Four-Year MD Program
Student Manual

I. Introduction
St. George’s University School of Medicine Four-Year MD Student Manual includes descriptions of the curriculum, student support services and requirements for the MD degree. Incoming and current students in the Four-Year MD program can find the information in this Manual to help them successfully participate in this program.

Students registered in the Four-Year MD program are subject to the policies and regulations of both the School of Medicine and St. George’s University. The General Policies for All Students, and Student Standards, Policies, and Nonacademic Procedures are found on our website. If policies and regulations between the School of Medicine and St. George’s University conflict, then the School of Medicine policies and regulations supersede. Students can find additional details about the clinical program in the Clinical Training Manual which can be found on our public website. This Student Manual is subject to review and change from time to time, and policies may be revised in the course of any given academic year. St. George’s University School of Medicine (SGUSOM) reserves the right to alter, change or amend any of these rules and regulations at any time without prior notice. Information contained herein supersedes all previously published versions and is subject to change. Students are, therefore, encouraged to check this Manual periodically to confirm policies and requirements in effect at any given time. This Manual is not intended and should not be construed to constitute a contract. (the final page contains a glossary of abbreviations)

II. Overview – Becoming an MD
1. Mission
The School of Medicine Doctor of Medicine Program is designed to provide an international, culturally diverse environment in which students learn the knowledge, skills, and attitudes required for post-graduate training in the health professions while being inspired to develop compassion, curiosity, tolerance, and commitment to patients and society; dedication to lifelong learning; and an understanding of the vital role of research in healthcare.

2. Curriculum
The Four-Year MD program curriculum is dynamic and innovative. The program consists of a 157-week curriculum divided into ten terms. The school offers students the option to choose different schedules. Most students complete the program in four years if they matriculated in the August term and four and one-half years if they matriculated in the January term. Students have the option of extending the program to five years for no additional tuition if they wish to do research, take extra time to study or decide to experience additional clinical rotations. During the first two years students study Basic Principles of Medicine and Principles of Clinical Medicine on the True Blue campus in Grenada. Students are also given the option to enroll in the Keith B. Taylor Global Scholars Program (KBTGSP), which offers the same first year curriculum on the campus of Northumbria University in the United Kingdom. During the last two clinical years, students train at the University’s clinical centers and affiliated hospitals in the United States and the United Kingdom.
Year I

Term 1
- Basic Principles of Medicine I
  - Foundation to Medicine
  - Musculoskeletal System
  - Cardiovascular, Pulmonary and Renal Systems
- 17 Weeks

Term 2
- Basic Principles of Medicine II
  - Endocrinology and Reproduction
  - Digestion and Metabolism
  - Nervous System and Behavioral Sciences
- 18 Weeks

Year II

Term 3
- Basic Principles of Medicine III
  - Basics of Immunology and Microbiology
  - Public Health Assessment Tools
  - Culture and Societal Issues / Physician Patient Relationship
  - Ethics, Professionalism and Medical Jurisprudence
- 6 Weeks

Term 4
- Principles of Clinical Medicine I
  - Foundations to Clinical Medicine
  - Renal and Cardiocvascular Systems
  - Respiratory and Hematopoietic Systems
  - Digestive, Endocrine and Reproductive Systems
- 18 Weeks

Term 5
- Principles of Clinical Medicine II
  - Muscle, Skin and Nerve
  - Cardiopulmonary Renal and Hematology
  - Gastroenterology, Genitourinary, Obstetrics
  - Endocrine and Rheumatology
  - Dermatology, Neurology, Psychiatry, Pediatrics and Geriatrics
- 18 Weeks

Core Clerkships*
- Internal Medicine
  - 12 Weeks
- Surgery
  - 12 Weeks
- Pediatrics
  - 6 Weeks
- Obstetrics / Gynecology
  - 6 Weeks
- Psychiatry
  - 6 Weeks
- 42 Weeks

Year III

Advanced Clinical Year*
- Family Medicine / General Practice
  - 4-6 Weeks
- Medicine Sub-Internship
  - 4 Weeks
- Medicine Elective
  - 4 Weeks
- Additional Electives
  - 24 – 26 Weeks
- 38 Weeks

*Order of rotations may vary
Overarching Goals
SGUSOM has constructed its curriculum around three domains. As listed in the Overarching Goals below, the three domains are Medical Knowledge, Clinical Skills and Professional Behavior.

At the time of graduation all medical students will be able to meet the following goals:

Medical Knowledge
1. Apply the multidisciplinary body of basic sciences to clinical analysis and problem solving using:
   • The knowledge of normal structure, function, physiology and metabolism at the levels of the whole body, organ systems, cells, organelles and specific biomolecules including embryology, aging, growth and development.
   • The principles of normal homeostasis including molecular and cellular mechanisms.
   • The etiology, pathogenesis, structural and molecular alterations as they relate to the signs, symptoms, laboratory results imaging investigations and causes of common and important diseases.
2. Incorporate the impact of factors including aging, psychological, cultural, environmental, genetic, nutritional, social, economic, religious and developmental on health and disease of patients, as well as their impact on families and caregivers.
   • Utilize the important pharmacological and non-pharmacological therapies available for the prevention and treatment of disease based on cellular and molecular mechanisms of action and clinical effects. Identify and explain factors that govern therapeutic interventions such as clinical and legal risks, benefits, cost assessments, age and gender.
3. Apply the theories and principles that govern ethical decision making in the management of patients.
4. Evaluate and apply clinical and translational research to the care of patient populations.

Clinical Skills
1. Communicate effectively with patients, their families and members of the health care team.
2. Obtain a comprehensive and/or focused medical history on patients of all categories.
3. Perform physical and mental status examinations on patients of all categories appropriate to the patient’s condition.
4. Document pertinent patient health information in a concise, complete and responsible way.
5. Select appropriate investigations and interpret the results for common and important diseases and conditions.
6. Recognize and communicate common and important abnormal clinical findings.
7. Develop a problem list and differential diagnosis based on the history, physical findings and initial investigations.
8. Apply effective problem solving strategies to patient care.
9. Perform routine and basic medical procedures.
10. Provide patient education for all ages regarding health problems and health maintenance.
11. Identify individuals at risk for disease and select appropriate preventive measures.
12. Recognize life threatening emergencies and initiate appropriate primary intervention.
13. Outline the management plan for patients under the following categories of care: preventive, acute, chronic, emergency, end of life, continuing and rehabilitative.
14. Continually reevaluate management plans based on the progress of the patient’s condition and appraisal of current scientific evidence and medical information.

Professional Behavior
1. Establish rapport and exhibit compassion for patients and families and respect their privacy, dignity and confidentiality.
2. Demonstrate honesty, respect and integrity in interacting with patients and their families, colleagues, faculty and other members of the health care team.
3. Be responsible in tasks dealing with patient care, faculty and colleagues including health-care documentation.
4. Demonstrate sensitivity to issues related to culture, race, age, gender, religion, sexual orientation and disability in the delivery of health care.
5. Demonstrate a commitment to high professional and ethical standards.
6. React appropriately to difficult situations involving conflicts, nonadherence and ethical dilemmas.
7. Demonstrate a commitment to independent and lifelong learning including evaluating research in healthcare.
8. Demonstrate the willingness to be an effective team member and team leader in the delivery of health care.
9. Recognize one’s own limitations in knowledge, skills and attitudes and the need for asking for additional consultation.
10. Participate in activities to improve the quality of medical education, including evaluations of courses and clerkships.

III. Graduation
The Graduation Assessment Board (GAB) monitors the performance of all clinical students as they progress towards graduation and approves those students for graduation who have completed the curriculum established by the Council of Deans. To be eligible for graduation a student must satisfactorily complete 80 weeks of clinical training after the successful completion of the 77 weeks of Basic Principles of Medicine and Principles of Clinical Medicine. Based on assessments throughout the Four-Year MD Program, the School of Medicine graduates those students that have developed the competencies intended by the Overarching Goals.
REQUIREMENTS FOR GRADUATION

All candidates must:
1. Meet the requirements of all the basic science courses and clinical rotations and have satisfactorily completed the Basic Science and Clinical curriculum.
2. Complete additional training and assessment for any failing grade in a course or component of a clinical rotation.
3. Achieve a cumulative weighted mean percentage grade average of 75%.
4. Be at least 21 years of age.
5. Pursue the study of medicine for at least three years at St. George’s University School of Medicine.
6. Maintain acceptable professional behavior and standards.
7. Be discharged of all indebtedness to the University.
8. Comply with the requirements for admission.
9. Be approved for graduation by the Graduation Assessment Board.

HONORS DESIGNATIONS
Magna Cum Laude (with great honor)
- Students graduating with a cumulative WMPG of 97%+
Summa Cum Laude (with highest honors)
- Students graduating with a cumulative WMPG between 93%–96%
Cum Laude (with honors)
- Students graduating with a cumulative WMPG between 90%–92

PROFESSIONAL COMMITMENT
When students enter the Four-Year MD program, they take an academic oath reciting the following professional commitment at the White Coat Ceremony:
“Today is the beginning of my medical education as a physician. I acknowledge my responsibility to continue the pursuit of knowledge and understanding until that day when I will cease to be a practicing physician.

I am entering training for a noble profession in which my interest must always be subservient to those who may seek my assistance. I must be ever conscious of the value of my fellow health professionals and treat them with respect at all times. My classmates at St. George’s University are now my colleagues, and I owe to them the same support and encouragement to achieve their goals as I hope to receive from them. I will work alongside my colleagues and professors with tolerance, compassion, and honesty.

I acknowledge my obligation to adhere to the University Honor Code, and to conduct myself with integrity and in an ethical manner at all times henceforth. I shall do all within my power to show in myself an example of all that is honorable and good throughout my medical career. It is a privilege to have been given the opportunity to become a physician. May I be ever conscious of that privilege and never abuse it.”
TECHNICAL STANDARDS
Candidates for admission to this MD program must have functional use of the somatic senses, adequate motor capabilities to negotiate situations in which these senses would be employed, and the ability to integrate data acquired via these senses. Compensation through technology for deficiencies in any of these areas may be acceptable; however, such compensation should not preclude candidates’ abilities to act reasonably and independently. The use of a trained intermediary would mean that candidates’ judgment must be mediated by someone else’s power of selection and observation; therefore, third parties cannot be used to assist students in accomplishing curricular requirements in the skill areas specified below.

1. **Observation Skills:** Applicants/Medical students must be able to participate actively in all demonstrations and laboratory exercises in the Basic Sciences and to assess and comprehend the condition of all patients assigned to them for examination, diagnosis and treatment.

2. **Communication Skills:** Applicants/Medical students must be able to communicate effectively and sensitively with patients in order to elicit information, describe changes in mood, activity and posture, assess verbal and non-verbal communications and be able to effectively and efficiently transmit information to patients, fellow students, faculty, staff and all members of the health care team. Communication skills include speaking, reading and writing, as well as the observation skills described above.

3. **Motor Skills:** Applicants/Medical students must have sufficient motor function to elicit information from patients by palpation, auscultation, percussion and other diagnostic maneuvers, be able to perform basic laboratory tests, possess all skills necessary to carry out diagnostic procedures and be able to execute motor movements reasonably required to provide general care and emergency treatment to patients.

4. **Intellectual/Conceptual, Integrative and Quantitative Abilities:** Applicants/Medical students must be able to measure, calculate, reason, analyze, and synthesize. Problem-solving, a critical skill demanded of physicians, requires all of these intellectual abilities. In addition, applicants/medical students must be able to comprehend three-dimensional relationships and to understand the spatial relationships of structures. Applicants/Medical students must have the capacity to perform these problem-solving skills in a timely fashion.

5. **Behavioral and Social Attributes:** Applicants/Medical students must possess the emotional health required for full utilization of their intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the diagnosis and care of patients and the development of mature, sensitive and effective relationships with patients and others. Applicants/Medical students must also be able to tolerate taxing workloads, function effectively under stress, adapt to changing environments, display flexibility and learn to function in the face of uncertainties inherent in the clinical problems of many patients. Compassion, integrity, concern for others, commitment and motivation are personal qualities which all applicants/ medical students should possess.
6. **Computer Literacy**: In the 21st century profession of medicine, basic computer literacy is a necessary skill. Students and graduate physicians must understand and be able to utilize—unaided—the technology used in education, medical records and in the transmission of data and information with the patient and throughout the medical system.

**Policies for the Basic Science Years**

**REGISTRATION**

All students in the Basic Sciences will be automatically pre-registered for their required courses and must complete registration check-in on or before the first day each term as scheduled by the Office of the Registrar (see [https://mycampus.sgu.edu/group/oep-registrar/academic-calendars](https://mycampus.sgu.edu/group/oep-registrar/academic-calendars)).

The Office of Clinical Studies makes hospital assignments and schedules clinical rotations based on the clinical sites available and Student Preference forms.

**REGISTRATION CHECK-IN**

To register for Terms 1 through 5 of the Basic Sciences program, students must have financial clearance, academic clearance and health insurance. Students who are not in good financial standing are required to work with the Office of Student Finances to resolve their outstanding balances. If students are recipients of federal and/or alternate student loans, all required documentation must be received before financial clearance is provided. School of Medicine students in Terms 2 through 5 may require program clearance from the Dean of Basic Sciences. Students in dual degree programs (MD/MSc, MD/MBA or MD/MPH) need clearance from their Graduate Studies Program advisor; they will then register for both programs simultaneously, if applicable. Students should not proceed to Grenada without financial and academic clearance. More information on registration, billing and late payments is in the General Student Manual.

**LATE REGISTRATION FEES**

Students who complete registration after the first day of class are charged a late registration fee. This serves to encourage students to be present and accounted for on the first day of classes. Students are billed according to the following schedule:

- First day of late registration period: US $50.00
- Second day of late registration period: US $100.00
- Third day of late registration period: US $150.00
- Fourth day of late registration period: US $200.00
- Fifth day of late registration period: US $250.00

**Note**: Students are discouraged from arriving late. Students should note that if they register and begin classes late, they will miss important academic content and their performance and grades may be adversely affected. Late registration is not considered an excuse for poor academic performance.
COMMUNICATION REQUIREMENTS
Students are responsible for ensuring that the SGUSOM is able to contact them at all times. They should notify the Registrar of any change in contact information as soon as possible.

Students must monitor and respond to all university communications during their entire matriculation at the University; this includes during the academic terms, clinical rotations, while at affiliated hospitals, while on vacation or a leave of absence, during clinical bridge time, or while awaiting graduation.

Failure to monitor communications, respond to communications, or to act on information contained in communications from the School is considered unprofessional behavior. Such unprofessional behavior may have adverse effects on performance and grades and may lead to a recommendation of dismissal from the University.

PROGRAM COMMITMENT POLICY FOR STUDENTS MATRICULATED INTO THE KBTGSP AT NORTHUMBRIA UNIVERSITY
Students matriculated into the Keith B. Taylor Global Scholars Program (KBTGSP) given in conjunction with Northumbria University (NU) in Newcastle, United Kingdom, complete the Basic Principles of Medicine Terms 1 and 2 in the first academic year of the Four-Year Doctor of Medicine program in the United Kingdom. They then proceed to their second academic year, Principles of Clinical Medicine at St. George’s University in Grenada. This also applies to students who take a leave of absence (LOA) or repeat coursework. This means that students remain in the United Kingdom (or return there if on LOA) until they are promoted into Term 3 when they proceed to Grenada.

NOTE: Students who matriculate into the first year of the four-year MD program in Grenada do not have the option of matriculating into the KBTGSP for part of the first year of their program.

COURSE AND CLERKSHIP PARTICIPATION
Students are expected to participate in all required activities of this MD program and should be present from the start to the end date of each semester. Students should consult the official academic calendar prior to making travel arrangements. Travel conflicts are not valid reasons for missing required course activities.

(See https://mycampus.sgu.edu/group/oep-registrar/academic-calendars)
The faculty considers participation to be an essential component of professionalism. Students must participate in all required educational activities as defined by Course and Clerkship directors. Such activities include (but are not limited to) lectures, labs, small group discussion, directed learning activities, examinations, and continuous quality improvement. **Course directors take participation into account when determining grades. Non-participation may adversely affect grades and may result in a failing grade.** Remediation will not be offered for any missed activities. Students should consult their course Syllabi for additional information related to course participation.

**PARTICIPATION IN CONTINUOUS QUALITY IMPROVEMENT**

Student feedback is critical to the continued growth of the University and its future students. Student feedback about the quality of instruction at SGU helps to improve the education of future medical professionals. It is the professional responsibility of all students to complete evaluations for each course and clerkship. Students who fail to participate in the evaluation process are considered non-compliant and unprofessional and may be subject to disciplinary action.

**ABSENCES FROM REQUIRED BPM and PCM COURSE ACTIVITIES (NON-EXAMS)**

Except for examinations, there are no excused absences from scheduled course activities and no make-up sessions for missed points associated with missing scheduled course activities. For each course in the Basic Sciences of the MD program a percentage of the best scored assessments is retained for inclusion in the gradebook (consult the course syllabus for specific details). This means that some activities associated with points can be missed without penalty.

**V. BPM and PCM Examinations**

Summative assessments are an integral part of the MD program, and students are expected to comply with examination policies (see Examination Policies). Students are expected to adhere to the master schedule (published on the Office of the Registrar site at https://mycampus.sgu.edu/group/oep-registrar/academic-class-schedules), which provides examination dates and times.

The following are considered summative assessments:
- Module Examinations
- Midterm Examinations
- Final Examinations
- Lab Practical Examinations
- Objective Structured Clinical Examinations (OSCEs),
- Objective Structured Practical Examinations (OSPEs),
- Basic Sciences Comprehensive Examination 1 (BSCE 1)
- Basic Sciences Comprehensive Examination 2 (BSCE 2)
• Comprehensive Basic Science Examination (CBSE)
• Completion Examinations for any missed first offering of an examination
several of these assessments are comprehensive examinations and are
described in further detail in the next section.

COMPREHENSIVE EXAMINATIONS

BSCE’S AND CBSE
The BSCE 1, BSCE 2, and CBSE are standardized examinations administered
during the Basic Sciences. Questions are drawn from Year 1 content using
the relevant National Board of Medical Examiners (NBME) customizable
question bank for the BSCE exams. The content covered on the CBSE is
based on the United States Medical Licensing Examination® (USMLE®) Step 1. The
CBSE is basically a shorter version of Step 1 that covers material that is typically
learned during basic sciences. Students must adhere to the NBME’s standardized
examination policy for these examinations.

BSCE 1
The BSCE 1 provides an assessment of students’ understanding of the Basic
Sciences upon completion of all Year 1 Basic Sciences academic coursework.
In addition, this examination helps students evaluate their approach to taking
standardized examinations and to build the test-taking skills needed for
future comprehensive examinations. This examination also provides
feedback about content areas that require remediation. The BSCE 1 grade is
incorporated into the Basic Principles of Medicine (BPM2) final course grade
in Term 2.

BSCE 2 AND CBSE
The BSCE 2 and CBSE are designed to measure students’ requisite Basic
Sciences knowledge of Year 1 and Year 2 content. The BSCE 2 and CBSE grades
are incorporated into the Principles of Clinical Medicine 2 final course grade
in Term 5, as outlined in the course syllabus.

OSCE, OSPE OR EQUIVALENT PRACTICAL PHYSICAL EXAMINATIONS
OSCEs and OSPEs are standardized comprehensive clinical examinations. They
are administered during Terms 1, 2 (OSPEs) and 4, 5 (OSCEs). OSCEs and OSPEs
are designed to measure students’ requisite clinical skills during the Basic
Sciences. These exams provide an assessment of students’ understanding and
mastery of the clinical skills taught throughout the Basic Sciences. In addition,
these examinations are designed to help students evaluate their approach to
taking standardized examinations and to build the test-taking skills needed for
future comprehensive clinical skill examinations.
The OSPE 1 and 2 grades are incorporated into the Basic Principles of Medicine 1 (BPM 1) and Basic Principles of Medicine 2 (BPM2) final course grades, respectively. OSCE 1 and 2 grades are incorporated into the Principles of Clinical Medicine 1 and 2 courses (PCM1 and PCM2).

EXAMINATION POLICIES
Students are expected to take all regular and Completion examinations as scheduled (see master School of Medicine schedule published on the OEP/Registrar site (https://mycampus.sgu.edu/group/oep-registrar/welcome).

All students are expected to adhere to the Code of Conduct with respect to all university-administered examinations. Examination policies apply to all Examinations (See Electronic Examination Procedures section).

Students who fail to appear for an examination without an approved excused absence (Medical/non-Medical) will receive a grade of zero (“0”) for the examination. Students may appeal to the Dean of Basic Sciences by contacting studentDOBS@sgu.edu

MEDICAL EXCUSE FROM EXAMINATIONS
In rare instances, medical reasons may prevent a student taking an examination as scheduled. Students are entitled to one Medical Excuse for examinations per 12-month period. The student receives an “I” for the exam grade and is permitted to take the Completion Examination. Students take the Completion Examination after the semester ends, as per the official schedule on the OEP/Registrar site (https://mycampus.sgu.edu/group/oep-registrar/academic-class-schedules). Students should consider this completion examination period when scheduling end of term travel. Travel conflicts are not a valid reason for missing an examination; examinations will not be re-scheduled to accommodate student travel.

Students should use their Medical Excuse wisely as no additional excused absences for examinations will be allowed. If a student does not take an examination as scheduled and has already used his/her Medical Excuse in the prior 12-month period, then the student will receive a “0” grade for the examination.

Students with extenuating circumstances for missing an additional examination should seek guidance from the Dean of Students (DOS).
PROCEDURE FOR SUBMITTING MEDICAL EXCUSE (ME)
To submit a Medical Excuse, the student uses the “SOM Examinations” link on the Member Center of the SGU website (https://cas.sgu.edu/cas/login). This self-report form should be submitted before the end of the scheduled examination time. The Medical Excuse covers all exams within a 7-day period starting from the date of submission of the Medical Excuse. If a student becomes able to take some or all of the examinations during the timeframe covered by the Medical Excuse, he/she may take any remaining examinations. If a student makes a second Medical Excuse request within 12 months, then the student receives a written notice about his/her ineligibility for a second Medical Excuse and the consequences of missing the examination(s).

Note: Students may not request a Medical Excuse once they have started an exam. Once a student has started an exam, a score will be submitted and contribute to the student’s grade, irrespective of how much of the exam has been completed. Therefore, students are strongly discouraged from taking an exam if they are unwell.

EXAMINATIONS AND RELIGIOUS OBSERVANCES
A student who wishes to observe a religious holiday on an examination date may take a completion examination on the scheduled date if appropriate protocol is followed for documenting the religious observance. Specifically, at the beginning of each term, the Dean of Students (DOS) office will invite students via email to register the dates of their religious holidays that conflict with their examination schedule for that term. Students who register these dates after January 31st (Spring semester) or after August 31st (Fall semester) will not receive an excused absence from examinations. This protocol must be followed each term. The protocol does not cover any dates of travel associated with the religious observance beyond the actual religious holiday. All completion examinations are scheduled after the semester ends, as per the official schedule on the OEP/Registrar site (https://mycampus.sgu.edu/group/oep-registrar/academic-class-schedules).

COMPLETION EXAMINATIONS
A completion exam is an exam given to students with an approved Incomplete (“I” grade) for missing a regularly scheduled examination. Students who receive an approved Incomplete (“I”) for an exam must take a Completion Examination as per the master School of Medicine schedule (published on the Office of the Registrar site (https://mycampus.sgu.edu/group/oep-registrar/welcome). Regardless of which examination is missed, all completion examinations are held approximately one week after the end of the semester. Students who fail to appear for an examination without an approved excused absence (Medical/non-Medical) will receive a grade of zero (“0”) for the examination.

Students should consider this completion examination period when scheduling end of term travel.
GRADING
BPM and PCM The course requirements and grading policy are specified in each course syllabus for the Basic Sciences. Students’ transcripts reflect a students’ achievement of course requirements and their academic performance.

Students who wish to contest an examination or course grade should consult the Course Director within 48 hours from the release of the grade. If a dispute over a final Basic Sciences course grade remains unresolved after discussion with the Course Director, students may raise the issue with the Dean of Basic Sciences.

Courses are graded numerically and the WMPG is calculated from the numerical grades. The grades on the student self-service portal grade reports are posted in rounded, whole numbers, but the system holds the grade to two decimal places for the purpose of class rank and for promotions. The passing grade for each course is 70%. The grades and WMPG are shown in alpha on transcripts. The conversion charts are as follows:

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<thead>
<tr>
<th>BASIC SCIENCES GRADE DESIGNATIONS</th>
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<td>Letter Grade</td>
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Definitions:
I: Incomplete
In the Basic Sciences, incomplete grades are given when course requirements have not been completed due to serious mitigating circumstances. This “I” designation remains on the transcript until a final course grade is given upon the completion of remaining course requirements. Should a student with an “I” fail to take the scheduled Completion Examination, the Dean of Basic Sciences Office must approve the reason supporting the extension of the “I” designation. The “I” designation must be resolved prior to registration for the next term. The “I” designation will converted to a “F” designation and the APRC will review the academic status of the student.
**W: Withdrawal**
The “W” designation is given if a student drops a course within a specified time period. A student who does not complete coursework will receive a grade of “W” on his/her transcript and will be expected to pay for the course(s) again if/when they are taken.

**CR: Credit Remediation** – See CREDIT REMEDIATION (CR) section on page XXX below

**V. ACADEMIC PROGRESS**
To a large extent, medical school is preparatory for postgraduate training. In the United States, residency program directors look for graduates who demonstrate compliance with program requirements, a high standard of academic achievement, the resilience to handle the demands of postgraduate training and the ability to complete three to five years of a residency program without interruption.

SGUSOM sets high standards for academic progress within the Four-Year MD Program. Students must maintain satisfactory academic progress and develop the competencies intended by the learning objectives for progress, promotion and retention.

**Satisfactory Academic Progress**
The Doctor of Medicine program is designed to be continuous with minimal interruption. Each term serves as a building block for subsequent terms. Prolonged breaks between terms disrupt the educational process and may adversely affect academic success; therefore, leaves of absence are discouraged. Most students complete the Doctor of Medicine program within four or four-and-one-half years after matriculation. Students have the option to extend their timeline to five years in order to do research, extend their study time and/or complete additional rotations without additional tuition.

The maximum allowable time for completion of the Four-Year Doctor of Medicine program is six years. That is, students must complete all graduation requirements within six years of matriculation or be recommended for dismissal. In addition, students must complete the:
**BPM and PCM Segment:** This segment is two years delivered in five consecutive terms. Students must complete these courses within three years of matriculation.

**Clinical Segment:** This segment is two years delivered in five consecutive terms. Students must complete clinical training and meet graduation requirements within three years of starting Term 6.

Failure to complete either segment within the maximum allotted time results in a recommendation for dismissal.

**TIMELINE FOR AUGUST MATRICULANTS**

Students who matriculate in the August term complete their MD program in four years, assuming no extension to their timeline.

1. BPM and PCM: Students complete these courses in May of the second year following their matriculation.

2. Start of the clerkship year: Students who wish to start clinical training in the United States take the USMLE Step 1 in July and start their first clinical term in August or September. Students who wish to start clinical training in the United Kingdom do not have to take the USMLE Step 1 and can start in the United Kingdom in July.

3. End of the advanced clinical year: Students complete the clinical curriculum by May or June in the second year following the commencement of clinical training (e.g., if clinical training begins in July, August, or September 2019, then graduation is in June 2020). This is four years or less after matriculation. Students interested in a US residency should seek a May graduation date, if possible, to ensure ECFMG paperwork and state licensing paperwork prior to the start of residency orientation.

Terms 6 through 10 represent an intensive educational period. Students who start in September have approximately 90 weeks to complete an 80-week curriculum. During this time, students interested in a US residency also study for and take the USMLE Step 2 (CK) and (CS) and apply for residencies.
TIMELINE FOR JANUARY MATRICULANTS
Students who matriculate in the January term generally complete their MD program in four and one-half years, assuming no extension to their timeline.

1. BPM and PCM: Students complete these courses in December of the second year following their matriculation.

2. Start of the clerkship year: Students who wish to start clinical training in the United States take the USMLE Step 1 in March and start their first clinical term in May or June. Students who wish to start clinical training in the United Kingdom do not have to take the USMLE Step 1 and can start in the United Kingdom in January or April.

3. End of the advanced clinical year: While students can graduate in December in the second year after starting clinical training, most students opt to graduate in May, approximately two years after starting clinical training. Terms 6 through 10 represent an intensive educational period. Students who start in May have approximately 100 weeks to complete an 80-week curriculum and graduate in June. During this time, students interested in a US residency also study for and take the USMLE Step 2 (CK) and (CS) and apply for residencies.

EXTENDED TIME LINES
Students are expected to complete BPM and PCM within five consecutive terms in order to complete the basic sciences portion of their MD program in two years (as described above). Nonetheless, students who encounter unanticipated personal setbacks or academic difficulties can request an extension of the timeline. Students may be granted a timeline extension for one of the following reasons:

- Leave of Absence (LOA) to address personal setbacks (example, medical conditions) that prevent the student from successfully completing the academic term

- Credit Remediation (CR) when academic performance is at risk of not meeting academic performance standards

- A recommendation by the Academic Progress Review Committee (APRC) or by the Committee on Academic Progress and Professional Standards (CAPPS) for a student to repeat failed coursework.

Students should note, however, that timeline extensions will be factored into the decision-making and recommendation process of the Academic Progress Review Committee (APRC) and the Committee on Academic Progress and Professional Standards (CAPPS) should students subsequently fail to meet performance standards. All students must complete the Basic Sciences within 3 years of matriculation.

Additional LOAs between terms 5 and 6 may be granted.
ENROLLMENT STATUS AND VACATION TIME
The period between the completion of Term 5 and the start of term 6 is considered vacation time, provided the student’s clinical term begins within 20 weeks of the end of Term 5.

Due to the nature of the academic calendar, USMLE requirements and clinical placement schedules, students might not be able to start their clinical term until after this vacation period ends. If this occurs, the student must be placed on a LOA. If the student is a US Federal aid recipient, the Leave of Absence will allow the student to maintain an enrollment status that will keep the student’s federal student loans in an “in school” deferment status. This LOA can be for a maximum of six months.

Beyond this time, the student’s US Federal student loans will go into a repayment status, and the student will need to seek the necessary authorization to extend the LOA.

A student’s LOA enrollment status is maintained for US Federal student loan purposes. However, it is not reflected on a student’s transcript unless the student fails to start a rotation assigned to them by the Office of Clinical Studies.

GRADES
Satisfactory academic performance requires students to achieve a passing grade in all courses (69.5%) and achieve a minimum cumulative Weighted Mean Percentage Grade (WMPG) of 69.5% for Term 1 and 75% for future terms.

The WMPG is calculated by adding all earned course grades as weighted by their credit hours and dividing by total cumulative credit hours attempted also including final failed course grades (if any). All grades earned in the MD program will appear on the student transcript. Students who do not achieve these minimum standards in the basic science terms will be reviewed by the APRC.

STUDENT SUPPORT IN THE FIRST TWO YEARS
(Student support services during the clinical years are detailed in the Clinical Training Manual).

The Four-Year MD program is academically rigorous and with a demanding class, small group, laboratory, clinical and study schedule. Some students succeed with extended time lines. The SGUSOM is committed to offering all students the support they need to succeed.
Students in the BPM and PCM program have a number of services available to them designed to support learning and to help them succeed in medical school. In addition to the support available through the academic department, support services are also include services offered by the Department of Educational Services (DES), Psychological Services Center and Student Health Services. The Academic Advising and Development Support (AADS) unit in the Dean of Basic Sciences Office coordinates the advising system for the basic sciences. The SGUSOM utilizes a four-tiered advising system for its students:

1. **College System**: Each College is a learning community designed for student support and wellness. Central to the College system is the aim of improving the learning climate to maintain academic performance while mitigating stress, anxiety and depression and augmenting cohesion, a sense of ‘community”, and student satisfaction. Each College is led by a Director of College with the support of the Associate Director of College. The Director provides a leadership contact for every student enrolled in the College and ensures that the membership of the college is aware of all of the support services offered by the College and has timely access and support when required.

2. **Academic Advice**: There are full-time academic advisors within the Dean of Basic Sciences Academic Advising, Development and Support Division, which lead and coordinate the Academic Advising Program. A select number of faculty in each term of the Basic Sciences assist the full-time academic advisors to provide consistent, current, and specific advice to students. Academic Advising is a key component of the Interactive Team Instruction (ITI) delivery of the BPM and PCM segment of the MD Program. These faculty provide advice regarding academic options available to students (e.g., joining the Interactive Team Instruction delivery method, taking the Credit Remediation option). In addition, all teaching faculty in the Basic Sciences hold weekly office hours for students in the MD program. These advisors also refer students to other service departments.

3. **Learning Strategies Advice**: Students in need of learning strategies advice (e.g., time-management skills, study skills, test-taking skills, reading comprehension) may seek help from faculty in the Department of Educational Devices (DES). Students may also be referred to the DES by the academic advisors, the APRC, or the CAPPs. Learning Strategies advising is a key component of the Interactive Team Instruction (ITI) delivery of the Basic Sciences segment of the MD Program.

4. **Non-Academic Holistic Advice**: Students who seek counsel for non-academic reasons (e.g., personal issues) are met by faculty in the Dean of Students office who are skilled in attending to student wellness. Referrals may be made to other campus support services (e.g., Student Health Services, the Psychological Services Center, Student Financial Department).
REVIEW OF STUDENT PERFORMANCE FOR PROGRESS, PROMOTION AND RETENTION

During the first two years, a committee of faculty (the Academic Progress Review Committee or APRC) reviews the academic performance of students following each examination and at the end of each term. Based on its review of students’ timeline and academic achievement, the APRC advises and/or makes recommendations about the progress, promotion and retention of students according to the established MD standards.

During its post-exam interim reviews, the committee identifies students who are not likely to meet satisfactory academic progress standards. The Dean of Basic Sciences office communicates with students who are deficient and refers students for Academic Advising as required. The ITI delivery method of the MD program or the CR option (see ITI and CR sections) may be offered to students not likely to meet standards by the end of the academic term.

During its end of term performance review, the APRC identifies students who are deficient in meeting standards. These students may be allowed to continue in their program on Monitored Academic Status, or they may be recommended for dismissal.

Students have the option to appeal any recommendation for dismissal (see below). Students who are retained will be placed on a Period of Academic Focus.

Timeline delays and failure to meet standards may affect Financial Aid. Students should be encouraged to contact the Financial Aid office (finaid@sgu.edu) regarding these concerns to determine how Monitored Academic Status, a Period of Academic Focus or a timeline extension may affect their financial aid.

ALTERNATIVE PATHWAYS

During post examination Academic Advising meetings, students not likely to achieve performance standards may be offered the option to join the Interactive Team Instruction (ITI) delivery of the MD program or the Credit Remediation (CR) option. The ITI is designed to offer students with additional academic support to better equip them to achieve performance standards. Those who, despite all available support, are not likely to achieve standards may require the CR option.
INTERACTIVE TEAM INSTRUCTION METHOD (ITI)

Students in the MD program are expected to be adaptive, self-directed learners who can capably integrate what they know and apply their knowledge clinically. This cognitive process may occur independently during and following an academic lecture; likewise, it may occur during and following interactions with others. Teaching and learning in the MD program includes required activities such as academic lectures, small group discussions, laboratory sessions and clinical experiences. Additional optional activities are also available: open lab hours, faculty office hours, peer-to-peer facilitated reviews and academic support seminars. Students are encouraged to take advantage of the many varied opportunities for learning and academic development that are available to them.

Most students matriculate into our traditional live lecture-based curriculum. While lectures are the foundation of this curriculum, approximately 50% of contact hours are in small groups and laboratories where students have opportunities for faculty interaction, collaborative learning and academic support. Other students can matriculate into an Interactive Team Instruction (ITI) delivery method of the curriculum.

The ITI utilizes an instructional pedagogy that provides interaction with faculty and incorporates frequent collaborative active learning based on videos of lectures. The small group discussion and lab components are comparable to the traditional live lecture-based curriculum. Students’ progress through the curriculum in an instructor-guided small-group setting (approximately 8:1 student-to-faculty ratio). Students study the lectures through our lecture recording platform. Multiple choice questions, discussions and clinical cases introduced at key points during each lecture serve as catalysts for the clarification of concepts. The instructors of the small-groups ensure that all questions raised by students are effectively addressed in the ITI session. The ITI incorporates academic support through Learning Strategies Seminars given by the DES and individual Learning Strategies Advising meetings. These are built into the ITI schedule.

Entry into the ITI Following matriculation

Following every examination period, the APRC reviews student performance and identifies students with performance trends that indicate students are at risk of not achieving performance standards. Subsequently, during mandatory advising meetings, Academic Advisors meet individually with these students to discuss program requirements and standards, identify obstacles to progress, and consider opportunities for improvement. Performance data indicate that many students who do not meet performance standards in the traditional curriculum make significant improvement in the ITI alternative; therefore, Academic
Advisors may encourage students to choose the ITI method of content delivery. Students who choose this option by the established deadline, transition into the ITI sessions and schedule and must remain there for the remainder of the academic term.

At the end of the academic term, the APRC may offer a student the option of transitioning back into the traditional curriculum. This is dependent on the student’s academic performance (greater or equal to 80% term WMPG). The APRC makes all determinations about student progression in the ITI delivery method at the end of term.

**CREDIT REMEDIATION (CR)**

The Four-Year MD program is designed to be continuous without interruption. Any timeline extensions could impact students’ ability to graduate on time. Nonetheless, some students encounter academic setbacks which may be resolved with an opportunity to remediate courses. The APRC identifies students who are not likely to meet academic standards by the end of an academic term and recommends that they be granted a CR option which is an extension of their timeline by one academic term. However, any student can choose the CR option regardless of the APRC recommendation.

The CR allows students to repeat the course once if they are not likely to meet academic standards for progress. Deadlines for the CR option are posted prior to the final exam of the last course module.

Students who opt for the CR do not take the final exam of the last course module; however, they must attend all remaining scheduled academic activities in the academic term, complete a Final Self-Directed Learning Assignment at the end of the term and present it in person on the scheduled final exam day. Students who are not present for the final presentation of their self-directed learning assignment at the end of the term will forfeit their CR option and be given an F (69.49%) for the course.

The Medical Excuse Policy for course examinations applies to the CR Final Self-Directed Learning Assignment. Students with an approved excused absence will be permitted to complete the CR final assignment as per the Completion Examination schedule. Students who receive an approved Incomplete (“I”) for an exam or a CR assignment must complete their CR Assignment in person as per the master School of Medicine schedule (published on the OEP/Registrar site [https://mycampus.sgu.edu/group/oep-registrar/welcome](https://mycampus.sgu.edu/group/oep-registrar/welcome)).
Completion examinations are held approximately one week after the end of the term. Students should consider this completion examination period when scheduling end of term travel.

Students who comply with all CR requirements will receive a grade of CR on their transcript and repeat all term coursework in the ITI.

They are not charged tuition for their repeat of the course but administrative fees will apply.

Students who use their CR option are at risk of not meeting the MD program’s satisfactory progress guidelines and will be placed on Monitored Academic Status by the APRC. Student should note that although no final grade is issued, during an APRC or CAPPs performance review, a CR is viewed as an academic setback should the student subsequently fail to meet academic or timeline standards.

An additional CR May be allowed in the second year of the Basic Sciences. Presuming students have no prior academic setbacks or timeline delays (ie., F or I grades, failure to met WMPG standards, LOA/W, APRC/CAPPs stipulations) and only one previous CR, they may be granted up to two CR terms in accordance with the following rules.

1. One CR granted during Year 1 (Term 1 or Term 2) and one CR granted during Year 2 (Term 3, 4, or 5); or
2. Two CRs granted in Year 2 (Term 3, 4, or 5).

**CR COMBINATIONS:**

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Students who use the CR option are at risk of not meeting the minimum academic standards of the MD program and will remain or be placed on Monitored Academic Status. Students with prior academic setbacks or timeline delays (F or I grades, failure to meet WMPG standards, LOA/W, APRC/CAPPS stipulations) may be ineligible for one or both CR options.

Note: In Year 2, Terms 3 and 4 CRs are counted separately—a CR in Term 3 counts as 1 CR, and a CR in Term 4 counts as a separate CR.

**Academic progress**

In addition to meeting academic performance standards for progress, students must also progress through the MD program within the established timeline. Disruptions to a student’s program, whether as a result of personal or academic setbacks (e.g., repeated courses, LOAs), may prevent the student from maintaining timeline requirements.

Although timeline extensions may be permitted (e.g., CR, LOA), the APRC will consider these extensions when making recommendations for the retention or dismissal of students. Students who have timeline delays or interruptions will be placed on a Monitored Academic Status (MAS) for the duration of the MD program.

At the end of each academic term, the APRC will review students’ academic performance and identify any students who are not meeting academic performance standards in the Basic Sciences. The APRC will make recommendations to the Dean of Basic Sciences for a student’s progression, promotion or dismissal. Students who fail to meet standards may be allowed to progress if they have had no previous failure to meet standards and no timeline delays. Students with previous failures to meet standards and/or timeline delays may be granted an additional term on MAS or recommended for dismissal in the following situations:

**Failing Grades**

A failing grade (“F”) is defined as a final course grade of less than 69.50%. If this is the student’s first attempt at a course, the consequences of a failing grade depend on several factors as outlined below:

**Continue on Monitored Academic Status (MAS):**

- Students will be allowed to continue in the MD program, despite failing to make satisfactory academic progress, if the following conditions are met:
  - No previous F grade in any course in a prior term
  - No more than one of the following timeline delays:
    - CR
    - LOA
  - The student will be given an opportunity to repeat the course in the ITI on MAS;
Additional stipulations will be applied.

- The student will be permitted to register for the course a second time and to earn a second grade for the course. The grade and credits earned on both the first and the second attempt at a course will be calculated into the cumulative WMPG. The grade earned on the second attempt does not replace the grade earned on the first attempt.

**Recommendation for Dismissal:**

Students will be recommended for dismissal if any one of the following applies to them:

- Two of the following in any combination: Prior CR, prior LOA
- One of the following: Previous failure to meet cumulative WMPG standards or a previous F grade in a course
- The student will exceed the 3 years maximum allowed to complete BPM and PCM

**WMPG STANDARDS**

**Term 1 Cumulative WMPG between 69.5% and 75%**

Students in Term 1 with a cumulative WMPG of at least 69.5% (69.5-75) are considered to be making satisfactory academic progress and will be promoted to Term 2. However, since the minimum progression standards increase after Term 1, these students will be placed on MAS and possibly be required to participate in the ITI delivery of the MD program.

**Term 1 Cumulative WMPG of <69.5% or Terms 2-5 Cumulative WMPG of <75%**

Students are not meeting academic progress standards if their cumulative WMPG is less than 69.5% at the end of Term 1 or less than 75% at the end of Terms 2-5.

Students with a cumulative WMPG<75% may be allowed to continue in the MD program if they have no more than one prior CR or one prior LOA and no previous failures to meet academic standards (F grade or WMPG below standards). These students will be registered for the ITI and placed on Monitored Academic Status for the subsequent term. Additional stipulations may apply.

- Students will be recommended for dismissal if any one of the following applies to them:
- Prior failure to meet academic standards (F grade or failure to meet WMPG standards).

  or

- Two of the following in any combination: Prior CR, Prior LOA

All students who are recommended for dismissal have the opportunity to appeal to the CAPPS.
MONITORED ACADEMIC STATUS

Monitored Academic Status is an internal marker placed in students' progress files by the Dean of Basic Sciences or the Office of the Dean. It allows students who are at risk of not making satisfactory academic progress to continue in the program with additional academic advising. Students are placed on MAS throughout the academic program if they meet any of these conditions:

1. Failing a Basic Sciences course even if successfully repeated
2. Failing to achieve WMPG standards
3. Requiring an extra term to complete the Basic Sciences program (CR, LOA)

Students on MAS are assessed, supported and monitored by the Academic Advising and Development Support (AADS) division of the Dean of Basic Sciences Office or the Student Support Services in the Office of the Dean in the clinical years. They will be required to meet regularly with their assigned academic advisor who will assess and monitor their progress and make referrals to relevant support services.

The APRC reviews students on MAS during each term of basic sciences. Students promoted to the clinical years on Monitored Academic Status are monitored by the Student Support Services in the Office of the Dean.

RECOMMENDATION FOR DISMISSAL DURING TERMS 1-5

The following criteria will guide APRC determinations for end of term dismissal recommendations

1. Failure to complete the basic science curriculum within three years.
2. Failure to maintain a cumulative WMPG of at least 75% from the end of Term 2 onward.
3. Failure to earn a passing grade of 69.50% in a course.
4. Failure to meet CAPPS stipulations after the CAPPS retains a student following an appeal of a recommendation for dismissal

All students who are recommended for dismissal have the opportunity to appeal to the CAPPS.

RECOGNITION OF ACHIEVEMENT

Students who have high cumulative WMPGs are recognized for their achievement as follows:

- Cumulative WMPG ≥ 95.00%: Students are placed on the Chancellor’s List and promoted to the next term.
- Cumulative WMPG ≥ 90.00%: Students are placed on the Dean’s List and promoted to the next term.
STANDARDS FOR PROFESSIONAL BEHAVIOR

The faculty has established professional standards and requires all medical students to meet these standards in order to progress and successfully complete the Four-Year MD Program. The School reserves the right to issue a warning, to place on probation, suspend or to dismiss a student whose behavior renders the student unable to meet the required standards. All Basic Science courses have professional behavior standards. Failure to meet professional behavior standards may result in up to a 10% penalty of the total available course points and may result in an F grade for the course in which the student is registered. During clinical rotations, professional behavior is worth 20% of the final grade.

Students are expected to abide by the University Code of Conduct and to demonstrate professional behavior at all times. The University Code of Conduct can be found on our website. The Dean of Basic Sciences and/or the Dean of Clinical Years (US and UK) can suspend students at any time for serious breaches of the Code of Conduct.

PROBATION FOR UNPROFESSIONAL BEHAVIOR

Probation is reflected in students’ progress files for students who violate the standards of professional behavior as defined by the Code of Conduct. Probation allows students who do not meet these standards to continue in the Doctor of Medicine program for a specified period of time with a prescribed course of action. Students will be monitored for adherence to stipulations specified in their probation letters. Although probation does not appear on a student’s transcript, the School of Medicine must supply this information if it is requested by external agencies, such as a state licensing board. While on probation, students’ behavior must improve in accordance with the specific written stipulations given to students. Students who fail to meet the prescribed course of action risk a recommendation of dismissal.

Information regarding University Disciplinary and Judiciary Policies and Procedures can be found on our website.
THE COMMITTEE FOR ACADEMIC PROGRESS AND PROFESSIONAL STANDARDS (CAPPS)
CAPPS ACADEMIC APPEALS PROCESS

The mission of the CAPPS is to make fair and objective decisions on individual student appeals.

Although the School of Medicine is committed to providing students with remediation and support needed to facilitate student success, the CAPPS is obligated to consider not only the individual student’s appeal but also key considerations such as program requirements and standards, as well as student’s performance history, timeline and academic risk factors.

CAPPS’S TERMS 1-5

REVIEW, DISMISSAL AND APPEAL PROCESS

1. Following each major examination, the APRC, comprised of Course/Module Directors and Dean of Basic Sciences representatives, will conduct a review and analysis of student performance. At this meeting, the APRC will identify students at risk of failing to meet academic standards.

2. Following each major examination, Academic Advisors will counsel at-risk students and inform them of the appeals process, should they find themselves recommended for dismissal at the end of the term.

3. At the conclusion of the final exam period for each term, the APRC will conduct comprehensive review and analysis of student performance. The APRC makes academic progress recommendations to the Dean of Basic Sciences based on students’ achievement of School of Medicine standards as stated in the Student Manual or in additional post-appeal CAPPS stipulations.

4. Within two working days of the APRC meeting, the Dean of Basic Sciences will email a recommendation for dismissal to any student who fails to meet these standards. The email will describe the reason for the recommendation, detail the student’s options to appeal or to withdraw, and specify the timeframe in which to do this.

5. The email will provide a link to the electronic Appeal Form which must be completed and submitted, along with official documentation in support of extenuating circumstances described in the appeal, by the stipulated deadline (see timeline below). The submission will be automatically directed to the CAPPS office. Once the timeframe to submit the appeal has ended, a comprehensive report providing all appeal information for each student will be generated by the CAPPS office in preparation for the review by the CAPPS. Should a student fail to submit his/her appeal by the stipulated deadline, there is no guarantee that the appeal will be reviewed. While preparing their appeals and
considering what supporting documentation to include, students should bear in mind that there is only one opportunity to appeal a recommendation for dismissal. Extensions to the appeal deadline will not be granted, nor will additional appeals.

6. If a student’s appeal is successful, the CAPPS will determine the conditions a student must meet to progress in the MD program. A letter will be issued to the student detailing the conditions as specified by the CAPPS. Students must respond to this communication to indicate their acceptance of these conditions. A student who does not accept the CAPPS conditions has the option to withdraw from the MD program within a specified timeframe. If a student does not withdraw within the specified timeframe, the student will be dismissed.

7. Students are placed on a Period of Academic Focus (PAF) if they are retained after a successful appeal of a recommended dismissal. Students on PAF are assessed, supported and monitored by the Academic Advising and Development Support division of the Dean of Basic Sciences Office. They will be required to meet regularly with their assigned academic advisor who will assess and monitor their progress and make referrals to relevant support services.

8. The APRC reviews students on a PAF each term. During the Basic Sciences, students are removed from a PAF by successfully achieving School of Medicine standards for the duration of the Basic Sciences and satisfying their academic plan as prescribed by the Dean of Basic Sciences or the CAPPS.

9. If a student’s appeal is unsuccessful, the letter to students with a rejected appeal will provide each student with the option to withdraw from the MD program within a specified timeframe. If a student does not withdraw within the specified timeframe, the student will be dismissed. The School of Medicine has no further mechanism for appeal.

SATISFACTORY ACADEMIC PROGRESS STANDARDS AND US FEDERAL FINANCIAL AID ELIGIBILITY
Satisfactory Academic Progress (SAP) ensures students are completing their academic program in a timely manner while achieving and maintaining compliance with minimum academic standards. Eligibility for the Federal Direct Student Loans is contingent upon students achieving Satisfactory Academic Progress toward the Doctor of Medicine degree. These standards are for Title IV Federal Financial Aid purposes only and neither replace nor override academic policies outlined in this Student Manual. However, these standards are intended to be at least as rigorous as SGUSOM academic policies. Full Financial Aid policies can be found on our website.
PROMOTION INTO CLINICAL PROGRAM
Students are eligible to be promoted to the clinical years if they have passed all BPM and PCM coursework and have at least a 75% cumulative WMPG. Passing of the United States Medical Licensing Examination (USMLE) Step 1 is a prerequisite for placement in hospitals in the United States.

CLINICAL TERMS
CRIMINAL BACKGROUND CHECK
The University conducts criminal background checks on all students prior to placement in the clinical program. The cost of the criminal background check shall be paid by students.

CLINICAL TERMS
Students are required to be at the hospital/clinic daily, Monday through Friday, as well as evenings and weekends if scheduled by that site. During clinical rotations, no unexcused absences are permitted. Missing a lecture or failing to fulfill a clinical assignment will call into question students’ ability to accept the necessary responsibilities required of a physician. If students must be absent for a period of a few hours, or a day or two, they must obtain permission from the clerkship director before leaving. If students are absent without permission from a scheduled rotation (including electives), the absenteeism could be reflected in a lower or failing grade, and/or disciplinary action.

BRIDGE TIME FOR STUDENTS
Clinical rotations are scheduled year-round. Clinical students who need to schedule a few weeks off between rotations may do so. This is referred to as bridge time. Students must notify their clinical coordinator in the Office of Clinical Studies and receive approval prior to taking bridge time. The amount of bridge time available to students depends upon when the clinical period begins. Students are allowed up to 20 weeks of bridge time within a 12-month period. Liberal use of bridge time may negatively impact satisfactory academic progress and ultimate graduation date.

CLINICAL EXAMINATIONS
Examination policies and procedures during the clinical terms are described in the Clinical Training Manual.
THE USMLE

Students who are seeking a residency in the United States must take the United States Medical Licensing Examination (USMLE). The Office of the Registrar will certify students to sit the USMLE Step 1 if, at the end of Term 5, they have successfully completed BPM and PCM. Students who pass Step 1 should immediately notify the Placement Coordinators in the Office of Clinical Studies at clined@sgu.edu. Students who fail the USMLE Step 1 must also notify the Placement Coordinators and the Office of Career Guidance at careerguidance@sgu.edu. Students who fail the USMLE Step 1 may retake the examination but must stay within academic progress guidelines.

USMLE APPLICATION

The USMLE information is available online (www.ecfmg.org). Before completing the online part of the application, all students must read, in its entirety, the information booklet for pertinent USMLE instructions.

Medical school students who are enrolled in medical schools that participate in ECFMG's online portal system (EMSWP Status Verification) are required to complete and print out the “Certification of Identification Form 186.” This is the last step of the on-line application process. The Application for ECFMG Certification consists of an on-line application available through ECFMG's Interactive Web Applications (IWA) and the Certification of Identification Form (Form 186) that must be completed and notarized using NotaryCam.

It is recommended that both completed forms be handed into the OEP-Registrar’s Office (Bourne Centre on the SGU Campus), where they will be sent to the New York office and forwarded directly to the ECFMG in Philadelphia.

USMLE Step 1 information or assistance can be obtained from:
- Office of the Registrar, University Support Services, LLC 3500 Sunrise Highway, Building 300 Great River, NY 11739
- Telephone: +1 (631) 665-8500; Fax: +1 (631) 665-3627
- Regmail@sgu.edu OR the ECFMG website (www.ecfmg.org)

IMPORTANT NOTE: It is the responsibility of the students to maintain a timely progression through the curriculum, which includes being able to start the Clinical Sciences and complete the MD program within six years of matriculation. Students who are having difficulty passing any USMLE examination should not let repeated leaves of absence to study for and retake these examinations interfere with their overall academic progress. (See Satisfactory Academic Progress Standards and Progress).
CLINICAL TERMS
During the clinical years, the school has extensive student support services to provide academic counseling, career counseling and psychological services. The Office of Career Guidance and Student Development should be consulted for advice on preparing for postgraduate training. The Office of the Dean, Office of Clinical Studies and the Office of the Dean of Students are available for guidance on other issues. The Directors of Medical Education, clerkship directors, preceptors, medical education coordinators and clinical faculty at clinical sites are also available for advice.

A THREE-YEAR CLINICAL SCHEDULE
Most students complete their clinical training and graduate in two or two and one-half calendar years after completing the basic science program. These students usually take Step 2 CS during their third year and Step 2 CK at the end of their third year. However, students have the option of choosing a three-year schedule (a fifth year in the Four-Year MD program) at no extra tuition. These students can take Step 2 CS and CK after four years of medical school, allowing them more time to prepare for Step 2. During this period, students also have the option to participate in individually tailored program of electives and/or conduct research.

The Office of Career Guidance (OCG) may advise students to consider a fifth year if they meet one or more of the criteria below which are predictors of poor performance on Step 2 CS and CK.

1. Academic difficulties in the basic science terms
2. Failing or performing poorly on Step 1
3. Negative comments or a C in the Clinical Skills component of the clerkships
4. Deficient performance on the NBME Clinical Subject Exams, including any failure and/or less than a 62% average

EXTENDED TIMELINES IN THE CLINICAL PROGRAM
A student may take a LOA in the clinical phase. Students who have taken excessive leaves of absence for health or other reasons should limit their bridge time and are forewarned that they must complete their program of study within the timeline requirements. The need to take off more than one year is incompatible with satisfactory progress and can lead to dismissal from the medical school. Above all, students must remain within the satisfactory academic progress guidelines.

Students need to be aware that extending their timeline, which may be advantages academically, may diminish their prospects in the residency match program. In addition, any disruption in a student’s matriculation may affect their loan repayment status if they are receiving US federal loans.
CLERKSHIP GRADING

The course requirements and grading policy are specified in the Clinical Training Manual for clinical rotations.

Academic transcripts reflect an average based on the numeric grades received in each course for all courses taken in the basic science years.

Quality points are doubled in the WMPG calculations for the core clerkships. Clerkship grades are determined by performance on the wards and clinics (60%), performance on the NBME clinical subject exams (30%); and competency in communication skills (10%). The required sub-internship, Family Medicine/General Practice rotation and electives are graded on a pass/fail basis. The following grade definitions and transcript notations appear on the transcript legend, and in all publications, which outline grading policies:

<table>
<thead>
<tr>
<th>Letter Grade</th>
<th>Numeric Grade</th>
<th>Attempted Credits</th>
<th>Earned Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>A+</td>
<td>97–100</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>A</td>
<td>93–96</td>
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<td>Y</td>
</tr>
<tr>
<td>A-</td>
<td>90–92</td>
<td>Y</td>
<td>Y</td>
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<tr>
<td>B+</td>
<td>87–89</td>
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<tr>
<td>B</td>
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<td>Y</td>
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<td>C</td>
<td>73–75</td>
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<tr>
<td>C-</td>
<td>70–72</td>
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</tr>
<tr>
<td>F</td>
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</tr>
<tr>
<td>NG</td>
<td></td>
<td>Y</td>
<td>N</td>
</tr>
</tbody>
</table>

Courses are graded as follows in the clinical years:

**A+** (honors) is given to students who proficiently develop the competencies listed in the Clinical Training Manual and receive honors in the NBME Clinical Subject Exam.

**A** is given to students who proficiently develop the competencies listed in the Clinical Training Manual and whose overall performance is good.

**B** is given to those students who only adequately develop the required competencies and whose overall performance is acceptable.

**C** is given to those students who barely meet minimum requirements. This grade is, in fact, a “warning” grade and identifies a student who is struggling in medical school and may need remedial work or counseling.

**F** is given to those students who are not achieving minimum School of Medicine standards.

Clerkship Directors have the option of adding + or – to the above grades based on their opinion. Only A+ requires objective criteria, namely Honors in the relevant NBME Clinical Subject Exam.
**Additional transcript notations**

**I: Incomplete**

In the Basic Sciences, incomplete grades are given when course requirements have not been completed due to serious mitigating circumstances. This “I” designation remains on the transcript until a final course grade is given upon the completion of remaining course requirements. Should a student with an “I” fail to take the scheduled Completion Examination, the Dean of Basic Sciences Office must approve the reason supporting the extension of the “I” designation. The “I” designation must be resolved prior to registration for the next term. The “I” designation will converted to a “F” designation and the APRC will review the academic status of the student.

In the clinical terms, the Dean of Clinical Studies or the Dean of the School of Medicine can mandate an Incomplete (“I”) when additional clinical work is required to complete the course and can assign the “I” designation. The “I” designation remains on the transcript until a final course grade is given upon completion of remaining course requirements. In this case, the Dean sets a time limit for the completion of a course.

**NG: No Grade (only for the Clinical years)**

A Course Director may report a “No Grade” for a student who is registered in a course. Students must fulfill all course requirements as defined by the Course Director to obtain a final grade. The course work needs to be repeated.

**CR: Credit Remediated (only for the Basic Science years)**

The CR designation is given when a student who is not likely to meet performance standards opts to complete a course in the Basic Sciences and decides to repeat that course in its entirety during the subsequent semester. A CR is recorded instead of a final course grade.

**W: Withdrawal**

The “W” designation is given if a student drops a course within a specified time period. A student who does not complete coursework will receive a grade of “W” on his/her transcript and will be expected to pay for the course(s) again if/when they are taken.

**IMPACT OF CR OR W ON A STUDENT’S TRANSCRIPT**

While a “CR” or “W” does not affect a student’s WMPG, a “CR” or “W” will appear on the student’s transcript, and the Medical Student Performance Evaluation (MSPE) will describe the reason for the CR/W. Students are advised that a “CR or “W” could affect their academic progress and competitiveness for residencies in the US.
REVIEW OF STUDENT PERFORMANCE FOR PROGRESS, PROMOTION, RETENTION AND GRADUATION
During the Clinical terms, the Office of Clinical Studies, Deans of Clinical Studies (US & UK), and the GAB monitor student performance.

GRADUATION ASSESSMENT BOARD (GAB)
The GAB evaluates the performance of all students as they progress towards graduation. The Curriculum Committee Structure and the SOMCOD establish the curriculum and level of competency required for each student to reach the overarching goals. Promotion to the clinical terms requires a WMPG of at least 75%. Once in the clinical terms the GAB continuously reviews the academic records of all students as they progress towards graduation. To meet graduation requirements students must pass all clerkships and electives and all components of these assessments. Students who receive an “F” in any rotation must repeat that rotation. Students who fail one component of an assessment, such as the NBME Clinical Subject Exam, can pass the rotation. However, in these cases, the GAB will place the student on a Monitored Academic Status and mandate additional fourth-year training and a successful repeat of the exam. Similarly, GAB identifies students who pass the rotation but fail clinical reasoning, clinical skills, communications skills or professional behavior, mandates a structured fourth-year rotation and requires an assessment establishing the required competency.

MONITORED ACADEMIC STATUS (MAS)
Monitored Academic Status is an internal marker placed in students’ progress files by the GAB or by an academic Dean. It allows students who are at risk of not meeting the satisfactory academic progress guidelines or not doing well on Step 2 to continue in the medical program with additional counseling. The Office of the Dean places students on a Monitored Academic Status if their WMPG is 75% - 80% or for any of the following conditions:
1. Failing a basic sciences course even if successfully repeated
2. Requiring more than two years to complete the Basic Sciences program
3. Performing poorly on the NBME exams in the Basic Sciences or Clinical program

The relevant Deans review students on MAS each term. Students promoted to the clinical years on Monitored Academic Status during the clinical terms are monitored by the Office of the Dean which can advise a fifth year in medical school.
PERIOD OF ACADEMIC FOCUS
Students are placed into a Period of Academic Focus if they are retained after a successful appeal of a recommended dismissal. Students are removed from the Period of Academic Focus by satisfying their academic plan prescribed by the CAPPS. Students who fail any component of their clinical evaluation are placed on a PAF by GAB.

RECOGNITION OF ACHIEVEMENT
Students who have high cumulative WMPGs are recognized for their achievement as follows:

- Cumulative WMPG ≥ 95%: Students are placed on the Chancellor’s List and promoted to the next term.
- Cumulative WMPG ≥ 90%: Students are placed on the Dean’s List and promoted to the next term.

US FEDERAL FINANCIAL AID ELIGIBILITY AND SATISFACTORY ACADEMIC PROGRESS STANDARDS
Satisfactory Academic Progress (SAP) ensures students are completing their academic program in a timely manner while achieving and maintaining compliance with minimum academic standards. Eligibility for the Federal Direct Student Loans is contingent upon students achieving Satisfactory Academic Progress toward the Doctor of Medicine degree. These standards are for Title IV Federal Financial Aid purposes only and neither replace nor override academic policies outlined in the SOM Student manual. However, these standards are intended to be at least as rigorous as SGU’s SOM academic policies.

Evaluation Points
To determine if students are meeting the academic standards for federal student loan purposes, students in terms 1-5 (Year 1 and Year 2) are reviewed each academic term. Students in terms 6-10 (Year 3 and Year 4) are reviewed annually by the Office of Financial Aid. Students must meet all of the minimum standards below at each evaluation point or be subject to sanctions.

Academic Standard
- Have no more than one failing grade in terms 1-5
- Have no more than one failing grade in terms 6-10. Have no more than one term in which minimum cumulative Weighted Mean Percentage Grade (WMPG) was not achieved
  - Minimum cumulative WMPG Term 1-69.5%
  - Minimum cumulative WMPG subsequent terms -75%
**Pace Progression Standard**
- Have earned at least 50% of the total attempted credits for the first 2 terms of enrollment in basic sciences
- Have earned at least 60% of the total attempted credits in the remaining Basic Science terms
- Have no more than two fully repeated Basic Science terms
- Have earned at least 67% of the total attempted credits thereafter

**Maximum Timeframe**
- Progressing toward completion of terms 1-5 within three years of matriculation
- Progressing toward completion of terms 6-10 and meeting graduation requirement within three years
- Progressing toward completion of graduation requirements within 6 years of matriculation

**Treatment of Non-Earned Grades**
Courses in which a student earned a grade of ‘W’, ‘I’, ‘CR’ or ‘NG’ will count toward hours attempted but not earned for maximum timeframe and pace of progression but will not be included in the qualitative measure. Courses in which a student earned a grade of ‘F’ count toward the qualitative, quantitative and maximum timeframe calculations.

**Transfer Credits**
For purposes of financial aid, only transfer credit hours officially accepted for the student’s program of study will be automatically counted in the attempted and successfully completed credit hours toward the quantitative and maximum timeframe calculations. Transfer credits are not included in the GPA calculation.

**Sanctions**
The student will be notified in writing of any change in his or her SAP standing that may impact Title IV eligibility. **Terms 1-5:**
Students failing to meet any of the satisfactory academic progress standards will be placed on a one-term ‘Financial Aid Warning’ and will remain eligible to receive federal financial aid for the term. If the student does not meet the satisfactory academic progress standards by the end of the warning term, the student will no longer be eligible for federal financial aid unless he or she files an appeal and it is approved **Terms 6-10:**

Students failing to meet any of the satisfactory academic progress standards will be ineligible for federal financial aid unless he or she files an appeal and it is approved.

**Loss of Title IV Eligibility:**
A student who has not met the minimum SAP standards after an annual evaluation, a warning semester, a probation semester, or has failed to adhere to the terms of the academic plan will become ineligible for financial aid funding. In addition, students who do not meet the standards for maximum timeframe will become ineligible for financial aid when it becomes mathematically impossible for the student to complete within the maximum number of years.
Appeal Process
If a student has lost financial aid eligibility, the student may submit a written appeal with supporting documentation to the Director of Financial Aid petitioning for reconsideration of eligibility for financial aid based on extenuating circumstances. The appeal must specify all of the following information:

- The extenuating circumstances beyond the student’s control that led to the failure to meet SAP (i.e. death, illness);
- What has changed in the student's situation to resolve the issue(s) that caused the academic or progress deficit or progress; and
- That the issue(s) will not affect their performance in the future.

If the student provides all of the above required information, the Director of Financial Aid will review the appeal to determine the validity and reasonableness of the appeal and if students can reasonably be expected to return to a good SAP standing by the end of the next term or within the terms of an academic plan.

Outcomes of Appeal
If the appeal is approved, the student will be placed on ‘Financial Aid Probation' for one term and will be eligible for financial aid funding for that term. If the student needs more than a single term to return to a good SAP standing, the student will be placed on an academic plan which allows the student to meet the SAP standards by a specific point in time.

If the appeal is denied, the student may regain financial aid eligibility by becoming compliant with all of the SAP standards while studying at his or her own expense. Appeal decisions are sent to the student's official SGU email address within 10 days of the receipt of the appeal and appropriate documentation.

Academic Plan
A student on an academic plan will have modified SAP measurements requirements for the duration of the plan. In order to financial aid for the terms while on an academic plan, the student must meet the terms of the academic plan as specified in their Financial Aid Probation letter. If the student doesn't meet the terms of the academic plan specified in the letter, the student is not eligible for federal financial aid.

LICENSURE
The Office of the Registrar–Licensing Services works with students to assist in the preparation and submission of applications for medical licensing.

Applicants for a medical license are responsible to see that applications are properly processed in accordance with the requirements of the particular authority from which a license is sought. The Office of the Registrar maintains some information on the requirements for licensure, however, the University is not an agent of any licensing authority. For precise information, it is the responsibility of students and graduates to seek that information from the licensing agency in the region, state, or country where licensure is being sought. The Office of the Registrar, during the paperwork process of licensure, will advise individuals on the role of the University in the process.
Students may contact the Office of the Registrar at Licensing@sgu.edu.

APPENDIX
ELECTRONIC EXAMINATION POLICIES AND PROCEDURES IN TERMS 1-5

The following policies and procedures supplement the general guidelines outlined in the University Examination Policies and Procedures in the SGU Student Manual. Each examinee is responsible for reviewing and adhering to these policies.

1. Each student is required to have a laptop for taking computer-based examinations at SGU. Examinees must ensure that their laptops meet the current system requirements, as published by Examination Services at the Office of Institutional Advancement (OIA).

   NOTE: Some of the latest operating system updates may jeopardize the compatibility with electronic examinations. Examinees are encouraged to seek guidance from Examination Services at OIA, prior to installing updates.

2. Examinees must ensure that they meet the requirements to access the university network at any time, and should confirm access prior to examinations.

3. Examinees must set the clock on their laptops to the correct local time and time zone (Grenada: Atlantic Standard Time AST = UTC-4; UK: Greenwich Mean Time GMT = UTC, or British Summer Time BST = UTC+1).

4. For examinations using ExamSoft, examinees are responsible for downloading and registering the required version of Exemplify on their laptop prior to examination day.

5. Examinees are notified via the electronic course management system of all examination related information, including venue assignments, time sequence of examinations (including the download window, time when students enter the assigned venue, and when the doors are closed), and examination specifications (e.g. number of questions, duration etc.).

6. For examinations using ExamSoft, examinees are required to download the examination during the allocated time window (see time sequence in the examination notification above).

7. Examinees who are not eligible to take an examination (e.g. students who have withdrawn from course work, or students on an approved leave of absence) are not permitted to download the examination.

8. Examinees experiencing technical difficulties are encouraged to visit Examination Services at OIA for assistance prior to the examination day. An
examinee who needs a loaner laptop must adhere to the loaner laptop policy provided by OIA.

ON EXAMINATION DAY

1. Examinees are expected to assemble outside their assigned venue and ready to enter by the time stated in the examination announcement (see notification prior to examination day above).

2. Examinees must adhere to the instructions given by the Chief Proctor, or the proctors acting under his/her supervision.

3. Examinees are required to enter their assigned venue only (see notification prior to examination day above) and must take their assigned seat.

4. All examinees scheduled to sit a computer-based examination are required to bring their laptops and all necessary accessories (mouse, Ethernet cable and power cord/battery charger), for use on examination day.

5. All examinees who present themselves to sit a University examination are required to display a current SGU student identification card to access the examination venue. The SGU ID is the only acceptable form of ID. Any examinee who fails to present this ID will be required to complete a Missing/Lost Identification Form and to present a government-issued photo ID to access the examination venue.

6. Once seated, examinees must place their ID clearly visible on the left side of the desk they are seated at.

7. Permitted items - only the following items are allowed in the examination venue:
   • Laptop and accessories
   • SGU ID
   • Completely clear (see-through) bottle of plain water, which must be placed outside the examination venue for all examinations
   • Items explicitly permitted for a specific examination (see announcement), or approved by the Student Accessibility and Accommodation Services Office (SAAS).

8. Items that are explicitly NOT permitted inside the examination venues include:
   • Cell phones
   • iPods/ iPads
   • Wrist watches
   • Calculators
   • Paging devices
   • Recording/filming devices
   • Reference materials (book, notes, papers)
   • Backpacks, briefcases, or luggage
   • Beverages or food of any type
   • Coats, outer jackets, headwear
• Jackets/sweaters with pockets
• Hooded jackets/sweaters

Note: Jackets/sweaters with pockets are considered outer jackets and are not permitted. Hooded sweaters are considered headwear and are not permitted.

9. Examinees will need to be prepared to turn their pockets inside out for inspection. Please avoid trousers with an excess of pockets, such as multi pocket work trousers, cargo pants, or hiking trousers. These will slow down the process of entering the exam venue, causing unnecessary stress and anxiety for everyone.

10. Any prohibited items found inside the examination venue will be confiscated.

11. Examinees are assigned a seat (either by posting of individual seat assignments outside the venue, on the website, or by the Chief Proctor or an authorized representative at the venue).

12. Examination conditions are in effect at all times inside the examination venue, from the time the first examinee has entered, until the last examinee has left the examination venue. During examination conditions, no communication of any kind is permitted between examinees. Access to any files or programs other than those explicitly specified by the Chief Proctor is not permitted.

13. No examinee is permitted to enter the examination venue after the doors have been closed (in preparation of the password announcement; see notification prior to examination day above).

14. White boards, dry erase markers and erasers are provided. Examinees are not allowed to write on the white boards prior to starting the examination.

15. Examinees’ eyes must be visible at all times. Hair long enough to cover the eyes and ears must be pulled back.

16. An examinee who is experiencing problems should seek immediate attention from a proctor.

17. Some problems may be solved immediately and on site, but more severe problems may require relocation of an examinee or even termination of the examination.

18. A bathroom break is the only allowed break during an examination. Examinees may not eat, smoke or communicate with anyone other than an assigned proctor during a bathroom break. Examinees must get the attention of a proctor, get permission, sign out and back in and be accompanied by a proctor.

19. No bathroom breaks are permitted for 30 minutes after the assessment password has been provided and no examinee may leave the examination during this time period.

20. Once an examinee leaves the examination area without signing out and back in as stipulated, he/she is considered to have concluded the examination. He/she will not be allowed back into the examination venue to resume the examination.
21. To start the examination, the Chief Proctor will provide examinees with the assessment password and give the start signal “START NOW” (or “BEGIN NOW”).

22. Once the start signal has been announced, examinees are required to proceed with their exam without delay.

23. Examinees are allowed to exit the examination venue when they have completed their examination and displayed the upload confirmation screen (in case of Exam Soft examinations), or whatever procedure has been specified by the Chief Proctor. During the last 10 minutes of an examination, examinees may be instructed to remain seated until dismissed.

24. It is the responsibility of every examinee who downloaded an Exam Soft examination, but is unable to take the examination on examination day, to contact Examination Services at the OIA immediately, to facilitate the process of removal of the examination from their personal computer.

25. All examination activity is logged and any log file demonstrating irregular activity, such as attempting to disable or tamper with security features, is subject to academic disciplinary action.

AFTER THE EXAMINATION

1. An examinee may not attempt to reproduce a test or a test item by any means, including but not limited to reconstruction through memorization and/or dissemination of examination materials by any means.

2. Communications about specific test items, cases, and/or answers with another examinee, potential examinee, or any other person at any time before, during, or after an examination, are strictly prohibited.

3. Every examinee is required to fully cooperate in investigations regarding any examination irregularities, whether committed or observed by themselves or others.

Violation of any policy or procedure outlined in this document is reported as an examination irregularity to the Dean of Students and to the Course Director. In the case of NBME examinations, irregularity reports are also sent to the National Board of Medical Examiners, with potential consequences outlined on their website. The Dean of Students decides on subsequent disciplinary action and the Course Director determines the implications for examination scores and course grades.

GLOSSARY

APRC ACADEMIC PROGRESS REVIEW COMMITTEE
<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
</tr>
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<tbody>
<tr>
<td>CAPPS</td>
<td>COMMITTEE ON ACADEMIC PROGRESS AND PROFESSIONAL STANDARDS</td>
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<td>BPM</td>
<td>BASIC PRINCIPLES IN MEDICINE</td>
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<td>GRADUATION ASSESSMENT BOARD</td>
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<td>ITI</td>
<td>INTERACTIVE TEAM INSTRUCTION</td>
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<td>KEITH B. TAYLOR GLOBAL SCHOLARSHIP PROGRAM, 1ST YEAR OF BASIC SCIENCES, NORTHUMBRIA UK</td>
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<td>SATISFACTORY ACADEMIC PROGRESS</td>
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<td>ST. GEORGE’S UNIVERSITY SCHOOL OF MEDICINE</td>
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