

Article 8 Student Progression

Section 8.01 General Guidelines

(1) To receive the medical degree, students must pass all required courses, pass certain qualifying examinations including the USMLE Steps 1 and 2, and demonstrate consistent compliance with the Technical Standards for Medical Students, including exhibiting the professional characteristics expected of a physician.

(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 of the requirements of their current year curriculum before being promoted to the next year.

Section 8.02 Student Promotions Committee

(1) The purpose of the Student Promotions Committee is to review the academic and professional performance of medical students. For those experiencing Professional/Academic Difficulty or Risk, the Committee will consider the totality of the circumstances and take appropriate actions in the best interests of the student, school, profession, and the public.

(2) The Student Promotions Committee is appointed by the Dean and is composed exclusively of UNC School of Medicine teaching faculty.

(3) The Committee is composed of eight voting members and a Chair. Four of the members will be appointed from the basic science departments and four from the clinical departments. Four alternate voting members from the basic science or clinical departments will also be appointed by the Dean. The Associate Dean for Student Affairs and the registrar are ex officio (nonvoting) members of the Committee.

(4) 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.

(5) 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.

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

(7) The appropriate faculty advisor, course directors, the Associate Dean for Student Affairs, and the registrar are expected to provide information on each student as may be required by the Student Promotions Committee to render informed decisions.

(8) The Committee reviews all students with professional or academic difficulty or at professional or academic risk during each semester and at the end of each semester. (See 8.03 Professional or Academic Difficulty and Risk) If any student's performance is found deficient, the Student Promotions Committee may require that the student:

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

(b) complete a remedial program

(c) enter a decelerated curriculum

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

(e) withdraw from the regular curriculum to take review courses or enter a review program

(f) take a leave of absence with defined conditions for returning to the curriculum (See Article 10)

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

(h) be dismissed from medical school

- i. Student must be given written notification 14 days prior to dismissal.
- ii. If student does not respond, the decision to dismiss stands.

(9) Failing to comply with a requirement or recommendation of the Student Promotions Committee may result in dismissal from the UNC School of Medicine.

(10) The Student Promotions Committee is not permitted to change the evaluation of student performance submitted by the course directors.

(11) If a student's alleged conduct constitutes an offense under the Instrument of Student Judicial Governance, the matter must be referred to the Medical School Attorney General for handling in accordance with the Instrument. If, in the Student Promotions 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 was not an offense under the Instrument of Student Judicial Governance, but the alleged conduct calls into question the student's professional fitness for the

practice of medicine, the Student Promotions Committee may address the conduct under this policy.

(b) If, upon review of the matter, the Attorney General concludes that the alleged conduct was an offense under the Instrument of Student Judicial Governance but there is insufficient evidence to bring a charge against the student, the Student Promotions Committee may address the conduct under this policy if the alleged conduct calls into question the student's professional fitness for the practice of medicine.

(c) If the Honor Court finds the student responsible for the offense charged, and the conduct at issue also calls into question the student's professional fitness for the practice of medicine, the Student Promotions Committee may review the conduct under this policy. Such consideration shall not begin until the student has exhausted all levels of appeal of the Honor Court decision.

(d) If the Honor Court finds the student not responsible for the offense charged, normally, the Student Promotions Committee may not consider the matter further. However, in certain rare instances, where the student has admitted conduct in connection with the case that calls into question the student's professional fitness for the practice of medicine, the Student Promotions Committee may address the conduct under this policy. Such consideration shall not begin until all Honor Court proceedings, including appeals, if any, have concluded. Prior to beginning a review in this situation, the Student Promotions Committee should consult with the Office of University Counsel about the appropriateness of proceeding.

Section 8.03 Professional or Academic Difficulty and Risk

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

- (a) conditional or failing grades in
 - i. one or more courses
 - ii. the USMLE Step 1 or 2
 - iii. the Clinical Performance Examination (CPX)
 - iv. other requirements

(b) documented difficulties in clinical performance in any course that leads to a failing or conditional grade.

(2) Professional Difficulty is defined by the presence of any one or more of the following:

- (a) documented attitudinal or behavioral problems, including behaviors inconsistent with the professionalism expected of a physician, which interfere with the student's responsibilities and progress through the curriculum, and have caused a failing or

conditional grade (Refer to Article 5 Responsibilities of Medical Students and Article 3 Expected Outcomes)

- (3) Academic Risk is defined by the presence of any one or more of the following:
- (a) passing two or more courses with an exam score in each that is two standard deviations or more below the exam mean and a final course grade below 70%.
 - (b) having a final average course grade that is two or more standard deviations below the mean and below 70%.
 - (c) substantial documented difficulties in clinical performance that have not led to a failing or conditional grade.

(4) Professional Risk is defined by the presence of any one or more of the following:

- (a) documented attitudes or behaviors that are unbecoming of a physician (refer to Article 5 Responsibilities of Medical Students Section 5.01 Technical Standards.)

(5) Students in Professional/Academic Difficulty or at Professional/Academic 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.)

(6) A student with a documented pattern of behavior and/or level of professionalism that is substantially inconsistent with the Technical Standards (See Articles 2, 3 and 5) and requirements of the profession, as judged by the Student Promotions Committee, may be dismissed from the UNC School of Medicine. This provision applies even if the student has shown no other instances of Professional/Academic Difficulty or Risk.

Section 8.04 Addressing Professional/Academic Difficulty and Risk

(1) In situations involving Professional or Academic Difficulty or Risk, the Student Promotions Committee may, where appropriate, require any of the actions listed in Section 8.02(8). While the circumstances of an individual case may dictate an additional or different response, the following responses will normally apply under the circumstances indicated:

- (a) If a student is at Professional/Academic Risk in any year, but is not in Professional/Academic Difficulty, the student may be required to enter a remedial program for those courses registering Professional/Academic Risk.
- (b) If a student fails less than 10% of their course work during the first or second year, this student will be required to complete a remedial program for those courses unless:

- i. the student is also at Professional/Academic Risk, then the student may also be required to enter a remedial program for courses where the student registered Professional/Academic Risk in addition to the remedial program for the 10% failed coursework.
- ii. the quantity of courses failed and registering Professional/Academic Risk are impractical to complete in a remedial program, the student may be required to enter a decelerated curriculum.
- iii. the student is also registering extraordinary Professional/Academic Risk, especially with a documented pattern of attitudinal or behavioral problems. In this case, a student may be dismissed from the UNC School of Medicine.

(c) If a student fails one block or between 10-15% of their course work during the first year, this student will be required to do one of the following:

- i. enter a remedial program if the student has not registered Professional/Academic Risk in other course work.
- ii. enter a decelerated curriculum if the student has registered Professional/Academic Risk in other course work.
- iii. be dismissed from the UNC School of Medicine if the student is at extraordinary Professional/Academic Risk, especially including a documented pattern of attitudinal or behavioral problems or is in academic difficulty related to documented attitudinal or behavioral problems.

(d) If a student fails two blocks or more than 15% of their course work during the first year, this student will be required either to:

- i. enter a decelerated curriculum if the student has not registered other Professional/Academic Risk.
- ii. be dismissed from the UNC School of Medicine if the student has registered other Professional/Academic Risk.
- iii. be dismissed from the School of Medicine if the student has a documented pattern of attitudinal or behavioral problems.

(e) If a student fails between 10-15% of their course work during the second year, this student will be required to do one of the following:

- iv. enter a remedial program if the student has not registered Professional/Academic Risk in other course work.
- v. enter a decelerated curriculum if the student has registered Professional/Academic Risk in other course work.
- vi. be dismissed from the UNC School of Medicine if the student is at extraordinary Professional/Academic Risk, especially including a documented pattern of attitudinal or behavioral problems or is in academic difficulty related to documented attitudinal or behavioral problems.

(f) If a student fails more than 15% of their course work during the second year, this student will be required either to:

- iv. enter a decelerated curriculum if the student has not registered other Professional/Academic Risk.
- v. be dismissed from the UNC School of Medicine if the student has registered other Professional/Academic Risk.
- vi. be dismissed from the School of Medicine if the student has a documented pattern of attitudinal or behavioral problems.

(f) First or second year students who fail a 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 UNC School of Medicine.

(g) If a student does not pass the USMLE Step 1, the student will not be allowed to continue in the clinical curriculum after December 31st of the third year until a passing score on the USMLE Step 1 is recorded by the registrar.

(h) A third or fourth year student with Professional/Academic Difficulty may be required to do any of the following

- i. complete remedial work in the area of the failure
- ii. be referred for evaluation of difficulties that impair his or her ability to be a physician, including learning disabilities, medical disorders, and psychological disorders
- iii. repeat the failed clinical course
- iv. delay a clerkship or take a leave of absence with defined conditions for return
- v. be dismissed from the UNC School of Medicine

(i) If a student does not pass the USMLE Step 2, the student will be required to retake the exam after completing a remedial program. A student will not be able to graduate until a passing score is registered on the USMLE Step 2.

(j) 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.

(l) Three failures of the USMLE Step 1 or 2 exam will result in dismissal from the UNC School of Medicine.

8.05 Guidelines for Deceleration

- (1) Students who are decelerated by the Student Promotions Committee or who decelerate voluntarily must complete the pre-clinical curriculum within three academic years of matriculation, excluding approved leaves of absence.

- (2) The entire curriculum must be completed in five academic years, excluding approved leaves of absence. Failure to do so will result in dismissal from the UNC School of Medicine unless there are extraordinary extenuating circumstances that preclude the student's progress and, in the judgment of the Student Promotions Committee, warrant an extension.

Approved by CMPC February 10, 2005
Approved by Dean Golden March 8, 2005

Notes and Procedures:

8.01(1)

The reference to certain qualifying examinations is not meant to imply a student must pass every medical school exam to receive the MD degree. This is included 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.

Approved by CMPC February 10, 2005

8.02

All remedial programs are coordinated by the Associate Dean for Student Affairs collaborating with the Educational Resources Coordinator, and the appropriate course, exam, or clerkship director. These remedial programs may be reviewed and modified by the Student Promotions Committee.

Approved by CMPC February 10, 2005

8.03 Clinical Curriculum Evolution

1. Core Clerkships

Students will complete each of the following core clerkships by the end of the second month of the fourth year (i.e., in the first fourteen blocks). (Joint degree students see UNC SOM Educational Policy 13.03.)

- a. Family Medicine - 1 rotation of 4 weeks
- b. Internal Medicine - 1 rotation of 8 weeks
- c. Ob/Gyn - 1 rotation of 4 weeks
- d. Pediatrics - 1 rotation of 8 weeks
- e. Psychiatry / Neurology - 1 rotation of 8 weeks
- f. Surgery - 1 rotation of 8 weeks

2. Other Required Courses to be completed before the end of the fourth year.

- a. Four four-week Selectives:
 - Internal Medicine III
 - Critical Care

- AHEC AI
 - Ambulatory Care
- b. Fundamentals of Acute Care (including ACLS certification), in the first or last week of one “off” block during the clinical years
 - c. The Capstone Course, during fixed dates to be scheduled by the Dean’s Office
 - d. A minimum of four four-week Electives

3. Electives Policy

There are 2 objectives of electives:

- To provide *diverse* experience early enough in a student’s medical education to allow informed career decisions (i.e., in the first 2 years)
- To provide *applied* experience late enough in medical education for students to take advantage of acquired knowledge and maturity.

The following policies are designed to support students and advisors in making course of study decisions that meet both of these objectives for each student.

1. No elective may be taken during the first semester of the first year.
 2. A maximum of four weeks (one block) of elective credit is permitted in the preclinical years, which may count toward the four required electives. (Joint degree students see UNC SOM Educational Policy 13.03.)
 3. Students with a history of academic difficulty or academic risk must obtain permission of the Associate Dean for Student Affairs to take electives in the preclinical years.
 4. Electives whose prerequisites are met are permitted in the fourteen block core experience.
 5. At least two of the electives taken during the clinical years must be “practice-based,” by which is meant “applied,” “patient- or case-centered,” or “clinical.”
- a. Three blocks (twelve weeks) will be permitted as off-time. This is exclusive of scheduled student holidays and required coursework. This off time can be vacation, residency interviewing, research, etc.
 - b. Advancement to the clinical years requires a passing score on Step 1.
 - c. Evidence of passing Step 2 CK and scheduling Step 2 CS is required to graduate.
 - d. Passing CPX is required to graduate. CPX must be taken during blocks 12-15 of the clinical experience.

Approved by CMPC August 24, 2006

8.04

It is recognized that the diversity of educational experience among combined degree students can create unique scheduling demands. The Associate Dean of Student Affairs and the Associate Dean for Curriculum and Educational Development are therefore authorized to modify scheduling requirements for combined degree students on a case-by-case basis if they determine that such an accommodation would support such students in meeting course requirements while accomplishing their multiple objectives.

Approved by CMPC September 28, 2006