Article 8 Student Progression

Section 8.01 General Guidelines

(1) To receive the medical degree from The University of North Carolina at Chapel Hill (University) School of Medicine (SOM), students must pass all required courses; pass certain qualifying examinations including the Clinical Performance Exam and USMLE Steps 1 and 2 (CK and CS);\(^1\) demonstrate consistent compliance with the Technical Standards for Medical Students, including exhibiting the professional characteristics expected of a physician; and adhere to all SOM and University policies.

(2) Students who fail any course must subsequently pass the course through remediation, reassessment, and/or by repeating the entire course.

(3) Students must pass all phases of the curriculum.

Section 8.02 Student Progress Committee

(1) The SOM has established a Student Progress Committee (Committee) whose purpose is to review the academic and professional performance of medical students. For those students experiencing Academic Difficulty, Professional Difficulty, Academic Risk, or Professional Risk (see Section 8.03 Academic or Professional Difficulty or Risk), the Committee will consider the totality of the circumstances and take appropriate actions, carefully balancing the best interests of the student, the SOM, the profession, and the public.

(2) The Committee is composed of eleven members and a chair.

(a) Eight members of the Committee are voting members, all of whom are SOM teaching faculty. Three of the members will be appointed to the Committee by the Dean from the basic science departments (as defined in the SOM Bylaws) and three will be appointed to the Committee by the Dean from the clinical departments (as defined by the SOM Bylaws). One voting faculty member from the basic science departments and one voting faculty member from the clinical science departments is elected by the faculty of the SOM from a pool of experienced educators who have previously served as a medical school course or clerkship director and/or a member of the Academy of Educators. Alternate voting members from the basic science or clinical departments will also be appointed by the Dean.

(b) The Associate Dean for Student Affairs, the Registrar, the Associate Dean for Admissions, and the Assistant Dean for Admissions/Director of Special Programs are ex officio (nonvoting) members of the Committee.

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\(^1\) The reference to certain qualifying examinations is not meant to imply that a student must pass every SOM exam to receive the MD degree. Rather, the reference is intended to explicitly cover required examinations that are not coursework, including but not limited to the Clinical Performance Examination (CPX) and required steps of the USMLE.
(c) The chair of the Committee is appointed by the Dean. The chair may vote only to break a tie or when acting as part of the necessary quorum.

(3) A Committee quorum is constituted by five voting members. The chair may serve as the fifth voting member to constitute a quorum. The Committee may not act without a quorum.

(4) The decisions of the Committee are determined by a majority vote of the members present.

(5) Committee voting members who have been involved in the circumstances that led to the student’s review are required to recuse themselves from voting on any motions concerning the student.

(6) Advisory College faculty do not serve on the Committee.

Section 8.03 Academic or Professional Difficulty or Risk

(1) Academic Difficulty is defined by the presence of any one or more of the following:

(a) one or more failing grades in:
   i. courses, clerkships, electives, or selectives
   ii. the USMLE Step 1 or 2 (CK or CS)
   iii. the Clinical Performance Examination (CPX)
   iv. other requirements

(b) failure to meet the requirements of any extramural activity approved and authorized by the Associate Dean of Student Affairs (e.g., requirements of the School of Public Health for the MPH degree or for other approved dual degree programs)

(c) documented difficulties in clinical performance in any course that leads to an incomplete or failing grade

(d) In general, students will be notified of Academic Difficulty by their small group instructor, course/clerkship director, or the Associate Dean for Student Affairs.

(2) Professional Difficulty is defined by the presence of documented behavior, including behaviors inconsistent with the professionalism expected of a physician, which interfere with the student’s responsibilities and progress through the curriculum which may have caused a failing or incomplete grade. (Refer to Article 5 Responsibilities of Medical Students and Article 3 Expected Outcomes.)

(a) Examples of behaviors that may establish Professional Difficulty include but are not limited to habitual and unexcused lateness or absenteeism, responding inappropriately when receiving feedback, unprofessional or inappropriate interactions with health care teams, failing to submit assignments, missing deadlines, dishonesty, and being sanctioned by the Honor Court.
(b) In general, students will be notified of Professional Difficulty by their small group instructor, course/clerkship director, or the Associate Dean for Student Affairs.

(3) Academic Risk is defined by the presence of any one or more of the following:

(a) performance in a section or course with a final course score that is two standard deviations or more below the section or course mean or below 70%.

(b) substantial documented difficulties in clinical performance that have not led to an incomplete or failing grade.

(c) In general, students will be notified of Academic Risk by their small group instructor, course/clerkship director, or the Associate Dean for Student Affairs.

(4) Professional Risk is defined by the failure of a student to exhibit the personal attributes and capabilities essential for promotion and graduation, as described in the Technical Standards (see Articles 2, 3 and 5).

(a) In general, students will be notified of Professional Risk by their small group instructor, course/clerkship director, or the Associate Dean for Student Affairs.

Section 8.04 Review by the Committee

(1) The Committee reviews all students experiencing Academic Difficulty, Professional Difficulty, Academic Risk, and Professional Risk during each semester and at the end of each semester.

(2) The appropriate faculty advisor, course directors, the Associate Dean for Student Affairs, and the Registrar, as appropriate, will provide to the Committee written information from the student’s academic record about each student subject to review to assist the Committee to render informed decisions.

(3) If any student’s performance is found deficient, the Committee may take any of the following steps, alone or in combination:

(a) recommend that the student be referred for evaluation of difficulties that may impair his/her ability to be a physician, including but not limited to learning disabilities, medical disorders, and psychological disorders

(b) require the student to complete a SOM remedial program

(c) require the student to enter a decelerated curriculum

(d) require the student to repeat a portion or the entirety of academic work for the previous academic year

(e) recommend that the student withdraw from the regular curriculum to take a review course or enter a review program
(f) require the student to take a leave of absence with defined conditions for returning to the curriculum (See Article 10)

(g) require the student to cease or not perform clinical coursework until all issues before the Committee and all appeals have been resolved. This measure is reserved for situations where, in the Committee’s reasoned professional judgment, there is a risk that a student may jeopardize patient care or safety through unprofessional behavior or incompetence.

(h) dismiss the student from the SOM

(i) recommend or require other measures to appropriately address the professional or academic difficulty or risk at issue

(4) If, in the opinion of the chair of the Committee, the Associate Dean for Student Affairs, and the Registrar, it is possible that the Committee will recommend an action other than remediation of an incomplete or failing grade to the satisfaction of the course/clerkship director (e.g., deceleration, repeating a year, dismissal), the student shall be advised in writing at least ten working days prior to the scheduled meeting of the Committee and will be invited to appear before the Committee.

(a) Students who appear before the Committee may address the Committee and present any relevant documentation to the Committee. Students may also bring one SOM faculty with them to the meeting.

(b) If the student does not respond that they intend to appear before the Committee, the Committee will meet as scheduled, and any decisions will be made in the student’s absence.

(5) Failure to comply with a requirement or recommendation imposed by the Committee may result in dismissal from the SOM.

(6) If a student’s alleged conduct potentially constitutes an offense under the Instrument of Student Judicial Governance (Instrument), the matter must be referred to the Student Attorney General for handling in accordance with the Instrument. If, in the Committee’s reasoned professional judgment, the alleged conduct, if true, would constitute a risk to patient care or safety, the Committee may suspend the student from patient contact pending the outcome of the case.

(a) If, upon review of the matter, the Attorney General determines that the alleged conduct does not constitute an offense under the Instrument or that there is insufficient evidence to pursue a charge against the student, the Committee may address conduct that calls into question the student’s professional fitness for the practice of medicine pursuant to this policy, the SOM Technical Standards, or other applicable SOM or University policies.

(b) If the Attorney General initiates a charge against the student and the Honor Court finds the student responsible for the offense charged, the Committee may also review the student’s conduct if that conduct calls into question the student’s professional fitness for the practice of medicine pursuant to this policy, the SOM Technical Standards, or other
applicable SOM or University policies. Such consideration shall not begin until all Honor Court proceedings, including any appeals, have concluded.

(d) If the Honor Court finds the student not responsible for the offense charged, the Committee will ordinarily not consider the matter further. However, where the student has admitted conduct in connection with the Honor Court case that calls into question the student’s professional fitness for the practice of medicine, the Committee may address the conduct pursuant to this policy, the SOM Technical Standards, or other applicable SOM or University policies. Such consideration shall not begin until all Honor Court proceedings, including any appeals, have concluded. Prior to beginning a review in this situation, the Committee will consult with the Office of University Counsel about the appropriateness of proceeding.

Section 8.05 Addressing Academic Difficulty, Professional Difficulty, Professional Risk, or Academic Risk

(1) In situations involving Academic Difficulty, Professional Difficulty, Academic Risk, or Professional Risk, the Committee may, where appropriate, require any of the actions listed in Section 8.04(3). While the circumstances of an individual case will dictate the appropriate response, the following responses are typically – but not always – applied under the circumstances indicated:

(a) If a student is at Academic Risk or Professional Risk during any phase, but is not in Academic Difficulty or Professional Difficulty, the student may be required to enter a remedial program for those courses that signal Academic Risk or Professional Risk.

(c) Foundation Phase students who fail a section or course in the remedial program may be required to enter a decelerated curriculum, take a leave of absence with defined conditions for return, or be dismissed from the SOM.

(d) If a student does not pass the USMLE Step 1, the student will not be allowed to continue in the clinical curriculum after November 1st of the Application Phase until a passing score on the USMLE Step 1 is recorded by the registrar.

(e) If a student does not pass the USMLE Step 2 CK and CS by November 1st of their fourth year, the student may be withdrawn from the Match (see UNC SOM Policy for Completion of USMLE Step 1, Step 2-Clincal Knowledge, and Step 2-Clinical Skills Exams). A student will not be able to graduate until the student passes USMLE Step 2 CK and Step 2 CS by the second Wednesday before graduation.

(f) If a student does not pass the Clinical Performance Exam (CPX), the student will be required to retake the CPX after completing a remedial program. A student will not be able to graduate until a passing score is registered on the CPX.

(g) Three failures of the USMLE Step 1 or 2 (CK or CS) exam will result in dismissal from the SOM.
(2) Students in Academic or Professional Difficulty or at Academic or Professional Risk are strongly urged to work with the academic assistance program under the direction of the Associate Dean for Student Affairs. (See Article 7, Academic Assistance.)

**8.05 Guidelines for Deceleration**

(1) Students who are decelerated by the Committee or who decelerate voluntarily should complete the appropriate phase of the curriculum within three academic years of matriculation, excluding approved leaves of absence. If an authorized leave of absence exceeds three calendar years, the student’s situation will be reviewed by the Committee and may result in dismissal.

(2) The entire curriculum must be completed within six academic years of matriculation, excluding approved leaves of absence. Failure to do so will result in dismissal from the SOM unless there are extraordinary extenuating circumstances that preclude the student’s progress and that, in the judgment of the Committee, warrant an extension.

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