal Pass designations in Pre-Clerkship modules
- d) Failure on either the USMLE Step 1, Step 2 Clinical Knowledge, or Step 2 Clinical Skills examination
- e) Non-cognitive issues as noted below

Advancement and retention in the School of Medicine are also contingent upon non-cognitive academic performance. Honesty, integrity, reliability, compassion, balanced judgment, and the ability to relate to others are examples of behavior required to be a successful physician. Students are expected to conduct themselves at all times in a manner which reflects credit upon the medical profession and their positions as commissioned officers. Students failing to meet the required standards of non-cognitive academic performance will be brought before the Student Promotions Committee and may be recommended for dismissal, even though they may have achieved passing grades in all the cognitive aspects of their academic work. Students whose military behavior does not meet the standards of conduct may also be dismissed even though their academic records are acceptable.

REQUIRED ATTENDANCE, ACADEMIC ACTIVITIES

(Excerpted from USUHS DPM 007-2011)

This memorandum applies to policy and procedures concerning required attendance at academic activities of the undergraduate medical education program of the School of Medicine.

The faculty is dedicated to excellence in medical education and to inspiring the desire for lifelong learning in students. The entire faculty shares jointly in the responsibility for the development of the curriculum and ensuring its integration into a coherent educational program. This is an ongoing process in which the Curriculum Committee, department chairs, module directors, course and clerkship directors, and teaching faculty all participate

JULY - AUGUST 2015

MONDAY 27

TUESDAY 28

WEDNESDAY 29

THURSDAY 30

FRIDAY 31

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August

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under the leadership of the Dean. Students have an equally important role in the educational process. They have primary responsibility to manage their educational activities, to master the curriculum, and to actively contribute to their educational program in ways that promote and enrich its academic excellence.

The USUHS program in medical education consists of an integrated four year curriculum, administered by the basic and clinical sciences departments and the Dean's office. In addition, students receive training that is unique to their future roles as uniformed medical officers and that extends beyond the educational experience offered by other U.S. medical schools. The curriculum consists of diverse educational experiences including lectures, laboratories, small group learning, panel discussions, clinical clerkships, seminars and field exercises, accompanied by opportunities to conduct basic and/or clinically oriented research and participate in community health programs. Attendance is required if the activity represents a unique educational experience or participation of all students is essential for its success. Required activities include most laboratory exercises, small group experiences, clinical experiences, and lectures presented by honored guest speakers.

Attendance at laboratory exercises, small group experiences and learning experiences conducted in clinical settings is required unless otherwise stated by the corresponding module directors.

In addition, required attendance at other educational experiences may be requested by the module director, course director or departmental chair under the following circumstances: (1) The session includes participation of a guest lecturer from outside of USUHS, whose presence is an honor to the group. (2) The content of the session is essential for accomplishing the work of a subsequent small group experience or laboratory exercise and cannot be acquired by students through independent study.

STUDENT PARTICIPATION IN CLINICAL SKILLS TRAINING

As part of their educational experience, medical students often learn basic interviewing and physical examination skills by practicing on each other, under the guidance of an experienced clinician or faculty mentor. Examples of such procedures include learning how to obtain a blood pressure, performing an abdominal or knee exam, performing a basic phlebotomy, etc. If a student wishes to opt-out of being a "patient" for experiences of this sort,* he/she should discuss this with the appropriate Course Director, with a faculty member in the Office for Student Affairs, or with the Associate Dean for Medical Education.

Students will not be penalized for declining to serve in the role of "patient" for another classmate or an Instructor. In such circumstances, instructors must refrain from evaluating the student's overall performance in whole or in part, based on their willingness to volunteer as a "patient."

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Faculty members are expected to make every effort to ensure that students are not placed in situations that violate a student's sense of privacy or propriety. Moreover, the management of any incidental findings of clinical significance should be discussed with the involved student in a manner that respects the student's confidentiality and right to privacy.

*Note: School of Medicine policy prohibits instructors or medical students from requesting medical students from serving as "patients" for intrusive examinations or procedures, such as a rectal or genitourinary exam, or a lumbar puncture. Medical students should refuse any such request and immediately report the incident to the Office for Student Affairs or Associate Dean for Medical Education.

REQUEST FOR TRANSCRIPTS

Requests for transcripts are directed to the University Registrar. All requests must be in writing. Transcripts are to be requested on the USU Website (www.usuhs.edu/reg/service.html) whenever possible. Official or unofficial transcripts may be provided to the student or third party, upon the student's written request.

GRADE REPORTS

Students may request a grade report by visiting the University Registrar or by email request.

ACCESS TO STUDENTS' RECORDS AND CORRECTION OF RECORDS

The Privacy Act and implementing regulations apply to students' records. In brief, students may:

- Request access to their record or to any information pertaining to themselves which is retained by the University Registrar.
- Authorize in writing a designated person(s) to review the record and have a copy made of all or any portion thereof. The University Registrar may require students to furnish written statements authorizing discussion of their record in the accompanying person's presence.
- Request, in writing, amendment of records pertaining to themselves. After obtaining necessary verification and not later than ten working days after receipt of such request, the Registrar will acknowledge the request, in writing, and make any justified correction(s) of any portion of the record. The student will be notified of any refusal to amend the record in accordance with the request and the reason for the refusal.

WITHDRAWAL FROM THE SCHOOL OF MEDICINE

You may withdraw from the School of Medicine at any time. You must submit a letter of resignation through the Associate Dean for Student Affairs to the Dean stating the reason for requesting withdrawal. If your resignation

is accepted, you will be released from the School of Medicine but will be required to serve on active duty in an appropriate military capacity, as prescribed by the Secretary of Defense, or his/her designee, for a period equal to the amount of time spent in the School but in no case less than one year. Students may be required to serve on active duty immediately, in a reserve status, and/or be obligated to reimburse the government for educational costs.

SUPPORT OF THE ACADEMIC ENVIRONMENT

THE JAMES A. ZIMBLE LEARNING RESOURCE CENTER

The James A. Zimble Learning Resource Center (LRC) supports the information needs of the F. Edward Hébert School of Medicine, the Daniel K. Inouye Graduate School of Nursing, and the Post Graduate Dental Schools. It is open to USU affiliates 24 hours a day, seven days a week, with service hours during the daytime and evening. Reference librarians and computer support staff are available to help you with your research needs during service hours. In addition to housing print books, journals and computers, the LRC provides group study rooms, a computer classroom, and a quiet study area. Classes on library resources are held regularly throughout the year.

The LRC also provides remote access to its electronic collection through our Electronic Resources (ER) collection, which includes access to over 7,000 electronic books, journals and databases.

The University Archives, housed in the LRC, collects, preserves, and makes available rare university materials; historical military medical and public health collections; and personal papers of enduring value from administrators, faculty, and alumni for the research use of the university and the general public. The Archives collects manuscripts, oral histories, rare books, audio-visual materials, and artifacts relating to the history of the University and the history of military medicine.

CENTER FOR MULTIDISCIPLINARY SERVICES

The Multidisciplinary Laboratories (MDL), established for the support of teaching and dedicated to the assistance of students, provides a home base of operations for study and scheduled laboratory exercises. They are a university activity under the Customer Support Director, CSD, and are managed by the Director, MDL.

The MDL rooms are designed for maximum flexibility so that all laboratory teaching activities may be conducted regardless of their discipline. A telephone is available from the MDL common areas, each lecture room, each conference room and the ATL so that users may reach the MDL office when emergencies arise: (b)(6)

The MDL provides support in the following areas:

- *Examination Support.* The university, through the MDL, is using computerized testing. This involves using the computers in the MDL for test taking at various times of the year. Prior to tests, the MDL computers will be unavailable for use and staged for the exam. This means that no one should count on having a specific computer for his or her personal use. Examinations are designed and administered at the departmental level. The MDL also provides the university with a computer-based grading system. The MDL utilizes an optical mark reader (OMR) to grade student examination sheets. This requires proper marking of the answer forms with a No. 2 pencil. Stray marks, “light” responses, and/or incomplete erasures may result in an incorrect grade. Students should familiarize themselves with examination instructions to avoid such errors. Students are responsible for marking their exam number on the answer sheet.
- *Classroom Support.* The MDL supports all lectures by providing requested audiovisual equipment and supplies. Centralized room scheduling for six lecture halls, eighteen conference rooms, one broadcast/vtc room, computer room, and the Sanford Auditorium is provided online through the MDL website.
- *Student Laboratory Support.* The MDL supports student laboratory exercises by providing pre-laboratory coordination of logistical support, complete staging of equipment, and technical assistance during the lab exercise, and documentation/cost analysis following the lab.

Also under the supervision of the Director, MDL is the Anatomical Teaching Laboratory (ATL). The ATL conducts laboratory teaching support of the anatomical sciences. The lab provides cadavers for dissection, anatomical materials, models, and audiovisual materials along with the necessary specimens for all anatomically-related laboratory teaching.

The ATL is off limits to all personnel unless they have specific business in the facility. “Drop in” tours of the ATL for family and friends are prohibited.

Any tour of the ATL requires prior approval from the Senior Vice President, the Director, MDL; the Assistant Director, Anatomical Support Services; and during their respective courses, the Anatomy Course Directors. The date and time of the visit must always be coordinated with the Assistant Director, Anatomical Support Services.

The following guidelines apply to all students and faculty in conjunction with use of the MDL.

1. The MDL is open for student use 24 hours a day 7 days a week. The MDL office room “A2030” is open for customer service from 0730 to 1400 at (b)(6) and a technician can be reached in room “A2034” until 1700 at (b)(6). The ATL is open 24 hours a day 7 days a week during the Anatomy courses and at scheduled times during the remainder of the year.

2. While maintenance personnel will perform housekeeping tasks each day, we require your cooperation to allow USU to be professionally maintained. Please clean-up your laboratory station when you complete a lab exercise. Clean all equipment and properly dispose of trash. Discard trash in available trash cans. Dispose of needles, scalpel blades, and other “sharps” in special “sharps” containers. Place blood, blood products, and other items which contain blood in biohazard bags. Leave remaining equipment in the condition in which it was received or as instructed by lab personnel.
3. Smoking is prohibited in all areas of the MDL, the ATL, and lecture rooms. Eating or drinking is also prohibited in the ATL and MDL labs. Eating is prohibited in the lecture rooms and conference rooms. Clean up by individuals eating or drinking where authorized is essential. This is especially true when you use common spaces after hours, remember someone may be seeing your university the next day before the custodial staff arrive.
4. Audiovisual equipment is available for your use and may be checked out at scheduled times. Return it to the condition in which you found it (if centrally located) and report any malfunction to the MDL Office.
5. Do not leave texts, notebooks, papers, recorders, or calculators unattended in any teaching areas.
6. Lab station assignments will be made at the beginning of each year. Changes are to be made only with the approval of the Module Director.
7. The taking of photographs or video recordings is prohibited at all times in the MDL/ATL.
8. Do not add, remove or modify furniture or equipment from any of the MDL areas without the permission of the Director, MDL.
9. While the lab and conference rooms are available for student study, these rooms are used for other purposes throughout the year. It is important to remember to keep these areas clean. There are no microwaves, refrigerators, sleeping bags, clothes storage, or any other housekeeping type items allowed in the MDL rooms. Any such items found in the rooms will be removed. While we appreciate the long study hours it is necessary to maintain these rooms in a safe and clean manner.
10. The computers in the labs are for student study use. These computers belong to the DOD and as such fall under their regulations for use. Personal downloading of movies and other items is prohibited. Excessive personal use for “surfing the net” is also prohibited. Because the computers are used for teaching and testing, it is important to bear these regulations in mind.

MDL issues textbooks at the beginning of each school year and physician diagnostic equipment during the first academic year. You are required to sign for these as a matter of record, but they remain your property. None of these issued items, however, may be sold or otherwise exchanged for profit. The School of Medicine will not replace any lost/stolen items. Since insurance companies often distinguish between "medical equipment" and other "personal possessions," we suggest that students acquire sufficient insurance to cover the loss of the physician's diagnostic equipment.

Certain textbooks, bone sets, and surgical sets are loaned to each student. You will be required to sign for these items and are expected to return them at the end of the course or when requested. When receiving a loan item, you will be issued a receipt which you should keep in the unlikely event the MDL files are in error. Receipt of the following year's textbooks is contingent upon the return of previously loaned books, student microscope, and locker key. Loaned materials which are lost or damaged must be either replaced or reimbursed, at the discretion of the Director, MDL.

Two laboratory jackets will be issued to you. Maintenance of and replacements for laboratory jackets are your responsibility.

Each Pre-Clerkship student is to provide a lock for his/her assigned locker (keys are issued for some lockers). Lockers may be searched (since USU is on a military installation). Lockers must be cleaned out at the end of each academic year.

Issue, loan, and turn-in dates and times will be coordinated to ensure that an agreeable time is selected for the majority of the class. Students may request alternate dates and times by contacting the MDL Office.

MDL personnel are available to assist you in the use of your equipment. Do not hesitate to ask for assistance. If your equipment is not functioning properly, it will be replaced or corrective action will be taken to ensure a successful laboratory experience.

CENTER FOR LABORATORY ANIMAL MEDICINE

USU uses animals in teaching and research programs. To support these efforts, there is a stringent animal care use program and an extensive modern animal housing facility. USU Instruction No. 3204 explains in detail the policies relative to the animal care program under the Center for Laboratory Animal Medicine (LAM).

The animal facility is RESTRICTED ACCESS to all personnel unless they have specific clearance to enter the facility. Unscheduled tours of the animal facility for family and friends are specifically prohibited. Any tour of the facility requires prior approval by the Director, LAM. In addition, LAM offers guided tours of the central animal facility. The tours are open to any interested university student, faculty, or staff member. Those desiring tours

should contact the Director, LAM, or Deputy Director, LAM to schedule an appointment.

LAM does not support a private pet clinic. There are military private pet clinics at Fort Meade, (b)(6), and Fort Belvoir, (b)(6). Questions relative to the animal care and use program at USU should be referred to the Director, LAM, (b)(6). Private pets are prohibited within the USU complex.

ENVIRONMENTAL HEALTH AND OCCUPATIONAL SAFETY

The mission of the Center for Environmental and Occupational Safety (EHS) is to provide the students, staff, and faculty of USUHS with the optimal healthful work environment by controlling health hazards, promoting safety, providing occupational health support, and protecting the environment through compliance with DOD, federal, state, and local regulations. To accomplish this mission, EHS has four divisions including Radiation Safety (b)(6); Industrial Hygiene (b)(6); Occupational Medicine (b)(6); and Occupational Safety (b)(6) Divisions. The university Safety Officer (b)(6) can address any safety question you may have or direct your concerns to the appropriate division Chief. EHS performs regular Radiation Safety and Industrial Hygiene surveys throughout the university. Additionally, Occupational Safety performs annual safety audits on university spaces to include research laboratories.

Each division is dedicated to optimizing safety and the prevention of occupational injury and illness. Additional EHS program elements include biological and chemical waste management, medical surveillance for various occupations and positions, laboratory safety and hazard communication to include several varied training sessions offered by EHS. To learn more about EHS, please visit: <http://www.usuhs.edu/ehs>.

EHS's main office is located in Building "A", Room A-2020 (b)(6). We encourage you to review our web page and to direct any questions you may have concerning Environmental Health and Occupational Safety to our main office. A representative from EHS will answer your query promptly. Urgent safety issues or questions regarding how to perform a task safely, especially involving work in laboratories, should be immediately brought to the attention of your work center supervisor, instructor, professor, and/or Principle Investigator. Should you wish to discuss any issue, urgent or not urgent with EHS directly, you may do so by contacting any of the people in the paragraph above, through and including the Director of EHS. You may request that your name be kept confidential.

Safety is everybody's business. In addition to EHS staff, responsibility for safety falls with everyone working at the university to include students, faculty and staff. There are no silly questions. Please ask your supervisor, instructor or a member of the EHS staff should you have any safety questions regarding your work at the university.

UNITED STATES MEDICAL LICENSING EXAMINATION

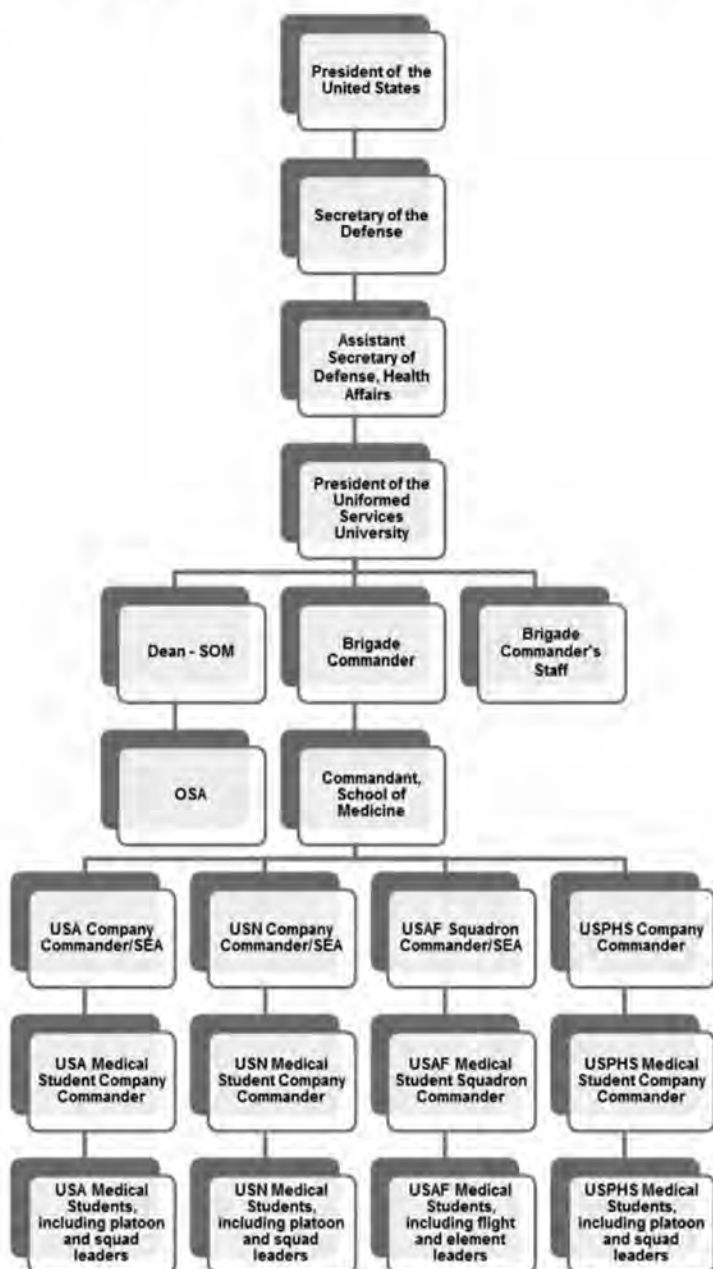
Physicians within the military health care system must be licensed to practice medicine as a prerequisite for obtaining full credentialing and hospital privileges. Therefore, as a service physician, you will be required to obtain a license to practice medicine in any one of the fifty states, the District of Columbia, Guam, the Virgin Islands, or Puerto Rico within one year of becoming eligible. To be licensed, physicians must (among other requirements) pass the United States Medical Licensing Examination (USMLE), a series of four standardized exams, including a clinical skills exam.

You will take Step 1 (which covers the material taught during the Pre-Clerkship and Clerkship years) at the beginning of your Post-Clerkship period. You will take Step 2 CK (Clinical Knowledge) and Step 2 CS (Clinical Skills) which cover knowledge and skills learned during the Clerkship and Post-Clerkship period, during the first half of the Post-Clerkship period. After receiving the M.D. degree and upon completion of at least six months of internship, you will take Step 3. Once you have passed all four parts of the exam you will receive certificates from the NBME.

Students who fail either Step 1, 2CK, or 2CS will have their entire academic record reviewed immediately by the Associate Dean for Student Affairs and the Assistant Dean for Clinical Sciences; the records will also be reviewed subsequently by the Student Promotions Committee. Future plans for these students will be made on an individual basis following discussions between the students, the Associate and Assistant Deans, the Student Promotions Committee, and the Dean of the School of Medicine.

MILITARY

MEDICAL STUDENT'S CHAIN OF COMMAND



MILITARY CHAIN OF COMMAND

As active duty officers, students are assigned to a military organization (the USU Brigade), with a formal military chain of command. The chain of command provides a clear and concise route for information flow and decision making authority for those activities that relate to a student's duties as a uniformed officer.

Within USU, the chain of command proceeds from the Brigade Commander, to the Commandant, to the Company Commanders and then to the student chain of command.

USU BRIGADE

Mission

The Brigade is the military command of all uniformed personnel, including faculty, staff, and students assigned to USU. Numbering over 1000 Navy, Marine, Army, Air Force and Public Health Service members, the Brigade is a dynamic organization that plays an integral role in the university and its tenant activities in the preparation of health care professionals for military readiness and national disasters. Its missions include:

- Provide professional career development for assigned officers and enlisted personnel that enhances competitiveness for promotion, future assignments and retention in the uniformed services.
- Ensure the health, welfare, morale and spiritual support of Brigade members.
- Support University military field exercises and events.
- Support worldwide military medical operations and contingencies.

Brigade Support Staff

This includes the Brigade Executive Officer, Headquarters Company Commander, Senior Enlisted Advisor, Brigade Equal Opportunity Officer, Brigade Surgeon, Operations Officer, Military Personnel Office, Brigade Legal, and Brigade Chaplain.

Other university elements working for the President and/or Dean to provide direct support to students are: The offices of the Vice President, Recruitment and Admissions; General Counsel; and others. Since all of these USU staff elements work in close concert, any of them can, without difficulty, direct students to the office most able to provide the needed support.

More information about the Brigade is available on the USU website: (www.usuhs.edu) under the heading of "Military," then "Brigade Command."

Military Personnel Office (MILPO)

This office processes all administrative paperwork for Army, Air Force, and Navy students.

BRIGADE COMMANDER

The Brigade Commander is ultimately responsible for the accomplishment of the Brigade mission. The Brigade Commander is recognized as the senior active duty military officer of the Uniformed Services University and implements the Uniformed Code of Military Justice within the USU Brigade. The medical student battalion is an element of the USU Brigade and falls under the Brigade Commander's Chain of Command for any military issues. USU students work within academic departments and receive their academic direction from module directors and the Office for Student Affairs.

It is the responsibility of the Brigade Commander to ensure the uniformed personnel assigned to the University adhere to the appropriate service specific standards set by their parent service. In addition, the Brigade Commander makes certain that the interests of all military members (faculty, staff and students) assigned to the University are addressed. These interests include, but are not limited to, good order and discipline, physical fitness standards, completion of performance evaluations and training in military programs and customs.

COMMANDANT OF THE SCHOOL OF MEDICINE

Mission

The mission of the Office of the Commandant is to provide military leadership, to teach and instill officership, and to support medical education and professional development so that each graduate achieves the goal of becoming a world class military physician.

Mission Essential Tasks

1. To exercise command and control, on behalf of the Uniformed Services, over the officers assigned as students to the F. Edward Hébert School of Medicine.
2. To model, stimulate, and foster the qualities and attributes of professional leadership and officership, giving particular emphasis to:
 - a. Service as a uniformed medical officer.
 - b. Character as exemplified by integrity, morality, discipline, and a strong sense of duty and responsibility.
3. To provide Service-specific guidance and training essential to officer professional development.
4. To mentor and cultivate life-long healthy lifestyle habits.
5. To support the USU unifying goal of developing medical officers who demonstrate, by exhibiting the highest principles of medical practice and officership, their dedication to service to others through service to the nation.

With the support of the Army, Navy, Public Health Service, and Air Force Company Commanders, the Commandant of the School of Medicine commands the medical and graduate students assigned to the university. The Commandant also serves as:

- 1) Chairman, Board of Review of Interservice Transfers
- 2) Member, Student Promotions Committee
- 3) Member, Student Award Committee
- 4) Assistant Professor of Military & Emergency Medicine
- 5) Advisor to the Dean and Associate Dean for Student Affairs

SERVICE SPECIFIC COMMANDERS/SENIOR ENLISTED ADVISORS, SOM

Mission and Tasks

The Commandant of the School of Medicine is assisted by Army, Navy, Air Force, and Public Health Service Company Commanders. These commanders are in command of over 600 medical students and are responsible for their officer professional development, welfare, morale, and readiness. Additional responsibilities include the supervision and management of all administrative aspects of the company which includes physical fitness testing, weight management, financial management, career development counseling, and drug and alcohol testing. Additionally this position carries with it an appointment as an adjunct faculty member in the Department of Military and Emergency Medicine which entails assisting in the instruction of basic field medical skills courses and combat medical skills courses. The Commanders serve as advisors to the Commandant on all matters pertaining to the professional development of all student officers in all the branches of service represented at USUHS: Army, Navy, Air Force, and the Public Health Service.

The Senior Enlisted Advisors assist the Commanders in all matters relating to the professional development of the medical students. This includes conducting formations and inspections, providing guidance to students on service policies, instructions and regulations, and providing a positive example of the credibility and capabilities of the Senior NCO Corps. Additionally, they take an active role in preparing students to participate in Operation Bushmaster, Field Training Exercise 101 and the Antietam Road March.

STUDENT COMPANY COMMANDERS

Mission, Tasks and Purpose

The Student Company Commanders are the military leaders for all students of a given service within a class. These students must maintain a close working relationship with the Class President and when appropriate the elected class representatives. They are responsible for keeping the Student Battalion Commander and staff Company Commanders informed of relevant

service-specific issues. They assist in planning, organizing and conducting service-specific military activities, and disseminate official information through their subordinate leaders. There are activities that overlap with regard to a student's military and academic duties (e.g., required uniforms for certain classes, scheduling mandatory military activities with minimal impact on student activities, etc.). The Student Battalion Commander (who is the elected class president) and other elected academic representatives are responsible for coordinating with each other on all matters that impact upon both military and academic responsibilities ensuring that the Commandant, Company Commanders and Associate Dean for Student Affairs (ADSA) are fully informed in advance.

Some of the activities that the chain of command may be called upon to plan and organize include: uniform inspections; physical fitness testing; field gear issue; unit recall; Commandant's call; and Company formations.

The student chain of command serves two purposes: (1) to familiarize students with the structure of the military organizations, and (2) to provide assignments which promote and teach basic military leadership and officership skills in a practical setting. The student chain of command is appointed by the Company Commanders under authority of the Commandant.

STUDENT PLATOON LEADER

Each military service is divided into platoons. The leaders report to the Student Company Commanders to receive assignments and military information for dissemination. These leaders will assist the Student Company Commander with the planning, organization and conduct of military activities.

STUDENT SQUAD LEADER

The squad leaders are primarily responsible for timely and accurate dissemination of information, the accountability of their squad at military formations, and providing leadership for tasks designated by those senior in the chain of command.

DEFINITIONS, STANDARDS, PROCEDURES AND EXPECTATIONS OF USUHS MEDICAL STUDENTS

DEAN'S TIME

The official duty day is Monday through Friday, 0730–1600. Dean's Time is that part of the official school day that "belongs" to the Dean. Other staff or faculty may use this time for student activities only with the Dean's consent. Most often, the Dean leaves these time periods unscheduled to allow time for students to accomplish essential tasks outside of the USU campus (e.g., vehicle registration, banking, and other matters restricted by business hours), for additional study times, or for recreation. The Commandant, with the concurrence of the Dean, will schedule military training activities during this time (e.g., formations, inspections, physical fitness tests, weigh-ins, or special training). The Dean may approve other USU elements' requests for scheduling Dean's Time in support of specific requirements.

ACCOUNTABILITY, LEAVE, AND PASS/LIBERTY

Accountability System

To ensure the safety and welfare of all students, an efficient and effective system of accountability is essential.

1. All students must provide any changes in telephone numbers or address to the Company Commander's Office AND the Office for Student Affairs within 7 days of the change. The information is used to update the recall roster.
2. All students must log onto their USU e-mail accounts (GoogleApps) DAILY and respond to any taskers in a timely manner.
3. Students must participate in all required academic activities unless officially excused by the appropriate module director(s). The Senior Enlisted Advisors and Company Commanders approve all pass and leave requests. The Office for Student Affairs or delegated staff are the university officials who grant final clearance for missing academic requirements prior to signature by the Company Commanders.
4. An electronic Sign-In Process (Everbridge) is used during all four years and during breaks to ensure that all students are accounted for within the Standards of Military Service Requirements.

Leave

Medical school is emotionally, mentally, and often physically stressful. It is in the student's best interest to periodically disengage from this environment to regain positive and healthy perspectives. You are strongly encouraged to take advantage of the leave you accrue each year.

You earn 2.5 days of leave each month. USU policy permits ordinary leave when classes are not in session during the fall, winter, and spring breaks, and at the end of the academic year. Students are responsible for managing their leave by ensuring adequate leave days are accrued before taking authorized absence; leave days are not lost at the end of the fiscal year; and enough leave days are available to cover the transition from medical school to internship (may require 20-30 days of leave).

Specific procedures for requesting leave are provided by the student's service-specific Company Commander. The student must be in good academic standing and *medically ready*; therefore, before requesting leave, students should check their *medical readiness* status with their Senior Enlisted Advisor.

1. Plan ahead for leave. Submit the following documents to your service-specific Company Commanders no later than *10 working days* prior to the start date: a) service-specific leave request, b) most current Medical Readiness status, and c) Leave and Earning Statement (LES).
2. Leave is not approved until you have a control number on your leave form, or is electronically approved online (Air Force & Navy). For the Army, the paper system is used for leave requests.
3. You must have a copy of your leave approval on your person at all times when on leave.
4. You must sign in the next day when you return from leave (check service specific policies).
5. Use of leave not yet earned (advance leave) is not automatic; you need to check with your Company Commander for service specific policies.
6. Emergency leave can be granted at any time if the leave meets the service-specific definition of emergency leave. Your commanders will provide you with a contact number you can use any time of the day or night to receive assistance. At minimum, you must provide the nature of the emergency, when you want to leave, the complete address of where you will be going, name of person(s) with whom you will be staying, phone number, mode of transportation, and how many days you will be gone. It is your responsibility to notify your Company Commander; this is not something you can delegate. Leaving the area without permission is considered Absent Without Leave (AWOL) or Unauthorized Absence (UA), is a serious offense, and is punishable under the Uniform Code of Military Justice (UCMJ).
7. Any request for leave which would cause a student to miss scheduled class or clinical rotation time must have the approval of the Office for Student Affairs and module director or clerkship preceptor before Company Commander processing. In addition, the OSA will require verbal permission from the relevant department chair/module director before they will recommend leave.

Regular and Special Pass/Liberty

Regular pass/liberty is authorized absence from place of duty (greater than 250 miles) during **non-duty** hours (after 1600), weekends, and holidays. Typically, passes are used for 3-4 day holiday weekends for a period of 96 hours or less. It does not count against leave. Regular pass must include the weekend (Saturday and Sunday) and may not include a school day. For example, if a federal holiday falls on a Monday, the student may request for a 3-day regular pass that extends from Friday after 1600 until the beginning of duty on the following Tuesday at 0730. Regular passes are requested by submitting a Pass/Liberty Request Form to the appropriate Company Commander. Requests must be submitted at least 7 working days in advance prior to pass start date.

Regular pass may be granted with leave with the following guidance. A regular pass begins and ends at the duty location, or location from where the student typically commutes to duty before a pass begins. Leave begins and ends at the duty location, or location from where the student typically commutes to duty before leave begins. Requested leave should not start or end at the destination of the regular pass.

If you are unable to return from regular pass/liberty for any reason, you must immediately notify your Senior Enlisted Advisor, Company Commander, or the Commandant. Extension of a regular pass/liberty will necessitate conversion of the entire absence into leave. You may not overstay a regular pass/liberty without prior approval. If you do, you are AWOL/UA and subject to disciplinary action.

If a student wishes to be absent on days with mandatory class functions or during duty-hours, a leave form must be submitted to service-specific Company Commanders for processing after signed approval from OSA and module director or clerkship preceptor.

Special pass/liberty is authorized absence from place of duty under special circumstances granted by Command (i.e., special recognition for superior performance, observance of major religious events, or to exercise voting responsibilities). It does not count against leave. Special pass/liberty may NOT be used in combination with leave, regular pass/liberty, holidays, or other off-duty periods where the combined periods of continuous absence would exceed 4 days.

Special pass/liberty requests that include days with mandatory class functions must be signed by the Office of Student Affairs and module director or clerkship preceptor prior to submitting to your Company Commander for processing. Special passes are requested by submitting the award certificate and Pass/Liberty Request Form to the appropriate Company Commander. Requests must be submitted at least 7 working days in advance prior to pass start date, and are usually 3 or 4 days in duration.

Request for 3-day special pass/liberty is approved by the Commandant. It normally begins at the end of a normal duty day and ends at the start of a normal duty day on the 4th day (i.e., from Monday at 1600 until Friday at 0730, or from Wednesday at 1600 until Sunday at 0730).

Request for 4-day special pass/liberty is approved by the Brigade Commander. It normally begins at the end of a normal duty day and ends at the start of a normal duty day on the 5th day, and includes at least 2 consecutive non-work days (i.e., from Wednesday at 1600 until Monday at 0730).

If you are unable to return from special pass/liberty for any reason, you must immediately notify your Senior Enlisted Advisor, Company Commander, or the Commandant. Extension of a special pass/liberty will necessitate conversion of the entire absence into leave. You may not overstay your special pass/liberty without prior approval. If you do, you are AWOL/UA and subject to disciplinary action.

STANDARDS OF CONDUCT

Public confidence in the integrity of the Department of Defense (DoD) is essential to the performance of its mission. For this reason, all military personnel are held to the standards of conduct requiring them to:

1. Avoid any action, whether or not specifically prohibited, which might result in or responsibly be expected to create the appearance of:
 - a. Using public office for private gain;
 - b. Giving preferential treatment to any person or entity;
 - c. Impeding government efficiency or economy;
 - d. Losing complete independence or impartiality;
 - e. Making a government decision outside official sanctions;
 - f. Adversely affecting the confidence of the public in the integrity of the government.
2. Not engage in any activity or acquire or retain any financial interest which results in a conflict between their private interest and the public interest of the United States related to their duties.
3. Not engage in any activity that might result in or reasonably be expected to create the appearance of a conflict of interest.
4. Not accept gratuities from defense contractors.
5. Not use their official position to influence any person to provide any private benefit.
6. Not use inside information to further private gain.
7. Not use their rank, title, or position for commercial purposes.

8. Avoid outside employment or activity that is incompatible with your duties or may bring discredit to the military service.
9. Never take or use government property or services for other than officially approved purposes.
10. Not give gifts to their superiors or accept them from their subordinates.
11. Conduct no official business with a person whose participation in the transaction would be in violation of the law.
12. Seek ways to promote efficiency and economy in government operation and public confidence in its integrity.

UNIFORM CODE OF MILITARY JUSTICE (UCMJ)

Military service members do not lie, cheat, steal, or engage in activities that bring discredit upon their service, nor do they tolerate those who do.

The military justice system is one tool used to correct breaches of discipline; it protects the rights of both the institution and the individual service member. As a uniformed officer, it is your responsibility to provide full support to the UCMJ when a breach in discipline occurs. The following are some specific responsibilities that come under this general responsibility:

1. Support your Commander in the application of the military justice system for maintaining order and discipline.
2. Become involved when breaches of discipline occur in your presence and report all such violations to the proper authorities.

Officers should do everything within their power to prevent breaches of discipline from occurring. If all efforts at prevention fail, the next most reasonable step is correction through expressions of disapproval, verbal reprimands, or remedial training.

These corrective methods often bring more desirable results than more punitive methods; however, if these minor corrective methods prove unsuccessful, punitive action may be taken. Punitive methods are used as a last resort to punish those who repeatedly or seriously violate the standards of conduct required of military service members. Punishment may be rendered through nonjudicial punishment (Article 15) or judicial punishment (court-martial). Issues involving breaches in military conduct will be dealt with by the USU Brigade chain of command. Adjudication will be directed through the student's branch of service. The Student Promotion Committee (SPC) will be briefed on actions taken. The SPC will determine the need for further action as it relates to medical student status at the university. Depending on the offense, local or DoD law enforcement may also be brought in at the discretion of the Command.

UNIFORM AND GROOMING STANDARDS

Unless otherwise directed all USU students will wear their services' prescribed service uniform while attending classes, when conducting other official business on campus while in rotations, and during the usual duty day (0730-1600). Academic exercises requiring the wearing of the utility uniforms (ABU/ACU/NWU/ODU) will be so annotated on the course schedule prepared and distributed by the Office of Medical Education and on the official class bulletin boards. During rotations in the military treatment facilities during the clinical years, the normal duty uniform will be prescribed by the local commander. During clinical rotations in non-military treatment facilities, the duty uniform will be prescribed by the Assistant Dean for Clinical Sciences. Remember, even during rotations or leave periods, students must be in uniform to conduct official business on the USU campus.

All students are required to maintain proper grooming standards in accordance with their service-specific regulations. Students should be neat and clean at all times with their uniforms in good repair. Service-specific physical fitness uniform or exercise clothing may be worn only while going directly between the place of exercise and the changing room at USU unless specifically authorized.

DINING-IN AND DINING-OUT

The university holds a Dining-In or Dining-Out each academic year. The Offices of the Commandants of the School of Medicine (SOM) and Graduate School of Nursing (GSN) sponsor both events under the auspices of the Brigade Commander. The planning and execution of these events are accomplished through a committee with representatives from the School of Medicine and Graduate School of Nursing.

The Dining-In serves to familiarize students with the formal military customs, to continue old traditions, and to foster an "esprit de corps" at USU. The Dining-In is an enjoyable evening of companionship with fellow students, staff, and faculty.

The Dining-Out is an opportunity to have family and friends join in the uniformed tradition of fine formal dining and fellowship among officers. In addition to the custom and ceremony of the event, entertainment and dancing usually follow the formal portion of the evening.

These evenings are formal activities of this uniformed command. Attendance during the first two years provides important opportunities for officership growth and development. Attendance is an officer's professional obligation, as is the ownership and proper wear of the service-specific dinner dress uniform.

PHYSICAL FITNESS AND WEIGHT CONTROL

Students are required to pass the physical fitness test and meet height/weight and body fat standards administered in accordance with their service regulations. Failure at either test can result in administrative actions, including entry into a supervised exercise program, entry into a weight management program, restriction of clinical rotations and potential removal from active duty. Failure to meet standards will result in notification of the parent service.

All students will maintain a personal exercise program to ensure physical fitness and weight control. The university has master fitness instructors who, upon request, will tailor programs to meet individual needs. Students are encouraged to seek help from their service-specific Company Commanders if they are experiencing difficulty in this area, preferably BEFORE a physical fitness failure.

POLICY DIRECTIVE ON MEDICAL STUDENT OUTSIDE ACTIVITIES

Unlike other medical schools, students at this university are fortunate enough to receive full military pay and allowances while attending school. One example of the importance placed by the military services on the training that occurs here is that students, even those with previously established military specialties, will not be temporarily reassigned outside of the institution while they are students except in the gravest of national emergencies. For these and other reasons, the parent service of each student expects that a student's primary emphasis and full attention will be focused on their studies at USU. Accordingly, the following policy is established regarding outside activities.

For purposes of this Directive outside activity is defined as any non-federal government activity that involves compensation (employment), relates to the service member's duty (to include attendance in a regular course of study at other educational institutions) or significantly impacts on the student's time. The general definition of employment may be found in DoD Directive 5500.7-R, the Joint Ethics Regulation. Any questions as to whether a particular activity falls within this Directive should be addressed to the Brigade Legal Officer. Courses which are completed in a relatively short time are exempt from this Directive. (An example of this would be a short computer course taken over a weekend or during a couple of evenings at a local computer training center.) While the university encourages students to volunteer and be active in the local community, we expect students to know their limits and not let this interfere with their studies.

Any activity deemed to be an outside activity for the purpose of this directive must be approved before the student is authorized to engage in the activity. While each request will be evaluated on its own merits, as a general rule activities which involve compensation will not be approved.

The process for seeking approval of outside activities is as follows:

1. The student will discuss and receive approval from the Office for Student Affairs before initiating the process.
2. The student will obtain a USUHS Form 1004 from the Company Commanders' Office.
3. The completed form will be staffed through the service-specific Commander, Commandant, and OSA.
4. Should they recommend approval, the request will be reviewed by the Brigade Legal Officer to ensure compliance with the Joint Ethics Regulation.
5. Final action will be taken by the Brigade Commander.

SPECIFIC LOCAL POLICIES

1. ***Saluting:*** The area within the garage, walls and central courtyard of the USU complex is a no-hat/no-salute area. Outside the walls (i.e., off the bricks in front of the USU building on the university grounds), officers in uniform will be covered and render/return salutes. Verbal courtesies still apply in these no salute areas. Saluting is expected on all other parts of the military base in accordance with military service policies.
2. ***Name/Address/Telephone Changes:*** Students must notify the Company Commanders' Office AND the Office for Student Affairs of any change in name, address, or telephone number within 7 days of the change.
3. ***Eating/Drinking in Lecture Halls:*** USU does not allow beverages or food in laboratories, in the main auditorium, or during lecture presentations by general/flag officers or senior federal governmental officials. Students may normally bring beverages, but not food, into Lecture Rooms D and E during scheduled activities. Module Directors may prohibit beverages during specific presentations involving outside guests who, in the Module Directors' judgment, might be disturbed or offended by such "audience behavior." Such individual prescriptions will be listed in the Course Schedule published by the Office of Medical Education.
4. ***Rendering of Courtesies to Senior Military or Governmental Guests:*** All students will come to attention when a general/flag officer or service government official first enters the lecture room. When asking questions of visiting general/flag officers or senior governmental officials in a lecture setting, USU students will stand at attention by the seat, greet the speaker by title, introduce themselves (i.e., Lt or ENS XXX), and ask their question.
5. ***Rendering of Courtesies to Faculty, Military Colleagues, and University Executives:*** Students will initiate and exchange greetings and courtesies with senior personnel, i.e. Good Morning, Ma'am, Good Evening, Sir...

6. ***Elective surgery*** (e.g. PRK/LASIK) requires prior coordination with both the Office for Student Affairs and the Company Commander before moving forward with the procedure.
7. ***Use of cell phones/electronic media during lectures and on campus:*** The Office of Medical Education, module directors, teaching faculty and staff have allocated great time and resources in preparing stimulating lectures for the school curriculum. To afford them the courtesy, all students will refrain from texting or “surfing” the internet with their electronic devices during lectures. Cell phones should be placed in “vibrate” mode. For phone calls that must be answered, students will take the call outside of the lecture hall. In addition, students should be courteous and refrain from conducting loud or disruptive personal phone calls in public places such as the student lounge, Learning Resource Center, cafeteria, and gym.
8. ***Internet etiquette:*** Students will avoid unprofessional behaviors when engaging in online activities. These unprofessional online behaviors include, but are not limited to: use of threatening, slanderous, or obscene language; use of discriminatory language based on race, ethnicity, sexual orientation, gender, age, religion or disability; engage in arguments or personal attacks; comments that suggest illegal activities; distribution of spam, solicitations, and inappropriate advertisements; and release of protected health information or personally identifiable information. Pause and review the content of your correspondence before sending or posting.

ALCOHOL AND DRUG ABUSE PREVENTION

As do all military personnel, students will periodically undergo random, unannounced urinalysis drug testing while attending USU. It is the university's intent that no positive results occur. Accordingly, not only does testing demonstrate to the American public that we are drug free, it is intended to act as a final deterrent for someone contemplating illegal drug use.

Urinalysis drug testing is considered a mandatory formation and must be completed within the specified time set up for the test. The only excuse for not performing a mandatory Urinalysis is that service member is on official government travel, pass, or leave.

MEANING OF THE TERMS “MANDATORY” AND “ACADEMICALLY REQUIRED”

When, with the concurrence of the Dean, the Commandant describes attendance at an event as “mandatory,” each student has a duty to attend in the appropriate uniform, on time (example: ready to begin and seated, not entering, a lecture hall at 1300 hours for a mandatory 1300 hour event). The Commandant or Company Commanders will announce each mandatory event through your Student Chain of Command. Attendance will be noted and appropriate actions

taken for failure to attend. Students who feel they have a legitimate reason for being absent from a mandatory event must coordinate an excused absence from the Company Commander prior to the event. A word to the wise: do not wait until the last minute to talk with your Commander.

When, with the concurrence of the Dean, an academic department describes attendance at a scheduled event as “academically required,” each student has an academic duty to attend. Consequences of failure to attend such an academically required function will be in accordance with the published policies of the department involved. Academically required events will be so designated in the course material provided each student.

TRAINING REPORTS (TR), ACADEMIC EVALUATION REPORTS (AER), AND FITNESS REPORTS (FITREP)

The Company Commander reports on your academic and military progress to your military service every year. This report is a brief narrative noting your academic progress, military performance, and essential identifying information (rank, SSN, etc.). In addition, the Commandant’s Office will forward personnel documents received to the Military Personnel Office and the Registrar’s Office for inclusion in your official records as appropriate. Prior to completion of the TR/AER/FITREP, your Company Commander will require you to submit an “input sheet” with information concerning your professional activities, completed requirements, and accomplishments. This information is used in the “Professional Qualities” (bearing, appearance, conduct, fitness) portion of your academic report. Although USU Navy students will receive “not observed” Fitness Reports, input will be solicited from the students to include in the narrative section of the FITREP. Academic probation status, disciplinary actions, failure to maintain service-specific height/weight and fitness standards are also reported.

STUDENT TRAVEL

Most of your education during your Clerkship and Post-Clerkship years of medical school will be at affiliated military and civilian hospitals and other sites away from the University. The Student Travel Program Managers, Senior Enlisted Advisors, and Company Commanders will provide the necessary information to allow you to meet all travel requirements. This section explains the basic policies and procedures regarding arranging these trips and traveling to them.

TRAVEL POLICY

The policy regarding student travel is determined by the Brigade and applies to all medical students on funded or permissive Temporary Duty/Temporary Assigned Duty (TDY/TAD).

YOU are responsible for coordinating all your Clerkship and Post-Clerkship travel. For some programs, all or part of a class will travel as a group. If you are permitted to travel separate from the group, you will be paid only what it would have cost the USU to send you with the group. Your extra travel time will be charged as leave. Consideration will be given to certain travel requests at no cost to the USU, but require approvals by your Company Commanders and the person responsible for the program.

Typically, required/selective rotations outside of local duty stations are funded. Elective rotations outside of local duty stations are not funded. All rotations conducted at local duty stations are not funded. See the end of this section for a list of military treatment facilities considered local duty stations. This section refers to funded student travel as funded TDY, and those that are not funded as permissive TDY (PTDY). Approved PTDY may not be changed to a funded TDY at a later time.

You will receive detailed briefings and instruction regarding the Student Travel Program and the rules and regulations regarding your travel. Questions should be directed to the Senior Enlisted Advisors, Company Commanders, and Student Travel Managers.

Key points regarding your travel:

- You must travel with a hard copy of your *approved* authorization (orders) in hand for both funded and permissive TDY. An approved authorization is the official document that permits your travel. For funded TDY, the approved authorization serves as the basis for reimbursement by the government of official travel, transportation, and reimbursable expenses. Travel reimbursement is NOT authorized once travel is performed before your authorization (order) is approved. Travel without approved authorization qualifies as Unauthorized Absence (UA) or Absence Without

Leave (AWOL) and is subject to disciplinary actions. It is the student's responsibility to ensure orders are approved by the Approving Official (AO) from the Student Travel Program prior to departure.

- The Defense Travel System (DTS) is the official electronic system used to create, modify, and approve authorization (orders) for official travel, and to submit vouchers for reimbursement of travel expenses. You may access DTS at: <http://www.defensetravel.osd.mil>. You *must* use the Government travel charge card (GTCC) for authorized travel expenses while on funded TDY such as (but not limited to): airline tickets, lodging, taxi, and rental cars/gas (if authorized and approved). The GTCC is NOT to be used to pay expenses incurred while on permissive TDY (unfunded travel), leave, or pass. The GTCC is issued to you for use in conjunction with official travel. Official travel expenses paid with personal credit cards are NOT reimbursable.
- Similar to personal credit cards, balance on your GTCC must be paid on time. Every month, the issuing financial institution notifies USU Finance of all students who fail to pay their GTCC on time. Continued "delinquency status" is reported to the Command and USU President and could affect your security clearance and FICO score, and will result in disciplinary actions by the Command.
- To ensure timely reimbursement of your travel expenses, you **MUST** complete your travel voucher and submit supporting documents using DTS *within 5 working days of completion of each rotation*. Your rotation sites are military treatment facilities with CAC-enabled computers and should have access to DTS. Therefore, USU students should be able to complete travel vouchers and submit supporting documents into DTS for timely reimbursements. See ***Returning From Rotations*** and ***Government Travel Charge Card (GTCC)*** sections below for detailed guidelines on how to avoid charge card delinquency.
- Vouchers for permissive TDYs will require completion in DTS even if these types of student travels are not funded.
- All supporting documents of authorized expenses incurred during funded TDYs must be submitted into DTS for review and approval prior to reimbursement. These documents include (but are not limited to) receipts for: gas, taxi, super shuttle, laundry, dry-cleaning, lodging, airline tickets, and rental cars (if authorized and approved). Other documents to provide include: rental car agreements (if authorized and approved) and GTCC statements.
- All receipts submitted for reimbursement of authorized expenses must clearly show the business name and date of transaction – no exceptions.
- Hotel and rental car (if authorized and approved) receipts that are submitted into DTS should show "zero" balance (\$0.00).

- To allow for quicker review of supporting documents, only scanned or receipts in pdf format are accepted. Pictures of receipts, statements, or agreements are NOT accepted.
- Students will receive per diem while on funded TDY; therefore, grocery or restaurant receipts are not needed.
- If you are traveling by commercial air, you are responsible for making your own plane reservations using DTS. Students may NOT use any other travel agency or on-line provider such as Travelocity, Expedia, or Priceline to purchase airline tickets. The use of City Pair flights is required unless a flight is not available or the Approving Official (AO) approves another government or other commercial fare for mission essential reasons. If it is not possible to use DTS, students must call the Contracted Travel Office (CTO) supporting the University, currently CWTSato Travel at (b)(6). As there are three airports supporting the National Capital Region (NCR), the AO may direct you to use the one that is most cost effective. All airline tickets will be charged to the student's GTCC.
- The AO does not have the authority to approve any fare other than coach class. Students may upgrade a coach class ticket using their personal frequent flyer miles or personally paying the additional costs directly to the airline. The additional costs are NOT reimbursable.
- Airline baggage fees while traveling on official orders are generally waived. With your approved orders and CAC ID in hand, speak with an airline attendant when checking-in to waive your baggage fee.
- If you travel by using your own vehicle (a privately owned vehicle or POV), you are provided a mileage allowance for your round trip or the cost of the cheapest Government Services Administration (GSA) published airfare, whichever is the lesser amount. No in and around mileage will be paid for travel at the site. If you have a passenger with you, only the POV owner/operator is provided the mileage and gas reimbursements. The passenger receives no mileage and gas reimbursements for travel. The student driver will not be paid more for POV mileage than what it would have cost for government contracted airfare. Reimbursement for rental cars is NOT authorized at clerkship/post-clerkship sites unless approved on your funded TDY/TAD orders.
- All laundry and dry-cleaning expenses must have receipts to support any reimbursements. Coin operated washing machines and dryers may not provide receipts; you may use your laundry detergent purchase receipt as proof of laundry.
- Appendix A of this section is a list of most out-of-town clerkship sites and the one-way mileage. If the site is not listed in the table, mileage will be computed on an individual basis. *Official travel time allowed is one day going to the site.* Students on non-consecutive funded rotations are

to schedule their return flights sometime on the last day of their rotations with coordination with OSA and rotation director. Students on consecutive funded TDYs may arrive at their new rotation one to two days prior to the rotation start date (Saturday or Sunday) as long as their flight to the new site does not involve an overnight stop at another city. You must adhere to travel times as stated in the TDY/TAD orders. Early reporting with per diem is not authorized unless approved prior to travel by the AO. If you depart for your destination earlier than the official travel time, then you must take leave or pass to cover these additional travel days. Payment of per diem during pass or leave periods is not authorized. The arrival date must be one day prior to the date of the first class. Arrival at subsequent TDY sites, when traveling on orders with multiple funded rotations, will be determined on a case by case basis, dependent upon if leave was scheduled between rotations.

- Travel outside the continental limits of the United States (OCONUS) is authorized, but generally is not funded (permissive TDY). If funds are available, your per diem (meals and quarters) will be at reduced rates. OCONUS travel requires completion of required trainings, country clearance, visas, and passport prior to departure. This process will take some time. Request for OCONUS travel must be initiated and submitted *at least 70 days prior to the start of travel* and must be coordinated with your Company Commander who will provide you with OCONUS travel instructions and check list. You are responsible for securing your passport and any required visas; the Administrative Support Division can assist you with this.
- You will not receive reimbursements for mileage, gas, lodging, or per diem during your rotations at local duty stations. These local duty stations are: Walter Reed National Military Medical Center (WRNMMC), Malcolm Grow USAF Medical Center (Andrews AFB), Kimbrough Army Community Hospital (ACH) (Ft. Meade), and DeWitt ACH (Ft. Belvoir). VOQ rooms are available for a fee at Andrews AFB.

LEAVE AND PASS/LIBERTY POLICY WHILE ON TRAVEL

The policy regarding leave and pass/liberty rules for students is determined by the Commandant and your Company Commander and applies to all medical students on either funded or permissive TDY/TAD. See **Definitions, Standards, Procedures, and Expectations** for more information on leave and pass/liberty.

PREPARING TO TRAVEL

Core curriculum clerkships are of five-week duration per rotation and are fully funded (funded TDY) by the University. Post-Clerkship curriculum consists of required and elective courses that are each four-weeks in length. With several exceptions discussed under “Special Post-Clerkship Travel

Funding” in this section, elective rotations are unfunded (permissive TDY).

You will participate in the scheduling of your Clerkship Period through a student-run lottery, which will be explained to you in detail by the Office for Student Affairs (OSA). Only the Associate Dean for Student Affairs or the Assistant Dean for Clinical Sciences can approve your request to change any rotation schedule after it becomes final.

In collaboration with OSA, you are responsible for all scheduling and canceling of Post-Clerkship period rotations using the instructions published in the USU catalog. Changes to your Clerkship and Post-Clerkship rotation schedule must be immediately reported to OSA, the Student Travel Program (especially for funded TDY), Company Commanders, and Senior Enlisted Advisors.

Once you have your Clerkship or Post-Clerkship rotations established with OSA, you are ready to submit your request for travel authorization (travel orders) for rotations outside of local duty stations via the Defense Travel System (DTS). *You must submit your request for travel authorization no later than **four weeks** prior to departure* for funded or permissive TDY to allow time for review and approval. All site choices, modes of travel, dates of travel, leave en route plans, etc., must be made by that time.

Annotate in the “Comments to the Approving Official” box the purpose of your travel to ensure you receive proper reimbursement. *Leave may be requested in conjunction with funded or permissive TDY. Leave requests must be submitted no later than 10 days prior to leave start and approved by your service-specific Company Commanders before they are taken.* If you are permitted to take leave in conjunction with funded or permissive TDY/TAD, then annotate leave dates in the comment section of your travel authorization. See **Definitions, Standards, Procedures, and Expectations** for leave procedures.

An example of student travel information to annotate in the “Comments to the Approving Official” section: “USU Class of 2014 for student travel to rotation 4 (Clerkship Curriculum – Pediatrics) at Tripler Army Medical Center, HI from 29 Oct 2012 – 07 Dec 2012. Leave requested and approved for the following dates: 10 Dec 2012 – 14 Dec 2012.”

The Approving Official (AO) of the Student Travel Program reviews and approves your travel authorization requests. Your request for travel **MUST** receive approval prior to departure. The AO may return your request for travel if additional items are needed. You must periodically check DTS to review the status of your request. Only an approved authorization (approved travel orders) permits your travel and serves as the basis for reimbursement by the government of official travel, transportation, and reimbursable expenses. Travel reimbursement is **NOT** authorized once travel is performed before your authorization (order) is approved. Expenses incurred before your travel authorization is approved are **NOT** reimbursable. In addition, travel without

approved authorization qualifies as Unauthorized Absence (UA) or Absence Without Leave (AWOL) and is subject to disciplinary actions. It is your responsibility to follow-up and to ensure travel orders are approved by the AO from the Student Travel Program prior to departure.

Once you receive your approved travel authorization (orders), they will not be changed except for true emergencies. Changes in DTS to an already approved travel authorization will automatically change your travel authorization to an "amend" status. This means that your travel authorization is no longer approved and that re-review and re-approval by the AO must occur before departure. For true emergencies that require changes to your approved authorization or if you made inadvertent changes to your approved travel authorization, contact the Student Travel Program, Senior Enlisted Advisor, or Company Commanders for assistance. It is your responsibility to follow-up and to ensure travel authorizations are approved prior to departure.

Proofread your travel authorization (orders) to ensure all information is accurate (e.g., reporting date, number of days, mode of travel, etc.). You must travel with a hard copy of your approved authorization and leave form (if taken in conjunction) in hand for both funded and permissive TDY.

If you have questions, you can send an email to (b)(6) or see your Company Commander.

RENTAL CARS (leased government/commercial rental)

The cost for clerkship travel is of major concern to the School of Medicine, and costs continue to increase with each academic year. To that end, efforts are always on-going to control or reduce travel costs. One such effort has been to enter into an agreement with the authorities at various clerkship sites, whereby government-owned vehicles (motor pool vehicles) or vehicles leased from commercial rental agencies are made available for use by our students. With such accommodations comes responsibility.

Government-owned or commercially leased vehicles are for **Official Use Only**, which means:

- You can use the vehicle to go to and from a place of duty to a place of residence (BOQ).
- You can obtain/maintain subsistence on/off base, or go to the commissary, base exchange, base laundry facilities, base recreational facilities (such as the gym), or any other appropriate base facility.
- You must return the vehicle to the Vehicle Dispatch Office in a clean state. Any trash, debris, etc., should be removed prior to turning in the vehicle.
- Specifically, you cannot use the vehicle for personal trips such as sightseeing, weekend trips off base, visiting family or friends located outside/off the military base.

- Prior to departing the Vehicle Dispatch Office, ensure you obtain a point of contact (names and numbers) in order to request assistance for mechanical difficulties; to report a traffic accident; or to report a traffic ticket for a moving violation. Additionally, you must also report the incident to the Company Command, and by email to (b)(6).

Students authorized rental cars by the Student Travel Program Manager/AO will make their rental car reservations in DTS. Authorized rental cars are shared among students traveling to the same rotation site. The standard size vehicle authorized for funded TDY is a **compact**. If a student chooses to upgrade to a vehicle size other than compact, then the difference in vehicle price and gas consumption between the compact and upgraded vehicle are NOT reimbursable and will be personally paid by the student.

Students should decline any offered insurance for vehicles rented in CONUS, Hawaii, or Alaska as it is not reimbursable. Your approved travel authorization will provide coverage in case incidents may occur while the vehicle is being used for official business. Rentals of Global Navigation Systems are not reimbursable.

Since rental cars are shared among students, only the student whose name is on the rental car agreement is the one authorized to submit receipts and receive rental car and gas reimbursements. Remember to use your GTCC to pay for these authorized travel expenses. Other student passengers will not receive any gas reimbursements. In addition, only gas consumed while traveling from rental car location to lodging, between lodging and duty station, and locations to maintain subsistence (i.e., commissary, base exchange, base laundry facilities, base gym and other appropriate base facilities) during funded TDY are reimbursable. Gas expenses resulting from travel outside of these authorized locations are not reimbursable and are personally paid by students.

To receive reimbursements for rental car and gas, students must submit rental car agreements, rental car receipts with zero balance (\$0.00), and gas receipts when completing their vouchers in DTS within 5 days of rotation completion. Only scanned or supporting documents in pdf format are accepted.

If you have further questions or need assistance with other issues during the year, the Office of the Company Commanders is available to provide assistance at (b)(6).

ARRIVING AT CLERKSHIPS

Students participating in clerkships must report by 1800 hours on Sunday evening. If you will be arriving after 1800, you must call the BOQ and guarantee your room for late arrival with the GTCC. Failure to do so will result in the cancellation of the reservation.

BILLETING/LODGING

Bachelor Officers Quarters (BOQ)/Visiting Officers Quarter (VOQ) reservations are prearranged for you by the Student Travel Program Manager

for all out-of-town clinical rotations during the Clerkship Period. **You must confirm these arrangements approximately two weeks prior to your arrival.** BOQ telephone numbers are listed in Appendix B to this section.

You **MUST** pay for your BOQ/VOQ with your GTCC with the following exceptions: lodging is pre-paid for you at Portsmouth Naval Medical Center and Tripler Army Medical Center by the University. If you receive non-availability from a BOQ, you must contact the Office of the Company Commanders and email (b)(6) within 24 hours. If you choose to leave the BOQ or not accept BOQ billeting for any reason without prior approval, your lodging expenses will be limited to the BOQ/VOQ daily rate. You must provide a daily-itemized lodging receipt to support all lodging reimbursements (government or non-government quarters).

You are responsible to make your own lodging reservations for out-of-town rotations during the Post-Clerkship period, except during Military Emergency Medicine (MEM), Military Contingency Medicine (MCM), and Neurology rotations. Housing reservations for MEM and Neurology only will be made for you.

To receive lodging reimbursements for funded TDYs, students must submit lodging receipts with zero balance (\$0.00) when completing their vouchers in DTS within 5 days of rotation completion. Only scanned or supporting documents in pdf format are accepted.

RETURNING FROM ROTATIONS

Upon completion of funded and permissive TDY/TAD, *you must submit your travel voucher using DTS within **five working days** of rotation completion.* For funded TDYs, you must maintain logs and receipts of your travel dates and times, mileage, and extraordinary expenses (taxi, tips, etc.). Receipts for lodging, fares (airline tickets, taxi, or super shuttle), and incidental expenses (i.e., laundry, dry cleaning) must be uploaded into DTS along with any rental car receipts and gas (if authorized and approved). Other documents to provide include: rental car agreements (if authorized and approved) and GTCC statements.

All travel vouchers and supporting documents are reviewed and approved by the Student Travel Program's Approving Official (AO). Personnel at the Company Commanders Office are available to answer any questions regarding your trip and provide assistance on completing vouchers, if necessary. Many questions can be answered by sending an email to (b)(6) or by reading the **Student Government Travel Charge Card** section below.

All authorized expenses charged to the GTCC must be paid directly to the financial institution issuing the GTCC. It is the student's responsibility to accurately and timely complete travel vouchers and to provide all necessary documents for timely payment of the GTCC. See the tips below for timely payment of your Government Travel Charge Card.

SPECIAL POST-CLERKSHIP PERIOD TRAVEL FUNDING

Funding is provided for certain Post-Clerkship programs. The Bushmaster field training exercise during Military Contingency Medicine (MCM) will be organized through the Department of Military and Emergency Medicine (MEM). BOQ/VOQ reservations at all out-of-town funded MEM sites are made for you by the Student Travel Program Manager; contracted quarters (also arranged by the Student Travel Program Manager) or authorized quarters allowance are provided at civilian MEM sites. Parking fees are authorized **ONLY** during a MEM rotation at the University of Maryland Shock-Trauma Center, Baltimore, MD.

Additionally, partial funding may be provided for one out-of-town rotation in support of your application for an internship program after graduation from USU (known as GME-1). The guidance for this rotation is as follows:

1. This partially funded rotation must be in direct support of your GME-1 application (no exceptions). Funding will not be provided for an experience that you choose to schedule out-of-town and is not in direct support of your GME-1 application, even if it is a required clerkship.
2. The funded portion spans 10 consecutive days at any time during this rotation only (not to exceed 10 days at government rate). Funding covers lodging and per diem for food.
3. This partially funded experience must be scheduled within blocks 4, 5 & 6 (to correlate with when student interviews are typically conducted as per OSA). Exceptions will be considered on an individual basis.
4. Funding is authorized only at service-specific hospitals, except for USPHS students or if an inter-service transfer is anticipated.

In all of these programs, regardless of the mode of transportation you use, travel reimbursement is limited to the cost of contracted airfare. If you travel by POV with a passenger, only the POV owner/operator is reimbursed for travel. Funding for rental of or air freight for bicycles is not authorized.

GOVERNMENT TRAVEL CHARGE CARD (GTCC)

Issuance of GTCC

Students will complete applications for the GTCC upon arrival to the University. Medical students will be authorized GTCC at the end of their first year.

What should be charged on the GTCC?

The Government Travel Charge Card is for authorized travel expenses incurred while on funded TDY only. The GTCC is **NOT** to be used to pay

expenses acquired from permissive TDY, leave, pass or for personal use. Authorized expenses for GTCC use while on funded TDY are:

1. Commercial transportation (airline tickets, super shuttle, and taxi)
2. Lodging (BOQ, VOQ, commercial lodging)
3. Gas (if POV is used)
4. Rental cars and gas (if authorized and approved)

Expenses covered by the “meals and incidentals” portion of per diem are exempt from mandatory use. Official travel expenses paid with personal credit cards are NOT reimbursable.

Never Let Your GTCC Become Delinquent

GTCC delinquency is very serious for USU and the Department of Defense (DoD). **All military and DoD civilians with GTCC are responsible for paying their statement balance by the PAYMENT DUE DATE.** Student GTCC holders will be notified by their service-specific Company Commanders if their GTCC accounts become over 30-days past due. *Under no circumstances should your GTCC account become 60-days past due.* For GTCC accounts that are 60-days delinquent, the Command and USU President are notified and your name will appear on the DoD Delinquency Report. A 60-day delinquency status will result in automatic suspension of your GTCC account, could affect your security clearance and FICO score, and will result in disciplinary actions by the Command.

Your rotation sites are military treatment facilities with CAC-enabled computers and should have access to DTS. Therefore, USU students should be able to complete travel vouchers and submit supporting documents into DTS after each rotation for timely reimbursements.

If you are having difficulties making timely payments to your GTCC, let your Senior Enlisted Advisor or Company Commanders know before becoming 30-days past due. They are available to assist you. The most common reason for GTCC delinquency is failure to accurately and timely complete travel vouchers or provide requested supporting documents.

Travel Tips to Avoid GTCC Delinquency

1. FILE YOUR TRAVEL VOUCHER PROMPTLY

Complete your travel voucher and upload all supporting documents into DTS within 5 days of completing each rotation. *Students will not be able to start their travel vouchers in DTS if their travel authorizations (travel orders) are not approved.* Expenses incurred before your travel authorization is approved are NOT reimbursable. It is imperative that you have *approved* travel authorization before departing for your funded or permissive TDY. It is your responsibility to periodically

check DTS before departure to make sure your request for travel is being reviewed and considered for approval by the Approving Official of the Student Travel Program.

2. **USE *SPLIT DISBURSEMENT*** (Mandatory for all military)

DoD mandates that you use the split disbursement process on your voucher if you have a balance on your GTCC. Split disbursements allows the Defense Financial and Accounting Services (DFAS) to pay the financial institution (CITI) directly once your travel voucher is approved by the AO, eliminating any delay if DFAS mails you the check which you then, in turn, sends to CITI.

When processing your travel voucher in DTS, make sure you use the split disbursement option and *designate sufficient amount to cover all outstanding credit card charges.* This process allows DFAS to pay CITI directly for authorized expenses charged on your GTCC account with minimal delay.

3. **USE *SCHEDULED PARTIAL PAYMENTS* WHEN AWAY ON CONSECUTIVE ROTATIONS**

Scheduled Partial Payments (SPP) are available to students on funded TDY of 46-days or greater. This is an essential part in providing funds so that the charges on the individual's government charge card may be paid in a timely manner. The DTS system computes the amount of the SPP and upon completion of 30-days TDY, deposits the pre-calculated amount into the student's financial institution. If the funded TDY exceeds 60-days, subsequent deposits will be made at additional 30-day intervals. **It is extremely important to make sure the expenses listed on the travel authorization (travel orders) before departure for funded TDY are as accurate as possible as the SPP is based on the authorization amount.** Upon completion of the travel voucher, the SPP is automatically deducted from the total entitlements resulting in a net payment if the SPP was less than the final calculation, or a debt if the SPP exceeded the calculation. Students must repay any travel debt promptly.

Travelers desiring a partial payment must fax a copy of their TDY orders, a completed DD Form 1351, and supporting receipts directly to the Student Travel Program Coordinator, (b)(6) or email

(b)(6) The partial payments must be indicated on the travel settlement claim.

4. **PERIODICALLY CALL YOUR FINANCIAL INSTITUTION AND CHECK YOUR MONTHLY GTCC STATEMENT**

After you have submitted your travel voucher and supporting

documents into DTS after each rotation, call the financial institution within one week to inquire your balance. Once your travel voucher is *approved* by the AO, payment by DFAS to CITI is typically made within 7-10 days or sooner.

If your GTCC still has the entire balance after 7-10 days of travel voucher submission, this suggests that the Student Travel Program is still reviewing your travel voucher and may need clarification or additional supporting documents. It is your responsibility to check DTS and follow-up with the Student Travel Program or Senior Enlisted Advisor/Company Commander to make sure your travel voucher is processed for a timely GTCC payment.

If your balance is only partially paid, this suggests that 1) you did not allocate sufficient amount to cover all outstanding GTCC balance during split disbursement, or 2) portions of your submitted entitlements were not authorized. It is your responsibility to check DTS, review authorized travel expenses, and contact the Student Travel Program or Senior Enlisted Advisor/Company Commanders for any questions. In this case, the student is still required to pay for the remaining balance on time and out-of-pocket to avoid GTCC delinquency status. Remember, the government reimburses authorized travel expenses only.

5. OUT-OF-POCKET PAYMENT WHILE WAITING FOR REIMBURSEMENT

If travel tips 1-4 are followed, then this situation is very rare. If timely reimbursement is significantly delayed for whatever reason, students may need to pay out-of-pocket while waiting for reimbursement for authorized travel expenses to avoid GTCC delinquency status.

Out-of-pocket payments may be made on-line or over the telephone. Payments over the phone are typically posted within 48-hours; however, there is a \$10.00 non-reimbursable fee to use this form of payment. Students are discouraged to mail personal checks; this method of payment may take approximately 2 weeks or longer to clear.

The contact information of the financial institution is annotated on the back of your GTCC.

APPENDIX A

Official One-Way Mileage from USU

The General Services Administration (GSA) has announced CY 2014 privately owned vehicle (POV) mileage reimbursable rates, which went into effect on January 1, 2014. Pursuant to the Federal Travel Regulation (FTR) § 301-10.303, the rates are:

- Privately owned automobile: \$0.56
- Privately owned motorcycle: \$0.53

<i>Site</i>	<i>Mileage</i>
Brooke AMC, San Antonio, TX	1,600
Darnall ACH, Ft. Hood, TX	1,500
Eisenhower AMC, Ft. Gordon, GA	578
Madigan AMC, Ft. Lewis, Tacoma, WA	2,793
Martin ACH, Ft. Benning, GA	768
Womack AMC, Ft. Bragg, NC	345
Naval Aerospace Medical Institute, Pensacola, FL	975
Naval Hospital, Bremerton, WA	2,814
Naval Hospital, Camp Lejeune, NC	363
Naval Hospital, Camp Pendleton, CA	2,706
Naval Hospital, Jacksonville, FL	728
Naval Hospital, Pensacola, FL	974
Naval Hospital, Portsmouth, VA	204
Naval Hospital, San Diego, CA	2,706
646 Medical Group, Eglin AFB, FL	960
Bergquist Strategic Hospital, Offutt AFB, NE	1,150
David Grant USAF Medical Center, Travis AFB, CA	2,766
Mike O'Callaghan Federal Hospital, Nellis AFB, NV	2,394
Scott USAF Medical Center, Scott AFB, IL	822
USAF School of Aerospace Medicine, Brooks AFB, TX	1,607
Wilford Hall USAF Medical Center, San Antonio, TX	1,614
Wright-Patterson USAF Medical Center, Dayton, OH	460
Ben Taub General Hospital, Houston, TX	1,409
Phoenix Indian Medical Center, Phoenix, AZ	2,350

APPENDIX B

BOQ Telephone Numbers

<i>Site</i>	<i>Commercial Number</i>	<i>DSN Number</i>
Brooke AMC, TX	(b)(6)	NO DSN
Darnall ACH, TX		(b)(6)
Eisenhower AMC, GA		(b)(6)
Madigan AMC, WA		
Martin ACH, GA		
Tripler AMC, HI		
Womack AMC, NC		No DSN (b)(6)
NAMI, Pensacola, FL	(b)(6)	(b)(6)
NH, Bremerton, WA		(b)(6)
NH, Camp Pendleton, CA		
NH, Jacksonville, FL		
NH, Pensacola, FL		
NH, Portsmouth, VA		
NH, San Diego, CA (NAB)		
NH, Camp Lejeune, NC		No DSN
Wilford Hall USAFMC, TX	(b)(6)	(b)(6)
David Grant USAFMC, CA		
Scott USAFMC, IL		
Wright-Patt USAFMC, OH		
646th Med Gp, Eglin FL		
Berquist SH, Offutt NE		
Nellis AFB, NV		

SECURITY

SECURITY INFORMATION

The USUHS Security Office, Rm. UP001, (b)(6), is open from 0700 to 1530 hours, Monday to Friday. The Contract Security Guard Office, Rm. G192, Ground Floor, "B" Building (b)(6) is open seven (7) days a week, twenty-four (24) hours a day. For emergencies contact the Security Office during their regular work hours and the Contract Security Guards at all other times.

Acting Director of Security –	(b)(6)	(b)(6)
Deputy Director –	(b)(6)	
Physical Security Specialist –	(b)(6)	
Physical Security NCOIC – MAJ	(b)(6)	
Personnel Security Specialist –	(b)(6)	
Security Assistant –	(b)(6)	
Security Assistant –		
Industrial Security Specialist –	(b)(6)	

BUILDING AND PARKING POLICIES

BUILDING ACCESS

USUHS buildings are open from 0600 to 1900 hours, Monday through Friday. USUHS buildings are secured from 1900 to 0600 hours Monday through Friday, and all day Saturday, Sunday and holidays. Building access and exit during secure hours is only permitted at the Security Guard Office, Room G-192, on the Ground level of Building "B".

IDENTIFICATION BADGES

USUHS identification (ID) badges are issued in the Security Office, room UP001, to new members with an approved sign-in form, to adjunct faculty members with a valid certification and to temporary/volunteer employees with a check-in sheet from CHR. USUHS ID badges must be worn and prominently displayed at all times while on the USUHS campus. All visitors must sign-in and sign-out and wear a visitor badge at all times.

PARKING PERMITS and CARPOOL

Authorized parking permits and carpool spaces are issued by the NSAB Pass & ID Office located at BLDG 102, near the north gate. Complete information and office hours can be obtained by visiting or calling NSAB Pass & ID at (b)(6). Students are advised to seek consultation with their company commander or senior enlisted advisor if they would like to obtain a parking pass.

PARKING

All authorized USUHS tag holders must park in designated parking locations within the garage. Parking for USUHS personnel and visitors is only authorized in the USUHS garage. Parking in any other location on NSAB before 0900 is not authorized, subject to ticketing and towing. After 0900 the base utilizes a “Rainbow” system; any NSAB color placard may park anywhere except Building 17.

There is a height restriction of six (6) feet for all vehicles entering lower parking locations. Trucks and vans that are less than six (6) feet in height are permitted to park in all lower parking areas. Large trucks and vans (less than six (6) feet, seven (7) inches) are required to park in the designated truck and van area on the Ground Floor level of the garage. Oversized vehicles (over six (6) feet, seven (7) inches) must park in the tunnel area or the designated areas located outside the garage.

USUHS members are not permitted to park at the WRNMMC Hospital. Tickets will be issued by NSAB police. **Exception:** USUHS military and family members who require medical assistance or have medical appointments are permitted to use the hospital patient garage.

VISITORS AND GUESTS

All persons entering the NSAB base must have either a US military identification card, an identification card issued by a federal government agency, or be sponsored by USUHS personnel. There are no exceptions to this policy. The Security Office has instructions on base access procedures. Instructions are provided on our security web page.

TRAFFIC

The NSAB base speed limit is 20 MPH. The speed limit in the USUHS garage is 5 MPH and headlights **must be turned** on while in the garage.

OVERNIGHT PARKING

The only allowance for parking overnight is for Brigade scheduled exercises (Bushmaster/FTX 101) and emergencies. Vehicles parked overnight must have authorization and an overnight parking permit issued by the USUHS Security Office, RM UP001.

Overnight parking is not permitted during rotation assignments or during periods of official travel.

PHYSICAL SECURITY

All personal items of value must be secured. Maintain sensible security precautions, and **do not** allow personal items to remain unattended when you are away from your work/study sites. No photographs may be taken within

the grounds of the USUHS without prior approval of the Director, Office of University Affairs (OUA) and notification to the Director, Security Division.

No pets are allowed on the premises without prior approval from the Director, Laboratory Animal Medicine (LAM) and/or the Security Office.

PERSONNEL SECURITY

Permanent civilian and contractor employees require background investigations based upon assigned duties. These investigations are processed by the USUHS Security Office, and must be completed within time limits as directed by OPM, DOD.

DEPARTURE FROM USUHS

All civilian, military and contractor members who depart from USUHS must visit the USUHS Security Office with a valid sign-out form in order to turn in their USU ID, CAC and any parking placard.

INCLEMENT WEATHER POLICY

Inclement weather announcements are provided to students through the Brigade Chain of Command, and may also be found by accessing the Inclement Weather Message Board located on the USUHS home page or by calling (b)(6) during periods of inclement weather.

STUDENT HEALTH ISSUES

LTC DAVID E. CABRERA

UNIVERSITY FAMILY HEALTH CENTER (UFHC)

The **David E. Cabrera** University Family Health Center (UFHC) is dedicated to providing comprehensive patient and family centered care to active duty students, faculty, their families and other DoD beneficiaries assigned to USU. The UFHC is a TRICARE PRIME clinic. All medical students are to be enrolled to the UFHC as their primary care manager (PCM) site. Family members who enroll in Tricare Prime may be assigned a UFHC family physician as their PCM if they choose to. All members of the family must change their Tricare enrollment to this region if you were previously enrolled in another region. Per TRICARE guidelines, DoD eligible patients NOT enrolled to Tricare Prime or who are enrolled to another Tricare Prime site may be seen on a "space available" basis only.

The UFHC is located on the first floor in building A in room A1034.

The clinic is open from 0715 to 1600 Monday through Friday, and closed for lunch from 1200-1245hrs daily. Patients are seen by appointment only.

except in the event of an emergency. Patients needing appointments for either routine or same day/acute problems should call (b)(6) to schedule.

Pre-clerkship students, who are sick and not on campus, may call the clinic to request to be placed on Quarters for 24 hours. Students in this situation must call before 0900 to ensure that the Office for Student Affairs can be notified in a timely fashion. After-hours medical advice can be obtained by contacting the UFHC On-Call Physician at (b)(6)

Designated parking for the UFHC is available in the USU parking deck. See the Security Guard at the entrance to the parking deck to obtain a temporary parking permit.

SERVICES

The UFHC is staffed and operated by the Department of Family Medicine with board-certified family physicians and is supported by a professional staff nurse, medical technicians, and administrative support staff. The medical experts at the clinic can manage the majority of your health care. If further expertise is required to diagnose or manage a condition, consultation with other secondary care specialists can be obtained at the Walter Reed National Military Medical Center (WRNMMC) or other health care facilities in the National Capital Region.

The UFHC offers full spectrum Family Medicine. Typical services provided by the UFHC include:

- General physical examinations, wellness and adult immunizations
- Prenatal care (UFHC) and Delivery (WRNMMC)
- Military specific, retirement and insurance exams
- Well-child exams and childhood immunizations
- School and camp physicals
- Child behavioral concerns
- Women's health care services (Pap, HPV testing, Colposcopy, IUD, Nexplanon, etc.)
- Infertility evaluation
- Quarters evaluation and authorization
- Physical profiles
- Weight evaluations
- Minor surgical procedures (Skin, Vasectomies, Joint Injections, etc.)
- Dermatology evaluations
- Allergy evaluations
- Acute infectious diseases
- Chronic medical problems
- Acupuncture (Licensed Medical Acupuncturists on staff)
- Coordination of consults with other specialty clinics

In addition, the clinic can obtain blood and urine laboratory specimens.

MEDICATIONS

Most routine medications will be prescribed for pick-up at WRNMMC. If another DoD Medical Facility within the Capital Area is more convenient for you, however, most medications can be prescribed for pick-up at any of these facilities.

Medication refills can also be provided by the WRNMMC. You can call the refill line at (b)(6) and provide your Refill Prescription Number (located on medication label).

The drive thru satellite pharmacy and the NEX satellite pharmacy are also available for refills by calling (b)(6)

If you need to renew a prescription, this can be done by telephone consult (call and leave message at clinic) or secure messaging utilizing **RelayHealth** (secure online messaging system).

STUDENT COUNSELING SERVICES

Co-located with the UFHC is the Student Counseling Service. This clinic is supported by the Office for Student Affairs and is staffed by the Department of Family Medicine. A Board-certified psychiatrist, psychologist and social worker provide mental health counseling services to our students, staff and family members.

Typical services provided by the Student Counseling Service include:

- Mental health counseling
- Couples therapy
- Family therapy
- Stress management
- Behavioral health evaluation (ADHD, Depression, Anxiety, etc.)
- Test anxiety counseling

MEDICAL RECORDS

Your health record is a valuable document that is the property of the United States Government. Patients who bring paper medical records will have their record maintained in accordance with our Records Room policies in order to ensure quality care and to ensure the confidentiality and safety of the record. Medical records will not be generated as we now utilize electronic medical records for all new students and patients. Because your medical record is confidential it may not be released to anyone, including a spouse, without specific written instructions. If you receive care at a civilian facility, please forward any treatment related information to the clinic for insertion into your electronic medical record. Active duty members placed on limited duty or physical profiles by a civilian provider must confirm their status through the UFHC.

DENTAL

Dental care is available for active duty members at the Dental Readiness Clinic, Building 2, 2nd Floor, WRNMMC. Dental records are maintained there, and any dental records should be turned in to Dental Readiness during in-processing. Call (b)(6) for more information. Family members are eligible for the Tricare Dental Program (MetLife). More information can be found at: <http://www.tricare.mil/Dental/TDP/Enrollment.aspx>

ACCESS TO CARE

The UFHC is open Monday through Friday from 0715–1600, and closed for lunch daily. During the summer recess and during University-wide exercises, the clinic may operate on a limited schedule. The clinic is closed on federal holidays.

The UFHC follows WRNMMC Outpatient Clinics status for weather closings and delays.

Please tell the appointment clerk if you need more time than the routine 20-minute appointment. The UFHC maintains appointments every day for those with acute illness that need to be seen on a same day basis. Call early in the day for a same day appointment.

After hours advice is available from the on call physician by contacting the UFHC On-Call Physician at (b)(6)

If you have an emergency, go directly to the nearest civilian or military emergency room. Emergency room visits do not require prior authorization or referrals. If you are seen in a local urgent care center you **MUST** call the clinic within 24 hours to report the visit and have a referral entered. If this does not occur you will be billed for the visit.

HINTS FOR A SUCCESSFUL VISIT

- The UFHC is not an emergency room. If you have a life or limb threatening emergency you should proceed immediately to the nearest civilian or military emergency room or call 911.
- Always call for an appointment. Letting us know that you need to be seen allows us to schedule an appropriate time for your visit while avoiding an excessive wait in the clinic. Patients who walk-in without calling will be given the next available appointment time which can result in a delay of several hours.
- When you arrive for your appointment, check in at the front desk.
- To allow for appropriate check in prior to being evaluated by the provider, arrive 15 minutes before your scheduled doctor's appointment. Your appointment begins when you talk with our skilled medical technician,

who will gather a brief current and past medical history. Please plan ahead for traffic and parking delays that may occur on the day of your appointment.

- Patients who arrive after their scheduled appointment time may be seen at a later time during the physician's clinic or be asked to reschedule.
- Make separate appointments for each family member who needs to be seen. It's not fair to you, your family members, or other patients for our team to try and see more than one patient per appointment.
- Sometimes patients may unexpectedly require more time than the appointment given. Please know that you will be afforded the same time if you need it.

OTHER IMPORTANT INFORMATION

- Phone messages: if you have a question or need to speak with a physician, you may call to leave a phone message. The clinic nurse, your doctor or the physician on call will typically return your call the same day. Non-acute messages will be returned within 72 hours. If you need a more urgent reply, please inform our team member when you call the UFHC at (b)(6). This is the only number available for leaving a message for anyone on our team. We encourage all patients to sign up for the secure online messaging system known as RelayHealth. You will be able to communicate with your doctor via this avenue also. www.relayhealth.com
- Medication refills: medication refills can be provided for any medications originally ordered at the UFHC. You can call in your request for a refill to the Military Treatment Facility pharmacy. If you have no more refills left on your prescription, please use Relay Health or call our clinic. Renewing a prescription is done by telephone consult. The prescription will be entered within 72 hours.
- Lab results: our team will contact you with any abnormal results. Test results can also be obtained through RelayHealth.
- TRICARE is the DoD insurance plan for family members and retirees. Beneficiaries declare which of three plans they elect to participate in and receive all their care through the primary care network in that plan. TRICARE PRIME is the DoD managed care organization (HMO) type plan. More information is available on the Tricare website at www.tricare.osd.mil.
- The UFHC is the TRICARE PRIME site for all active duty students. Other active duty members, family members and retirees affiliated with USU may choose the UFHC as their TRICARE PRIME enrollment site. DoD eligible patients not enrolled to Tricare Prime or enrolled to another Tricare Prime site may be seen on a space-available basis.

Contact TRICARE (HEALTHNET is contractor for North Region) at (b)(6) or visit the TRICARE website for forms or questions.

- Follow us on Facebook (facebook.com/usuclinic) and Twitter (@usuclinic) for pertinent clinic information including educational tidbits, policy changes and closings.
- Once enrolled, you can also access many TRICARE services through: www.tricareonline.com.
- Suggestions: if you have concerns about something that happened while you were in the clinic or an idea that might improve care, please bring it to the attention of the clinic director or patient contact representative.

PHONE NUMBERS

Emergency	911
Emergency Department WRNMMC	(b)(6)
Emergency Department Andrews AFB	
Emergency Department Bolling AFB	
Emergency Department Ft. Meade	
Emergency Department Ft. Belvoir	
University Family Health Center (UFHC)	
WRNMMC Pharmacy	
WRNMMC Radiology	
WRNMMC MRI	
WRNMMC Ultrasound	
WRNMMC OB/GYN	
WRNMMC Optometry (Active Duty)	
WRNMMC Dental Readiness (Active Duty)	
WRNMMC Medical Readiness	
TRICARE	
WRNMMC Referral Management	

HEALTH CARE POLICY BRIEFINGS

GENERAL HIV POLICY

Since all USU medical students are active duty military officers, each person should recognize their responsibility to follow the guidance of each individual military service. On a regular basis, the student body will receive a briefing on the entire subject of AIDS in contemporary society. This briefing provides a full educational experience to include medical and psychological

issues, prevention, safe sex practices, employment issues and all personal health and mental health services.

All students are tested for HIV according to the instructions provided by their parent military service. This testing provides the opportunity for early identification and treatment.

Aside from the required testing process, some individuals may learn they are HIV positive by some other means. Any student placed in this situation should immediately report this finding to their personal physician in the UFHC and to the proper military official in their military chain of command. This will ensure prompt evaluation, re-testing and treatment if necessary.

Students who are HIV positive will be required to observe restrictions in clinical settings as established by the command structure of each individual military hospital. The Office for Student Affairs and the Commandant along with the UFHC will dialog with the command structure in settings where HIV positive students may work to insure that communication, treatment, support and protection of patients and the student are made a priority.

HIV positive status may have an important effect on the length of time a student may remain on active duty. Each student must address these issues with the Commandant.

NEEDLE STICK INJURY

Medical students, physicians, and all other health care professionals have a fundamental responsibility to provide care to all patients in a sensitive and compassionate manner without regard to the patient's diagnosis or the nature of the illness involved. At the same time, however, health care personnel must be aware of their potential exposure to certain diseases because of their occupation and take appropriate precautions to protect themselves from such exposure.

Although many diseases may be transmitted through contact with biological materials or fluids such as feces, urine, genital secretions and blood, two serious and potentially fatal viral infections must be emphasized in particular—namely those caused by Hepatitis B and HIV. The Hepatitis B virus causes an inflammatory disease of the liver that may be asymptomatic or manifested by jaundice and other symptoms of acute liver injury. Approximately 25% of patients become jaundiced, but only 3–5% requires hospitalization. Although a significant number of patients go on to develop chronic liver disease, less than 1% of patients die of their disease. On the other hand, HIV typically causes an indolent disease and usually remains asymptomatic for many years during which time the patient's immune system is progressively impaired. Eventually, patients develop various symptoms of AIDS—a chronic wasting disease with many manifestations,

including multiple infections not usually found in patients with a normal immune system.

Both of these infections are transmitted primarily through sexual contact or through contamination with infected blood or blood products, and neither is transmitted through simple casual contact. Therefore, Hepatitis B and HIV are transmitted in the health care setting primarily through handling infected blood or through a needle stick injury wherein an individual drawing blood from an infected patient accidentally injects that blood into himself or herself.

The Hepatitis B virus appears to be more easily transmissible than HIV, and the relative risks of becoming infected from a single needle stick injury with infected blood are estimated to be 10–35% for Hepatitis B but only 0.32% for HIV. Nevertheless, when drawing or obtaining a blood sample, it is vital that all health care personnel, including medical students, (1) recognize that any patient may be infected with Hepatitis B or HIV and (2) always take the appropriate precautions to avoid a needle stick injury, including wearing gloves when drawing blood. Furthermore, since the Hepatitis B vaccine is highly effective in protecting against subsequent Hepatitis B infection, it is equally vital that health care personnel avail themselves of this vaccine. Accordingly, all uniformed medical personnel are required to be vaccinated against Hepatitis B.

Since the university and all of the teaching hospitals have strict infection control procedures and a designated infection control officer, the following guidelines are reiterated here to remind you of the procedures to be followed in the event that you sustain a needle stick injury.

- Assume that your patients may be infected with Hepatitis B, HIV or both.
- Wash the site of injury with soap and water.
- Become a patient instantly and immediately report your exposure to the infection control officer, or the emergency room physician if the former is unavailable, so that you may receive expert counseling and advice.
- Your physician will take a pertinent history from you, examine you, discuss the situation with you, and make recommendations for appropriate diagnostic tests and treatment.
- Don't panic! Talk about the situation with your physician and with others as you see fit, and continue to talk about it.

DIRECTORY

This section is a quick reference of the people, offices, and telephone numbers most frequently needed by students. The USU telephone directory contains a complete listing of personnel (staff, faculty, and students) and all university offices and telephone numbers.

UNIVERSITY ADMINISTRATION

President: Charles L. Rice, M.D.

Vice President,
Finance & Administration (Acting):

(b)(6)

Brigade Commander:

(Col, USAF, MSC)

Brigade Chaplain:

(b)(6)

(LCDR, CHC, USN)

General Counsel:

(b)(6)

J.D.,

J.D.

Brigade Judge Advocate:

(b)(6)

(Maj, USAF, JAG)

F. EDWARD HÉBERT

SCHOOL OF MEDICINE ADMINISTRATION

Dean: Arthur L. Kellermann, M.D., M.P.H.

Senior Associate Dean
for Academic Affairs:

(b)(6)

M.D.

Associate Dean for
Student Affairs:

(b)(6)

M.D.

(COL, MC, USA)

Assistant Dean for
Clinical Sciences:

(b)(6)

M.D.

(CAPT, MC, USN)

Assistant Dean for
Academic Support Services:

(b)(6)

Ph.D.

Student Affairs Specialist:

Program Administrative Specialist:

Program Support Assistant:

Program Support Assistant:

OFFICE OF ADMISSIONS/REGISTRAR

Assistant Dean for Recruitment
and Admissions:

(b)(6), M.D.
(LTC, MC, USA)

Director, Office of Admissions:

(b)(6) M.S.W.

Assistant Vice President for
Academic Records/
University Registrar:

(b)(6) MS. Ed.

Fourth Year Coordinator/
Registrar Assistant:

(b)(6)

Verification Specialist:

(b)(6)

OFFICE OF THE COMMANDANT, SOM

Commandant:

(b)(6), M.D., M.P.H.
(LTC, MC, USA)

Company Commander, USN:

(b)(6)
(LT, MSC, USN)

Company Commander, USA:

(b)(6)
(CPT, MS, USA)

Squadron Commander, USAF:

(b)(6), M.D.
(Maj, USAF, MC)

Company Commander, USPHS
(Acting):

(b)(6), M.D., M.P.H.
(CAPT, USPHS)

Navy and PHS Company
Enlisted Advisor:

(b)(6) (HMC, USN)

Army Company
Enlisted Advisor:

(b)(6) (SFC, USA)

Air Force Squadron
Enlisted Advisor:

(b)(6) (MSgt, USAF)

Executive Assistant to
the Commandant:

(b)(6) (TSgt, USAF)

Student Travel Coordinator:

(b)(6)

THE PLACES

<i>Department:</i>	<i>Room</i>	<i>Phone</i>
Anatomy, Physiology, and Genetics	B2094	(b)(6)
Anesthesiology	C1092	
Biochemistry	C1094	
Dermatology	C1077	
Family Medicine	A1038	
Medical History	D3008	
Medical Psychology	B3056	
Medicine	NNMC, Bldg. 1, Rm. 1	
Microbiology	B4152	
Military Medicine	C1039	
Neurology	A1036	
Obstetrics/GYN	B2022	
Pathology	B3154	
Pediatrics	C1061	
Pharmacology	C2007	
Preventive Medicine	A1044	
Psychiatry	B3068	
Radiology	C1071	
Surgery	A3014	
Administrative Services	G056	
Admissions (ADM)	A1041	
AMBULANCE	
Audio Visual	G070	
Auditorium	Bldg. B	
Brigade Commander	C1023	
Cafeteria	1st Floor, Bldg. B	
CARDIAC ARREST	
Chaplain	C1099	
Civilian Personnel	A1022	
Commandant	C1021	
Company Commanders	C1019	
Computer Center (UIS)	G007	
Dean, School of Medicine	A1010	
Equal Employment Office	G056	
Facilities	G049	

FIRE		(b)(6)
General Counsel (OGC)	A1030	
Gym	G060	
Laboratory Animal Medicine (LAM)	G169	
Learning Resource Center (LRC).....	D1001	
Lecture Rooms		
A	Bldg. A	
B	Bldg. A	
C	Bldg. A	
D	Bldg. C	
E	Bldg. C	
F	Bldg. E	
Mail Room	G059A	
Medical Education	A1005	
Military Personnel (MPO)	C1016	
Multidiscipline Laboratories (MDL).....	A2030	
Registrar (REG)	A1041	
Security Office	UP001	
Guard Station	B Building	
Seminar Rooms		
F	A2054	
G	A2053	
H	A2051	
I	B3004	
J	B4004	
Student Affairs (OSA)	C1020	
Student Store.....	First Floor, Building	
Travel Office (Carlson-Wagonlit Travel)		
Toll Free		
Fax		
After Hours		
University Family Health Center	A1034	
Weather Recording (School Cancellations).....		

3-YEAR CALENDAR