

STUDENT HANDBOOK

2025



KIRK KERKORIAN
SCHOOL OF MEDICINE

UNLV

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SECTION 1: INTRODUCTION

The Medical Student Handbook is the official document of policies, procedures, and resources for medical students enrolled in the doctor of medicine (MD) program at the Kirk Kerkorian School of Medicine at UNLV. Every student enrolled in the MD program is accountable for reading, understanding, and abiding by the policies and procedures set forth in the student handbook, as well as the general rules and regulations of the University of Nevada, Las Vegas (UNLV) as set forth by UNLV.

The school of medicine may change policies, procedures, resources, and other information as circumstances require. The contents of the handbook apply to all current students, regardless of class year. The most recently approved policies, procedures, and standards will be followed.

Nothing in this document constitutes a contract or creates a contractual obligation on the part of the Kirk Kerkorian School of Medicine at UNLV or the university. The school of medicine reserves the right to interpret and apply its policies and procedures and to deviate from these guidelines, as appropriate in particular circumstances and in accordance with its mission and goals.

The Medical Student Handbook is available online in MedHub (<https://unlvsom.medhub.com/index.mh>) and WebCampus (<https://www.it.unlv.edu/webcampus>).

VISION

The Kirk Kerkorian School of Medicine at UNLV will deliver high-quality, innovative education, research, and superb clinical care to meet the healthcare needs of the growing and diverse population of Nevada.

MISSION

The Kirk Kerkorian School of Medicine at UNLV will serve our patients, students, medical professionals, and community as a transformational force for improving healthcare in Nevada. This is accomplished by delivering evidence-based, innovative centers of excellence in medical education and research, coupled with cost-effective, high-quality care that improves the health of our community members throughout their lifespan; becoming an integral contributor to an Academic Health Center; and creating a culture of collaboration through inclusion and excellence.

STRATEGIC PRIORITIES

The following list describes the strategic priorities of the Kirk Kerkorian School of Medicine at UNLV.

- Community: Advance healthcare for all citizens of Nevada.
- Discovery: Create a culture of scientific inquiry that fosters research and translates into positive health outcomes.
- Education: Use evidence-based curriculum and teaching techniques at all levels of education.
- Patient and Family-Centered Care: Provide high-quality, cost-effective care in a patient and family-centered manner.
- People: Serve those inside the institution and in the community to foster a positive culture.
- Performance Improvement: Execute the strategic plan and assess its effectiveness using appropriate metrics.

VALUES

The following values underpin the strategic mission and day-to-day operations of the Kirk Kerkorian School of Medicine at UNLV.

- Strive for Excellence
- Drive Innovation
- Serve with Compassion and Humility
- Demonstrate Inclusion
- Act with Integrity

UNIVERSITY STATEMENTS AND COMPLIANCE

University statements and compliance concerning a variety of issues, including equal opportunity, civility, diversity, Title IX, unlawful harassment, personal discrimination and retaliation, medical marijuana, digital and media copyright compliance, and web accessibility, can be found at: <https://www.unlv.edu/about/statements-compliance>.

EQUAL EDUCATIONAL AND EMPLOYMENT OPPORTUNITY

REAFFIRMATION OF COMMITMENT TO EQUAL EDUCATIONAL AND EMPLOYMENT OPPORTUNITY

The University of Nevada, Las Vegas (UNLV) is committed to and will provide equality of educational and employment opportunity for all persons regardless of race, sex, age, color,

national origin, religion, disability, sexual orientation, gender, genetic information, pregnancy, or veteran status — except where sex, age, or ability represent bona fide educational or employment qualifications or where marital or veteran status are statutorily defined eligibility criteria for federal or state benefit programs. Further, the university seeks to promote campus diversity by enrolling and employing a larger number of minorities and women where these groups have historically been and continue to be underrepresented within the university in relation to availability. Diversity, equity, and inclusion are core values at UNLV, and preference may be given to substantially equally qualified candidates who can demonstrate evidence of a commitment to diversity, equity, and inclusion.

This affirmation is published in accordance with 41 CFR 60 and is in keeping with Title VII & Title IX of the Civil Rights Act of 1964, as amended; Executive Order 11246; the Rehabilitation Act of 1973; the Vietnam Era Veterans' Readjustment Assistance Act of 1974; the Civil Rights Restoration Act of 1988; Nevada Revised Statutes; Genetic Information Nondiscrimination Act of 2008; and the Code and Policies of the Board of Regents of the Nevada System of Higher Education.

To ensure that equal educational and employment opportunity exists throughout the university, a result-oriented, equal opportunity/affirmative action program has been implemented to overcome the effects of past discrimination and to eliminate any artificial barriers to educational or employment opportunities for all qualified individuals that may exist in any of our programs. The university aims to achieve, within all areas of the university community, a diverse student body, faculty, and staff capable of providing for excellence in the education of its students and for the enrichment of the university community.

The University of Nevada, Las Vegas reaffirms its commitment to equality of educational and employment opportunity in its relationships with all members of the university community and its commitment to the elimination of any documented historical and continuing underutilization of women and minorities among the student body or employee complement. The University of Nevada, Las Vegas is committed to this program and is aware that with its implementation, positive benefits will be received from the greater utilization and development of previously underutilized human resources.

DIVERSITY

The Kirk Kerkorian School of Medicine at UNLV strives to attract and support individuals from groups historically underrepresented in medicine. Our institutional leadership is dedicated to the principles of diversity, equity, and inclusion as essential pillars of our climate and culture. This is evidenced by collaborative efforts between the office of diversity, equity, and inclusion and the offices of student affairs, admissions, community engagement, faculty affairs, and human

resources to maintain an inclusive and respectful environment for all members of our academic community.

We aspire to achieve diversity among our students, faculty, staff, and leadership that is reflective of Southern Nevada, and we celebrate a culture of inclusion where all members of our medical community are welcomed, respected, and heard. We honor those devoted to increasing health equity and providing care to all in the context of cultural humility. As an academic medical center, it is our privilege and responsibility to train and mentor future healthcare providers who will understand, appreciate, and advocate for diversity, equity, and inclusion and are well positioned to provide the best care to all people.

STATEMENT ON THE COMMITMENT TO THE RECRUITMENT OF DIVERSE STUDENTS AT UNLV

The University of Nevada, Las Vegas (UNLV), along with other research-intensive public universities in the United States, recognizes that a student body that is diverse with respect to race, ethnicity, socioeconomic class background, and geography, among other dimensions of cultural difference, benefits and enriches the educational experiences of all students, faculty, and staff. Accordingly, UNLV strives to recruit students who will further enrich this diversity and to support their academic and personal success while they are a part of our campus community. The presence and achievement of racial and ethnic minority students at UNLV not only benefits these students individually, it enhances the educational and interpersonal experiences of everyone in our campus community. UNLV actively encourages applicants whose racial and ethnic backgrounds are underrepresented in higher education in Nevada, who are first-generation college students, and those with demonstrated financial need.

STATEMENT ON DIVERSITY IN THE UNIVERSITY COMMUNITY

As an institution of higher learning, UNLV represents a rich diversity of human beings among its faculty, staff, and students and is committed to maintaining a campus environment that values that diversity. Accordingly, the university supports understanding and appreciation of all members of its community, regardless of race, sex, age, color, national origin, ethnicity, creed, religion, disability, sexual orientation, gender, gender identity, marital status, pregnancy, genetic information, veteran status, or political affiliation.

SECTION 2: DOCTOR OF MEDICINE PROGRAM

The doctor of medicine (MD) program is a fully accredited four-year, post-baccalaureate program designed to educate physicians who will provide outstanding medical care to their patients and improve the health of the communities that they serve. In keeping with its identity as a socially accountable, community-focused institution dedicated to improving the health of Nevadans, the MD program is rooted in relationships between faculty and students, physicians and patients, and institution and community.

ACCREDITATION

The Kirk Kerkorian School of Medicine at UNLV receives accreditation from the Liaison Committee on Medical Education (LCME). The LCME oversees and monitors accreditation for all allopathic (MD-granting) medical schools in the United States and Canada. The school of medicine achieved preliminary accreditation in October 2016, provisional accreditation in October 2019, and full accreditation in February 2021.

ADMINISTRATION

A complete listing of administrative leadership, faculty and staff names, and contact information is available online at: <https://www.unlv.edu/medicine/directory>

DEAN'S OFFICE

The dean's office, under the leadership of the dean of the school of medicine, oversees all aspects and issues related to the school of medicine, including its academic, healthcare, service, and research missions.

DIVISION OF ACADEMIC AFFAIRS AND EDUCATION

The division of academic affairs and education guides and oversees all aspects of undergraduate medical education, including curriculum, biomedical science and clinical education, student affairs, community engagement, wellness, admissions, and program accreditation.

OFFICES OF STUDENT AFFAIRS AND ADMISSIONS

The offices of student affairs and office of admissions are the primary points of contact and information for medical students. Faculty and staff are focused on supporting and assisting medical students throughout their medical education at Kirk Kerkorian School of Medicine. Activities of the offices include recruitment, admissions, enrollment, financial aid, student wellness, counseling, learning communities, career exploration and advising, mentoring, clubs and organizations, professional development, and residency application assistance.

OFFICE OF DIVERSITY, EQUITY, AND INCLUSION

The office of diversity, equity, and inclusion is charged with leading and evaluating a collaborative approach that encourages and supports inclusive excellence across the Kirk Kerkorian School of Medicine enterprise. The office has five areas of focus: college pipeline programs, early talent identification and community outreach, curriculum and learning, student affairs and campus life, and recruitment and retention of diverse faculty and staff.

CURRICULUM

The curriculum of the MD program is comprised of three phases:

PHASE 1: FOUNDATIONS PHASE

The Foundations Phase is designed to provide students with the foundational knowledge and skills necessary to practice medicine. Components of Phase 1 include the following:

Foundations of Medical Science

An introduction to the biomedical sciences and basis for further study in the medical sciences. Introduces the basic tenets of biochemistry, molecular biology, cellular biology, genetics, and embryology, as well as histology, pathology, epidemiology, immunology, and pharmacology.

Anatomy and Histology

The anatomy and histology course provides a foundation in concepts related to clinically oriented anatomy, histology, and radiology. These concepts are revisited in the organ-system courses.

Immersion/Emergency Response

In this course, students learn about population health through immersion in the community and in the classroom. Students also receive training as emergency medical technicians in the initial response to a medical emergency in the community. The course orients students to service learning opportunities for the study of population health in the communities throughout the Las Vegas Valley that their patients come from.

Integrated Organ-System Courses

Organ-system courses are designed to provide students with the understanding and ability to apply important concepts of the sciences basic to the practice of medicine, with emphasis on principles and mechanisms underlying health, disease, and modes of therapy. This foundation is necessary for the safe and competent practice of medicine. Problem-based learning (PBL) is a central component of the organ-system courses and teaches students a range of skills relevant to clinical practice.

Analytics in Medicine (AIM)

The purpose of AIM is to foster the development of the tools necessary for modern physicians to navigate the variety and volume of information available effectively and efficiently and to use that information to improve decision-making processes, healthcare delivery, and patient care.

Students develop skills in analyzing a variety of data sources, discuss tough ethical questions, and interpret and apply evidence-based medicine to patient care.

Physicianship

This course is designed to develop knowledge, skills, attitudes, and behaviors for the modern, competent, ethical, and humane physician. Emphasis is placed on the longitudinal development of clinical skills and professionalism prior to advancing into the clerkship and career preparation phases of the medical program.

Psychiatry, Behavior & Sexuality

This course focuses on neurology, psychiatry, behavioral medicine, human development, and understanding of the structure and function of the central and peripheral nervous system. Emphasis is placed on pathophysiology, epidemiology, biostatistics, diagnostic tests, and therapeutic principles associated with the nervous system, mental disorders, and sexuality.

Foundations of Clinical Practice (FCP)

Students develop and apply patient interviewing and physical exam skills, including patient history-taking and communication practice, in preparation for clinical encounters that require diagnostic reasoning and the formation of strong doctor-patient relationships. Students cultivate a comprehensive understanding of the active role of a physician in a clinical setting and are exposed to concepts and the art of integrative medicine.

Nevada Community Service (NCS)

Service-learning experiences where students collaborate with a community service organization of their choice and, under the guidance of the director of community engagement and community mentors, address healthcare concerns and/or social issues present in the Las Vegas Valley. Community-based field experiences are impactful and meaningful and foster the knowledge, skills, and competencies necessary to promote community improvements and access to healthcare. Optional summer research experiences follow the first year of medical study. During the Career Exploration and Scholarship Phase, students complete a one-month rotation in NV Community Medicine, which combines the practice of medicine and public health in a community-based facility with an overview of the U.S. healthcare system.

PHASE 2: CLERKSHIP PHASE

The Clerkship Phase consists of clinical experiences that help students acquire medical knowledge, sharpen clinical skills, further develop clinical reasoning in both outpatient and inpatient settings, and acquire experience in the administration and practice of medicine under supervision. All medical students in clinical learning situations involving patient care will be appropriately supervised at all times by a faculty member, fellow, or resident to ensure patient

and student safety. The level of responsibility delegated to the student must be appropriate to the student's level of training, and the activities supervised must be within the scope of practice. During Phase 2, students also learn to apply the principles of patient safety and care, as well as on health promotion and disease prevention.

Transition to Clerkships

Students continue to hone clinical skills acquired during Phase 1, while focusing on the acquisition of specialty-specific knowledge and skills necessary to serve on clinical teams in the clerkships.

Clerkships

The clerkships is 46 weeks, consisting of:

- Family Medicine: 6 weeks
- Internal Medicine: 8 weeks
- OB-GYN: 6 weeks
- Pediatrics: 6 weeks
- Psychiatry: 6 weeks
- Surgery: 8 weeks

Selectives

Three, two-week short rotations; one of your selective is a neurology rotation. Students may be assigned to inpatient services with resident teams, outpatient clinics, or a combination of both.

Goals and Objectives of the Clerkships

Training in clerkships is the continuation of your Phase 1 education to meet the School of Medicine Educational Program Objectives in these competency domains:

- Medical Knowledge
- Interpersonal & Communication Skills
- Patient Care & Procedural Skills
- Task-Based Learning & Improvement
- Professionalism
- Systems-Based Practice

The clerkship training emphasizes the strengthening of competencies in history-taking, physical examination skills, problem differentiation, disease prevention and management, as well as written communication and oral presentation skills – including, but not limited to, presenting information on rounds, writing notes, and communicating with colleagues, patients, and families. These skills are built on the competencies students have acquired in Phase 1 of their education. In applying these basic skills, students demonstrate their understanding of comprehensive, evidence-based, and patient-centered care. At the end of the year, students

have command of an extensive fund of knowledge, which positions them for exceptional performance on the United States Medical Licensing Examination (USMLE) Step 2: Clinical Knowledge (CK) exam.

Independent Study

Phase 2 concludes with a four-week period of independent study that offers students time to prepare and sit for the USMLE Step 2, CK exam.

PHASE 3: CAREER EXPLORATION AND PREPARATION PHASE

The Career Exploration and Preparation Phase provides students the opportunity to take on greater clinical responsibility in sub-internships, acquire additional knowledge and skills in acute care settings, and explore personal interests in electives and away rotations. Phase 3 Capstone is an intense two-week course that ensures graduates have acquired and mastered the skills and competencies expected of an entering first-year resident. Students are required to complete 44 weeks of course work.

Required Sub-Internship and/or Intensive Critical Care (ICU) Rotation

Students complete a required sub-internship or ICU experience as advanced learners/acting interns responsible for the day-to-day supervised management of patients on inpatient wards.

Nevada Community Medicine

A required four-week, seminar style course for fourth-year students that combines the practice of medicine and public health in a community-based facility. This course provides an overview of the U.S. healthcare system including the programs, providers, policies, and payment systems (4Ps) from a clinical perspective. Didactic sessions address key issues in healthcare services, a survey of the policies and structures of the U.S. healthcare system, a historical analysis of the development of the current system, and the organization and administration of current and future objectives of healthcare services. Students examine the healthcare system in terms of equity, appropriateness, and effectiveness of the way healthcare services are delivered and paid for.

Electives

Students have the opportunity to complete at least four months of clinical electives and away rotations, under the advice and guidance of their respective pathway advisor. Students may also choose to take non-clinical electives.

Capstone

Provides students with the important skills, practice, and information needed to successfully

navigate the transition to residency training. Hands-on and procedural training is included to meet the evolving requirements of residency training.

Vacation and Interview Months

Students submit their own schedules to accommodate for residency interviews, time-off, research, and/or self-directed study. In order to avoid conflicts with assigned duties, students are not recommended to schedule required Sub-I, ICU, or Nevada Community Medicine rotations during the usual peak “Interview Season” (November, December, and January).

SECTION 3: RESOURCES AND PARTNERSHIPS

CAMPUS AND FACILITIES

Medical students are based in the Kirk Kerkorian Medical Education Building (MEB). All faculty, staff, and student support personnel are located in the MEB building as well. MEB is located at the corner of Shadow Lane and Pinto Lane (625 Shadow Lane Las Vegas, NV 89106).

As the school’s first permanent structure and centerpiece of the Las Vegas Medical District, the newly built, five-story building offers state-of-the-art design, cutting-edge technology and environmental advancements.

MEB was made possible through the generous donors who contributed to the Nevada Health & Bioscience Corporation (NHBC). A nonprofit corporation that began in May 2019, NHBC is committed to the community, UNLV, and enhancing academic medicine in Southern Nevada.

Functionality and flexibility abound in the 135,000-square-foot building, providing optimum learning opportunities with standardized patient rooms, a simulation suite, virtual anatomy classrooms, and a prosection lab. The building also houses an open forum for large gatherings, a learning resource center operated by UNLV Libraries, as well as a cafe, wellness center, outdoor terrace, and walking trail for students.

Certified LEED Silver, the building earned points by adhering to prerequisites and credits that address carbon, energy, water, waste, transportation, materials, health, and indoor environmental quality.

MEDICAL COMMUNITY PARTNERSHIPS

UNLV works collaboratively with existing Las Vegas institutions to establish our city as a world-class medical destination providing the highest levels of clinical care. Additionally, partnering with physicians and hospitals in the community to educate medical students, medical residents,

and fellows is essential to the future ability of Las Vegas to keep physician graduates practicing in Nevada. The medical school's partners include:

- Dignity Health – St. Rose Dominican Hospital
<https://locations.dignityhealth.org/dignity-health-st-rose-dominican-hospital-san-martin-campus-las-vegas-nv>
- Mike O'Callaghan Military Medical Center (Nellis AFB Medical Center)
<https://nellis.tricare.mil>
- Mountain View Hospital and Medical Center
<https://www.sunrisehealthinfo.com/locations/mountainview-hospital>
- Rawson Neal Psychiatric Hospital/Southern Nevada Adult Mental Health Services (SNAMHS)
<https://www.dpbh.nv.gov/programs/clinical-behavioral-services-home/locations/southern-nevada-adult-mental-health-services-snamhs-locations>
- Southern Hills Hospital and Medical Center
<https://www.sunrisehealthinfo.com/locations/southern-hills-hospital>
- Sunrise Hospital and Medical Center
<https://sunrisehospital.com>
- University Medical Center of Southern Nevada (UMCSN)
<https://www.umcsn.com>
- Valley Hospital Medical Center
<https://www.valleyhospital.net>
- Veterans Affairs (VA) Medical Center (VA Southern Nevada Healthcare System)
<https://www.lasvegas.va.gov>

COMMUNITY SERVICE AGENCIES AND ORGANIZATIONS

The Kirk Kerkorian School of Medicine at UNLV has established partnerships with a broad spectrum of community-based organizations, including those providing social services, medical/behavioral services, government-based agencies, and faith-based services.

SCHOOL OF MEDICINE LIBRARY

The School of Medicine Library provides course and research support to the Kirk Kerkorian School of Medicine at UNLV including both undergraduate and graduate medical education.

The School of Medicine Library is designed so that all medical students, residents, fellows, and faculty can use library resources for study and research. Additional UNLV-affiliated users and

community members of Southern Nevada are welcome to use the library as a resource for health information needs. Library faculty are partners in student learning, evidence-based practice, information literacy, physician wellness, and interdisciplinary discovery of the latest research information.

Physical learning spaces incorporate multimedia equipment and software tools for research and the creation of new knowledge. The majority of the library's collection is delivered in electronic formats so that users may access materials at any time and across multiple platforms and devices. To learn more about library resources available to medical students, please visit <https://www.library.unlv.edu/medicine>.

The school of medicine librarians provides reference, instruction, research assistance, and consultations to members of the Kirk Kerkorian School of Medicine at UNLV. The undergraduate medical education (UME) librarian is the dedicated faculty member for the undergraduate medical students and their instructional faculty. Please visit the School of Medicine Library online at <https://www.library.unlv.edu/medicine> where you can find a list of popular databases, research guides, and more information about library services and policies.

The School of Medicine Library's primary location for UME use is on the third floor of MEB.

SECTION 4: GOVERNANCE

INTRODUCTION

LCME accreditation standards require medical schools to maintain effective organizational structures and governance processes. To that end, the Kirk Kerkorian School of Medicine at UNLV has established a number of standing committees responsible for oversight and decision-making related to the medical education program. The following standing committees include medical student members:

- Admission Committee
- Curriculum Oversight Committee
- Diversity, Equity, and Inclusion Committee

The medical student body is formally represented by the Kirk Kerkorian School of Medicine at UNLV Student Government. The structure, policies and procedures, and duties of the student government are fully described in the Kirk Kerkorian School of Medicine at UNLV Student Government Constitution and its bylaws.

ADMISSION COMMITTEE

SCOPE OF AUTHORITY AND DUTIES

The Admissions Committee has the authority and responsibility for the development, implementation, maintenance, and amendment of admissions policies for the MD program of the Kirk Kerkorian School of Medicine at UNLV. The final responsibility for accepting students into the MD program rests with the Admissions Committee. The selection of individual medical students for admission shall not be influenced by any political or financial factors.

Duties of the Admissions Committee are as follows:

- The committee will identify pre-medical, prerequisite coursework.
- The committee will collaborate with admissions administration to set standards for the initial and secondary review of applications, as well as review all applicants who are invited to interview and will make the final decision concerning each applicant. The committee will set standards for the review of applications, review all applicants who are invited to interview, and will make the final decision concerning each applicant.
- The committee may be broken into subcommittees typically comprised of two to three faculty members, one community member, and one student to review randomized batches of applicants in order to support comprehensive and holistic review of applicants. Subcommittees will present applicants to the full committee for discussion and responsibility of the admissions decision.

MEMBERSHIP

The Admissions Committee is comprised of 20 voting members:

- Eight to 12 faculty members
- Four community members
- Four medical students (two from the second year of study; two from the third year of study)

SELECTION AND TERMS OF SERVICE

Members

The following describes the process by which student members of the Admissions Committee are selected and the length of time for which they serve.

Student Members

Student members will be selected by their peers to serve from a pool of interested individuals who self-nominate through the office of student affairs during student election periods. Student members who serve only one term may be voted by their peers to serve a second term.

Faculty and Community Members

Faculty and community members are appointed by the dean and should serve only two successive terms. However, faculty and community members may be approved by the dean to serve again.

Faculty, community, and student members of the committee will carry voting rights and will serve from September 1 through August 31 of each year of the appointment.

INTERVIEWERS

Interviewers will conduct admissions interviews to evaluate applicant preparation and motivation for attending medical school. Applicant interview evaluations are included as part of the applicant's admission file and will be reviewed by members of the Admissions Committee. Interviewers may not serve on the Admissions Committee, and members of the Admissions Committee may not serve as interviewers.

CURRICULUM OVERSIGHT COMMITTEE

SCOPE OF AUTHORITY AND DUTIES

The Curriculum Oversight Committee (COC) is structured to promote robust faculty involvement in the design, implementation, and evolution of the school of medicine's curriculum. It has the authority and accountability for oversight of the design of the curriculum, including competencies, learning objectives, curriculum implementation, setting standards of achievement, and evaluation procedures for the entire four-year curriculum. The committee has responsibility for the curriculum improvement process.

The committee is charged with developing and implementing the process for continuous oversight and evaluation of the curriculum to assure that it is coherent, coordinated, integrated, and in compliance with LCME standards. This includes oversight of curricular content, learning objectives, pedagogies, assessments, and all pertinent outcomes. It may initiate additional curriculum development activities as needed, for example, in response to changing LCME requirements.

MEMBERSHIP

The Curriculum Oversight Committee is comprised of 17 voting members:

- Nine elected faculty members
- Six appointed faculty members
- Two voting medical students; two non-voting medical students

The vice dean for academic affairs and education and senior representatives from the following

offices serve as ex-officio, non-voting members on the committee in addition to two elected medical students:

- Biomedical Science Education
- Clinical Education
- Community Engagement
- Curriculum
- Educational Outcomes and Assessment
- Student Affairs
- Admissions

SELECTION AND TERMS OF SERVICE FOR STUDENT MEMBERS

Medical students who are elected as their class vice presidents serve as representatives on the COC. Medical students serve one-year terms and may be re-elected once. Students must be in good academic and professional standing to serve on the committee. Vice presidents from each of the Phase 1 junior and senior council serve as voting members. Vice presidents from the Phase 2 and Phase 3 council serve as non-voting members of the COC.

MEDICAL STUDENT PROGRESS COMMITTEES

SCOPE OF AUTHORITY AND DUTIES

Medical Student Progress Committees (MSPC) bear the responsibility to ensure that medical students meet the academic, professionalism, and technical standards of the MD program.

Phase Committees

The Phase 1 and Phase 2/3 Medical Student Progress Committees are charged with evaluating and making recommendations concerning medical student progress, including promotion, remediation, probation, leaves of absence, expanded curriculum plans, suspension, dismissal, and graduation. Both phase committees identify and recommend for promotion those students who have satisfactorily completed all phase requirements.

The Medical Student Progress Committees are structured to represent academic faculty of the Kirk Kerkorian School of Medicine in matters related to student progress in the MD program, including evaluation, promotion, discipline, and graduation. The Medical Student Progress Committees shall consist of the following:

1. Phase 1 Medical Student Progress Committee
2. Phase 2/3 Medical Student Progress Committee

Conflict of Interest

Members must recuse themselves from discussion and voting on any student issue they

identify may cause a conflict of interest. They should notify the chair as soon as possible once they identify the possible conflict of interest.

Continuous Quality Improvement

For the purpose of continuous quality improvement, the phase committees will annually provide the vice dean for academic affairs and education and the assistant dean for student affairs observations and recommendations concerning admissions requirements and student progress standards.

MEMBERSHIP

Phase 1 Medical Student Progress Committee

The Phase 1 Medical Student Progress Committee (P1-MSPC) is structured to represent academic faculty in Phase 1 of the MD curriculum. Phase 1 course directors serve as voting members of the committee. The chair of the Phase 1 Committee is the assistant dean for biomedical sciences. The dean for student affairs, the medical registrar, director of evaluation, and the director for academic support services serve as ex-officio, non-voting members. The medical registrar keeps minutes of all P1-MSPC meetings.

Phase 2/3 Medical Student Progress Committee

The Phases 2/3 Medical Student Progress Committee (P2/3-MSPC) is structured to represent academic faculty in Phases 2 and 3 of the MD curriculum. All Phase 2 clerkship directors and one (1) Phase 3 course director serve as voting members of the committee. The Phase 3 voting members are selected by the vice dean for academic affairs and education and serve three-year terms. The chair of the P2/3-MSPC is the assistant dean for clinical education. The dean for student affairs, the medical registrar, director of evaluation, and the coordinator for academic support services serve as ex-officio, non-voting members. The medical registrar keeps minutes of all P2/3-MSPC meetings.

SELECTION AND TERMS OF SERVICE

Phase Committees

Voting and ex-officio, non-voting members of the phase committees are appointed by virtue of their roles in the MD program. There are no term limits for phase committee members.

DIVERSITY, EQUITY, AND INCLUSION COMMITTEES

SCOPE OF AUTHORITY AND DUTIES

The primary responsibility of the Diversity, Equity, and Inclusion Committee shall be to discuss programs and policies necessary to meet the school of medicine's diversity, equity, and

inclusion goals. The Diversity, Equity, and Inclusion Committee will review new and existing programs and policies based on feedback and data collected from faculty and other offices within the institution in order to ensure continuous improvement. The Diversity, Equity, and Inclusion Committee shall provide an annual report of activities and outcome data related to the Kirk Kerkorian School of Medicine at UNLV's stated diversity, equity, and inclusion goals. The committee will provide oversight to ensure the Kirk Kerkorian School of Medicine at UNLV is prepared for each LCME site visit and meets all diversity and inclusion requirements through full accreditation and beyond.

MEMBERSHIP

The Diversity, Equity, and Inclusion Committee is comprised of 10 voting members:

- Dean for diversity, equity, and inclusion
- Assistant dean for the office of diversity, equity, and inclusion
- Representatives from:
 - Office of admissions
 - Office of student affairs
 - Office of faculty affairs
 - School of medicine office of human resources
 - Office of community engagement
- Student representatives from each class
- Non-voting community members to represent social, cultural, and economic groups identified by the school of medicine.

SELECTION AND TERMS OF SERVICE

The dean for diversity, equity, and inclusion and the director of diversity, equity, and inclusion are ex-officio voting members of the committee. Representatives from the offices of admissions, student affairs, faculty affairs, and human resources are selected by the dean and director in collaboration with the dean for student affairs, dean for faculty affairs, and executive director for human resources.

The two delegate-at-large faculty members are elected by the faculty of the school of medicine. The term of service is one year.

Additional non-voting members will be selected from the community as representatives of the social, cultural, and economic groups the school has determined to target in its faculty and student recruitment to form an external advisory committee. Their role will be to assist the committee in better understanding the needs of the community and effectively reaching out to and building relationships with the local community.

Student body representatives to the committee are elected by their classmates. Medical students serve one-year terms. Students must be in good academic and professional standing

to serve on the committee.

STUDENT GOVERNMENT

SCOPE OF AUTHORITY AND DUTIES

The student government serves as the primary executive agency of the student body. The purpose of the student government is to represent and serve the interests of Kirk Kerkorian School of Medicine students. The structure, policies and procedures, and duties of the student government are fully described in the Kirk Kerkorian School of Medicine at UNLV Student Government Constitution and its bylaws.

MEMBERSHIP

The student government consists of one Executive Council and four Phase Councils (Junior Phase 1, Senior Phase 1, Phase 2, and Phase 3). Members of the student government serve roles on standing committees of the school of medicine.

The Executive Council is comprised of eight voting members:

- The president from each Phase Council
- The vice president from each Phase Council

The Phase 3 President serves as the president of the Executive Council.

The four Phase Councils are each composed of the following members:

- President
- Vice president
- Treasurer/secretary
- Representative to the Wellness Committee
- Representative to the Diversity, Equity, and Inclusion Committee
- LC Student Government Executive Coordination

Furthermore, each class is organized into four learning communities, with each community having two representatives:

- Well-Being and Engagement Chair
- Community Service Chair

Students must be in good academic and professional standing to serve in student government. Students that are on academic or professionalism probation may not run for or hold office.

SECTION 5: COSTS, FINANCIAL AID, RESIDENCY

TUITION AND FEES

All student charges and explanation of fees, along with the total cost of attendance for the academic year can be found online at: <https://www.unlv.edu/medicine/student-financial-services>. Additional information is also provided internally to all enrolled students through WebCampus.

REFUND POLICY

Students who withdraw from the MD program may be eligible for a refund of tuition and/or fees as described in the following table:

Withdrawal prior to the first week of classes	100% refund of tuition and fees
Withdrawal after the first week of classes, but prior to the seventh week of classes	50% refund of tuition only
Withdrawal after the seventh week of classes	No refund of tuition or fees

Students with financial aid may be required to return/repay award amounts based on the withdrawal date. A student must complete 60% of the semester in order to retain federal student aid. Anything less will be prorated and must be paid back to the U.S. Department of Education Federal Loan Program.

In the case of a withdrawal, the student's insurance coverage works as follows:

- Health insurance is billed upfront for the entire year and is not refunded if a student withdraws. A student will continue to be covered by school-sponsored health insurance until the end of the policy year (July 1- June 30) if he/she withdraws from the university.
- Disability insurance is incorporated into an administrative fee that students pay each semester. Students are automatically enrolled, but coverage ends immediately upon withdrawal as the policy requires a student to be enrolled full time.

There is not a direct refund of this earmark should a student withdraw as it would be encompassed by the standard refund policy listed above.

FINANCIAL AID POLICIES

DETERMINATION OF RESIDENCY STATUS

Determination of residency status and procedures is based upon Nevada System of Higher Education (NSHE) and UNLV policies and procedures. Each student will be classified as either a Nevada resident or a non-resident for the purposes of tuition. Non-resident students will be charged non-resident tuition. Fees remain the same for both Nevada and non-Nevada residents.

It is the student's responsibility to provide accurate information for the medical school to determine residency status. Questions or concerns regarding residency status must be raised in a timely manner and should be sent to the medical school's registrar. Additional information is available online at: <https://www.unlv.edu/graduatecollege/residency>.

Medical students are eligible to apply for residency reclassification after the first year of medical school. Complete information and deadlines are available online. Eligibility for residency reclassification will be based upon Nevada System of Higher Education (NSHE) policies and regulations governing residency determination for tuition purposes found in the Board of Regents Handbook.

ELIGIBILITY FOR MEDICAL STUDENT FINANCIAL AID

Students interested in financial aid, including loans and scholarships, and/or grants, and/or Veterans Affairs (VA) educational benefits will have opportunities to apply to each according to the guidelines set by the various awarding agencies.

- Federal Financial Aid: <https://studentaid.ed.gov/sa/eligibility>
 - Direct Unsubsidized
 - Graduate PLUS
- School of Medicine Scholarship: As determined each application year by the Scholarship Committee
- VA benefits: <https://www.unlv.edu/veterans>
- NSHE Grant-In-Aid (employees/dependents): <https://www.unlv.edu/hr/benefits/education>
- Private Loans: <https://students-residents.aamc.org/financial-aid/article/federal-vs-privateeducation-loans/>

Students must meet academic and code of conduct policies to receive and maintain aid eligibility.

DEBT MANAGEMENT

Students who are borrowing must meet with the director of student financial services in the fall semester of each year for one-on-one counseling. Students who would like additional advising, or who are not borrowing but wish to get financial counseling, are welcome to meet with the

director at any time.

Students are also encouraged to utilize the Association of American Medical Colleges (AAMC) website FIRST for all of their medical school debt management and financial planning needs. Resources are free. For more information visit: <https://students-residents.aamc.org/financial-aid>.

Financial literacy programming is also available through the office of student financial services.

SATISFACTORY ACADEMIC PROGRESS FOR MEDICAL STUDENT FINANCIAL AID

Students receiving financial aid, including loans, scholarships, grants, and/or VA educational benefits, are expected to make reasonable academic progress toward completion of the MD degree as a condition to receive federal, select state, or UNLV financial aid programs. In addition, all students eligible for VA educational benefits are required to submit transcripts from all prior post-secondary training or coursework for evaluation.

Medical students are responsible for maintaining eligibility for financial aid. Medical students, as professional students, have different financial aid rules than undergraduate students. Students are encouraged to meet with the director of student financial services to discuss their questions or concerns.

Requirements

Federal regulations require three measurements to determine satisfactory academic progress (SAP). These include qualitative, quantitative, and timeframe:

Qualitative

The financial aid office follows the MD program's Student Progress Committee academic review policy, which is established for all medical students, regardless of financial aid status.

Quantitative

Students must meet the MD program's academic, professionalism, and technical standards to maintain continued eligibility for financial aid.

Timeframe

The maximum timeframe a medical student has to complete the MD degree is six years.

Failure to Maintain Satisfactory Academic Progress

A student is considered NOT to be making satisfactory academic progress if one or more of the following conditions applies:

- The student has been placed on an involuntary leave of absence from the MD program for failing to meet its academic, professionalism, and/or technical standards.
- The student has been recommended for dismissal from the MD program by the MSPC.
- The student is unable to complete the MD degree within the mandatory six-year timeframe.

Review

Satisfactory academic progress will be monitored at the end of each academic year of the medical school curriculum and upon completion of each curriculum phase. Review of a student's status will be in collaboration with the dean for student affairs or designee after the Medical Student Progress Committees have reviewed the academic progress of all students. The dean for student affairs and the director of student financial services financial aid will meet with each student who is determined to have not met these requirements.

Students who fail to maintain satisfactory academic progress will be ineligible for continued financial aid funding beginning with the academic term immediately following the term in which the satisfactory academic progress requirements were not met. The office of student affairs will notify the student in writing of their aid suspension status and the appeal process for possible reinstatement.

The office of student affairs, the office of admissions, and the director for student financial services are responsible for monitoring medical student academic progress.

Repeating Coursework for an Entire Year

Students may receive financial aid funding for the repeat of a failing grade or withdrawal of any class or classes as long as active enrollment is posted. Repeating the same course may only be funded one additional time. Every attempt of a repeated course counts as an attempt towards completion but it only counts once as completed. Funding will be provided only once for the repeat of the same academic year.

Students repeating part or all of an academic year are not eligible for school of medicine scholarships. Students may petition to have a scholarship reinstated once a repeat year has been successfully completed.

Leave of Absence

Students on voluntary or involuntary leave of absence will not be eligible to receive financial aid during the leave unless they are approved to enroll in another degree-granting program. The cost of attendance for a student enrolled in another degree-granting program will be determined by that program and may not be the same as the cost of attendance for medical school. The cost of attendance determines the amount of awards the student is eligible to receive. Students must meet with the director for student financial services before a voluntary leave of absence

(LOA) is approved so they are fully informed about the impact of a potential change in enrollment status.

SECTION 6: ENROLLMENT

INTRODUCTION

The following section sets forth the academic standards of the MD program, including the policies and procedures for attendance and participation, grading and evaluation, advancement, graduation, academic remediation, progress review, and academic sanctions.

ENROLLMENT STATUS

The Kirk Kerkorian School of Medicine at UNLV uses the following terminology to designate a student's matriculation and enrollment status.

- Active or inactive
- Full-time, half-time, or less than half-time enrollment
- Not registered
- Leave of absence (including type or reason for leave)
- Probation
- Suspension
- Withdrawn-voluntary or involuntary
- Dismissed (including type of dismissal)
- Graduation date (date degree conferred)

Changes in a student's enrollment status may originate with the student, the office of student affairs, the office of admissions, or the Student Progress Committee. In all cases, the registrar will communicate changes in enrollment status to all key stakeholders, including the aforementioned offices, course and clerkship directors, the office of student financial services, and external agencies such as the department of education.

LIMIT ON TIME OF ENROLLMENT IN THE MD PROGRAM

Students must complete all requirements for the MD degree within a period of time not to exceed six years from the date of initial matriculation. Failure to meet this timeline may result in dismissal from the MD program. Time away from the program for any reason, including voluntary or involuntary leaves of absence for health, academic, financial, administrative, or other purposes, counts toward the total time of enrollment.

LEAVE OF ABSENCE

Leave of absence (LOA) is defined as a temporary separation from the MD program. LOAs may be voluntary (i.e., requested by the student) or involuntary (i.e., mandated by the Student Progress Committee or the medical education administration). There are many reasons why a student may seek to or be placed on a temporary LOA. More common reasons for leaves of absence are described below.

VOLUNTARY LEAVE OF ABSENCE

To be eligible for a voluntary LOA, students must be in good academic standing and not subject to academic actions or professionalism violations. The request must be presented in writing to the dean for student affairs in a timely manner. Students must indicate the reason(s) for the requested leave, the start date, and the anticipated date of return. If the voluntary LOA is granted, they will be informed in writing the start date, the anticipated date of return, and any conditions or requirements the student must meet to resume their training.

During a voluntary LOA, students may request an extension in writing to the dean for student affairs. Given that the MD degree must be completed in six years, voluntary LOAs will not be granted beyond two years. Final approval for voluntary LOAs, extensions, and returns from LOAs are generally made by the dean of student affairs in consultation with the Student Progress Committee and the vice dean for academic affairs and education.

Students who are absent from the MD curriculum for two years will be required to complete a fit for duty evaluation, funded by the school of medicine, to determine readiness to return to the MD program.

Health

A type of leave considered necessary for the student's emotional, mental, or physical health and beneficial to their personal and professional well-being and progress. Students seeking a voluntary LOA for health must submit their request in writing to the UNLV Health Withdrawal Committee. A copy of the process and forms for submitting a Request for Voluntary Health Withdrawal are online. The Voluntary Health Withdrawal Committee will make a recommendation to the dean for student affairs. This recommendation will include information submitted by the medical student to the committee. The university and/or school of medicine may require a student requesting a health leave or requesting to return from a health leave to have an independent medical assessment by a physician designated by the university.

As the Voluntary Health Withdrawal Committee does not operate year-round, students may seek a temporary health LOA from the dean for student affairs. In these instances, the dean reserves the right to request medical documentation to support the student's request.

Students who require longer than a one-year leave of absence and who are not enrolled in a formal degree program or who are denied a requested extension of the leave may apply for withdrawal from the MD program. Students must consult with the dean for student affairs. If a student fails to obtain a withdrawal, the student may be subject to dismissal.

Academic

A type of leave during which a student may pursue an advanced degree; engage in research training; participate in a medically related fellowship; extend USMLE preparation time; seek supplemental academic coursework; or pursue other educational enrichment activities. Students who are interested in pursuing an academic LOA must consult with and gain the permission of the dean for student affairs before applying to any external program.

Financial

A type of leave required when a student is unable to meet tuition and/or other educational financial obligations. Students must consult with and gain the approval of the assistant for student financial services before submitting a LOA request to the dean for student affairs.

Other

A type of leave sought by a student in order to devote attention to a personal matter that may inhibit or interfere with his/her academic performance and/or progress. Generally, a personal leave of absence is only granted to a student in good standing and may not exceed 12 months; a student may not request this type of leave more than once in an academic year.

INVOLUNTARY LEAVE OF ABSENCE

In certain instances, a student may be placed on an involuntary leave of absence from the MD program. Decisions to place a student on an involuntary LOA may be made by the dean for student affairs or the Student Progress Committee. When a student is placed on an involuntary LOA, they will be informed in writing the reasons for the LOA, the start date, the anticipated date of return, and any conditions or requirements the student must meet to resume their training. Students may appeal decisions that place them on an involuntary LOA to the vice dean for academic affairs and education, and, ultimately, the dean of the school of medicine. Reasons for involuntary LOAs are described below.

Administrative

A type of leave initiated by the school of medicine because it is believed that the student is incapable of continuing in the medical school curriculum. Return from administrative leave of absence may carry stipulations such as proof of successful resolution of the circumstances necessitating the leave.

Health

The university and the school of medicine reserve the right to request or require a student to be placed on an involuntary LOA for health if it is determined that the student suffers from a psychological or medical disorder, and, as an apparent result of that disorder, the student does one or more of the following:

1. Engages, or threatens to engage, in behavior which poses a danger of causing physical harm to self or others (including patients).
2. Engages, or threatens to engage, in behavior which interferes with the educational process or lawful activities of other members of the university.
3. Engages, or threatens to engage, in behavior which interferes with the orderly operation of the university or its clinical affiliates.
4. Demonstrates an inability to provide for personal needs (e.g., nourishment, shelter) such that there is a reasonable possibility that serious harm or death may occur within a short period of time.

Interim LOA for Health

The dean for student affairs may place a student on an interim LOA for health when there is cause to believe the student meets one or more of the conditions listed above. The student will remain on the interim LOA pending resolution of the situation pursuant to the process described below.

Notification

When possible, the dean for student affairs will notify the student that LOA for health is under consideration. Reasonable attempts will be made to meet with the student to discuss the behavior(s) of concern. The student may be encouraged to take a voluntary leave of absence. If the dean for student affairs, or designee, believes the student's health is in imminent danger, he/she may proceed without notifying the student. Upon deciding to recommend involuntary leave of absence for a student, the dean for student affairs will communicate the decision to the vice dean for academic affairs and education.

Mandatory Evaluation

The student may be referred by the dean for student affairs to the UNLV Student Counseling and Psychological Services or the Student Health Center for a mandatory evaluation. Alternately, the dean may choose to have the student undergo a mandatory evaluation by a community healthcare provider.

Release of Information

If referred for a mandatory evaluation, the student will be asked to execute a release of information form (request and authorization to exchange information) so that all designated

officials may exchange information in order to reach a decision regarding the evaluation and to delay, modify, or waive any additional proceedings.

Show Cause Hearing

When a student is placed on an interim LOA for health, the Medical Student Progress Committee will be convened within five days to review the circumstances of the action. The committee will weigh the likelihood that a student is a risk to self or others. The committee may seek additional information from other university administrators, faculty, or staff. The committee may request to meet with the student, and/or ask the student to provide information that can help the committee make a well-informed decision. The student may refuse to appear or provide information, but the refusal will not limit the right of the committee to make a final determination.

Student Progress Committee Decision

The committee can decide to uphold, amend, or set aside the recommendation for involuntary LOA for health. The committee reserves the right to make additional recommendations or place other requirements relative to the involuntary leave.

The student will receive written notice of the Student Progress Committee's decision along with requirements to remain in the MD program and to resume training.

The dean for student affairs may notify a spouse or partner, or parent or guardian, of the medical school's action, in accordance with Family Educational Rights and Privacy Act (FERPA) or with the student's consent.

Participation in Medical School Activities During an Involuntary LOA for Health

During a period of involuntary LOA for health, the student may NOT participate in academic, clinical, or extracurricular activities associated with the school of medicine or UNLV.

Return from Involuntary LOA for Health

Students placed on involuntary LOA for health will not be permitted to return to full-time student status without an evaluation of Fitness to Participate in the Academic and Clinical Program of Studies completed by a licensed healthcare provider selected by the school of medicine.

EXIT PROCESS

A leave of absence may impact a student's eligibility for financial aid and/or deferment of financial aid payments. Any student receiving financial aid must participate in an exit interview with the financial aid office prior to being approved for a voluntary LOA. Consideration for adjustment or refund of fees to students on leave of absence shall be based on established

refund policies, in accordance with Title IV regulations.

Students granted a voluntary LOA must meet with the medical registrar and complete a clearance form to communicate final changes in the student's enrollment status. The checklist serves not only to ensure the student receives appropriate counseling, but it also verifies that the student follows required exit procedures with various departments such as financial aid, information technology, security, etc.

As with other changes in status, the registrar's office is responsible for reporting LOA status in the AAMC Student Record System (SRS), the department of education, the annual LCME questionnaire, IPEDS, etc.

While on LOA, student access to certain programs and services may be limited. Questions about availability of programs and services should be referred to the dean for student affairs.

RETURN PROCESS

Medical students should be aware that returning to the curriculum will be based upon both their readiness to return as well as the academic calendar. The design of the curriculum is based upon three integrated phases for cohorts of students. Courses are not offered each semester but are organized by Phase 1, 2, 3. Medical students who are granted a leave of absence from any of the three phases may be required to repeat previous components of each phase which he/she had successfully repeated and/or be required to return at the start of the current or previous phase.

Students are required to submit to the dean for student affairs a written petition to return to the MD program at least 30 days prior to the planned date of return. The petition should include the intended date of return, as well as verification that any/all conditions or requirements for the student to resume their training have been met. If a student fails to submit the written petition by the stated deadline, they will be withdrawn from the MD program.

The office of student affairs will notify the registrar of the change in academic status and anticipated return to full-time status in the MD program.

Health

Students seeking to return from a LOA for health are required to obtain a Medical Clearance and Fitness to Participate in the Academic and Clinical Program of Studies Evaluation from a licensed medical provider prior to returning to classes. Students must also satisfy other requirements put in place at the time the LOA was approved. This evaluation must be presented to the UNLV Voluntary Health Withdrawal Committee prior to returning to classes or clinical activities. The Medical Student Progress Committee may also require additional requirements and/or assessment by a medical provider of the medical school's choice. If the medical school

requires the assessment, the financial cost will be the responsibility of the school of medicine.

Financial

Students seeking to return from a financial LOA must demonstrate to the director of student financial services the ability to meet tuition and/or other educational financial obligations.

Other LOA Types

Students who are on any type of leave from the MD program for more than one year are required to obtain medical clearance and a fit-for-duty evaluation before resuming participation in the program. The Medical Student Progress Committee may require additional conditions for re-entry. The medical school will bear the financial cost of any required assessments or evaluations which are a condition of re-entry into the program.

WITHDRAWAL

Withdrawal is a voluntary, permanent resignation from the MD program by a matriculated student. Withdrawal is not a solution to avoid dismissal due to academic failure or disciplinary reasons. The status of withdrawn is not considered an active academic status, but a terminal one. Students who withdraw from the MD program will not be considered for reinstatement or readmission.

DISMISSAL

A student may be dismissed from the MD program for a variety of reasons, including failure to meet academic standards, failure to meet professionalism standards, and/or failure to meet technical standards. Students subject to adverse actions are entitled to due process. Unless the student has demonstrated behaviors that indicate he/she is a risk to self or others, implementation of adverse actions is placed on hold until all appeals made by the student have been exhausted. The status of dismissal is not considered an active academic status, but a terminal one. Students dismissed from the MD program are not eligible for reinstatement or readmission. Students dismissed from the MD program are not eligible for admission to any other degree-granting program offered by the Kirk Kerkorian School of Medicine at UNLV.

SECTION 7: FAMILY EDUCATION RIGHTS AND PRIVACY ACT

INTRODUCTION

The Family Educational Rights and Privacy Act (FERPA), 20 U.S.C. § 1232g is a federal law enacted in 1974. FERPA is designed to protect the privacy of students' educational records. All educational institutions that receive federal funding must comply with FERPA.

DEFINITION OF EDUCATION RECORDS

FERPA covers information from “education records,” which are any record, file, document, and/or other materials containing information directly related to a student that are maintained by the institution or a party acting on behalf of the institution. Education records can be maintained in paper, digital/electronic, and other formats. Examples include, but are not limited to, the following:

- Transcripts
- Class schedules
- Daily attendance
- Degree audit reports
- Class rosters
- Grades
- Advising notes
- Financial records
- Student conduct files

The term “education records” does not include:

- Records in the “sole possession” of instructional faculty and staff for their own use as reference or memory aids and not shared with others.
- Personal observations
- Records created and maintained by a university law enforcement unit as part of their law enforcement function.
- Records created and maintained by medical and mental health providers in connection with the provision of treatment to the student and not available to anyone other than persons providing such treatment.
- Alumni records
- Peer-graded papers and exams prior to the grade being recorded in the instructor’s grade book.

WHEN FERPA RIGHTS BEGIN

Any person who attends or has attended UNLV is considered an eligible student under FERPA.

To meet UNLV's definition of eligible student, a person first must have received an official offer of admission and must have accepted the offer of admission. FERPA rights begin either on the first day of the person's first term of enrollment or the first day that the person moves into UNLV housing, whichever day comes first.

At a postsecondary institution, rights belong to the eligible student, not the parent, regardless of age. Persons who have applied for admissions but have NOT been admitted to UNLV are NOT covered by FERPA. Persons who have received an offer of admission but who have not accepted the offer are NOT covered by FERPA. Persons who accepted an offer of admission but who never enrolled in classes are NOT covered by FERPA.

DIRECTORY AND NON-DIRECTORY INFORMATION

Directory information, which is information that is generally not considered harmful or an invasion of privacy if released, can also be disclosed to outside organizations without a student's prior written consent. Outside organizations include, but are not limited to, companies that manufacture class rings or publish yearbooks.

If a student does not want UNLV to disclose any or all of the types of information designated below as directory information without prior written consent, students must add a "no-release" indicator on their record through their MyUNLV account. Students may also designate access to non-directory information to a third party by entering the release through their MyUNLV account.

In accordance with FERPA, UNLV has designated the following information as directory information for students:

- Student name
- Participation in official recognized activities and sports
- Address (only active mailing address)
- Telephone number (only the number defined as preferred)
- Weight and height (limited to student-athletes, as defined by athletics department)
- UNLV-issued student email address
- Degrees, honors, and awards received
- Major field of study
- College
- Dates of attendance
- Date of graduation
- Undergraduate or graduate status
- Most recent educational agency or institutions attended
- Enrollment status (full- or part-time)

Any information from education records that is not referenced above is considered non-directory information and may not be released by the institution without written consent of the student. The list below of non-directory information is meant to be illustrative but not exhaustive:

- NSHE ID number
- Place and date of birth
- Social security number
- Marital status
- Academic status (e.g., probation, suspension)
- Grades or grade point average
- Testing information
- Student class schedule
- Country of citizenship

BASIC STUDENT RIGHTS UNDER FERPA

FERPA gives eligible students five basic rights with respect to their education record:

1. The right to inspect and review their education record maintained by the institution.
2. The right to request the institution correct records or portions of the records that the student believes are inaccurate or misleading.
3. The right to request a formal hearing if the institution decides not to amend the record as requested.
4. The right to control disclosure of their education record except under certain conditions.
5. The right to file a written complaint regarding the institution's non-compliance with FERPA through the family policy compliance office within the U.S. Department of Education.

Note: Any third-party requesting records should visit UNLV's Public Records Site: <https://www.unlv.edu/integrated-marketing-branding/public-affairs/public-records>.

RELEASE OF STUDENT DIRECTORY INFORMATION

Directory information, which is information that is generally not considered harmful or an invasion of privacy if released, can also be disclosed to outside organizations without a student's prior written consent. Outside organizations include, but are not limited to, companies that manufacture class rings or publish yearbooks. You can control how your information is or is not released. Read more on the main FERPA page: <https://www.unlv.edu/registrar/ferpa>.

REQUESTS TO INSPECT, REVIEW, AND AMEND EDUCATION RECORDS

FERPA provides current and former students with the right to inspect and review their education records. The following describes how current and former students can exercise that right. Students only have the right to inspect and review education records related directly to them. Students who request to inspect their records may review records that have been redacted to protect other individuals' privacy rights.

PROCEDURE FOR INSPECTING AND REVIEWING YOUR EDUCATION RECORDS

1. A current or former student must make their request to access their education records

in writing or by filling out the appropriate university Student Request to Inspect Records form.

- a. The request must include:
 - Full name
 - Student ID number, NSHE ID number
 - The specific education records requested
 - Current email address
 - Current physical address
 - Signature and date
2. The request must be mailed or emailed as an attached PDF to the following:
 - a. Via U.S. Mail
Kirk Kerkorian School of Medicine at UNLV
Office of the Registrar
625 Shadow Lane
Las Vegas, NV 89106
 - b. Via email: somregistrar@unlv.edu
3. The request, whether valid or invalid, will be acknowledged by the university via email to the address provided. Under FERPA, the university may take up to 45 calendar days to respond to valid requests; the 45-calendar-day window will begin on the day following the business day that the request was received.
4. The university registrar or designee will gather the relevant education records in the university's possession, check for compliance with FERPA, and make any necessary redactions, as described above.
5. Records will be gathered as of the request date, meaning that any education records added after the date of the valid request will require an additional valid request to inspect, and a new time period will commence for those records.
6. The student will be notified by email or mail when the records will be made available in the registrar's office on the main campus or other suitable campus location as determined by the registrar or designee. Based on current staffing and available resources, students should expect dates to be offered near the end of the 45-day period.
7. If students choose not to attend during the time assigned under section six, the request will be closed, and students will be invited to make a new request.

PROCEDURES ON THE DAY OF INSPECTION

1. The student will check in with valid identification at the registrar's reception area (or other suitable campus location as determined by the registrar or designee) at the agreed upon time. One form of government-issued identification is required, such as a current (unexpired) driver's license, state identification card, or passport.
2. The student has the right to have one adviser of their choice present during the inspection, provided that the adviser's schedule does not unreasonably delay the inspection. The university registrar shall determine what constitutes an "unreasonable" delay. If the student brings an adviser, the student will sign a FERPA consent form, agreeing to the disclosure of their record to the adviser during the inspection.
3. A student will be given a reasonable time to inspect the records, which will generally be

one hour. However, depending on the number of records requested, the registrar or designee may provide for a longer inspection period.

4. The university registrar or designee will be present during the entirety of the inspection of the records. In general, students may not make copies or photographs of the education records. However, if circumstances effectively prevent the student from reviewing the records in-person at the registrar's office, the university will make alternative arrangements to allow for inspection of the requested education records. Such arrangements will comply with FERPA and will be communicated to the student by the registrar.
5. Following the inspection, the university registrar will create a record that the inspection was conducted, including the initial request, the date and time of the inspection, a general description of the records inspected, the name of the adviser and the signed consent if an adviser is present. This record will be added to the student's education record.

AMENDMENT OF EDUCATION RECORDS

By law, the university is required to only consider requests to amend information contained in education records that is inaccurately recorded, misleading, or in violation of a students' privacy rights. Requests for amendments such as a grade change or other substantive educational judgments, removal of materials such as received evaluations, any other decision of a university employee or official, or the outcome in a student conduct proceeding are not covered under the FERPA amendment process.

1. Students have the right to request amendment to education records if, after review, they believe any of the records to be inaccurate. To do so, a student must submit a request for amendment to the registrar's office in writing, clearly identifying the records for amendment, as well as reasons the student feels the records are inaccurate. Any written request that does not include the required information will not be considered and the student will be notified in writing.
2. Upon receipt of a proper request for amendment, the university will make a determination within a reasonable amount of time, not more than 30 calendar days, as to whether the proposed correction is accepted or rejected. The registrar's office will notify the requesting party of its decision.
3. If proposed correction is denied, the student has the right to a hearing regarding the request for amendment. Individuals who wish to have a hearing as a result of a negative decision must contact the registrar within a reasonable amount of time, not more than 30 calendar days after the notification of the original decision is sent. The registrar will determine the appropriate university official to serve as hearing officer depending on the nature of the decision being appealed. The decisions that result from the hearing will be considered final.

Should the university decide not to amend a record, students will have the right to place a statement in the record commenting on the contested information in the record or stating why they disagree with the decision of the agency or institution, or both.

SECTION 8: TECHNICAL STANDARDS AND DISABILITY RESOURCES

PREAMBLE

UNLV is committed to the policy that all persons shall have equal access to its programs, facilities, and employment without regard to race, sex, color, creed, religion, national origin, ethnicity, gender, age, marital status, pregnancy, disability, public assistance status, political affiliation, veteran status, or sexual orientation.

In adhering to this policy, Kirk Kerkorian School of Medicine at UNLV abides by Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990 (ADA), and the 2008 ADA Amendments Act that restated the original legislative intent that the definition of disability be construed in favor of providing broad coverage of individuals under the law including the “invisible disabilities”: learning disabilities and reading disorders. The school of medicine encourages all qualified individuals to apply for admission to the MD program.

The school of medicine recognizes the MD degree as a broad and undifferentiated degree requiring the acquisition of general knowledge and basic skills in all fields of medicine necessary to care for patients. The education of a physician requires assimilation of knowledge, acquisition of skills, and development of judgment through patient care experiences in preparation for independent and appropriate decisions required in practice. The practice of medicine requires collaboration among physicians, other healthcare professionals, as well as patients and their families.

Within the LCME standards, the school of medicine has the responsibility for the selection of students; the design, implementation, and evaluation of its curriculum; the evaluation of students’ performances; and the determination of who should be awarded a degree. Admission and retention decisions are based not only on academic achievement, but also on non-cognitive factors, which serve to ensure students can complete the essential functions of the academic program required to graduate. The MD program strives to select applicants who have the ability to become highly competent physicians. The goal is to produce skilled individuals who can practice as physicians and who put their patients first in the provision of safe and effective medical care.

UNLV has a responsibility to the public to ensure its graduates attain the knowledge, skills, attitudes, and behaviors necessary for the safe and effective practice of medicine. It is important that students admitted to the MD program at Kirk Kerkorian School of Medicine at UNLV possess the intelligence, integrity, compassion, humanitarian commitment, and physical and emotional capacity necessary to the practice of medicine. The intention of an applicant or student to practice a narrow part of clinical medicine or to pursue a non-clinical career does not

alter the requirement that all medical students take and achieve, either with or without reasonable accommodations, the competencies included in the full medical school curriculum. This includes all evaluations of academic and professional conduct and the USMLE licensure examinations which are required by the Kirk Kerkorian School of Medicine for promotion and graduation.

TECHNICAL STANDARDS

Technical standards have been developed and approved by the faculty of the school of medicine and reflect the essential relationship of medical education to the practice of medicine. Central to the school's mission, it is recognized that all candidates must demonstrate attainment of essential functions, as delineated below, to practice medicine safely and effectively. Medical students admitted to the MD program must be able to meet, with or without reasonable accommodation, these essential functions throughout their enrollment in the MD program.

ESSENTIAL FUNCTIONS

The Kirk Kerkorian School of Medicine at UNLV Technical Standards for Admission and Matriculation refer to the cognitive, behavioral, and physical abilities required for the satisfactory completion of all aspects of the curriculum and the development of professional attributes required by the faculty of all students approved to graduate with the MD degree. Essential functions for each technical standard are listed below and cannot be altered without fundamentally risking patient safety and the well-being of patients and the public, and the institutional educational mission. The individual student must be able to function independently in his/her care and interactions without the use of a surrogate in any of the following categories:

Individual and Cognitive Ability

Students must have the ability to master information presented in coursework presented in multiple formats including lectures, small group discussion and seminars, written materials, projected images, other forms of media and web-based formats, and simulations requiring different skills. Students must have the cognitive abilities needed to master relevant content in basic science and clinical courses at a level deemed appropriate by the faculty. Students may be required to comprehend, memorize, and analyze material. They must be able to discern and comprehend dimensional and spatial relationships of structures and to develop reasoning and decision-making skills appropriate for the practice of medicine. Successful completion of examinations is an essential component of the medical school curriculum and is a requirement of all students as a condition for continued progress through the program.

Professionalism, Behavioral and Social Aspects of Performance

The student must possess personal qualities including compassion, empathy, altruism, integrity, responsibility, sensitivity to diversity, and tolerance. The student must understand and apply appropriate standards of medical ethics. The student must maintain appropriate personal and professional boundaries in all settings, including those in which he/she is caring for patients and their families, or when interacting with faculty, residents, peers, staff, and other members of the healthcare team. The student must be able to function as a member of a multidisciplinary healthcare team in each setting and regardless of medical specialty.

Communication

The student must communicate effectively in English with patients, families, faculty, physicians, and other members of the healthcare team. The student is required to process all information provided by patients, families, peers, coworkers, and faculty, including the recognition of the significance of non-verbal responses in order to provide appropriate, timely, and focused follow-up inquiry. The student must be capable of responsive and empathetic communication, which establishes rapport and promotes openness on issues of concern and sensitivity to cultural differences. The student must process and communicate information on a patient's status in a timely manner and with a level of accuracy and in a comprehensive manner to physicians and other members of the healthcare team in settings in which time is limited. Written, dictated, or electronic medical record entries of patient assessments, treatment plans, prescriptions, etc., must be timely, complete, and accurate. The ability to interact with and utilize electronic medical records is essential. Of primary importance is patient safety, and the student must recognize that he/she may lack the skills or knowledge to make the correct decision or manage a situation without assistance.

Physical and Mental Requirements

These include required abilities in the area of observation, perception, sensory and tactile functions, fine and gross motor coordination, and stamina necessary in the examination, assessment, and safe care of patients. The student must be able to obtain a medical history and perform a physical examination, with or without reasonable accommodation. The student will be required to perform a comprehensive physical examination. See **Required Components: Basic Physical Exam of the Adult**. The student will also be required to perform certain procedures. See **Required Components: General Procedures of a Physician**.

Medical student learning takes place in an environment focused upon unpredictable needs of patients. Academic and clinical responsibilities of students may require working during day and evening hours at unpredictable times and for unpredictable durations. Students must be able to adapt to changing environments, demonstrate flexibility, and learn to function during the uncertainty inherent in clinical environments. In addition, the student must have the physical and emotional stamina, stability, and capacity to function in a competent manner in clinic,

hospital, classroom, and laboratory settings which may involve heavy workloads, long hours, and stressful situations. The student must have the emotional and psychological stability to function under stress.

The student must possess the emotional health required for appropriate utilization of intellectual abilities, exercise of good judgment, and the timely completion of all responsibilities attendant to their academic work, teamwork, and patient care.

An individual whose performance is impaired by the abuse of alcohol or other substances is not a suitable student for admission, retention, promotion, or graduation.

STUDENT ACKNOWLEDGEMENT

All accepted students must certify that they have read the technical standards and understand their responsibility of meeting the essential functions as outlined in the Kirk Kerkorian School of Medicine at UNLV Technical Standards for Admission and Matriculation. Students must continue to meet these standards throughout their enrollment.

REQUIRED COMPONENTS: BASIC PHYSICAL EXAM OF THE ADULT

AAMC EPA 1: PERFORM A PHYSICAL EXAMINATION

Entrustable Professional Activity (EPA): EPAs are units of professional practice, defined as tasks or responsibilities that trainees are entrusted to perform unsupervised once they have attained sufficient specific competence. EPAs are independently executable, observable, and measurable in their process and outcome, and, therefore, suitable for entrustment decisions.

KEY FUNCTION WITH RELATED COMPETENCY

- Perform a clinically relevant, appropriately thorough physical exam pertinent to the setting and purpose of the patient visit

ELEMENTS

- Preparation
 - Hand washing
 - Optimize conditions (e.g., lighting, availability of equipment for examination)
 - Ensuring patient modesty and comfort
- Basic Exam Sequence
 - Observation of general appearance
 - Obtaining vital signs
 - Obtaining blood pressure in either arm
 - Palpation of radial pulse; count for 15 seconds
 - Observation of respiratory rate; count for 15 or 30 seconds
- Skin and Nails

- Examine hands and fingernails
 - Examine skin throughout physical exam
- Head and Face
 - Observe, inspect, and palpate head, face, hair, scalp, and skull
 - Have patient bite down while palpating masseter muscles
 - Have patient raise eyebrows, squeeze eyes shut, and show teeth
- Eye
 - Test visual acuity
 - Perform external eye examination: lids, lashes, conjunctivae, and sclera
 - Test extraocular movements
 - Test corneal light reflection and comparison of size and shape of pupils, cornea, anterior chamber, and iris
 - Test for direct and consensual reaction to light
 - Perform fundoscopic exam, describing red reflex and blood vessels, retinal background, cup and disk and macula
- Ears
 - Inspection of auricle and mastoid, palpation of helix and tragus
 - Use otoscope to examine external canal and tympanic membranes
 - Test hearing
- Nose and Mouth
 - Inspection of the external nose
 - Inspection of the nares, nasal cavities, septum, and turbinates
 - Inspection of the lips, mucosa, tongue, floor of mouth, palate, tonsils, and oropharynx
 - Inspection of the teeth and gums
 - Have patient phonate and inspect palate and uvula
 - Have patient extend tongue
- Neck and Thyroid
 - Inspect for asymmetry
 - Check range of motion of neck
 - Have patient shrug shoulders and turn against resistance
 - Examine facial skin bilaterally on forehead, cheeks, and mandibular regions
 - Palpate lymph nodes in anterior and posterior cervical regions
 - Examine thyroid gland
 - Palpate thyroid gland
- Chest
 - Inspection of chest, including respiratory effort, presence of distress
 - Palpate chest-place hands on chest and confirm symmetry
 - Percussion of posterior lung fields
 - Percuss spine and costovertebral angles
 - Auscultate chest: posterior, lateral and anterior areas
- Breasts and Axillae
 - Inspect for asymmetry, nipple inversion, skin changes
 - Have patient place hands on hips and contract pectoralis muscles
 - Palpate axillary lymph node groups
- Heart and Vessels
 - Inspect and palpate for apical impulse, lifts, and thrill

- Auscultate the precordium over the cardiac apex, left lower sternal border
 - Determine heart rate and rhythm
 - Listen for normal and abnormal sounds at each location
- Pulses and Lymph Nodes
 - Palpate carotid arteries
 - Auscultate carotid arteries with bell of stethoscope
 - Locate and palpate the DP and PT pulses
 - Check for edema
- Abdomen and Inguinal Areas
 - Expose and inspect the abdomen for distention, scars, and masses
 - Auscultate abdomen for bowel sounds and bruits
 - Percuss abdomen in all four quadrants
 - Percuss the liver
 - Palpate all four quadrants, lightly then deeply
 - Palpate for the liver and the spleen
 - Palpate inguinal region for lymph nodes, femoral pulses
 - Auscultate inguinal region for bruits
- Neurological Examination
 - Evaluation of mental status
 - Cranial nerve testing
 - Examination of extremities for symmetry, muscle tone, and bulk
 - Test upper extremity strength: shoulder abduction, elbow motions
 - Test lower extremity strength: hip flexion, knee range of motion
 - Test upper extremity (pronator) drift
 - Test deep tendon reflexes: Biceps/Triceps/Patellar/Achilles
 - Test plantar response (Babinski)
 - Test sensation (light touch and vibration)
 - Test cerebellar function with finger-nose-finger or heel-shin test
 - Test gait
- Male Genitalia
 - Describe male genitalia
 - Examine penis and urethral meatus
 - Examine the scrotum, palpating testes, and epididymis
 - Examine for inguinal hernias bilaterally
- Female Genitalia
 - Describe female genitalia
 - Examine the lower abdomen and inguinal area
 - Examine external genitalia
 - Insert speculum and examine cervix
 - Perform bimanual examination
- Rectal Exam
 - Examine anal orifice
 - Perform digital exam noting sphincter tone and palpating prostate and rectal vault
 - Perform stool examination for occult blood
- Conclusion of exam and instructions to patient

REQUIRED COMPONENTS: GENERAL PROCEDURES OF A PHYSICIAN

AAMC EPA 12: PERFORM GENERAL PROCEDURES OF A PHYSICIAN

Entrustable Professional Activity (EPA): EPAs are units of professional practice, defined as tasks or responsibilities that trainees are entrusted to perform unsupervised once they have attained sufficient specific competence. EPAs are independently executable, observable, and measurable in their process and outcome, and, therefore, suitable for entrustment decisions.

KEY FUNCTIONS WITH RELATED COMPETENCIES

- Demonstrate technical skills required for the procedure.
- Understand and explain the anatomy, physiology, indications, contraindications, risks, benefits, alternatives, and potential complications of the procedure.
- Communicate with the patient and family to ensure they understand pre- and postprocedural activities.
- Demonstrate confidence that puts patients and families at ease.

PROCEDURES (MAY BE PERFORMED ON PATIENT OR LOW/HI FIDELITY SIMULATOR)

- Airway management
- Arterial line placement
- Arterial puncture (e.g., arterial blood gas)
- Aseptic and sterile technique
- Bag-mask ventilation
- Basic cardiopulmonary resuscitation (BLS)
- Central line placement
- Chest tube
- CXR – read and interpret
- ECG – perform, read, and interpret
- Endotracheal intubation
- Fecal occult blood test
- Finger stick puncture/glucose measurement
- Incision and drainage of an abscess
- Injections (subcutaneous, intradermal, and intramuscular)
- Insertion of an intravenous line
- Laceration repair (e.g., sutures/staple placement and removal, Steri-Strips, Dermabond)
- Nasogastric tube insertion
- Obtain informed consent
- Pelvic/speculum examination
- Placement of a Foley catheter
- Sterile technique
- Suturing, to include removal of sutures/staples and application of Steri-Strips
- Thoracentesis/chest tube placement
- Ultrasound (e.g., identify pelvic structures, abdominal structures, major structures)
- Vaginal delivery
- Venipuncture

- Ventilator management
- Wound management (apply and change dressings)

DISABILITIES AND ACCOMMODATIONS

UNLV complies with the provisions set forth in Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990 (and ADA Amendments), offering reasonable accommodations to qualified students with documented disabilities. Students enrolled in the MD program of the school of medicine must follow the approved process for requesting and receiving reasonable accommodations. Enrolled students are responsible for requesting accommodations and for providing the appropriate and required documentation of the disability in a timely manner.

ACCOMMODATIONS IN THE CURRICULUM OF THE MD PROGRAM

Medical students must be able to perform the Essential Functions with or without reasonable accommodations. Accommodations are considered reasonable if they meet the following three conditions:

1. Providing the accommodation or allowing participation does not pose a risk to the health and safety of the student, patients, or others.
2. Providing the accommodation does not substantially change an essential technical standard of the curriculum or fundamentally alter the essential nature of the medical education program.
3. Providing the accommodation does not create an undue financial or administrative burden on the institution.

The UNLV Disability Resource Center (DRC), in collaboration with the Medical Education Administration and the Technical Standards Committee, will determine whether the student can perform the Essential Functions with or without reasonable accommodations.

PROCESS

Students who wish to seek reasonable accommodations under the ADA must first apply with the UNLV DRC. Students can contact the DRC at <https://www.unlv.edu/drc/contact> or by calling 702-895-0866. The DRC is the university's designated office for formally identifying and determining eligibility for disability related accommodations. The DRC has the responsibility and authority to request and review documentation supporting accommodations. Students should allow up to six weeks for their request and supporting documents to be reviewed by the DRC.

Accommodations will not be provided unless a student has registered with the DRC.

If the DRC determines that a student has a qualifying disability under the ADA or Section 504 of the Rehabilitation Act, it will consult with the office of student affairs and the office of admissions at the school of medicine to identify potential accommodations. The DRC will review potential accommodations with the student, and then submit a Faculty Notification

Letter (FNL) to the school of medicine containing a list of academic accommodations. The DRC and the office of student affairs are responsible for ensuring that reasonable accommodations are provided.

If there is a concern that an accommodation listed in the FNL does not meet all three conditions that define reasonable, the matter will be referred to the Technical Standards Committee (TSC) for review and determination. The TSC will comprise members of the medical education administration, preclinical and clinical faculty, graduate medical education program, representative of the DRC, and other experts as deemed appropriate. The TSC's determination will be communicated to the DRC. If the TSC determines that the accommodation is reasonable, the DRC and the office of student affairs will ensure that reasonable accommodations are provided. If the TSC determines that the accommodation is not reasonable, the DRC will discuss the determination with the student. The DRC may accept the determination or may conduct a Fundamental Alteration Analysis. The DRC's final decision will be conveyed to the student and the dean for student affairs.

CONFIDENTIALITY

Information regarding a student's disability diagnosis provided to the DRC is considered confidential and cannot be released to individuals or agencies outside the university without a student's signed consent. Disability Records are covered under the FERPA. Requests to release disability information must be in writing. Personally, identifiable disability documentation is maintained by the DRC and kept separate from the student's other academic records.

FITNESS FOR DUTY

The ability to meet the Kirk Kerkorian School of Medicine at UNLV Technical Standards with or without reasonable accommodations are required for admission to the MD program and for students to advance and graduate from the Kirk Kerkorian School of Medicine. It is the responsibility of the faculty of the school of medicine to determine if a student can meet the academic, professionalism, and technical standards of the MD program.

Medical students must maintain these minimal technical standards, with or without reasonable accommodations, throughout their enrollment in the MD program. All students who have difficulty meeting academic, professionalism, and/or technical standards are encouraged to meet with the dean for student affairs as soon as possible. The dean will work with the student to identify challenges and to develop a plan to address those challenges. Students who have difficulty demonstrating the essential functions defined in the technical standards will be encouraged to access support services through the Counseling and Psychological Services Center (CAPS) at the UNLV.

MEDICAL CLEARANCE/FITNESS FOR DUTY EVALUATION

If a student's academic or behavioral performance raises questions or concerns with respect to (i) safety and welfare to self or others, (ii) the maintenance of order or continuity of school of medicine programs or (iii) the student's ability to meet technical standards, the Kirk Kerkorian School of Medicine may request or require a Medical Clearance and/or a Fitness for Duty Evaluation.

Each student, faculty, and staff member who is aware that he/she may have a condition which could impact the safe environment for students, employees, and patients has a primary responsibility and duty to report this condition to the dean for student affairs. The office of student affairs will work with the student to identify support and resources. In addition, any faculty, staff, or student who observes conditions or behavior which could endanger the student, others, or patients, has a responsibility to report this to a faculty member and/or the dean.

If circumstances are acute, processes are in place to provide immediate support and assistance, and for the school of medicine to act to ensure the safety of the medical school and university community. See ***Involuntary Leave of Absence Policy and Process***.

CONFIDENTIALITY

Due to the sensitive nature of conditions or behaviors which could arise requiring this evaluation, every effort to protect the confidentiality of the student and information and actions taken in these cases will be made. The safety and well-being of the student, and others in the medical school and university community, as well as patients, may require additional steps which could prevent complete confidentiality. In this case, the safety concerns are the primary responsibility of the medical school administration.

EVALUATION

The medical school will require that the evaluation is conducted by an individual trained to address educational, medical, and psychological issues pertaining to medical student performance. The school of medicine will refer the student to a specific provider identified by the school of medicine. The provider will have no student evaluations or teaching responsibilities in the medical school. If required by the school of medicine, the costs of the evaluation will be the responsibility of the school of medicine.

The Kirk Kerkorian School of Medicine will require the student to consent for the results of the evaluation to be released to the dean for student affairs, the Medical Student Progress Committee, and/or the appropriate university official for purposes of assessment and determination.

SECTION 9: PROFESSIONALISM STANDARDS

INTRODUCTION

The Board of Regents of the Nevada System of Higher Education (NSHE) permits professional schools to establish written policies, procedures, and sanctions for discipline of their students that may be used in lieu of the policies, procedures, and sanctions of the NSHE Code, Title 2, Chapter 10, subject to prior review by the office of general counsel and approval by the president of UNLV. In accordance with the authorization granted in the code, the Kirk Kerkorian School of Medicine at UNLV has established a Professionalism Advocacy Program which sets forth standards of conduct, along with policies, procedures, and sanctions used to uphold those standards.

CODE OF PROFESSIONAL CONDUCT

Professionalism is the basis of medicine's contract with society and is essential to maintaining the trust and support of the public. Personal behaviors have the potential to reflect on the school of medicine and on the medical profession either positively or negatively.

The school of medicine has adopted the fundamental principles outlined by the American Board of Internal Medicine's 2002 Physician Charter. These commitments align with core ethical principles of the medical profession:

- Primacy of patient welfare (beneficence, non-maleficence)
- Patient autonomy
- Social justice

There are professional responsibilities inherent in implementing The Physician Charter. These responsibilities include:

- Commitment to professional competence
- Commitment to honesty with patients and colleagues
- Commitment to patient confidentiality
- Commitment to maintaining appropriate relations with patients
- Commitment to improving the quality of care
- Commitment to improving access to care
- Commitment to a just distribution of finite resources
- Commitment to scientific knowledge
- Commitment to maintaining trust by managing conflicts of interest
- Commitment to professional responsibilities

Additional responsibilities include, but are not limited to:

- Practicing behavior that reflects the honor, responsibility, and service commitment of members.
- Treating colleagues, coworkers, staff, and faculty with respect and dignity.
- Avoiding the use of obscene, derogatory, or profane language or gestures at all times.

PROFESSIONALISM GUIDELINE

RESPECT FOR FACULTY, STAFF, AND PEERS

- Punctuality: Arrive on time for scheduled assignments.
- Courtesy: Exhibit polite, responsive, and considerate behavior.
- Ethics: Uphold honesty, integrity, and compassion in all interactions.

COMMITMENT TO PERSONAL RESPONSIBILITY

- Preparation: Prepare diligently for all educational activities.
- Responsibility: Complete all assigned tasks promptly and efficiently.
- Self-Awareness: Recognize your limits and seek help proactively when needed.

ADVANCE PROFESSIONAL DEVELOPMENT

- Self-Improvement: Strive for continuous personal and professional growth.
- Feedback: Embrace and value constructive feedback.
- Lifelong Learning: Actively pursue learning opportunities beyond formal settings.

Medical students in the Kirk Kerkorian School of Medicine at UNLV are required to comply with the Code of Professional Conduct. Students are also expected to adhere to the UNLV Student Conduct Code and the UNLV Student Academic Misconduct Policy. The school of medicine shall retain primary jurisdiction with respect to the Code of Professional Conduct. Suspected violations of the code will be addressed by the Student Progress Committee. The school of medicine also reserves the right to refer a student to the UNLV Student Conduct process as circumstances may require.

RESPECTFUL LEARNING ENVIRONMENT POLICY

RELATIONSHIPS BETWEEN TEACHER AND LEARNERS

Learners and teachers should recognize the special nature of the teacher-learner relationship, which is in part defined by role modeling, mentorship, and supervision. Learners and teachers should strive to develop their relationship to one characterized by mutual trust, acceptance, and confidence. There is a power differential as teachers often evaluate learner performance and the results of evaluations may impact a learner's future. Learners also evaluate the quality of their teachers and to an extent, may impact the teacher's career.

Teachers and learners should recognize the potential for conflict of interest and respect

appropriate boundaries. Actions that give the appearance of violating boundaries should be avoided. These include, but are not limited to:

- Romantic involvement
- Business relationships
- Accepting services or personal favors from each other (e.g., babysitting, work in the office).
- Accepting substantial gifts
- Special treatment, including gifts, meals, entertainment, or social contacts that differ from the usual teacher-learner relationship.
- Social media: It is recommended that teachers and learners postpone connecting on social media sites until the learner is no longer under the supervision of the teacher. Learners should refrain from requesting social media contact from anyone who supervises or evaluates them during courses or rotations.

The school of medicine promotes learning and working environments where all members of the health sciences center community interact in a mutually respectful fashion where personal dignity, cultural awareness and civility are maintained. The school of medicine strives to foster an environment that promotes learning through positive and courteous interactions between teachers and learners. This is an environment free of harassment, intimidation, exploitation, and abuse.

TEACHER AND LEARNERS EXPECTATIONS

The school of medicine values professional behaviors and attitudes, including duty, integrity, and respect for others. All members of the learning community are expected to strive for excellence. Learning is best fostered in an environment of mutual respect between teachers and learners. In the context of medical education, the term “teacher” is used broadly to include individuals responsible for promoting and/or assessing the acquisition of knowledge, skills, attitudes, and/or behaviors by learners. Teachers may include full-time and volunteer faculty, resident physicians, clinical preceptors, nurses, ancillary support staff, and others that support learning. “Learner” is used broadly to include resident physicians and students.

Principles include the following:

Duty

Teachers have a duty not only to facilitate the acquisition of knowledge and skills required to deliver the standard of care, but also to instill the values and attitudes required for preserving the medical profession’s social contract with its patients. Learners have the duty to pursue and acquire the knowledge, skills, attitudes, and behaviors necessary for the safe and effective practice of medicine.

Integrity

The patient-physician relationship requires trust. Integrity, which is the quality of being honest and having strong moral principles, is required to build that trust. Learning environments that are conducive to conveying professional values are based on integrity. Teachers are expected to advocate for and role model integrity. Learners are expected to learn and demonstrate integrity. Both teachers and learners are expected to advocate for integrity by identifying and addressing lapses in professionalism.

Respect

Respect for every individual is fundamental to the ethics of medicine. Mutual respect is essential for nurturing that ethic. Teachers have a special obligation to ensure learners are always treated respectfully. Learners are expected to treat their teachers, patients, and other members of the learning community with respect.

RESPONSIBILITIES OF TEACHERS AND LEARNERS

Teachers should:

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

Students should:

- Be courteous of teachers and fellow students.
- Be prepared and on time.
- Be active, engaged, and curious learners.
- Demonstrate professional behavior in all settings.
- Recognize that not all learning stems from formal and structured activity.
- Recognize their responsibility to establish learning objectives.
- Recognize their responsibility to participate as an active learner.
- Demonstrate a commitment to life-long learning.
- Recognize personal limitations and seek assistance as needed.
- Display honesty, integrity, and compassion.

- Recognize the privileges and responsibilities that come from the opportunity to work with patients.
- Recognize the duty to place patient welfare above their own.
- Recognize and respect patient privacy.
- Solicit feedback on their performance.
- Recognize that criticism is not synonymous with abuse.

ACADEMIC AND PROFESSIONAL INTEGRITY

Medical students are expected to uphold the academic and professional standards of the Kirk Kerkorian School of Medicine at UNLV at all times. Professional misconduct is considered a violation of the Code of Professional Conduct.

Professional misconduct includes, but is not limited to:

- Cheating: Fraud or deceptive practices which provide or attempt to provide an individual of advantage in written, oral, technical, or laboratory evaluations.
- Plagiarism: Using the words or ideas of another and claiming them as one's own, whether intentional or unintentional.
- Signing in or requesting another student to sign in for required activities when the individual is not present.
- Providing information known to be false on written or verbally transmitted presentations, patient records, transcripts, university documents, or personal qualifications.
- Falsely signing another student's or faculty's name to any document.
- Alteration of patient records, transcripts, or university documents.
- Any misrepresentation by which a student gains or attempts to gain an unfair advantage from the university, faculty, students, or staff.
- Wrongful procurement of goods, services, or information:
 - Stealing, destroying, or damaging university property and/or the property of other students or faculty, including laboratory projects, clinical instruments, study materials, or supplies.
 - Unauthorized use of online resources.
- Mistreatment of patients: This may include but is not limited to knowingly missing assigned clinic sessions or providing treatment of patients outside of scheduled sessions and without appropriate supervision.
- Unlawful conduct: Students are representatives of the Kirk Kerkorian School of Medicine at UNLV at all times and personal and public behaviors reflect on the school as well as the profession of medicine. The commissions of any felony, gross misdemeanor, or misdemeanor (excluding misdemeanor traffic violations) represent unlawful conduct. All students are obligated to disclose any felony, gross misdemeanor or misdemeanor, arrests, and convictions, to the dean for student affairs.

The school of medicine shall retain primary jurisdiction with respect to allegations or academic misconduct by its students but reserves the right to refer a student to the UNLV Academic Misconduct process if extenuating circumstances require it.

CRIMINAL BACKGROUND CHECKS

APPLICANTS

Applicants must meet the legal standards to be licensed to practice medicine in the state of Nevada. Students must acknowledge and provide written explanation of any misdemeanor or felony offense or disciplinary action taken against them prior to matriculation. As a condition of final acceptance to the MD program at the Kirk Kerkorian School of Medicine at UNLV, students must provide the results of a criminal background check through the AMCAS Certiphi process.

Applicants who receive a conditional acceptance to the MD program are required to authorize the background check as soon as they receive notification of the conditional acceptance. Failure to disclose prior or new offenses can lead to rescinding an offer of admission, disciplinary action, or dismissal.

To ensure the safety of other students and patients, the school of medicine requires criminal background checks on accepted applicants. Some of these background checks include arrest history. The Admissions Committee reviews all relevant information, facts, and circumstances and then renders final decisions based on the values of the school of medicine, the university, and the medical profession.

The school of medicine will not pay or reimburse expenses related to background checks for accepted applicants. Students are required to pay for the costs of the background checks.

MEDICAL STUDENTS

Medical students must continue to meet the legal standards to be licensed to practice medicine in the state of Nevada. Should a student be arrested or convicted of any misdemeanor or felony offense while in medical school, he/she must notify the dean for student affairs within seven days as to the nature of the incident. Failure to disclose prior or new offenses can lead to disciplinary action or dismissal.

The school of medicine will not pay or reimburse expenses related to background checks for medical students.

FREQUENCY OF BACKGROUND CHECKS

The school of medicine has made every effort to minimize the number of times a student is required to undergo a background check. However, the medical school, on behalf of some hospitals and outpatient clinics, may require students to submit to additional background checks and/or a fingerprint-based background check. Students are required to submit to these additional requirements to obtain clearance to be permitted to complete required educational rotations and experiences in that facility or at that institution. Students who do not submit to

fingerprinting or who fail to meet the background check requirements for institutions or facilities may be unable to fulfill academic requirements and may be dismissed from the MD program.

DRUG TESTING

Patient safety is paramount in the healthcare environment. Therefore, the use of any substance that can impair judgment or alter one's ability to practice medicine safely and effectively is grounds for disciplinary action, up to and including dismissal from the MD program. Students must comply with the rules and regulations concerning drug use and testing as outlined by the school of medicine, its clinical affiliates, and UNLV. Medical students must also comply with local, state, and federal laws.

Medical students may be screened for drug use when transitioning to or working in patient care environments, and/or as required by clinical partners of the school of medicine. Medical students may also be administered a drug test when a supervising faculty member or staff, after consulting with the dean for student affairs and designated campus drug and alcohol specialists, concludes that it is likely the student has engaged in the inappropriate use of controlled or prescription substances, including overuse of alcohol. This conclusion may be based upon observed behavior or physical symptoms, including that the student appears to be under the influence of alcohol or drugs; a pattern of abnormal or erratic behavior; information provided by credible sources regarding the student's use of mind-altering substances; or evidence the student tampered with a previously administered drug test. All medical students tested due to this provision shall be removed from patient care and clinical services pending results and review of further testing.

TESTING PROCESS

When testing is required to be administered as a condition of clinical placement, the school of medicine will use Certiphi. Those testing procedures will be communicated to students prior to the Transition to Clerkships course. The school of medicine will be responsible for the costs of drug testing to meet clinical placement requirements.

When testing is required due to a concern about the inappropriate use of a controlled or prescription substance, including the overuse of alcohol, a local physician testing and diversion program process will be used. The school of medicine will be responsible for the costs of drug testing due to a concern about inappropriate use.

RESULTS OF TESTING

Reports will be sent to the dean for student affairs. The office of admissions and the office of student affairs will maintain a record that students have complied with testing requirements.

These records are not part of the student's permanent file and will be destroyed upon the student's graduation from medical school. Only negative test reports will be shared with clinical affiliates. If a student receives a positive result, the dean for student affairs will determine if the report should be submitted to the Medical Student Progress Committee for further review and action.

SCHOOL ACTION

Upon receipt of a positive report, the Medical Student Progress Committee may require the student to appear for further review, discussion, and recommendations to ensure patient safety and student health and wellness.

RETURN TO MEDICAL SCHOOL

Students will be required to complete a Medical Clearance and a Fitness to Participate in the Academic and Clinical Program of Studies Evaluation prior to returning to the curriculum.

GUIDELINES FOR DRESS AND DEPORTMENT

Physicians need to present themselves in a manner that complements ability and demonstrates trustworthiness, sensitivity, compassion, integrity, and professionalism. The following guidelines regarding dress and deportment are provided to give structure and guidance to students beginning the process of development as a medical professional. These guidelines are not intended to dictate student dress nor suppress individual expression or personal preference. These guidelines reflect patient expectations and comfort in their professional interactions with medical students and physicians.

- The medical school requires compliance with all state of Nevada and clinical partner requirements, including the wearing of face masks.
- Students are expected to be clean, well-groomed, and dressed in a manner consistent to their responsibilities.
- Professional dress is expected at all school of medicine events and ceremonies, including the Welcome Ceremony, White Coat Ceremony, Match Day, and Commencement. Students should wear attire appropriate for a formal academic or professional setting.
- Professional dress: Professional dress is expected in all interactions with patients and standardized patients, as well as in evaluations conducted in the Clinical Education and Assessment Center.
- Casual clothing: Clean, comfortable clothing permitting participation in appropriate non-patient care activities, and not involving faculty or students from other professional institutions or settings, in which medical students are guests.
- Scrub clothing: Scrubs may be worn in appropriate settings (i.e., anatomy lab, lounge, and student study spaces). Scrub suits may not be worn in the lecture hall or small group learning classrooms unless otherwise specified.

- **White coat:** School of medicine white coats should be worn in all settings in which patients, simulated or otherwise, are encountered. White coats should be clean and pressed at all times.
- **Identification badge:** An identification badge consists of the student's ID with name and school logo. It must be easily visible at all times. Identification badges must be worn above the waist and must not be altered or defaced in any way. Patients and their families must be able to identify first and last names by looking at the name badge.
- **Accessories/jewelry:** Minimal jewelry or accessories is encouraged. Students should be mindful of jewelry, which may come into contact with patients in the clinical setting (rings, bracelets, necklaces). Jewelry should be worn in a manner that does not interfere with patient care or personal and patient safety. Jewelry expressing political preference or social policy is not permitted.
- **Ear piercings:** Ear piercings are acceptable, but other visible body piercing is discouraged.
- **Tattoos and body art:** Tattoos and body art should be covered to the extent possible when working with patients and staff.
- **Hats and head coverings:** Hats and head coverings are generally not permitted unless required. Exceptions may be made for religious or health-related reasons.
- **Grooming:** Students are expected to be clean, well-groomed, and dressed in a manner appropriate to their responsibilities.
- **Scented products:** The use of scented products is discouraged in consideration of patients, their families, and co-workers' sensitivities or allergies.
- **Hair:** Hair must be controlled in such a manner as to prevent it from touching patients or requiring frequent repositioning.
- **Facial hair:** Facial hair should be neatly groomed. Studies have shown that the presence of facial hair can compromise the effectiveness of tight-fitting facemasks. Therefore, men are encouraged to be clean shaven, especially when respiratory protective equipment is required to protect against airborne hazardous substances.

PROFESSIONALISM ADVOCACY

All members of the learning community are expected to advocate for professionalism by promoting and role modeling professional behaviors and identifying and addressing unprofessional behaviors. The Kirk Kerkorian School of Medicine at UNLV has established a reporting system that allows members of the learning community to report suspected professional misconduct or to recognize and commend exemplary professional behavior. The reporting system can be accessed at:

- Exemplary Professionalism:
https://unlv.co1.qualtrics.com/jfe/form/SV_eyQCRsBe2TwidE1
- Professionalism Concern:
https://unlv.co1.qualtrics.com/jfe/form/SV_8wATfp34KxZSdpP

NOTICE OF EXEMPLARY PROFESSIONALISM

Notices of Exemplary Professionalism may be submitted by any member of the learning community. The purpose of this notice is to recognize an individual (student, resident, teacher, administrator, staff) who has demonstrated an act or acts of exemplary professional behavior.

Notices are received by the dean for student affairs. Upon review of the notice, and if deemed appropriate, the dean will notify the recipient, along with the office of academic affairs and the recipient's supervisors.

NOTICE OF PROFESSIONALISM CONCERN

Notices of Professionalism Concern may be submitted by any member of the learning community. The purpose of this notice is to identify an individual (student, resident, teacher, administrator, staff) who has demonstrated concerning behaviors. Notices are received by the dean for student affairs. Notices are handled in accordance with the policies and processes outlined in the following sections: Policy and Process to Address Professional Misconduct and Policy and Process to Address Medical Student Mistreatment.

POLICY AND PROCESS TO ADDRESS PROFESSIONAL MISCONDUCT

REPORTING SUSPECTED VIOLATIONS OF THE CODE OF CONDUCT

All members of the school of medicine are bound by the responsibility to report violations of the Code of Conduct. The process of reporting a violation of the code is as follows:

- A "Notice of Professionalism Concern" may be submitted through the online portal at: https://unlv.co1.qualtrics.com/jfe/form/SV_8wATfp34KxZSdpP
- Alternatively, a Notice of Professionalism Concern can be submitted in writing to the dean for student affairs.
- Professionalism concerns can be submitted by any member of the learning community about any other member of the learning community. For example, a teacher can report a concern about a learner, a learner can report a concern about a teacher, or a peer can report a concern about a peer.
- A Notice of Professionalism Concern must include the following information:
 - The name of the person submitting the form.
 - The date, time, location, and name of the person(s) involved in the potential violation.
 - A description of the incident, with as much detail as possible.
 - The name(s) of any individual who may have witnessed the potential violation.

ADMINISTRATIVE RESPONSIBILITY

The dean for student affairs will receive and review professionalism concerns and forward them to the appropriate authority.

- Concerns raised about medical students will be managed by the office of student affairs and the office of admissions and may be submitted to the Medical Student Progress Committee for review and sanctions.
- Concerns raised about a member of the faculty will be conveyed to the vice dean for academic affairs and education, the appropriate department chair, the office of faculty

affairs, and/or the dean of the school of medicine.

- Concerns raised about UNLV administrative staff will be conveyed to the vice dean for academic affairs, the appropriate department, and/or the office of human resources.
- Concerns raised about residents or fellows will be conveyed to the vice dean for academic affairs, the office of graduate medical education, and the appropriate program director.
- Concerns about adjunct faculty or medical staff will be conveyed to the vice dean for academic affairs and the dean of the school of medicine.

Professionalism concerns will be processed in accordance with the policies and procedures that apply to the person of concern.

POLICY AND PROCESS TO ADDRESS MEDICAL STUDENT MISTREATMENT

PURPOSE

The purpose of this policy is to define student mistreatment and to provide mechanisms and procedures that allow medical students to report violations without fear of retaliation. In addition, the policy aims to ensure educational programs aimed at preventing student mistreatment are provided to the entire community on a regular basis. The “community” is defined as all sites where medical students receive training.

DEFINITIONS/EXAMPLES

The Council on Medical Education of the AMA defines student mistreatment as, “either intentional or unintentional, occurs when behavior shows disrespect for the dignity of others and unreasonably interferes with the learning process. Examples of mistreatment includes sexual harassment; discrimination or harassment based on race, religion, ethnicity, gender, or sexual orientation; humiliation, psychological or physical punishment; and the use of grading and other forms of assessment in a punitive manner.”

Mistreatment can take many forms. Examples include, but are not limited to:

- Intentional public humiliation or intentional embarrassment
- Threatening with physical harm or subjecting a student to physical harm, which could include intentional physical contact such as pushing, shoving, slapping, hitting, tripping, throwing objects at, or aggressive violation of personal space.
- Performing personal services
- Unwanted sexual advances
- An exchange of sexual favors for grades or other rewards
- Denied opportunities for training based on race or ethnicity
- Being subjected to racially or ethnically insensitive remarks
- Receiving lower evaluations or grades solely due to race or ethnicity rather than performance

- Being denied opportunities for training based on sexual orientation
- Being subjected to offensive remarks related to sexual orientation
- Being subjected to negative or offensive behaviors based on personal beliefs or characteristics other than gender, race/ethnicity or sexual orientation.

Behaviors which are not mistreatment include:

- Providing constructive criticism aimed at improving the student's clinical skills, knowledge, or professionalism.
- Expecting students to be punctual, prepared, and professional.
- Enforcing dress codes or hygiene standards appropriate for clinical settings.
- Correcting inappropriate behavior or communication in a professional manner
- Addressing breaches of patient confidentiality or professionalism
- Expecting students to take on challenging cases or work in high-stress environments as part of their training.
- Asking students challenging questions to assess their understanding.

ADMINISTRATIVE RESPONSIBILITY

The dean for student affairs, in consultation with the Title IX office, is responsible for oversight of appropriate treatment of medical students, and will monitor trends in departments, as well as by individual residents and faculty. Trends may be reported to the appropriate deans, department chairs, or committees so issues can be investigated and appropriate actions can be identified and taken. It is the shared responsibility of the faculty and administration to create and maintain an appropriate learning environment. The dean for student affairs and career services and the vice dean for academic affairs and education are responsible for receiving and managing reports of student mistreatment, for maintaining a database of incidents, for monitoring and addressing trends, and for preparing aggregate reports for the dean of the school of medicine and other institutional leaders and committees.

EDUCATION TO PROMOTE A POSITIVE LEARNING ENVIRONMENT

The school of medicine provides ongoing education to its community on promotion of a positive learning environment respectful of all individuals. This policy is included in the Kirk Kerkorian School of Medicine at UNLV Student Handbook and posted on the school of medicine website; the topic will be addressed at orientations at matriculation and at the beginning of the third year. The policy will be reviewed by the Curriculum Committee, the office of graduate medical education, and school of medicine faculty on a regular basis and modified as necessary. The dean will send a letter annually to all faculty (including volunteer faculty) reinforcing the school's statement on supporting an abuse-free environment, the trainee mistreatment policy, and resources for resolution.

REPORTING MEDICAL STUDENT MISTREATMENT

All members of the school of medicine are bound by the responsibility to report instances of student mistreatment. Student mistreatment is a violation of the Code of Professional Conduct. The process of reporting a violation is as follows:

- The complaint must be in writing and dated.
- To the extent possible, the complaint must contain the date, time, location, and name of the person(s) involved in the potential violation.
- The complaint must describe the incident in as much detail as possible.
- The complaint should include the name(s) of any individual who may have witnessed the potential violation.

Students or faculty can submit mistreatment incident reports online at:

https://unlv.co1.qualtrics.com/jfe/form/SV_bOD9ZeUHak3KtVj

Alternatively, mistreatment reports can be submitted via email to the dean for student affairs or the vice dean for academic affairs and education. Reports may be submitted anonymously, however, it may be difficult to fully investigate and address an anonymous report of possible mistreatment.

ADDRESSING MEDICAL STUDENT MISTREATMENT

When an incident of student mistreatment is believed to have occurred, there are three procedural avenues that may be pursued: consultation, informal resolution procedure, or formal grievance procedure. For Title IX violations, incidents should be reported to a Title IX Coordinator and the Title IX office.

Consultation

A learner who believes they have been mistreated by a member of the faculty, housestaff administration, or others in the learning environment may discuss their concerns with any of the following individuals:

- The person who has engaged in the behavior.
- The person's line manager or department chair.
- The course or clerkship director.
- The residency program director.
- The assistant dean for biomedical science education.
- The assistant dean for clinical education.
- The dean for diversity, equity, and inclusion.
- The dean for student affairs.

Consultation consists of one or more meetings during which any of the following may be discussed:

- The nature of the incident and the reasons why it raised concerns.
- Student mistreatment policies and procedures.
- Potential strategies to deal with the issue of concern.

Consultation may result in one of the following:

- The student chooses not to pursue further action.
- The student chooses to pursue the informal resolution procedure.
- The student chooses to pursue the formal grievance procedure.

If the issue of concern involves a potential Title IX violation, the student or consultant should contact the UNLV Title IX Coordinator.

Informal Resolution Procedure

The informal resolution procedure requires the student to submit a written complaint as described in the section “Reporting Medical Student Mistreatment.” Upon receipt of the complaint, the dean for student affairs will meet with the student (“complainant”) to discuss the incident in detail, to review mistreatment policies and procedures, and to determine if it would be more appropriate to pursue the formal grievance procedure and/or report the matter to the UNLV Title IX Coordinator.

If the determination is to continue with the informal resolution procedure, the dean for student affairs will consult with the following individual(s):

1. If the person of concern is a faculty member, consult with the dean for faculty affairs.
2. If the person of concern is a resident physician, consult with the dean for graduate medical education.
3. If the person of concern is a healthcare professional (other than MD or resident physician), consult with the vice dean for clinical affairs.
4. If the person of concern is a staff member, consult with human resources.
5. For any others, consult with the vice dean for academic affairs and education.

Formal Grievance Procedure

The formal grievance procedure is available when the informal resolution procedure fails to resolve the allegation of mistreatment to the satisfaction of the complainant and/or the dean for student affairs.

When the formal grievance procedure is initiated, the complainant is encouraged to be willing to be identified to the person of concern (“respondent”). However, there are circumstances when the complainant may prefer to remain anonymous. In such cases, every effort will be made to investigate and address the mistreatment, but anonymous reporting may limit the investigation and actions that can be taken to address the mistreatment.

The dean for student affairs will refer the formal grievance to the proper authority based on the status of the person of concern. To that end:

- Any Title IX complaint will be referred to UNLV's Title IX Coordinator.
- If the respondent is a member of the UNLV faculty, the matter will be brought to the attention of the vice dean for academic affairs and education, the faculty member's department chair, the office of faculty affairs, and the dean of the school of medicine.
- If the respondent is a member of the UNLV administrative staff, the matter will be brought to the attention of the vice dean for academic affairs and education, the staff member's line manager, and the office of human resources.
- If the respondent is an adjunct faculty member, the matter will be brought to the attention of the vice dean for academic affairs and education, and the dean of the school of medicine.
- If the respondent is a resident or fellow, the matter will be brought to the attention of the vice dean for academic affairs and education, the dean for graduate medical education, and the resident's or fellow's program director.
- If the respondent is a non-UNLV member of the learning environment, the matter will be brought to the vice dean for academic affairs, the dean of the school of medicine, and others as deemed appropriate.

In consultation with the vice dean for academic affairs, the dean for student affairs will also determine if immediate actions are required to protect the complainant from further mistreatment or retaliation. Such steps include, but are not limited to, moving the student to a different learning site and/or temporarily suspending the respondent's teaching privileges.

The individuals who receive a formal grievance are responsible for ensuring that the respondent is accorded their rights to seek remedies through general university procedures.

Confidentiality

Incident reports and written materials related to a complaint of medical student mistreatment will be kept in confidential files maintained by the office of student affairs. At the end of the academic year, the dean for student affairs will submit an annual report to the Medical Student Progress Committee, the Curriculum Committee, and the Kirk Kerkorian School of Medicine at UNLV Dean.

Retaliation

Retaliation against a person reporting mistreatment is regarded as a form of mistreatment and will not be tolerated. Accusations that retaliation has occurred will be handled in the same manner as accusations concerning other forms of mistreatment.

False Claims

A person who knowingly makes false allegations of mistreatment or who knowingly provides

false information in a mistreatment investigation or proceeding will be subject to disciplinary action up to and including dismissal from the MD program (for students), or termination of employment (for administrative staff, residents, or faculty).

Time Limits

The school of medicine strives to handle complaints of student mistreatment in a timely and equitable manner. Although there is no specific time limit for submitting an allegation of mistreatment, complainants are encouraged to do so as soon after an incident as possible.

SEXUAL HARASSMENT OR DISCRIMINATION

The Kirk Kerkorian School of Medicine at UNLV is committed to a harassment-free campus. Offensive remarks or behavior, which are sexual or discriminatory in nature, may constitute sexual harassment or discrimination. Complete information regarding sexual harassment or discrimination reporting, investigation, and the appeal process are located in Section 12 of the Medical Student Handbook.

SECTION 10: ACADEMIC STANDARDS

INTRODUCTION

The following section sets forth the academic standards of the MD program, including the policies and procedures for attendance and participation, grading and evaluation, advancement, graduation, academic remediation, progress review, and academic sanctions.

ATTENDANCE AND PARTICIPATION

INTRODUCTION

Attendance and active participation are essential to learning and the culture of the Kirk Kerkorian School of Medicine at UNLV. As physicians in training, medical students must learn how to balance their professional responsibilities and personal obligations. Before seeking an excused absence, students should weigh the circumstances of the required educational activity versus the importance of the personal obligation. The dean for student affairs has the discretion to allow or disallow absences based upon their potential impact on the educational experience. Generally, students are expected to make up absences in a method consistent with course expectations. In some cases, missed activities cannot be made up. In all cases, students are responsible for any material they miss during an absence.

MEDICAL STUDENT DUTY HOURS

The medical student duty hours policy follows the Accreditation Council on Graduate Medical Education (ACGME) program requirements. Duty hours cover required clinical and academic activities related to courses and clerkships, including:

- Hours in scheduled learning activities, such as lectures or conferences.
- Assigned inpatient and outpatient hours.
- Time spent in assigned clinical duties, including administrative duties, which are directly related to patient care.
- Time spent in house during call.

Specific clinical and educational work hour restrictions are outlined:

Phase 1

- The academic workload will not exceed 72 hours/week, averaged over four weeks. This includes a maximum of 24 hours of contact time and 48 hours of 'rest of the week' (ROW) time.

Phase 2 and 3

- Clinical and educational work hours must be limited to no more than 80 hours per week, averaged over a four-week period.
- Medical students must have a minimum of one day in seven free of clinical work and required education time, averaged over four weeks.
- Medical students should have eight hours off between each scheduled duty shift of an eight-hour duration or longer.
- Clinical and educational work periods for medical students must not exceed 24 hours of continuous scheduled assignments.
- In rare circumstances, after completing required clinical and educational responsibilities, medical students, on their own initiative, may elect to remain or return to the learning site:
 - To continue to provide care to a single patient
 - To offer humanistic attention to the needs of a patient or family
 - To attend unique educational events
- These additional hours of care or education will be counted toward the 80-hour weekly limit.

The school of medicine does not require students to log hours. It is the student's responsibility to manage their duty hours to avoid a violation while meeting the educational expectations and activities of the course. On course evaluations, students will respond to questions about compliance with duty hour policy.

Reporting Duty Hour Violations

Students who believe they have been required to exceed the duty hour work limits should notify

the dean for student affairs. The dean will gather information from the student, supervising faculty, residents, and other students to determine the circumstances under which the violation occurred.

Students also have the option to report to the clinical course or clerkship coordinator. Students may also report violations to any school of medicine dean or director in academic or student affairs. The office of student affairs will investigate all such reports and oversee remedies to violations of the duty hour policy.

REQUIRED ATTENDANCE: PHASE 1

In-person attendance forms an important component of the educational experience in medical school and allows for learning of skills and knowledge that is essential in the professional and academic formation of medical students.

Attendance will be monitored using sign-in sheets and, where appropriate, faculty assessment. It is the responsibility of the student to ensure that their presence is noted by the attendance monitoring process. Knowingly reporting false information related to attendance, such as signing in on behalf of someone else, falsifying a signature, or misrepresenting that one is present for a class when one is not, is considered an egregious violation of the academic code of conduct as well as an egregious breach of professionalism. If this occurs, the student will be reviewed by the MSPC, and possible consequences could include professionalism citation, probation, failure of the course, or dismissal from the school.

Course and Experiences With Required Attendance

Requirement

Phase 1 consists of three (3) semesters: Fall M1, Spring M1, and Fall M2. The faculty emphasize an active learning approach and consider most of the student learning experience as inherently active. Regardless of the format, in-person attendance is crucial in medical school education. In-person attendance provides a vital platform for acquiring the essential skills and knowledge integral to the academic development and professional formation of medical students.

Consequence

Missing a required session in any of these courses leads to a professionalism citation to the Student Progress Committee and a warning to the student. Missing a second session leads to immediate failure of the course, with an additional professionalism citation to the Student Progress Committee. This does not apply to absences that are pre-approved by the office of student affairs.

Organ-System Courses and Basic Science Courses, Anatomy and Introduction to Medical Sciences (IMS)

The organ-system courses make use of self-directed learning, with regularly scheduled large group learning sessions to provide students with faculty support for their learning.

Requirement

Basic science and organ-system courses will have one to two weekly, large group learning sessions facilitated by faculty. All these sessions require attendance.

Consequence

Missing a required session in any of these courses leads to a professionalism citation to the Student Progress Committee, and a warning to the student. Missing a second session leads to immediate failure of the course, with an additional professionalism citation to the student progress committee. This does not apply to absences that are pre-approved by the office of student affairs.

REQUIRED ATTENDANCE: PHASE 2 AND 3

Mandatory Attendance

During Phase 2, students are required to attend all clinical assignments and clerkship school on Wednesday afternoons.

During Phase 3, students are required to attend all clinical assignments and the final Capstone course to fulfill graduation requirements. Students must be physically present in Las Vegas during Match Week (Monday through Friday).

Absence policies are detailed in the clerkship syllabus and the elective catalog.

Make-Up Time

If you miss more than the allowed days for each clinical assignment per clerkship due to excused absences, you are required to make up the missed time. Make-up time for absences exceeding four days is at the discretion of the clerkship director. In some cases, extended time away may require completion of the missed time at the end of the clerkship year.

During Phase 3, students have 10 total allowed absence days during the 44 weeks of required rotations. If a student misses more than one day on a two-week rotation or more than two days on a four-week rotation, the student may be required to make up missed time at the direction of the elective director.

Federal and Nevada State Holidays

Students are excused from outpatient clinical duties on the following federal/state holidays:

- Martin Luther King Day (third Monday of January)
- President's Day (third Monday of February)
- Memorial Day (last Monday of May)
- Juneteenth (June 19)
- Independence Day (July 4)
- Labor Day (first Monday in September)
- Nevada Day (last Friday in October)
- Veteran's Day (November 11)
- Thanksgiving and Family Day (fourth Thursday and Friday of November)

Students on inpatient, critical care (e.g., MICU, SICU, CCU, PICU), and emergency medicine rotations may not be excused from clinical duties on Nevada state holidays unless expressly permitted by the clerkship director, attending physician, or dean for student affairs.

ABSENCES

All absences from required activities are recorded as excused or unexcused. Students seeking an excused absence from a required session must submit an excused absence request form to the dean for student affairs (<https://unlv.som.atlassian.net/servicedesk/customer/portal/15>). If a request is approved, the office of student affairs will notify the appropriate individuals of the student's approved absence. Failure to adhere to this requirement will lead to an unexcused absence. Unexcused absences are considered a violation of the Code of Professional Conduct. Violations will result in generation of a Report of Professionalism Concern and will be referred to the Student Progress Committee for review and possible sanctions.

PLANNED ABSENCES

Students who wish to obtain an excused absence for non-urgent reasons should submit a request via the online system at least 10 business days before the required curricular activity (15 business days before examinations). If the request is approved by the dean for student affairs, the student will be required to work with the course director to determine an appropriate make-up plan.

If a student is excused from a clinical activity, it is the student's responsibility to contact the course/clerkship director, course/clerkship coordinator, or attending physician, to notify them of the excused absence and to ensure that their clinical responsibilities are covered. Students are not obligated to disclose the nature or reason of an excused absence to others.

Health/Wellness

Students should try to plan routine health and wellness visits (e.g., annual physical, lab testing, non-urgent dental appointment) around required academic activities. If a student requires more than three days off for an illness, they will be required, at the direction of the dean for student affairs, to submit appropriate medical documentation to the office of student affairs.

Jury Duty

Students are encouraged to meet their civic duties and participate in jury duty if called. Students should contact the office of student affairs for assistance if they would like to reschedule their jury duty and require a note for the court.

Religious Observance

In keeping with the policy of the Nevada System of Higher Education (NSHE), the Kirk Kerkorian School of Medicine at UNLV is sensitive to the religious obligations of its students. Students seeking an excused absence for religious observance should submit their request at least 15 days before a required curricular activity. The excused absence will cover the religious holiday only. Any student missing class, quizzes, examinations, or any other class or lab work because of observance of a religious holiday shall, whenever possible, be given an opportunity to make up for the missed work. This policy shall not apply in the event that administering the assignment or examination at an alternate time is not feasible (e.g., an objective structured clinical examination), or would impose an undue hardship on the instructor or the institution that could not reasonably have been avoided. Students in Phase 2 and 3 are eligible to request accommodations for religious sabbath obligations. Students must make the requests to the assistant dean for student affairs no later than 60 days prior to the first day of the clinical rotation.

The dean for student affairs also reserves the right to deny an excused absence request for religious observance if the student's absence would interfere with or negatively impact the student's clinical obligations.

Bereavement

Medical students may seek an excused absence to address personal or family emergencies. The excused absence period will be determined by the dean for student affairs and career services.

Residency Interviews

The months of November, December, and January are peak interview times for many residency programs, although some programs do interviews as early as October and into February. Students are not allowed to schedule required Sub-I or ICU rotations, or the required Nevada Community Medicine rotation, during the months of November, December, and January.

Students who sign up for other rotations during these months must notify their clerkship director at least 10 business days prior to the date of their planned residency interview and request the absence via the excused absence request system.

Research and Other Conferences

Students may only be excused to attend a research conference if they meet the following three conditions:

- The student is the lead author of the research.
- The student is making an oral presentation.
- A school of medicine faculty member is present.
- The student holds a leadership position in a nationally affiliated student organization.

Conference Attendance in Phase 2 and 3

Each student is allowed up to two days to attend one medical conference for the year. A request must be made at least 60 days in advance. These two days are part of the 12 days of total allowed excused absences for the entire year.

In addition to the 12 days of excused absence noted above, each student is excused to miss clinical activities or clerkship school to attend a research conference if:

1. The student is the lead author of the research.
2. The research was performed during medical school under the guidance of a faculty member or as part of an external research project approved by the director of medical student research.

UNPLANNED ABSENCES/EMERGENCIES

In the event of an unplanned absence or emergency, the student or his/her designee should contact the office of student affairs as soon as possible. Failure to contact the office of student affairs within 24 hours of an unplanned absence will be recorded as an unexcused absence unless the student can show they were unable to contact the office. Students on clinical rotations should also attempt to contact the course/clerkship director, course/clerkship coordinator, or attending physician to ensure their clinical duties are covered. If the student is unable to do so, the dean for student affairs will contact the appropriate individuals on their behalf. At the direction of the dean for student affairs, students may be required to submit to the office of student affairs supporting documentation concerning the unplanned absence/emergency.

ABSENCES FROM EXAMINATIONS

Examination schedules are posted prior to the beginning of each academic year. All students are expected to take examinations at the scheduled date, time, and location. Students requesting alternate dates for examinations must notify the dean for student affairs in advance with the reason for the request. The dean has the responsibility of approving or denying the student's request. Students may be required to submit documentation (e.g., doctor's note) to support an excused absence request.

Requests for excused absences from examinations require as much advance notice as possible. For planned absences, requests should be made via the excused absence request system at least 15 business days before the examination. The dean for student affairs has the authority to approve or deny the request. If the request is approved, the office of student affairs will notify the course instructor/director(s) and will help coordinate re-scheduling of the missed exam as needed.

Only illness, military, or structured research program obligations or family emergencies involving immediate family members are allowed for exam absences. Students are not excused from exams to attend conferences.

For an unplanned absence/emergency, the student or his/her designee should contact the office of student affairs as soon as possible. The office will notify the course instructor/director(s) and will help coordinate re-scheduling of the missed exam as needed. Failure to contact the office of student affairs within 24 hours of an unplanned absence/emergency will be recorded as an unexcused absence unless the student can show they were unable to contact the office. An unexcused absence for an examination results in a grade of zero for the examination and generates a Notice of Professionalism Concern that will be referred to the Student Progress Committee.

If the dean for student affairs denies the excused absence request, the student may appeal the decision to the vice dean for academic affairs and education within 24 hours of learning of the denial. The vice dean for academic affairs and education will inform the student of the final decision within two business days.

Early Exams

Students may be permitted to take an examination prior to its scheduled date and time only under serious extenuating circumstances beyond the student's control. Requests for early examinations are subject to approval by the dean for student affairs, who has the sole authority to grant or deny such requests.

When reviewing a request, the dean will consider the nature of the extenuating circumstances as well as the logistical implications for the examination process. Approval is not guaranteed

and will be granted only when a compelling justification is provided. Students should submit requests as early as possible to allow for adequate review and planning.

Missed Exams During Phase 2

Subject examinations take place the week after the midterm and at the end of term. **There are no makeup provisions for these examinations.** No absences from shelf exams are allowed, except in the case of a last-minute illness or emergency. Additional tests or other assessments for grading may be required by each specialty. These requirements are contained in the specialty's syllabus.

Student Responsibilities

Upon approval, it is the student's responsibility to inform the clerkship director, course director, and the attending on the service of the absence. Failure to notify the clerkship director, course director, and the attending on the service, even after receiving approval from the dean for student affairs and career services, will result in an immediate professionalism citation.

Requests for excused absences should not be submitted via email, phone calls, or text messages. Residents are not authorized to grant absence approvals. If a student receives an excused absence from a resident without completing a request through the absence portal, it will be considered an unexcused absence and potentially lead to a professionalism citation.

Students who become ill are encouraged to take appropriate time off and seek medical attention. If absent for more than three (3) days, a medical note will be required before returning to clinical activities.

PROMOTION AND GRADUATION REQUIREMENTS

The awarding of the doctor of medicine (MD) degree is contingent upon the satisfactory completion of all program requirements. The Medical Student Progress Committee (MSPC) is responsible for making final decisions regarding the progress, promotion, and qualification for graduation of students in the MD program. To do this, the MSPC will consider the student's ability to meet the technical, professionalism, and academic standards of the MD program. A documented concern about a student's academic performance, professional conduct, or ability to meet the technical standards of the MD program may result in the determination of unsatisfactory progress when the record is reviewed by the MSPC. The committee will consider completion of required courses and clerkships, documented professional conduct, and demonstration of technical standards when making the final determination of whether the student has met the standards for promotion and for graduation.

Required to progress within Phase 1:

- Passed all required courses.

- Demonstrated ability to meet professionalism standards as evaluated by the faculty.
- Demonstrated ability to meet technical standards as evaluated by the faculty.

Required to progress from Phase 1 to Phase 2:

- Passed all required courses.
- Demonstrated ability to meet professionalism standards as evaluated by the faculty.
- Demonstrated ability to meet technical standards as evaluated by the faculty.
- Passing score on the USMLE Step 1.

Required to progress from Phase 2 to Phase 3:

- Passed all required clerkships.
- Demonstrated ability to meet professionalism standards as evaluated by the faculty.
- Demonstrated ability to meet technical standards as evaluated by the faculty.

Required for graduation from the MD program

- Passed all required courses/clerkships/electives.
- Earned required number of credit hours.
- Demonstrated ability to meet professionalism standards as evaluated by the faculty.
- Demonstrated ability to meet technical standards as evaluated by the faculty.
- Passed the USMLE 2 CK.

MD PROGRAM COURSES AND CREDIT HOURS

The following table lists courses and credit hours that apply to students entering the MD program in July 2025.

PHASE 1 - FOUNDATIONS	TOTAL CREDITS: 70
Anatomy, Histology, and Embryology	1 credit
Emergency Response and Population Health	6 credits
Foundations of Medical Science	6 credits
Hematology, Musculoskeletal, and Skin Systems	8 credits
Gastroenterology, Endocrinology, and Reproduction	8 credits
Pulmonary, Cardiology, Renal	12 credits
Research, Service, Scholarship	6 credits
Neuroscience, Neuroanatomy, and Neurology	10 credits

Analytics in Medicine 1, 2, 3	3 credits
Physicianship	1 credit
Foundations of Clinical Practice 1, 2, 3, 4	4 credits
Psychiatry, Behavior, and Sexuality	3 credits
Nevada Community Service 2, 3	2 credits
Multisystem Disease	6 credits

PHASE 2 - CLERKSHIP	TOTAL CREDITS: 50
Family Medicine	8 credits
Internal Medicine	8 credits
Neurology	2 credits
Obstetrics and Gynecology	8 credits
Pediatrics	8 credits
Psychology	8 credits
Surgery	8 credits

PHASE 3 - CAREER EXPLORATION AND SCHOLARSHIP	TOTAL CREDITS: 43
Clinical Electives: 6/7 Four-Week Blocks	Up to 32 credits
Subinternship or Critical Care	4 credits
Nevada Community Medicine	4 credits
Optional Non-Clinical Electives	Up to 8 credits
Capstone	3 credits

TOTAL MINIMUM CREDITS FOR UNLV MD DEGREE	TOTAL CREDITS: 163
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GRADING POLICIES

GRADING KEY

Course Grade	Transcript	Meaning
Honors	H	Used in Phase 2 and subinternships (Phase 3) only. Requirements to earn Honors are contained in course syllabi.
High Pass	HP	Used in Phase 2 and subinternships (Phase 3) only. Requirements to earn High Pass are contained in course syllabi.
Pass	P	Successful completion of all course requirements. Requirements to earn Pass are contained in course syllabi.
Fail	F	Failure of one or more course requirements. Remediation is required before a student can progress to the next academic year or graduate from the MD program.
Incomplete	I	Has not completed all required components of the course. Student may not progress to the next academic year until the course is completed and passed. If the course is not successfully completed within one calendar year, the grade is changed to Fail.
In Progress	IP	All course requirements not yet completed. Student may progress to the next academic year. Grade may stay on the academic transcript for more than one year.
Withdrawn	W	Student has withdrawn from the course prior to completion. Student may not withdraw from a course to avoid a failure. Student must retake the course in its entirety.

PHASE 1 - FOUNDATIONS

During Phase 1, grading in all courses is pass/fail. Mid-course formative assessments will be provided to students during each course to help identify areas for improvement. Final narrative assessments detailing student performance, professional development, and identifying areas for improvement will be provided to assist students in the process of personal improvement and self-assessment.

- Narrative assessment must be included in Phase 1 courses that utilize small group sessions, where the group size is no more than ten (10) and where a faculty member who provides the assessment has interaction with the respective students in that group

on at least two (2) occasions during the course.

- Narrative assessments must assess student performance and achievement in meeting specific objectives of a course or clerkship.
- Narrative assessments must address both cognitive and non-cognitive performance, such as behavior, communication, interpersonal skills, motivation, and professionalism.

Phase 1 Promotion Policy

Definition

Course: A course carries a course number and is reported in the transcript. Courses under consideration in this policy include:

- MED 800: Anatomy/Embryology/Histology (Anat)
- MED 802: Foundations of Medical Sciences (FMS)

The following organ systems courses:

- MED 806: Pulmonary (Pulm)/Cardiac (Card)/Renal
- MED 805: Gastroenterology (GI)/Endocrine (Endo)/Reproductive (Repro)
- MED 803: Heme
- MED 804: Musculoskeletal and Skin (MSS)
- MED 808: Neuroscience/Neuroanatomy/Neurology (NNN)
- MED 814: Psychiatry (Psych)

Block: A block is a section of a course that concludes with a summative NBME exam. For instance, the cardiac block. There are three blocks in FMS, two blocks in Anat, and two blocks in NNN.

Score: A score is a number that a student achieves on an assessment.

Grade: A grade is a letter we assign based on all the grading criteria for a course. All Phase 1 courses are graded pass/fail.

Policy

This policy addresses the following courses ONLY in Phase 1: Foundations of Medical Sciences (FMS); Organ-Systems courses; Anatomy/Embryology/Histology (Anat). This policy addresses the passing threshold and remediation process for the NBME portions of these courses and therefore represents the MINIMAL passing requirements of these courses.

Consider Phase 1 as having an M1 curriculum (consisting of fall and spring semesters), and an M2 Curriculum separately. Students must pass each year of Phase 1 in order to be promoted to Phase 2 (clerkships).

NCS/FCP/Physicianship/Emergency Response are not included in this policy. Students must pass these courses in order to be promoted. However, these courses do not use NBME exams as the main determinant of pass/fail. The course directors of these courses will decide the criteria for passing and the process for remediation if a student should fail. Any remediation needed for NCS/FCP/Physicianship/Immersion must be completed within two weeks of the end of the respective course.

Analytics in Medicine 1, 2, 3 (AIM 1, AIM 2, AIM 3) are not included in this policy. Students must

pass these courses in order to be promoted. These courses use NBME exams as the main determinant of pass/fail. The course directors of these courses will decide the criteria for passing and the process for remediation if a student should fail. Any remediation needed for AIM 1, 2, or 3 must be completed within two weeks of the end of the respective course.

MS Year 1

M1 Fall Semester

The M1 Fall Semester FMS and Anat will have five blocks:
FMS1, FMS2, FM3, Anat1, Anat2.

Each block will have a summative NBME exam: Students have three exams in FMS; Students have 2 exams in Anat.

The passing score for each exam is 75% or higher.

Students who fail an exam are placed on academic warning.

To achieve a passing grade for the semester, students must achieve a cumulative score of 75% or higher based on the weighted sum of the block scores and the semester cumulative final exam scores. The cumulative score used to calculate the semester final grade will be rounded to the nearest whole number such that 75% is the passing threshold.

The score from each block and the score from the cumulative final exam are weighted as follows in order to calculate the semester grade:

- FMS1 15%
- FMS2 15%
- FMS3 15%
- Anat 1 15%
- Anat 2 15%
- Cumulative Final Exam 25%

The content of the cumulative final exam will consist of 20% of each of the five blocks.

The following applies for any student who fails to achieve a passing grade for the semester:

- The student must take a remediation exam that is of equal characteristics to the semester cumulative final exam not earlier than one week after the release of semester grades and not later than two weeks after the release of those semester grades.
- The student must achieve a passing score of 75% or higher on the remediation exam.
- If the student fails the remediation, the student will be placed on academic probation through the end of the Year 1 or until the remediation exam is successfully passed. If the student does not take the remediation exam within two weeks, the student is considered to have failed the first remediation.
- If the student is successful in the remediation, the score of "75" represents the student's fall semester score.
- It is the student's responsibility to communicate with the course director(s) and other teaching faculty to address areas for improvement and generate a success plan that

includes interaction with the faculty.

M1 Spring Semester

Students take organ-system examinations after each of the six organ-system blocks PLUS a cumulative final exam.

Students who fail any exam will be placed on academic warning.

To achieve a passing grade for the semester, students must achieve a cumulative score of 75% or higher based on the weighted sum of the block scores and the semester cumulative final exam score. The cumulative score used to calculate the semester final grade will be rounded to the nearest whole number such that 75% is the passing threshold.

The score from each block and the score from the cumulative final exam are weighted as follows in order to calculate the semester grade:

- Pulm 12.5%
- Card 12.5%
- Renal 12.5%
- GI 12.5%
- Endo 12.5%
- Repro 12.5%
- Cumulative Final Exam 25%

The content of the cumulative final exam will be distributed evenly among each of the six blocks.

The following applies for any student who fails to achieve a passing grade for the semester:

- The student must take a remediation exam that is of equal characteristics to the semester cumulative final exam not earlier than one week after the release of semester grades and not later than two weeks after the release of those semester grades.
- The student must achieve a passing score of 75% or higher on the remediation exam.
- If the student fails the remediation, the student will be placed on academic probation through the end of the Year 1 or until the remediation exam is successfully passed. If the student does not take the remediation exam within two weeks, the student is considered to have failed the first remediation.
- If the student is successful in the remediation, the score of "75" represents the student's spring semester cumulative score.
- It is the student's responsibility to communicate with the course director(s) and other teaching faculty to address areas for improvement and generate a success plan that includes interaction with the faculty.

Passing Year 1 of Phase 1

Students who are on academic probation due to failure to meet the 75% cumulative threshold for either semester and having failed the first remediation for either semester, must attempt a second remediation during the summer break after Year 1. The content of the second attempt is at the discretion of the assistant dean of biomedical sciences. The timing of the second

attempt is at the discretion of academic support, the assistant dean of student affairs, and the assistant dean of biomedical sciences. The latest date the student can take the second attempt remediation is two weeks prior to the start date of the M2 fall semester. Students who fail the second attempt remediation will be referred to repeat Year 1 in its entirety.

MS Year 2

M2 Fall/Spring Semester

Students take organ system examinations after each block: Heme, Musculoskeletal and Skin (MSS), Neuroscience (NNN) (two blocks) and Psychiatry, and a cumulative final.

Students who fail any exam will be placed on academic warning.

To achieve a passing grade for the semester, students must achieve a cumulative score of 75% or higher based on the weighted sum of the block scores and the semester cumulative final exam score. The cumulative score used to calculate the semester final grade will be rounded to the nearest whole number such that 75% is the passing threshold.

The score from each block and the score from the cumulative final exam are weighted as follows in order to calculate the semester grade:

- Heme 15%
- MSS 15%
- NNN 1 15%
- NNN 2 15%
- Psych 15%
- Cumulative Final Exam Score 25%

The content of the cumulative final exam will be distributed evenly among each of the six blocks.

The following applies for any student who fails to achieve a passing grade for the semester:

- The student must take a remediation exam that is of equal characteristics of the semester cumulative final exam not earlier than one week after the release of semester grades and not later than two weeks after the release of those semester grades.
- The student must achieve a passing score of 75% or higher on the remediation exam.
- If the student fails the remediation, the student will be placed on academic probation through the end of Year 2 or until the remediation exam is successfully passed. If the student does not take the remediation exam within two weeks, the student is considered to have failed the first remediation.
- If the student is successful in the remediation, the score of "75" represents the student's M2 semester cumulative score.
- It is the student's responsibility to communicate with the course director(s) and other teaching faculty to address areas for improvement and generate a success plan that includes interaction with the faculty.

Passing Year 2 of Phase 1

Students who are on academic probation due to failure to meet 75% threshold and having failed the first remediation must attempt a second remediation before the student is permitted to take

Step 1 and proceed to Phase 2. The content of the second attempt is at the discretion of the assistant dean of biomedical sciences. The timing of the second attempt is at the discretion of academic support, the assistant dean of student affairs, and the assistant dean of biomedical sciences. The latest date the student can take the second attempt remediation is two weeks prior to the start date of the Transition to Clerkship course. Students who fail a second attempt remediation will be referred to repeat Year 2 in its entirety.

Academic Warning

1. Academic warnings do not appear on the transcript or in the Medical Student Performance Evaluation (MSPE).
2. Students on academic warnings must work with academic support.
3. Students who receive TWO or more academic warnings may participate in no more than TWO extracurricular activities.
4. Students who receive FOUR or more academic warnings may participate in no more than ONE extracurricular activities and must resign from any leadership roles.
5. The number of academic warnings is reset to zero after successful completion of Year 1 and completion of Year 2.

Academic Probation

1. Academic probations are reported on the transcript and in the MSPE.
2. Students who have received academic probation status may not participate in extracurricular activities or other extramural activities (such as summer research internship).
3. Academic probation status is removed after successful completion of Year 1 of Phase 1 and Year 2 of Phase 1.

PHASE 2 - CLERKSHIPS

Students will receive a grade at the end of each of the clerkships. Grades of Honors (H), High Pass (HP), Pass (P) are designated for family medicine, internal medicine, OB-GYN, pediatrics, psychiatry, and surgery. All final summative grades and narrative assessments must be made available within six (6) weeks after the end of each course or clerkship. The grading criteria are detailed below. Final grades are noted on Medical Student Performance Evaluations (MSPE or Dean's Letter) when applying for residency, along with all summative comments. Any formative concerns are recorded for internal use and for referral to the Student Progress Committee if deemed necessary. In order to achieve a minimal passing grade, the student must achieve a passing grade on three components: on the shelf examination, a minimum of 3.0 on the clinical evaluation, and separately a minimum of 3.0 in the professionalism component of the clinical evaluations. Students who do not achieve a passing grade will receive a grade of incomplete (I) until satisfactory remediation per the Remediation Policy.

All selectives are graded pass/fail.

Grading Rubric and Numerical Conversion

	Minimal Passing	Not Passing
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NBME Shelf Exam	Percentile scores converted to numerical values from 3.0 to 5.0 (appendix V)	<5th percentile =Failed component
Clinical Evaluation	Weighted evaluations from 3.00 to 5.00	Mean below 3.00 = Failed component

For most of your clerkships, the final grade will be based on a 50% shelf exam score and 50% clinical evaluation. However, each department may decide to add other formal assessments into the calculation of your final grade. Consult each clerkship director.

NBME Subject Examination (Shelf)

NBME Subject Exam percentile is based on the most recent percentiles published by the NBME at the beginning of the clerkship year. The annual composite scores are used.

Visit the NBME website (<https://www.nbme.org/examinees>) for complete information about the subject examination. The site also offers a comprehensive guide to each examination with outlines and sample questions.

Exams are scheduled during the last week of your rotation. Be there on time. If you are late, the door will be shut and you will receive a zero for the test. Students must take the shelf examinations during scheduled time, unless specifically excused by the assistant dean for student affairs and the associate dean for medical education. Not being prepared for an exam is NOT a valid excuse to postpone the exam.

Clinical Evaluation of Student Performance

The Clinical Evaluation of Student Performance Form is used to collect student performance from faculty and residents in all disciplines.

Attendings and residents who have been scheduled to be on the service that a student is assigned to will receive a request to complete the evaluation. In addition, students should submit, via MedHub, the names of preceptors they have worked with on the service they have just completed. Between these two lists the school of medicine can be fairly certain every preceptor who has worked with the student has received an evaluation request.

Review the evaluation form, which is in the Appendix. Evaluations are “weighted” according to the amount of time the evaluator spends with the student. Each competency is graded on a scale of 1-5. If a student has performed adequately for a 3rd year medical student, the student should expect a score of “3.” Students will be able to review a “batch” of deidentified evaluations at midterm and a second batch after the clerkship is completed.

Evaluations from preceptors are subjective. They are someone else’s impression of your work.

It is expected that different people will give you different grades. We DO NOT remove evaluations because students have a different impression of themselves from that of their evaluators. Instead, students are encouraged to consider such comments/grades carefully and make any necessary changes to improve. If an evaluation has been completed in error, in the case where the student has never worked with an evaluator to any extent, the student should email the associate dean for medical education to remove that evaluation.

Evaluations that a student deems to fall under “Student Mistreatment” or unprofessional conduct from the evaluator should be addressed by following the applicable policies and procedures.

Taken together, data gathered by these clinical evaluations will provide clerkship directors adequate and relevant information for meaningful feedback and to assign a numerical value as part of the final grade.

Narrative assessments are included in all assessments of student performance in required clerkships.

Departmental Requirement

Each department MAY require other activities to complement the assessment of student performance. Refer to each clerkship’s own syllabus for complete information. Each department may also require completion of additional assignments (for instance, completion of modules in Aquifer).

Professionalism

The school of medicine believes professionalism is an important part of satisfactory completion of the clerkships. Professionalism is assessed as a competency in the Clinical Evaluation of Student Performance. Overall professionalism evaluation may also be adversely affected by any reports of unprofessional behavior to the assistant dean for student affairs or failure to complete required tasks. Students must pass the Professionalism portion (3.0 or above) in the Clinical Evaluations.

Clerkship directors are also given discretion to adjust the final clerkship grade based on failure to follow professionalism guidelines.

ON-GOING ASSESSMENT AND MID-CLERKSHIP FEEDBACK

Students are evaluated throughout the clerkships. Preceptors, including attendings and residents, will receive electronic requests to evaluate students using the Clinical Evaluation of Student Performance form via MedHub. In each clerkship, there is a required midterm formal feedback with your clerkship director. This will consist of a face-to-face meeting. Students will

be able to review their clinical evaluations with the director. Progress in other aspects of the clerkship will be reviewed, such as completion of PET. The Faculty may elect to meet a student face-to-face to discuss any concerns at any time. All teaching faculty are available to meet with students at any time during the clerkship.

REMEDIATION

Students who fail one or more of the components of a clerkship will undergo a course of remediation, in accordance with the REMEDIATION POLICY, which was approved by the Curriculum Oversight Committee and attached in the Appendix. Students cannot proceed to Phase 3 of the medical school curriculum until a final passing grade is achieved in all of the clerkships.

OUT-OF-PHASE STUDENTS

If for any reason a student begins the clerkship late or has taken time away during the clerkships, the student must make up any missed clerkship time prior to proceeding to Phase 3. Students are not permitted to take Step 2 or enroll in any Phase 3 electives until the student has passed all the clerkships.

PHASE 3 - CAREER EXPLORATION AND SCHOLARSHIP

During Phase 3, grading for sub-internships is honors/high pass/pass/fail. Grading for all other courses and electives is pass/fail. Grades are determined by assessment of clinical performance as determined by course/clerkship faculty.

Clerkship directors and faculty who identify a student as “at risk” for not meeting clerkship requirements will meet with the student to develop an individual improvement plan with specific goals and tasks necessary for successful completion of the clerkship. The student and faculty will also develop a specific plan for monitoring the completion of tasks and goals.

Remediation

The Student Progress Committee monitors student performance throughout Phase 3. Students who fail one or more courses may be required to repeat part or all of Phase 3. Students who fail to meet professionalism standards may be referred to the SPC for review and disciplinary action. Students who fail to meet technical standards may be referred for a Fitness for Duty assessment. If the SPC concludes at any time that a student cannot meet the MD program requirements for graduation, it could recommend actions up to and including dismissal from the MD program.

Assignment to Clinical Sites, Phase 2 and 3

Students may express their clinical site preferences prior to initial clinical care assignments.

Priority is given to requests based on conflicts of interest, accommodations, compliance issues, or extenuating personal circumstances. After assignments are made by the office of undergraduate medical education, changes may be requested and approved by the dean for clinical education in consultation with the dean for student affairs and career services.

Phase 2: Clerkships

Academic affairs and education is responsible for the clinical assignment of all Phase 2 students. The following procedures apply:

1. Before preliminary schedules are made, students must notify academic affairs if they foresee any potential conflicts or challenges with certain sites or assignments. These requests are considered individually and must be approved by the dean for clinical education and the dean for student affairs and career services.
2. After these initial concerns are addressed, students are assigned randomly and preliminary schedules are made for the entire class. After the preliminary schedules are announced, students have one (1) week to swap a schedule with another classmate. Only one (1) entire schedule can be swapped with another entire schedule.
3. A student can request an alternative clinical site at any time if the student has encountered a serious issue with the learning environment. Such an issue will be addressed by the dean for student affairs and career services and the dean for clinical education. If the student's request is approved, a suitable alternative training site will be selected by the dean for clinical education in consultation with the dean for student affairs and career services.

Phase 3: Career Exploration

Academic affairs and education is responsible for the clinical assignment of all Phase 3 students. The following procedures apply:

1. Students submit their Phase 3 elective schedule request, including their choice of clinical sites. Assignments are based on site capacity and graduation requirements, and take into consideration the students' intended choice of residency. A lottery system may be used if requests exceed site capacity.
2. Upon receiving initial schedules, students have a one-week period to swap assignments with fellow classmates.
3. After the one-week swapping period, the Phase 3 schedules are final. Any changes require a formal request to the academic affairs and education office and approval from the dean for clinical education.

POLICY FOR ELECTIVES

TYPES OF ELECTIVES

Electives are designated as clinical or non-clinical. The Curriculum Oversight Committee (COC) determines the proper designation for each elective.

Clinical Electives

Clinical electives are those that include direct patient contact and care in a clinical setting. Clinical electives may be designated as a sub-internship (sub-I) or intensive care (ICU), which meet the sub-internship requirements for Phase 3. A clinical elective must involve at least 40 hours per week of assigned clinical duties.

Non-Clinical Electives

Non-clinical electives are medical in nature, but don't include patient care and can include one of the following:

- A research project that is new and distinct from the research requirement of graduation.
- A focused learning experience where a student develops or acquires clinical skills, such as anatomical dissection .
- A study in an area of concentration which contributes to the student's professional development.

A non-clinical elective must include at least 30 hours per week of assigned duties.

ELECTIVE PROPOSAL AND APPROVAL PROCESS

Electives can only be proposed by the school of medicine clinical or adjunct faculty. Proposed electives must be reviewed and approved by the COC. Proposals for an elective must include:

- Elective director and the department responsible for course administration.
- Length, two to four weeks only, and capacity.
- Course objectives linked to the school of medicine educational program objectives (EPO).
- Course descriptions and requirements.
- Method of assessment.

Each elective follows the elective grading policy.

- One selected sub-internships is graded H, HP, P, or F.
- All other electives are graded P or F.

The Kirk Kerkorian School of Medicine at UNLV does not offer longitudinal electives at this time.

ELECTIVE MONITORING

Once an elective is approved, the elective directors must review and provide any updates and changes to the COC for approval. The director of assessment and the office of academic affairs and education are responsible for preparing an annual elective report to the COC for review.

POLICY FOR AWAY ROTATIONS AND INTERNATIONAL EXPERIENCES

There are a number of good reasons why a medical student may wish to pursue an away rotation or international experience. Students are encouraged to explore such opportunities. Students considering away rotations or international experiences should consult with the office of student affairs to explore the pros and cons of such experiences.

An away rotation is one in which a student participates in a clinical or non-clinical course sponsored by another LCME-accredited institution or an ACGME-accredited residency program.

An international experience is one in which a student participates in a clinical or non-clinical educational experience outside the United States of America.

Medical students are expected to comply with all school of medicine guidelines for any approved away electives. This includes the requirement to complete all away electives in which they are enrolled, regardless of whether the credits will be applied toward graduation.

GENERAL GUIDELINES

The following guidelines apply to away rotations and international experiences.

- Students are only permitted to participate in away rotations and international experiences during Phase 3 of the curriculum.
- Students are limited to a total of four weeks of international experiences.
- Students are limited to a total of 12 weeks of away rotations.
- To qualify for an away rotation or international experience, a student must
 - Be in good academic and professional standing
 - Have completed all Phase 1 and 2 requirements
 - Passed the USMLE Step 1
- Students will not be permitted to do an away rotation or international elective during the month of March in Phase 3.
- Students will not be permitted to do an away rotation or international elective during the Capstone Block of Phase 3.
- International electives do not earn credits and cannot be used towards graduation requirements.

ADDITIONAL REQUIREMENTS FOR INTERNATIONAL EXPERIENCES

The following describes additional requirements for students who wish to pursue an international experience.

- Students must submit information describing potential political, health, or safety concerns which may place an individual student at risk. The Centers for Disease Control and U.S. State Department information for individual countries must be included with the application for an international experience. **Students will not be granted approval to**

participate in an experience located in a country or area for which the U.S. State Department has issued a Level 4: Do Not Travel advisory.

- Students must provide documentation of having obtained evacuation and repatriation insurance prior to approval of the international experience.
- Students must provide emergency contact information for the U.S. and for the foreign country prior to approval of the international elective.
- Students must provide documentation of having contacted a physician for travel and immunizations, which are recommended or required prior to travel. The student is responsible for the cost of all required immunizations.
- The student must report to and register with the U.S. Embassy immediately upon arrival in the foreign country.
- Any additional malpractice insurance required for participation in the international experiences must be obtained prior to approval of the elective and is the responsibility of the student.

USMLE EXAMINATIONS POLICY AND PROCESS

Students must pass the USMLE Step 1 as a condition for promotion from Phase 1 to Phase 2. Students must pass the USMLE Step 2 Clinical Knowledge (CK) as a condition for graduation from the MD program.

USMLE STEP 1

Students must take the USMLE Step 1 prior to starting Phase 2. Students are “provisionally” promoted to Phase 2 when they successfully complete all Phase 1 coursework and take the USMLE Step 1. Students are formally promoted to Phase 2 once they pass the USMLE Step 1. If a student fails the USMLE Step 1, they will be allowed the option of completing their current clerkships or stepping out of their current rotation, but receive credit for the weeks completed prior to stepping out to prepare for their subsequent attempt. Students will not be allowed to start a new rotation.

Each year, the office of academic affairs and education issues guidelines detailing deadlines to register for and take the USMLE Step 1. Students who fail to comply with those deadlines will be referred to the Student Progress Committee for review and possible sanctions.

A student who wishes to extend the deadline or take an academic LOA for additional USMLE Step 1 preparation may seek permission from the Phase 1 Medical Student Progress Committee (SPC). The committee’s decision will be based on a review of the individual student’s circumstances. The SPC may also consult with the deans for student affairs, clinical education, and biomedical sciences as well as academic support services. If the Phase 1 MSPC grants the student’s request, it will define the length of time for additional preparation, the deadline for taking the exam, and the conditions for return to the MD program. Failure to comply with the SPC’s recommendations are grounds for dismissal from the MD program.

Students must sit for their first attempt of the USMLE Step 1 exam no later than February 1 of the calendar year following their originally scheduled Step 1 deadline, regardless of any leave of absence or delay in their academic schedule.

Students who fail Step 1 three times or who do not pass the exam within 12 months from the first attempt are subject to dismissal from the MD program.

USMLE STEP 2 CK

Students must take USMLE Step 2 CK no later than October 30 of the year prior to the year in which they are scheduled to graduate. Students who do not take and pass the USMLE Step 2 CK by February 1 of their anticipated graduation year will not be certified to participate in the Main Residency Match. Students who do not take and pass the USMLE Step 2 CK by April 1 of their anticipated graduation year will not be cleared to graduate.

A student who wishes to extend the deadline or take an academic LOA for additional USMLE Step 2 CK preparation may seek permission from the Student Progress Committee (SPC). The committee's decision will be based on a review of the individual student's circumstances. The SPC may also consult with the deans for student affairs, clinical education, and biomedical sciences as well as academic support services. If the SPC grants the student's request, it will define the length of time for additional preparation, the deadline for taking the exam, and the conditions for return to the MD program. Failure to comply with the SPC's recommendations are grounds for dismissal from the MD program.

Students who fail Step 2 three times or who do not pass the exam within 12 months from the first attempt are subject to dismissal from the MD program.

DISMISSAL FOR USMLE FAILURES

As noted above, students will be dismissed from medical school if a student fails any one of the USMLE licensing examinations (Step 1, Step 2 CK) three times. Dismissal will occur after the third failing score. Dismissal will also occur if a student accumulates three failing scores on any combination of the USMLE licensing examinations.

Students who do not obtain a passing score on USMLE Step 1 and Step 2 CK within allowed timeframes or who exceed the six-year maximum time to degree allowed will be dismissed from medical school.

SECTION 11: ADVERSE ACTIONS AND DUE PROCESS

INTRODUCTION

The faculty of the MD program, as represented by the Medical Student Progress Committees, has the responsibility for issues related to medical student assessment, promotion, graduation, and discipline. The progress committees are charged with evaluating and making decisions concerning promotion, remediation, probation, leaves of absence, expanded curriculum plans, suspension, dismissal, and graduation. The following section outlines the actions that can be taken by the committees and the due process procedures available to students.

DEFINITION OF REMEDIAL AND ADVERSE ACTIONS

When a student fails to meet academic, professionalism, or technical standards, a Medical Student Progress Committee has the authority to recommend remedial and/or adverse actions. Such actions include, but are not limited to, referral for support services, medical evaluation, fitness for duty evaluation, repeating part or all of a course, repeating part or all of an academic year, warning, probation, leave of absence, and dismissal from the MD program.

DUE PROCESS

For the purpose of ensuring that the faculty of the school of medicine can meet its responsibilities to enforce the standards of the MD program while also protecting the right of students to fair and transparent proceedings, the following due process procedures have been put in place.

1. An unbiased committee
2. Notice of proposed action and the grounds for such action
3. Opportunity to present reasons why the proposed action should not be taken
4. The right to present evidence, including the right to call witnesses
5. The right to know opposing evidence
6. A decision based on a preponderance of the evidence presented
7. Requirement that the committee prepare a record of the evidence presented
8. Requirement that the committee to present a decision that includes written findings of fact and reasons for its decision
9. The right of the student to an appellate process.

MEDICAL STUDENT PROGRESS COMMITTEES

As described in the Medical Student Handbook in Section 4: Governance, medical student

progress committees are charged with evaluating and making decisions concerning promotion, remediation, probation, leaves of absence, expanded curriculum plans, suspension, dismissal, and graduation. To meet this charge, the progress committees routinely convene to review the progress of all medical students and to address concerns raised about any student who is not meeting the academic, professionalism, or technical standards of the MD program. The Phase 1 Medical Student Progress Committee is responsible for evaluating the progress of students in Phase 1 of the MD curriculum. The Phase 2/3 Medical Student Progress Committee is responsible for evaluating the progress of students in Phases 2 and 3 of the MD curriculum. The Executive Medical Student Progress Committee is responsible for hearing student appeals of adverse recommendations made by the phase committees.

REMEDIAL ACTIONS

The progress committees may recommend remedial actions for students who are not meeting academic, professionalism, or technical standards. Such actions include, but are not limited to, the following:

- Repeating an assessment
- Repeating part of a course
- Referral to Academic Support Services
- Referral to Student Health Services
- Referral to the Disability Resource Center
- Professionalism coaching

WARNING

If a student is not meeting MD program standards and is required to complete remediation in any phase of the program, the progress committees may issue a formal warning as described below.

Academic Warning

Students who are determined to have marginal academic performance may be subject to academic warning at the discretion of a progress committee. Marginal academic performance may include poor exam performance, repeated failures, multiple remediations, passing but marginal grades, or other factors determined by the MSPC.

Academic warnings are formative in nature. Their intent is to alert the student that their performance is marginal and they are at risk for remedial or adverse actions. Academic warnings do not appear on the academic transcript or the Medical Student Performance Evaluation (MSPE). The MSPC may suggest for the student to take certain remedial actions to help them address deficiencies, however there are no sanctions related to a warning. Students who receive repeated academic warnings may be placed on academic probation. This will be determined on a case-by-case basis. As there are no sanctions related to an academic warning,

this action is not appealable.

Professionalism Warning

Students who fail to meet professionalism standards may be subject to professionalism warnings at the discretion of a progress committee. Professionalism warnings are formative in nature. Their intent is to alert the student that their professional attitudes or behaviors have raised concerns, and they are at risk for remedial or adverse actions. Professionalism warnings do not appear on the academic transcript or the Medical Student Performance Evaluation (MSPE). The MSPC may suggest for the student to take certain remedial actions to help them address deficiencies, however there are no sanctions related to a warning. Students who receive repeated professionalism warnings may be placed on professionalism probation. This will be determined on a case-by-case basis. As there are no sanctions related to a professionalism warning, this action is not appealable.

Technical Standards Warning

Students who fail to meet technical standards may be subject to a technical standards warning at the discretion of a progress committee. Technical standards warnings are formative in nature. Their intent is to alert the student that they may not be demonstrating the essential functions necessary for awarding of the MD degree. Technical standards warnings do not appear on the academic transcript or the Medical Student Performance Evaluation (MSPE). The MSPC may suggest for the student to take certain remedial actions to help them with deficiencies, however, there are no sanctions related to a warning. Students who receive repeated technical standards warnings may be placed on technical standards probation. This will be determined on a case-by-case basis. As there are no sanctions related to a technical standards warning, this action is not appealable.

PROBATION

A MSPC may recommend for a student to be placed on probation for failing to meet the academic, professionalism, and/or technical standards of the MD program. When a student is recommended for probation, they will be informed of the following:

- Start date of the probation
- Conditions of the probation
- Requirements to come off probation
- Anticipated duration of the probation

Students who are placed on probation may not serve on standing committees of the school of medicine or hold office in student government. Additional limitations may apply at the discretion of the MSPC. Probations appear on the academic transcript and are reported in the Medical Student Performance Evaluation. As probation constitutes an adverse action, this recommendation may be appealed.

INVOLUNTARY LEAVE OF ABSENCE

A MSPC may recommend for a student to be placed on an involuntary leave of absence (LOA) for failing to meet the academic, professionalism, and/or technical standards of the MD program. An involuntary LOA is generally recommended if the committee determines that a temporary separation from the program is necessary for the student to address the reasons for any deficiencies. When a student is recommended for LOA, they will be informed of the following:

- Start date of the LOA
- Conditions of the LOA
- Requirements to come off LOA
- Anticipated duration of the LOA

Students who are placed on involuntary LOA are not actively enrolled in the MD program. They may not serve on standing committees of the school of medicine or hold office in student government. Additional limitations may apply at the discretion of the Progress Committee. A student recommended for involuntary LOA does not meet the definition of Satisfactory Academic Progress for the purpose of qualifying for financial aid. Leaves of absence appear on the academic transcript and are reported in the MSPE. As involuntary LOA constitutes an adverse action, this recommendation may be appealed.

DISMISSAL

A MSPC may recommend for a student to be dismissed from the MD program if it determines that a student has not met the academic, professionalism, and/or technical standards of the MD program. When a student is recommended for dismissal, they may not serve on standing committees of the school of medicine or hold office in student government. Additional limitations may apply at the discretion of the Progress Committee. For students dismissed from medical school, documentation as to the reason(s) for dismissal and a formal letter of dismissal become part of the permanent record. Students who have been recommended for dismissal may not sit for the USMLE Step 1 or 2 CK, and they will not be verified for participation in any residency matching program. A student recommended for dismissal does not meet the definition of Satisfactory Academic Progress for the purpose of qualifying for financial aid. As dismissal constitutes an adverse terminal action, this recommendation may be appealed.

STUDENT APPEALS

The following policies and process outline a student's right to appeal grades, evaluations, or adverse recommendations made by a MSPC. Students who seek guidance concerning the appellate process should consult with the office of student affairs and the office of admissions or the medical school ombuds office.

Students have the right to appeal the following:

- Grades and narrative evaluations or OSCE Assessments
- Adverse actions recommended by a MSPC (e.g., probation, involuntary LOA, dismissal)
- MSPE content

Complaints or violations of Title IX policies governing sexual harassment or discrimination are subject to their own appeals process. This information can be found in Section 12 of the Medical Student Handbook.

PROCESS FOR APPEALING A GRADE OR NARRATIVE EVALUATION

A student who is concerned about a grade or narrative evaluation should first discuss their concern with the course or clerkship director. The director will review the student's concerns and review the criteria by which the final grade or narrative evaluation was assigned. The director may determine that additional information is needed.

If the course or clerkship director determines the original grade should be modified, they will submit a change of grade request to the medical registrar. If the director determines that the original narrative evaluation should be modified, they will submit an updated narrative evaluation with explanation for the change to the office of clinical education.

If the course or clerkship director denies the student's request, the student may appeal to the appropriate phase committee. The student will provide information supporting the appeal. The basis for an appeal must meet one of the following criteria:

1. Assignment of a course grade or the content of a narrative evaluation is factually incorrect (e.g., based on a clerical or administrative error).
2. Assignment of a course grade or the content of a narrative evaluation was arbitrary and capricious, as defined by one or more of the following:
 - a. The course grade or narrative evaluation was made on some basis other than the student's performance in the course.
 - b. The course grade or narrative evaluation was made using standards different from those that were applied to other students in the course.
 - c. The course grade or narrative evaluation was made using a substantial, unreasonable, or unannounced departure from the faculty member's previously announced grading and evaluation standards.

Students can submit documentation to the phase committee in support of their appeal, or request to appear before the committee. The committee may require the student to appear. The committee will forward notice of their decision to the vice dean for academic affairs and education and the student within five days of the decision.

If the student wishes to appeal the phase committee's decision, he/she must notify the dean for student affairs, in writing, within five days of the decision of the intent to appeal. The matter will

be referred to the ad hoc Executive Medical Student Progress Committee (EMSPC) for review and final decision. The EMSPC's decision is final.

PROCESS FOR REQUESTING A REVISION OF THE MSPE

A student who identifies factual inaccuracies, omissions, or misrepresentations in their Medical Student Performance Evaluation (MSPE) may submit a formal written request for revision.

Submission of Request

The student must submit the written request to the office of student affairs within five (5) business days of receiving the MSPE draft. The request must include:

- The specific section(s) of the MSPE being requested for revision.
- The reason for the requested revision(s) (e.g., factual inaccuracy, missing data, misrepresentation).
- Supporting documentation, such as official evaluations, grade reports, or faculty communications.

Review of Request

The assistant dean for student affairs will review the request in collaboration with the vice dean for academic affairs and education. If the revision involves a clerkship evaluation, the assistant dean for clinical education may also be consulted. The review will assess whether the requested revisions are justified and supported by documentation.

Resolution and Finalization

If the revision is approved, corrections will be made, and the revised MSPE will be returned to the student for final review. If the revision is denied, the student will receive a written explanation of the decision. Once finalized, the MSPE will be submitted to ERAS and cannot be further revised.

Appeal of Decision

If the student disagrees with the outcome, they may submit a written appeal to the vice dean for academic affairs and education within five (5) business days of receiving the decision. The vice dean's decision is final, and no further changes will be made after this stage.

PROCESS FOR APPEALING AN ADVERSE ACTION RECOMMENDED BY A PHASE COMMITTEE

Students who wish to appeal an adverse recommendation made by a phase committee may do so to the ad hoc Executive Medical Student Promotions Committee (EMSPC). The appeal must be submitted to the dean for student affairs within five business days of notification of the phase committee's recommendation. If a student does not submit an appeal within five days of

the recommendation, their right to appeal is waived.

The appeal must contain the following information:

1. What action(s) the student is appealing
2. The basis for appealing the action(s)
3. What action(s) the student believes should be taken in lieu of the phase committee's recommended actions

The EMSPC will only consider an appeal if one or more of the following criteria are met:

- New, relevant information has become available that was unknown to the student and/or the phase committee when the adverse recommendation was made.
- The action(s) recommended by the phase committee are not consistent with policies contained in the medical student handbook.
- The phase committee failed to provide due process rights to the student.

The EMSPC will meet with the student when considering an appeal. To ensure students to a fair and transparent proceeding, the following due process procedures have been put in place:

- An unbiased committee
- Notice of proposed action and the grounds for such action
- Opportunity to present reasons why the proposed action should not be taken
- The right to present evidence, including the right to call witnesses
- The right to know opposing evidence
- A decision based exclusively on the evidence presented
- Requirement that the committee prepare a record of the evidence presented.
- Requirement that the committee present a decision that includes written findings of fact and reasons for its decision.
- The right of the student to an appellate process.

Upon consideration of an appeal, the EMSPC may choose any of the following:

- Uphold the phase committee's decision
- Overturn the phase committee's decision
- Issue a new decision
- Refer the matter back to the phase committee for further consideration and review.

The vice dean for academic affairs and education and the dean for student affairs will inform the student in writing of the committee's decision within five business days of receiving it. The vice dean and dean may request to meet with the individual student to discuss the decision.

The EMSPC's decisions are final for appeals, except in the matter of dismissals from medical school. In the case of a recommendation to dismiss a student from medical school, students may appeal the EMSPC's decision to the dean of the school of medicine.

PROCESS FOR APPEALING A RECOMMENDATION FOR DISMISSAL TO THE DEAN

A student who wishes to appeal a recommendation for dismissal made by the EMSPC may do so to the dean of the school of medicine. The appeal must be submitted to the dean for student affairs within five business days of notification of the EMSPC's decision. If a student does not submit an appeal within five days of the decision, their right to appeal is waived.

The appeal must contain the following information:

1. The basis for appealing the recommendation for dismissal.
2. What action(s) the student believes should be taken in lieu of dismissal.

The dean will only consider an appeal if one or more of the following criteria are met:

- New, relevant information has become available that was unknown to the student and/or the EMSPC when the recommendation for dismissal was made.
- The recommendation for dismissal is not consistent with policies contained in the Medical Student Handbook.
- The EMSPC failed to provide due process rights to the student.

The dean may choose to meet with the student when considering an appeal.

Upon consideration of an appeal, the dean may choose any of the following:

- Uphold the dismissal
- Overturn the dismissal
- Issue a new decision
- Refer the matter back to the MSPC for further consideration and review.

The dean will inform the student in writing of their decision within five business days of receiving the appeal. The dean may request to meet with the student to discuss the decision. The dean's decision is final.

STUDENT RIGHTS DURING THE APPEALS PROCESS

Students have access to their complete academic files during the appeals process. Students with complaints, questions, or requests for review of their academic record should contact the director of student affairs in the office of student affairs. Access to the student file is subject to the limitation that viewing restrictions will exist for components of the file for information provided by others to which the student has waived his/her right to access, such as letters of recommendation. The student must allow a reasonable time for the office of student affairs to make the file available.

During the appeals process the student may be removed from all classes and clinic participation.

A “support individual” may accompany a student if the student is requested to attend a meeting of a Medical Student Progress Committee. This individual may be a fellow student, parent, advisor, pastor, or legal counsel. The support individual is not permitted to speak to the committee for the student, ask questions, or participate in the deliberations in any way.

SECTION 12: SEXUAL HARASSMENT AND DISCRIMINATION

POLICY AGAINST DISCRIMINATION AND SEXUAL HARASSMENT

Please refer to the UNLV Policy Against Discrimination and Sexual Harassment - Complaint Procedure: <https://www.unlv.edu/hr/policies/harassment>.

INTRODUCTION

This policy is divided into three parts: section A states the NSHE policy against discrimination; section B states the NSHE policy against sexual harassment; and section C contains the complaint and investigation procedure for discrimination and sexual harassment complaints. These procedures are in addition to disciplinary complaints brought against professional employees or students under Title 2, Chapter 6 of the NSHE Code (or if applicable, institution student codes of conduct), or against classified employees under the Nevada Administrative Code. However, information gathered as part of the complaint process under this section may be used in connection with disciplinary proceedings.

TITLE IX NOTICE OF NON-DISCRIMINATION

NSHE and its member institutions do not discriminate on the basis of sex in their education programs and activities; Title IX of the Education Amendments Act of 1972 is a federal law that states:

"No person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any education program or activity receiving Federal financial assistance."

The chancellor and each president shall designate an administrator to serve as the Title IX coordinator, whose duties shall include overseeing all Title IX complaints and identifying and addressing any patterns or systemic problems that arise during the review of such complaints.

Inquiries concerning the application of Title IX may be referred to each member institution's Title IX coordinator or the office of civil rights of the United States Department of Education. Each member institution shall include on its website and in its general catalog, its Title IX coordinator's name, office address, telephone number, and email address.

Member institutions shall notify all students and employees of the name or title and contact information of its Title IX coordinator. For UNLV, that information can be found online at: <https://www.unlv.edu/compliance>.

NSHE NON-DISCRIMINATION POLICY

POLICY APPLICABILITY AND SANCTIONS

The Nevada System of Higher Education (NSHE) is committed to providing a place of work and learning free of discrimination on the basis of a person's age, disability, whether actual or perceived by others (including service-connected disabilities), gender (including pregnancy related condition), military status or military obligations, sexual orientation, gender identity or expression, genetic information, national origin, race, or religion. Where discrimination is found to have occurred, the NSHE will act to stop the discrimination, to prevent its recurrence, to remedy its effects, and to discipline those responsible.

No employee or student, either in the workplace or in the academic environment, should be subject to discrimination.

It is expected that students, faculty, and staff will treat one another and campus visitors with respect.

All students, faculty, staff, and other members of the campus community are subject to this policy. Students, faculty, or staff who violate this policy are subject to discipline up to and including termination and/or expulsion, in accordance with the NSHE Code (or in the case of students, any applicable student code of conduct) or, in the case of classified employees, the Nevada Administrative Code. Other lesser sanctions may be imposed, depending on the circumstances. Complaints may also be filed against visitors, consultants, independent contractors, service providers, and outside vendors whose conduct violates this policy, with a possible sanction of limiting access to institution facilities and other measures to protect the campus community.

TRAINING

All employees shall be given a copy of this policy and each institution's human resources office shall maintain documentation that each employee received the policy. New employees shall be given a copy of this policy at the time of hire and each institution's human resources office shall maintain documentation that each new employee received the policy.

Each institution shall provide this policy to its students at least annually and may do so electronically.

Each institution shall include this policy and complaint procedure on its website and in its

general catalog.

Each institution shall have an on-going non-discrimination training program and shall designate a person or office to be responsible for such training.

DISCRIMINATORY PRACTICES

It is illegal to discriminate in any aspect of employment or education, such as:

- Hiring and firing;
- Compensation, assignment, or classification of employees;
- Transfer, promotion, layoff, or recall;
- Job advertisements;
- Recruitment;
- Testing;
- Grading;
- Acceptance or participation in an academic program or school activity;
- Use of employer's facilities;
- Training programs;
- Fringe benefits;
- Pay, retirement plans, and disability leave; or
- Other terms and conditions of employment

Determining what constitutes discrimination under this policy will be accomplished on a case-by-case basis and depends upon the specific facts and the context in which the conduct occurs. Some conduct may be inappropriate, unprofessional, and/or subject to disciplinary action, but would not fall under the definition of discrimination. The specific action taken, if any, in a particular instance depends on the nature and gravity of the conduct reported and may include non-discrimination related disciplinary processes as stated above.

Discriminatory practices also include:

- discrimination on the basis of a person's age, disability (including service-connected disabilities), gender (including pregnancy related condition), military status or military obligations, sexual orientation, gender identity or expression, genetic information, national origin, race, or religion;
- retaliation against an individual for filing a charge of discrimination, participating in an investigation, or opposing discriminatory practices;
- employment or education decisions based on stereotypes or assumptions about the abilities, traits or performance of individuals of a certain age, disability (including service-connected disabilities), gender (including pregnancy-related conditions), military status or military obligations, sexual orientation, gender identity or expression, genetic information, national origin, race, or religion; and
- conduct that has the purpose or effect of substantially interfering with an individual's academic or work performance, or of creating an intimidating, hostile or offensive environment in which to work or learn.

This behavior is unacceptable in the workplace and the academic environment. Even one incident, if it is sufficiently serious, may constitute discrimination. One incident, however, does not necessarily constitute discrimination.

POLICY AGAINST SEXUAL HARASSMENT

SEXUAL HARASSMENT IS ILLEGAL UNDER FEDERAL AND STATE LAW

The Nevada System of Higher Education (NSHE) is committed to providing a place of work and learning free of sexual harassment, including sexual violence. Where sexual harassment is found to have occurred, the NSHE will act to stop the harassment, to prevent its recurrence, to remedy its effects, and to discipline those responsible in accordance with the NSHE Code or, in the case of classified employees, the Nevada Administrative Code. Sexual harassment, including sexual violence, is a form of discrimination; it is illegal.

No employee or student, either in the workplace or in the academic environment, should be subject to unwelcome verbal or physical conduct that is sexual in nature. Sexual harassment does not refer to occasional compliments of a socially acceptable nature. It refers to behavior of a sexual nature that is not welcome, that is personally offensive, and that interferes with performance.

It is expected that students, faculty, and staff will treat one another with respect.

POLICY APPLICABILITY AND SANCTIONS

All students, faculty, staff, and other members of the campus community are subject to this policy. Individuals who violate this policy are subject to discipline up to and including termination and/or expulsion, in accordance with the NSHE Code (or applicable Student Code of Conduct) or, in the case of classified employees, the Nevada Administrative Code. Other, lesser sanctions may be imposed, depending on the circumstances.

TRAINING

All employees shall be given a copy of this policy and each institution's human resources office shall maintain documentation that each employee received the policy. New employees shall be given a copy of this policy at the time of hire and each institution's human resources office shall maintain a record that each new employee received the policy.

Each institution shall provide this policy to its students at least annually and may do so electronically.

Each institution shall include this policy and complaint procedure on its website and in its general catalog.

Each institution shall have an on-going sexual harassment training program for employees.

SEXUAL HARASSMENT PRACTICES

Under this policy, unwelcome sexual advances, requests for sexual favors, and other visual, verbal or physical conduct of a sexual or gender bias nature constitute sexual harassment when one or more of the following occur:

- Submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment or academic status;
- Submission to or rejection of the conduct is used as a basis for academic or employment decisions or evaluations, or permission to participate in an activity;
- The conduct has the purpose or effect of substantially interfering with an individual's academic or work performance, or of creating an intimidating, hostile or offensive environment in which to work or learn.

Sexual harassment may take many forms – subtle and indirect, or blatant and overt. For example,

- It may occur between individuals of the opposite sex or of the same sex.
- It may occur between students, between peers and/or co-workers, or between individuals in an unequal power relationship (such as by a supervisor with regard to a supervised employee or an instructor regarding a current student).
- It may be aimed at coercing an individual to participate in an unwanted sexual relationship or it may have the effect of causing an individual to change behavior or work performance.
- It may consist of repeated actions or may even arise from a single incident if sufficiently severe.
- It may also rise to the level of a criminal offense, such as battery or sexual violence.
- Sexual violence is a physical act perpetrated against a person's will or where a person is incapable of giving consent due to the victim's use of drugs or alcohol.

An individual also may be unable to give consent due to an intellectual or other disability. Sexual violence includes, but is not limited to, rape, sexual assault, sexual battery, and sexual coercion.

Determining what constitutes sexual harassment under this policy is dependent upon the specific facts and the context in which the conduct occurs. Some conduct may be inappropriate, unprofessional, and/or subject to disciplinary action, but would not fall under the definition of sexual harassment. The specific action taken, if any, in a particular instance depends on the nature and gravity of the conduct reported and may include disciplinary processes as stated above.

Examples of unwelcome conduct of a sexual or gender related nature that may constitute sexual harassment may, but do not necessarily, include, and are not limited to:

- Rape, sexual assault, sexual battery, sexual coercion, or other sexual violence;

- Sexually explicit or gender-related statements, comments, questions, jokes, innuendoes, anecdotes, or gestures;
- Other than customary handshakes, uninvited touching, patting, hugging, or purposeful brushing against a person's body or other inappropriate touching of an individual's body;
- Remarks of a sexual nature about a person's clothing or body;
- Use of electronic mail or computer dissemination of sexually-oriented, sex-based communications;
- Sexual advances, whether or not they involve physical touching;
- Requests for sexual favors in exchange for actual or promised job or educational benefits, such as favorable reviews, salary increases, promotions, increased benefits, continued employment, grades, favorable assignments, letters of recommendation;
- Displaying sexually suggestive objects, pictures, magazines, cartoons, or screensavers;
- Inquiries, remarks, or discussions about an individual's sexual experiences or activities and other written or oral references to sexual conduct.
- Even one incident, if it is sufficiently serious, may constitute sexual harassment. One incident, however, does not usually constitute sexual harassment.

COMPLAINT AND INVESTIGATION PROCEDURE

This section provides the complaint and investigation procedure for complaints of discrimination or sexual harassment, including sexual violence (except those complaints against students which may be referred to student disciplinary processes). The chancellor (for the system office) and each president shall designate no fewer than two administrators to receive complaints. The administrators designated to receive the complaints may include the following: (1) the Title IX coordinator; (2) the affirmative action program officer; (3) the human resources officer; or (4) any other officer designated by the president. The president shall also designate a primary investigating officer (primary officer) to process all complaints. The primary officer may be any of the individuals identified above. All complaints, whether received by the affirmative action officer, human resources officer, or other designated officer, must immediately be forwarded to the primary officer. All Title IX complaints must be immediately forwarded to the Title IX coordinator.

An individual filing a complaint of alleged discrimination or sexual harassment shall have the opportunity to select an independent advisor for assistance, support, and advice and shall be notified of this opportunity by the primary officer, or by her designee. It shall be the choice of the individual filing the complaint to utilize or not utilize the independent advisor. The independent advisor may be brought into the process at any time at the request of the alleged victim. The means and manner by which an independent advisor shall be made available shall be determined by each institution or unit.

An individual against whom a complaint of alleged discrimination or sexual harassment is filed shall have the opportunity to select an independent advisor for assistance, support, and advice and shall be notified of this opportunity by the primary officer, or by her designee. It shall be the

choice of the individual against whom the complaint is filed to utilize or not utilize the independent advisor. The independent advisor may be brought into the process at any time at the request of the alleged perpetrator. The means and manner by which an independent advisor shall be made available shall be determined by each institution or unit.

If anyone in a supervisory, managerial, administrative, or executive role or position, such as a supervisor, department chair, or director of a unit, receives a complaint of alleged discrimination or sexual harassment, or observes or becomes aware of conduct that may constitute discrimination or sexual harassment, the person must immediately contact one of the individuals identified above to forward the complaint, to discuss it and/or to report the action taken. Title IX complaints must be immediately provided to the Title IX coordinator.

Complaints of discrimination or sexual harassment should be filed as soon as possible with the supervisor, department chair, dean, or one of the administrators listed above and/or designated by the president to receive complaints of alleged sexual harassment or discrimination.

STUDENTS

A student who believes that he or she has been subjected to discrimination or sexual harassment by anyone is encouraged — but it is neither necessary nor required particularly if it may be confrontational — to promptly tell the person that the conduct is unwelcome and ask the person to stop the conduct. A student is not required to do this before filing a complaint. A person who receives such a request must immediately comply with it and must not retaliate against the student.

The student may file a complaint with his or her major department chair or director of an administrative unit, who will in turn immediately contact one of the officials listed above.

If the student feels uncomfortable about discussing the incident with the department chair or director of an administrative unit, the student should feel free to bypass the person and file a complaint with one of the above officials or to any chair, dean, or director of an administrative unit who will in turn immediately contact one of the officials listed above to forward the complaint, to discuss it and/or to report the action taken. The chair, dean, or director of an administrative unit has a responsibility to act even if the individuals involved do not report to that person.

INVESTIGATION AND RESOLUTION

After receiving a complaint of the incident or behavior, the primary officer, or designee, will initiate an investigation to gather information about the incident. If the primary officer is unable to initiate an investigation due to a conflict or for any other reason, the president shall designate another individual to act as primary officer for the matter. Each institution may set guidelines for the manner in which an investigation shall be conducted. The guidelines shall provide for the

prompt, thorough, impartial, and equitable investigation and resolution of complaints, and shall identify the appropriate management level with final decision-making authority. The guidelines shall, at a minimum, provide the person subject to the complaint with information as to the nature of the complaint, and shall further provide that the person filing the complaint and the person who is the subject of the complaint have equal rights to be interviewed, identify witnesses, and provide documentation pertaining to the complaint. In most cases, an investigation should be completed within 45 calendar days of receipt of the complaint.

The standard for evaluating complaints shall be a preponderance of the evidence. At the completion of the investigation, a recommendation will be made to the appropriate management regarding the resolution of the matter. The recommendation is advisory only.

After the recommendation has been made, appropriate management regarding the resolution of the matter if warranted, disciplinary action up to and including involuntary termination or expulsion will be taken. Any such disciplinary action shall be taken, as applicable, in accordance with NSHE Code Chapter 6 (or applicable Student Code of Conduct), or, in the case of classified employees, NAC Chapter 284. Other appropriate actions will be taken to correct problems and remedy effects, if any, caused by the conduct, if appropriate. If proceedings are initiated under Chapter 6, the applicable Student Code of Conduct, or the Nevada Administrative Code, the investigation conducted pursuant to this policy may be used as part of such investigations. The administrative officer, in his or her discretion, may also supplement the investigation with additional investigation. In any disciplinary hearings conducted pursuant to a Student Code of Conduct or under Title 2, Ch. 6, the burden of proof shall be by a preponderance of the evidence. In connection with any such disciplinary hearings, the person filing the complaint and the person who is the subject of the complaint have equal rights to be interviewed, identify witnesses, and provide and receive documentation and witness lists pertaining to the complaint, and if an appeal is provided, to appeal the decision.

After the appropriate management has made a determination regarding the resolution of the matter, and depending on the circumstances, both parties may be informed concurrently of the resolution.

In the event actions are taken against an individual under NSHE Code Chapter 6 (or applicable Student Code of Conduct) or NAC Chapter 284, such matters generally remain confidential under those sections, except that final decisions following hearings or appeals of professional employees and state of Nevada personnel hearings involving classified employees are public records. Student matters generally remain confidential under FERPA.

When discriminatory conduct or sexual harassment involves a crime of violence or a non-forcible sex offense, FERPA permits the institution to disclose to the alleged victim the final results (limited to the name of the alleged perpetrator, any violation found to have been committed, and any sanction imposed) of a disciplinary proceeding against the alleged

perpetrator, regardless of whether the institution concluded that a violation was committed. With respect to an institutional disciplinary proceeding alleging a sex offense, the Clery Act requires that the accuser and the accused must be informed of the outcome.

In the event a student is found to have engaged in sexual harassment of another student, the institution shall disclose to the student who was harassed information about the sanction imposed on the student who was found to have engaged in harassment when the sanction directly relates to the harassed student.

PROMPT ATTENTION

Complaints of discrimination or sexual harassment are taken seriously and will be dealt with promptly, thoroughly, impartially, and equitably. Where discrimination is found to have occurred, the NSHE institution or unit where it occurred will act to stop the discrimination or sexual harassment, to prevent its recurrence, to remedy its effects, if any, and to discipline those responsible.

CONFIDENTIALITY

The Nevada System of Higher Education (NSHE) recognizes that confidentiality is important. However, confidentiality cannot be guaranteed. The administrators, faculty, or staff responsible for implementing this policy will respect the privacy of individuals reporting or accused of discrimination or sexual harassment to the extent reasonably possible and will maintain confidentiality to the extent possible. Examples of situations where confidentiality cannot be maintained include, but are not limited to, necessary disclosures during an investigation, circumstances where the NSHE is required by law to disclose information (such as in response to legal process), or when an individual is in harm's way.

RETALIATION

Retaliation against an individual who in good faith complains of alleged discrimination or sexual harassment or provides information in an investigation about behavior that may violate this policy is against the law will not be tolerated and may be grounds for discipline. Retaliation in violation of this policy may result in discipline up to and including termination and/or expulsion. Any employee or student bringing a discrimination or sexual harassment complaint or assisting in the investigation of such a complaint will not be adversely affected in terms and conditions of employment and/or academic standing, nor discriminated against, terminated, or expelled because of the complaint. Intentionally providing false information is also grounds for discipline.

"Retaliation" may include, but is not limited to, such conduct as:

- The denial of adequate personnel to perform duties

- Frequent replacement of members of the staff
- Frequent and undesirable changes in the location of an office
- The refusal to assign meaningful work
- Unwarranted disciplinary action
- Unfair work performance evaluations
- A reduction in pay
- The denial of a promotion
- A dismissal
- A transfer
- Frequent changes in working hours or workdays
- An unfair grade
- An unfavorable reference letter

STUDENTS

A student who believes that he or she has been subjected to retaliation may file a retaliation complaint with his or her major department chair or director of an administrative unit, who will in turn immediately contact one of the officials listed above.

If the student feels uncomfortable about discussing the alleged retaliation with the department chair or director of an administrative unit, the student should feel free to bypass the person and file a complaint with one of the above officials or to any chair, dean, or director of an administrative unit who will in turn immediately contact one of the officials listed above to forward the complaint, to discuss it, and/or to report the action taken. The chair, dean, or director of an administrative unit has a responsibility to act even if the individuals involved do not report to that person.

Complaints of retaliation under Title IX must be immediately provided to the Title IX coordinator.

FALSE REPORTS

Discrimination and sexual harassment frequently involve interactions between persons that are not witnessed by others. Reports of discrimination or sexual harassment cannot always be substantiated by additional evidence. Lack of corroborating evidence or "proof" should not discourage individuals from reporting discrimination or sexual harassment under this policy. However, individuals who make reports that are later found to have been intentionally false or made maliciously without regard for truth may be subject to disciplinary action under the applicable university and Nevada System of Higher Education (NSHE) Board of Regents disciplinary procedures. This provision does not apply to reports made in good faith, even if the facts alleged in the report cannot be substantiated by subsequent investigation.

SUPERVISOR'S RESPONSIBILITIES

Each supervisor has a responsibility to take reasonable steps intended to prevent acts of discrimination or sexual harassment, which include, but are not limited to:

- Monitoring the work and school environment for signs that discrimination or harassment may be occurring;
- Refraining from participation in or encouragement of actions that could be perceived as discrimination or harassment (verbal or otherwise);
- Stopping any observed acts that may be considered discrimination or harassment, and taking appropriate steps to intervene, whether or not the involved individuals are within his/her line of supervision; and
- Taking immediate action to minimize or eliminate the work and/or school contact between the two individuals where there has been a complaint of sexual harassment, pending investigation.
- If a supervisor receives a complaint of alleged discrimination or sexual harassment or observes or becomes aware of conduct that may constitute discrimination or sexual harassment, the supervisor must immediately contact one of the individuals identified above to forward the complaint, to discuss it, and/or to report the action taken.

Failure to take the above action to prevent the occurrence of or stop known discrimination or harassment may be grounds for disciplinary action.

RELATIONSHIP TO FREEDOM OF EXPRESSION

NSHE is committed to the principles of free inquiry and free expression. Vigorous discussion and debate are fundamental rights, and this policy is not intended to stifle teaching methods or freedom of expression. Discrimination or sexual harassment, however, is neither legally protected expression nor the proper exercise of academic freedom; it compromises the integrity of institutions, the tradition of intellectual freedom, and the trust placed in the institutions by their members.

SECTION 13: STUDENT HEALTH AND WELLNESS

IMMUNIZATION AND HEALTH REQUIREMENTS

Healthcare professionals, including students in training, are at a higher risk than the general population for acquiring communicable diseases such as measles, mumps, rubella, varicella (chicken pox), Hepatitis B, and tuberculosis. In order to protect themselves, their colleagues, and patients, prior to enrollment, students are required to provide evidence of immunization or immunity against these diseases.

The Kirk Kerkorian School of Medicine at UNLV follows guidelines issued by the Centers for Disease Control and Prevention (CDC) along with those of relevant Nevada state agencies. Vaccines required for all medical students prior to matriculation are listed below. Students are required to provide documentation of vaccination and/or titer evidence of immunity to these diseases. Students without documentation are required to initiate each immunization series prior to matriculation with their own provider or at the UNLV Student Health Center.

IMMUNIZATION REQUIREMENTS

Required immunizations and documentation of immunity PRIOR to matriculation:

- Tetanus/Diphtheria/Pertussis vaccine series - documentation of immunity required
- Polio vaccine series
- Measles, Mumps, Rubella vaccine series - documentation of immunity required
- Varicella vaccine series - documentation of immunity required
- Hepatitis B vaccine series - documentation of immunity required
- Hepatitis A vaccine series - documentation of immunity required
- Tuberculosis - proof of the results of a QuantiFERON blood test within three months of matriculation.

Vaccinations required for all medical students, which can be initiated FOLLOWING matriculation:

- Influenza vaccine - annually
- Booster vaccinations as needed

Vaccinations recommended and made available to students following matriculation:

- Meningococcal vaccine
- Annual flu vaccine
- Annual health requirements
- Annual QuantiFERON blood test

INFECTIOUS DISEASE REPORTING AND PREVENTION EDUCATION

The Kirk Kerkorian School of Medicine at UNLV complies with the Nevada Administrative Code (NAC) and standard CDC guidelines for health professionals in relation to the state of Nevada vaccination requirements for university students. Accordingly, this policy is subject to change as the NAC may be updated/amended and CDC guidelines may change.

Under the NAC, students can request a waiver of immunization and health requirements. Medical students who request a waiver will be unable to complete required placement in affiliated hospitals and clinics. Clinical placements are a requirement of the Kirk Kerkorian School of Medicine at UNLV curriculum. A student who is unable to complete these requirements due to an immunization waiver will be unable to fulfill the medical school's graduation requirements and will be subject to review and possible dismissal by the Medical Student Progress Committee.

Medical students are required to complete annual trainings, in person and online, on prevention of infectious disease, including bloodborne pathogens and tuberculosis.

Impact of Infectious Disease, Environmental Exposure, or Disability on Medical

Student Learning Activities

The Kirk Kerkorian School of Medicine at UNLV is committed to supporting all students in achieving their full academic potential. We recognize that infectious diseases, environmental exposures, and disabilities may affect a student's ability to fully participate in certain learning activities at times. In such cases, the school will work closely with the student, relevant clinical sites, and campus support services to provide reasonable accommodations and ensure continuity of education while maintaining the health and safety of all patients, students, and staff.

Medical students will not be discriminated against on the basis of infectious disease, environmental exposure, or disability. The school adheres strictly to federal and state laws, including the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act, and maintains policies that protect students from discrimination and ensure access to necessary accommodations.

Students who believe they have experienced discrimination or who need support in managing the impact of health-related issues on their learning are encouraged to contact the office of student affairs or the Disability Resource Center (DRC) for assistance.

INSURANCE

HEALTH INSURANCE

All medical students are required to carry comprehensive health insurance throughout their matriculation. Information on health insurance coverage, cost, insurance for spouses or domestic partners and dependents, eligibility, and enrollment dates are available online at: <https://www.unlv.edu/studentwellness/health-center/health-insurance>.

Full-time professional students are automatically charged the semester insurance rates unless a health insurance fee waiver is requested and proof of alternate insurance coverage is provided. It is the student's responsibility to ensure they maintain coverage throughout their matriculation. Failure to maintain health insurance or submitting a falsified health insurance fee waiver are grounds for disciplinary action, up to and including dismissal from the MD program.

LIABILITY INSURANCE

All actively enrolled students in the MD program are automatically enrolled in the university-sponsored liability insurance.

DISABILITY INSURANCE

UNLV provides all actively enrolled students in the MD program with a disability plan that will

pay a monthly benefit in the event the student becomes disabled due to a sickness or injury, as well as the option to continue coverage upon graduation. Upon completing medical school, students are entitled to convert their coverage to an individual non-cancelable policy without any medical underwriting (financial underwriting is required). MD students are automatically enrolled in the plan and fees are paid by the school of medicine.

Additional information about the disability insurance plan is available online at: <https://www.unlv.edu/medicine/student-health>

OCCUPATIONAL EXPOSURES TO BLOOD AND BODY FLUIDS

All students will receive training during orientation to bloodborne pathogens and infectious and environmental diseases, including how to safely minimize exposure during required medical school courses and clinical experiences.

This training must be completed in person for all incoming medical students during the start of Phase 1. Subsequent training will be required annually and will be completed online. The office of student affairs is responsible for monitoring student completion of required training. Completion of this training is considered a professional responsibility for medical students and is required for enrollment in the MD program.

If exposure occurs on campus, UNLV protocols will be followed. Complete information is available online at <https://www.unlv.edu/rms/occupational>. An exposure includes exposure of the eye, mouth, other mucous membranes, non-intact skin, or through the skin contact with blood or other potentially infectious agents. If an exposure occurs, the student should wash the exposed area with soap and water. If bleeding, the wound should be allowed to bleed freely. If the infectious agent or blood has entered the eye, nose, or mouth, the area should be flushed with water for 15 minutes. The student should seek immediate medical care from the UNLV Student Health Center or the nearest emergency room or urgent care center.

Students must notify supervising faculty and the office of student affairs and the office of admissions at the time of the incident. Supervising faculty and the student are responsible for notifying student affairs within 24 hours of the incident. Incidents may be reported by calling or emailing the director of student affairs or the dean for student affairs and completing the online exposure incident report form.

A student who has an exposure while in a clinical affiliate facility will follow the occupational exposure protocols of that facility. These protocols will be communicated to students during orientation at the clinical partner facility. The office of student affairs is responsible for verifying this information is communicated to students. This requirement also will be included in all affiliation agreements, as required, for clinical affiliates and community partners.

Students who experience an exposure Monday – Friday during regular business hours, and DO

NOT require emergency medical care, should follow up with UNLV Student Health Center. Students must notify the office of student affairs and admissions within 24 hours of the incident. Online reporting is available. The facility protocol should include referral to on-site emergency or urgent care, depending upon the medical requirements of the exposure. The facility is responsible for ensuring the source individual is identified and documented. Baseline blood samples should be taken of the source individual and the student. Results of the individual and the student's baseline must be disclosed to the student and to the office of student affairs. Students are required to submit to baseline and required follow up testing to determine their status post-exposure and to maintain health safety for themselves and their patients.

INFECTIOUS AND ENVIRONMENTAL DISEASE OR DISABILITY

If a medical student acquires an infectious and/or environmental disease or becomes disabled after matriculating, whether or not it is a direct result of the medical education program, the student will be allowed to complete the program as long as the student still meets the school's technical standards with or without reasonable accommodations.

HEALTH SERVICES

All enrolled medical students who have paid the health fees are eligible to use UNLV student health services. Health fees are assessed each semester. Fees cover office visits, access to health information, counseling and psychological services, and a variety of preventive care services. There may be a small fee for psychological testing, lab work, pharmacy prescriptions, or other services. A full description of UNLV student health and wellness services can be found at: <https://www.unlv.edu/studentwellness>.

UNLV STUDENT HEALTH CENTER

Medical students' primary care provider is the UNLV Student Health Center (SHC). Most services at the clinic are provided as part of the medical student health and wellness fee. The center has a complete list of additional fees available at its website. The UNLV Student Health Center offers comprehensive outpatient services for students. The clinic is located near the Tropicana parking garage on the main UNLV Campus. All students are eligible to use the SHC regardless of health insurance coverage.

Complete information on location, appointment scheduling, and services available are online at: <https://www.unlv.edu/studentwellness/health-center>. All health services received by students at the UNLV Student Health Center are confidential and separate from all other academic records for medical students. The UNLV Student Health Clinic is not a clinical affiliate or training site for students enrolled in the MD program at the Kirk Kerkorian School of Medicine.

COUNSELING AND PSYCHOLOGICAL SERVICES

The Kirk Kerkorian School of Medicine at UNLV provides counseling and psychological services through the UNLV Health Mojave Counseling Clinic and UNLV Counseling and Psychological Services (CAPS): <https://www.unlv.edu/caps>. UNLV CAPS is located on the main UNLV campus in the Student Health and Wellness Center. Adjacent parking can be found in the Tropicana parking garage. Hours and crisis/emergency information is available online. These services are included in the medical student health and wellness fee.

CONFIDENTIALITY

Medical students are assured full confidentiality when accessing both health and psychological services. At the UNLV Student Health Center and the UNLV Health Mojave Counseling Clinic, specific physicians and therapists are designated to see medical student patients. These providers have no teaching, evaluation, or other responsibilities within the Kirk Kerkorian School of Medicine.

Additionally, none of the providers at CAPS (Counseling and Psychological Services) have any affiliation or responsibilities with the school of medicine.

Strict safeguards are in place within the department of psychiatry's electronic medical records system to ensure that only the assigned therapist can access a medical student's records.

The office of student affairs will continue to coordinate with both the Student Health Center, CAPS, and Mojave Counseling to confirm that all confidentiality protocols remain effective and that student privacy is fully protected.

COMPLIANCE

All students are required to complete all UNLV compliance training modules, online and in-person. This includes Health Insurance Portability and Accountability Act (HIPAA), and Bloodborne Pathogens, and Tuberculosis, per CDC guidelines.

SECTION 14: STUDENT LIFE

UNLV STUDENT SUPPORT SERVICES

UNLV provides a variety of services that support enrolled students with issues such as food, housing, or transportation insecurity, childcare, medical and mental health needs, and digital/technology access. A full list of resources is available online at: <https://www.unlv.edu/students>.

PARKING AND TRANSPORTATION SERVICES

Information about parking and transportation services can be found online at: <https://www.unlv.edu/parking>. UNLV Main Campus and the medical education building have various levels of parking available to students, faculty and staff, on-campus residents, handicapped, meters, reserved parking, vendors, and motorcycles. All students are required to purchase a student-parking permit to park on campus. Permits are available at the UNLV Main Campus parking services and at the Shadow Lane campus parking and police services building. Current permit prices are available online. License plates must be visible at all times. Permits are not valid for metered parking. Metered parking requires additional payment.

Motorcycles are required to be permitted. Motorcycles must park in designated motorcycle areas and cannot occupy automobile parking spaces. Motorcycles are not allowed on campus sidewalks or walkways. You can purchase a permit online or in-person.

Student permits are available for purchase by all undergraduate and graduate students currently enrolled at UNLV. Student permits are valid in student spaces only. Students displaying a valid student permit may park in faculty/staff spaces after 5 p.m., with the exception of Lot I. New permits must be purchased every year.

Handicapped parking permits are available for purchase by those with a valid state-issued handicapped license plate or tag. All individuals with a state-issued handicapped parking placard must also purchase a campus handicap parking permit and display both in their vehicle. The registered owner of the handicapped plate or tag must be in the vehicle when it is being parked. If your vehicle does not have a handicapped license plate, the portable handicapped tag issued by the state must be displayed on the rearview mirror or face up on the vehicle dashboard.

UNLV Parking & Transportation Services offers a special needs permit for expectant mothers who require closer parking for a temporary period of time. Expectant mothers may obtain this permit by providing a note from their physician to UNLV Parking & Transportation Services. A valid parking permit is required to be granted special needs accommodation.

Parking permits are not required for bicycles or mopeds. Bicycles must be parked in bike racks. Bicycles cannot be parked or driven on pedestrian ramps to buildings or inside buildings.

UNIVERSITY POLICE SERVICES

Information about University Police Services can be found online at: <https://www.unlv.edu/police>. The mission of University Police Services is to provide a safe and secure learning environment for our campuses by using a community-oriented policing model.

based on collaboration and professionalism. In addition to policing, it provides a wide array of services for students on all UNLV campuses, including those housed in the Las Vegas Medical District. Some of the service provided to students, for little or no cost, include:

- Security escort services
- Notary
- Fingerprinting
- Campus presentations
- Property registration
- Self-defense courses

REBELSAFE ALERT AND MOBILE APP

RebelSAFE Alert is the emergency notification system used for incidents that present an imminent threat to life, health, or safety to UNLV students, employees, faculty, and community members. RebelSAFE Alert messages provide emergency information and instructions to protect yourself during an emergency. In the event of an emergency, RebelSAFE Alert will send emails, text messages, post to University Police Services Facebook and Twitter, push notifications to the RebelSAFE Mobile App, and provide audio and visual warnings to computer desktops and VOIP phones, digital advertising kiosks, RebelSAFE Emergency Phones, and UNLV websites.

REBELSAFE MOBILE APP

The RebelSAFE mobile app provides UNLV students, employees, faculty, and community members with a number of features to keep themselves safe.

- Quickly dial University Police Services to request help, report a crime in progress, report suspicious activities, or for any other emergency.
- Request a Rebel Rides evening shuttle.
- Real-time chat with University Police Services dispatch personnel.
- Submit anonymous crime tips.
- Receive RebelSAFE Alert push notifications.
- Virtual escort to share your GPS location with a friend or family member until you safely reach your destination.
- Other safety related information.

To download the free app, visit the App Store or the Google Play Store.

REBELSAFE EMERGENCY PHONES

RebelSAFE Emergency Phones are for students, employees, faculty, and community members of UNLV to request help, report a crime in progress, report suspicious activities, request a Rebel Rides shuttle, or for any other emergency. The state-of-the-art, 12-foot-tall RebelSAFE Emergency Phones are equipped with a 4000k LED area light, a 360-degree surveillance camera,

and are strategically located throughout campus to broadcast RebelSAFE Alerts via public address speakers in the event of an emergency.

PHOTO USAGE POLICY

The school of medicine will take, print, and distribute an individual photo of each student and a class photo. These photos will be available publicly online and will be distributed to faculty, staff, and students. Each student will be provided a “Media Release Form” during orientation to grant the UNLV permission to use photographs, video, audio recordings, and text for use in all university print and digital publications, websites, social media, marketing, and promotions. Students who do not want their picture used can indicate that on the Media Release Form. It is the student’s responsibility to notify the office of student affairs of any change in status that impacts their waiver to allow the medical school to use their image in school publications, both online and electronic, as well as printed materials.

STUDENT EVENTS

The office of student affairs and office of admissions coordinate medical student events throughout the MD program. Student participation and attendance is expected at each of these events:

- First-year orientation
- First-year convocation
- White Coat Ceremony
- Match Day
- Commencement

ACADEMIC SUPPORT SERVICES

The office of student affairs and office of admissions offer a variety of academic services to all students enrolled in the MD program. Services include workshops, one-on-one coaching sessions, and the 2nd Aid Peer Tutor program. These services are designed to help students acquire knowledge, develop effective study and learning strategies, and enhance their test-taking skills.

The 2nd Aid Peer Tutor Program provides group and one-on-one peer tutoring and mentorship. Group sessions help students practice USMLE-style questions by focusing on connections between basic science knowledge and clinical scenarios. The 2nd Aid program provides PowerPoints and notes to aid students throughout the basic sciences curriculum.

CAREER GUIDANCE PROGRAM

The office of student affairs and office of admissions offer students a four-year Comprehensive Career Guidance Program. The program, which includes town hall meetings, workshops, social events, and one-on-one guidance sessions, is designed to help students identify and compete for their desired field of specialization. The program includes online resources such as AAMC Careers in Medicine.

STUDENT ORGANIZATIONS

The school of medicine has a variety of student organizations, interest groups, and honor societies that support professional and career development, academic success, health and wellness, community service, research, and social engagement.

The office of student affairs and office of admissions, working with student government, support the development and management of student organizations and interest groups. Funds are available for student-run organizations and interest groups. To be eligible for funding, a student organization must be recognized by the UNLV Main Campus Registered Student Organization (RSO) Process: <https://www.unlv.edu/sia/student-orgs/registration/register>. A current list of student organizations at the Kirk Kerkorian School of Medicine is available online at: <https://www.unlv.edu/medicine/student-life>.

STUDENT GOVERNMENT

The student government serves as the primary executive agency of the student body. The purpose of the student government is to represent and serve the interests of Kirk Kerkorian School of Medicine students. The structure, policies and procedures, and duties of the student government are fully described in the Kirk Kerkorian School of Medicine at UNLV Student Government Constitution and its bylaws. More information about student government can be found in Section 5 of the Medical Student Handbook.

SECTION 15: TECHNOLOGY

SOCIAL MEDIA

The Kirk Kerkorian School of Medicine expects medical students, faculty, and other members of the learning community to conduct themselves at all times in a manner consistent with the values of the medical profession and in accordance with the law. Although social media provides many opportunities for positive engagement, it also presents significant risks and

challenges to medical professionals. The following policy provides guidance on the appropriate use of social media by learners and teachers in the school of medicine.

DEFINITION

Merriam-Webster defines social media as "forms of electronic communication (such as websites for social networking and microblogging) through which users create online communities to share information, ideas, personal messages, and other content (such as videos)." Types of social media include, but are not limited to, the following:

- Blogs
- Business networks (e.g., LinkedIn)
- Forums (e.g., Reddit)
- Photo sharing (e.g., Instagram, Snapchat)
- Product/service review (e.g., Yelp, RateMD)
- Social gaming
- Social networks (e.g., Facebook, Twitter)
- Video sharing (e.g., YouTube, Vimeo)
- Virtual worlds

SOCIAL MEDIA GUIDELINES

The following is excerpted from "Social Media Guidelines for Medical Students and Physicians" published online by the American Medical Student Association.

<https://www.amsa.org/2016/09/15/social-media-guidelines-medical-students-physicians/>

- **Be professional.** As medical students and physicians, we should represent our profession well. Adhere to rules of ethical and professional conduct at all times.
- **Be responsible.** Carefully consider content and exercise good judgment as anything you post can have immediate and/or long-term consequences and carry the potential for significant public impact and viral spread of content. Therefore, all statements must be true and not misleading. Make sure that you differentiate opinions from facts.
- **Maintain separation.** Avoid interacting with current or past patients through social media and avoid requests to give medical advice through social media. (e.g., replying to a post on social media asking to be diagnosed)
- **Be transparent/use disclaimers.** Disclose yourself and provide an appropriate disclaimer that distinguishes your views from those of the clinic, hospital system and/or university with which you are associated (while at the same time, being careful not to violate any social media policy to which you may be subject by such organizations). Without specific direction from the appropriate personnel, you may not present yourself as an official representative or spokesperson for said organizations. Also, be sure to reveal any conflicts of interest and be honest about your credentials as a medical student or physician (resident or otherwise).
- **Be respectful.** Do not use defamatory, vulgar, libelous, and potentially inflammatory language, and do not display language or photographs that imply disrespect for any

individual or group because of age, race, national origin, gender, sexual orientation, ethnicity, marital status, genetic information, military status, or any other protected characterization or group.

- **Follow copyright laws.** Comply with copyright laws. Make sure you have the right to use material before publishing.
- **Protect client/patient information.** Do not discuss confidential information and follow standards of patient privacy and confidentiality and regulations outlined in Health Insurance Portability and Accountability Act (HIPAA) and the Family Educational Rights and Privacy Act (FERPA, 20 U.S.C. § 1232g). Remember you could personally face a HIPAA violation if there are enough details in the post for patients to recognize themselves.
- **Avoid political endorsements.** Political endorsements of candidates should be avoided outside your own personal social media accounts, even their comments should be carefully considered endorsements of any candidates or political parties via AMSA social media channels is strictly prohibited, be aware of where and how AMSA's name is used.
- **Comply with all legal restrictions and obligations.** Remember use of social networking sites or weblogs can carry legal and professional ramifications. Comments made in an unprofessional manner can be used in legal, professional, or other disciplinary proceedings (i.e., hearings before a State Medical Licensing Board).
- **Be aware of risks to privacy and security.** Read the site's Terms of Use and Privacy Policy. Be cognizant of continuous changes in these sites and closely monitor the privacy settings of the social network accounts to optimize your privacy and security.

VIOLATIONS

The following rules must be adhered to. Any violation of these rules may lead to possible sanctions, up to and including dismissal from the MD program.

- Do not post any confidential or patient information on any public website at any time.
- Do not post any photos or videos taken during a medical encounter.
- Do not post any photos or videos of patients at any time.
- Students are not permitted to use any photographic devices such as pen cameras, Google glasses, or other devices to photograph materials or otherwise record educational sessions for personal use or distribution.
- The posting of educational materials on publicly accessible sites is not permitted.
- Posting of material that defames, threatens, harasses, or humiliates patients, students, house staff, nursing, administrative staff, and faculty are not permitted at any time.
- Students are responsible and held liable for proprietary, defamatory or libelous material posted on websites.
- Students are not permitted to post any material that may be misconstrued by a reader as being an official communication on behalf of the Kirk Kerkorian School of Medicine at UNLV.

UNIVERSITY EMAIL

A complete version of the UNLV student email policy can be found here:

https://www.unlv.edu/sites/default/files/page_files/27/AboutUNLV-Policies-StudentEmailPolicy.pdf

Official email communications are intended to meet student, faculty, and staff academic and administrative needs within the campus community. Unless otherwise prohibited by law, the university and its faculty may communicate with students officially by email and will expect that such email messages will be received and read in a timely manner. Official UNLV email accounts are created for all admitted students. The addresses are all in the form of [name]@unlv.nevada.edu. These accounts must be activated by the students through the Office of Information Technology Help Desk or online. If a student wishes to have email redirected from their UNLV official email to another email address, they may do so but at their own risk. The university is not responsible for the handling of email by outside vendors or departmental/unit servers, none of which are considered official student email accounts. Having email redirected does not absolve a student from the responsibilities associated with official communication sent to his or her [name]@unlv.nevada.edu account.

Students are expected to check their email on a frequent basis in order to stay current with UNLV related administrative and course communications and to recognize that certain communications may be time critical. Students must ensure that there is sufficient space in their accounts to allow for delivery of official email communications.

It is a violation of the UNLV Code of Student Conduct to use email to impersonate a university office, faculty/staff member, another student or any other person. Email users should exercise extreme caution in using email to communicate confidential or sensitive matters and should not assume that email is private or secure. It is also important that users are careful to send messages only to the intended recipients.

Faculty will determine how electronic forms of communication will be used in their classes and will specify their requirements in the course syllabus. Such use by students and faculty shall be consistent with this policy.

MEDICAL STUDENT EMAIL POLICY

Medical students should check their emails on a daily basis. They are expected to respond to official email communications within 72 business hours. Failure to respond to official email communications in a timely and appropriate manner is a violation of the professional code of conduct and may result in submission of a notice of professionalism concern.

