



The University of Texas at Austin

WHAT STARTS HERE CHANGES THE WORLD

The University of  
**Texas**  
at Austin

Medical School Catalog  
2023-2024



The University of Texas at Austin  
Office of the Registrar

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# Medical School

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## Introduction

The Dell Medical School at The University of Texas at Austin was established in September 2013 and has been designed from the ground up as a 21st-century medical school at a top-tier U.S. research university in a vibrant, entrepreneurial, socially conscious and conscientious city. The Dell Medical School aims to measurably improve health by educating leaders, developing new models of care, advancing innovation from health products to health care delivery, and building models that scale for increasing impact. As part of a groundbreaking role for academic medicine in rethinking and redesigning health care to enable better health for all.

## Undergraduate Medical Education (UME)

Dell Medical School students gain the core competencies to practice modern medicine while also learning how to become better leaders, communicators, partners and caregivers. Training includes a focus on value-based health care, team-based learning, space for self-discovery, expanded clinical opportunities, engagement with community partners and more.

This shift in the way doctors are educated equips students with the knowledge, skills and confidence needed to transform the health care system and improve outcomes locally.

The Dell Medical School awards a Doctorate of Medicine (M.D.). The first inaugural class of medical students graduated in May 2020.

## Graduate Medical Education (GME)

Residency and fellowship programs at Dell Medical School ensure that all physicians in training are prepared to engage in the critical work of revolutionizing how people get and stay healthy with a signature curriculum, Advancing Care Transformation, or ACT.

This unique learning experience emphasizes value-based health care, quality improvement, equity, leadership, teamwork and other key competencies in health systems science.

The Graduate Medical Education (GME) handbook information is updated and maintained by GME.

The GME handbook is available online [here](#). Please contact the program with concerns or questions.

## Officers of the Administration

### The University of Texas at Austin

Jay C. Hartzell, PhD, *President*

Sharon L. Wood, PhD, *Executive Vice President and Provost*

James Davis, JD, *Senior Vice President and Chief Operating Officer*

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Sandy Jansen, BBA, *Chief Audit Executive*

## Administrative Officers of the Colleges and Schools

Maria Juenger, PhD, *Interim Dean, Graduate School*

Heather Woofter, MArch, *Dean, School of Architecture*

Lillian F. Mills, PhD, *Dean, Red McCombs School of Business*

Justin Dyer, PhD, *Interim Dean, School of Civic Leadership*

Rachel Davis Mersey, PhD, *Interim Dean, Moody College of Communication*

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Robert M. Chesney, *Dean, School of Law*

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George A. Macones, MD, MSCE, *Interim Dean, Dell Medical School*

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Stacey Napier, JD, *Vice Chancellor for Governmental Relations*

Randa S. Safady, PhD, *Vice Chancellor for External Relations, Communications, and Advancement Services*

David L. Lakey, MD, *Vice Chancellor for Health Affairs and Chief Medical Officer*

## Board of Regents

### Officers

Kevin P. Eltife, *Chairman*

Janiece M. Longoria, *Vice Chairman*

James C. "Rad" Weaver, *Vice Chairman*

Francie A. Frederick, *General Counsel to the Board of Regents*

### Members

**Terms scheduled to expire February 1, 2025**

Christina M. Crain, Dallas

Jodie Lee Jiles, Houston  
Kelcy L. Warren, Dallas

#### Terms scheduled to expire February 1, 2027

Kevin P. Eltife, Tyler  
Nolan E. Perez, M.D., Harlingen  
Stuart W. Stedman, Houston

#### Terms scheduled to expire February 1, 2029

Janiece M. Longoria, Houston  
James C. "Rad" Weaver, San Antonio  
Robert P. Gauntt, Austin

#### Student Regent with term to expire May 31, 2024

John Michael Austin, The University of Texas Health Science Center at San Antonio

Each Regent's term expires when a successor has been appointed and qualified and has taken the oath of office. The Student Regent serves a one-year term.

## Medical School Administration

### Senior Leadership

Claudia F. Lucchinetti, MD, *Dean; Senior Vice President for Medical Affairs, The University of Texas at Austin*

#### Dean's Cabinet

C. Martin Harris, MD, MBA, *Chief Business Officer; Vice President of the Health Enterprise, The University of Texas at Austin*  
Maninder Kahlon, PhD, *Vice Dean for the Health Ecosystem*  
William Matsui, MD, *Vice Dean of Research*  
Michael A. Morrey, PhD, *Chief Administrative Officer; Chief Healthcare Strategist, The University of Texas at Austin*  
Jewel Mullen, MD, MPH, *Associate Dean for Health Equity*  
Elizabeth A. Nelson, MD, *Interim Vice Dean of Education*  
Vacant, *Vice Dean of Clinical Affairs*

#### Executive Operational Leadership

Timothy Boughal, JD, *Senior Compliance Officer*  
John Daigre, *Executive Director of Communications & External Affairs*  
Glenn Deaver, *Executive Director of Facility Management & Operations*  
Ray Dzieszinski, MBA, *Interim Chief Financial Officer*  
Alison Brooks, MD, *Elected Member of the Faculty Senate*  
Christopher Higgins, MBA, *Associate Vice President of Development*  
Ryan R. Johnson, MBA, *Chief Operating Officer*  
Eugene Lazuta, *Executive Director of Health Enterprise Strategy Translation, UT Health Austin*  
Elizabeth Matsui, MD, MHS, *Interim Assistant Dean for Faculty Affairs*  
Elizabeth M. Steinour, *Executive Director of Human Resources*  
Ryan Sutton, PhD, *Associate Dean for Diversity, Equity & Inclusion*  
Robert Turk, *Interim Chief Information Officer*

#### Department Chairs

Nicholas M. Barbaro, MD, *Chair, Department of Neurosurgery*  
Kevin Bozic, MD, MBA, *Chair, Department of Surgery and Perioperative Care*  
Vacant, *Chair, Department of Diagnostic Medicine*  
S. Gail Eckhardt, MD, *Chair, Department of Oncology*  
Jane C. Edmond, MD, *Wong Family Distinguished University Chair, Department of Ophthalmology*  
Z. Leah Harris, MD, *Chair, Department of Pediatrics*  
Barbara Jones, PhD, MSW, *Chair, Department of Health Social Work*  
George A. Macones, MD, MSCE, *Chair, Department of Women's Health*  
Elizabeth Nelson, MD, *Interim Chair, Department of Medical Education*

Charles B. Nemeroff, MD, PhD, *Matthew P. Nemeroff Endowed Chair, Department of Psychiatry & Behavioral Sciences*  
David Paydarfar, MD, *Chair, Department of Neurology*  
Michael Pignone, MD, MPH, *Inaugural & Dr. Lowell Henry Lebermann Endowed Chair, Department of Internal Medicine*  
Navkiran K. Shokar, MD, MPH, *Chair, Department of Population Health*

## Department of Medical Education

John C. Luk, MD, *Assistant Dean for Interprofessional Integration*  
Jonathan MacClements, MD, *Senior Associate Dean for Graduate Medical Education; Designated Institutional Official*  
Alejandro Moreno, MD, *Assistant Dean for Clinical Integration*  
Chris Moriates, MD, *Assistant Dean for Health Care Value*  
Elizabeth A. Nelson, MD, *Senior Associate Dean for Undergraduate Medical Education*  
Stephen R. Smith, PhD, *Associate Dean for Student Affairs*  
LuAnn Wilkerson, EdD, *Associate Dean for Evaluation and Assessment*

## Academic Calendar

### Fall and Spring Semester 2023-2024

Date	Event
	Fall Term
June 26	Monday - First Class Day (MS1 Students)
July 3	Monday - First Class Day (MS2, MS3 & MS4 Students)
July 13	Thursday - Tuition Payment Deadline
July 19	Wednesday - Twelfth Class Day
December 20	Wednesday - Last Class Day (MS1 Students)
December 22	Friday - Last Class Day (MS2, MS3, & MS4 Students)
	Spring Term
January 8	Monday - First Class Day
January 19	Friday - Tuition Payment Deadline
January 24	Wednesday - Twelfth Class Day
April 28	Sunday - Last Class Day (MS4 Students)
May 9	Thursday - Dell Medical School Commencement
May 11	Saturday - Official Graduation Date
June 18	Tuesday - Last Class Day (MS1 Students)
June 21	Friday - Last Class Day (MS2 & MS3 Students)

## General Information

Representatives from the Liaison Committee on Medical Accreditation (LCME) conducted a site visit in September 2019 and Dell Medical School received its Full Accreditation status in June of 2020.

At The University of Texas at Austin, we transform lives for the benefit of society. The Dell Medical School is building on this core purpose as we fulfill our vision for the benefit of all.

## Our Vision

A vital, inclusive health ecosystem:

- Vital: Vigorous, animated, full of life and energy, dynamic.
- Inclusive: Open to everyone.
- Ecosystem: The complex of a community and its environment functioning as a system.

## Our Mission

Revolutionize how people get and stay healthy by:

- Improving health in our community as a model for the nation;
- Evolving new models of person-centered, multidisciplinary care that reward value;
- Accelerating innovation and research to improve health;
- Educating leaders who transform health care; and
- Redesigning the academic health environment to better serve society.

## Our Values

### Realize

- We rigorously learn, measure and demonstrate how to improve health.
- We create and share effective solutions that can be adopted widely.

### Better

- We embrace frontiers that invite us to reach beyond our comfort zone, working together in unfamiliar ways.
- We are committed to improving ourselves and each other.
- We show that better never stops caring, learning, listening and growing.

### Caring

- We find purpose in how we equitably care for one another and for all people in our community.
- We celebrate each other, respectfully offer feedback and honor our shared humanity.

### Together

- We actively work to close the space between us.
- We believe that better will not come from any one of us, but from our shared wisdom.
- We strive for inclusivity and belonging, finding strength in our differences as well as our common ground.
- We are people, not titles, and we are on a first-name basis with each other.

## [ ] Your Own Value

We recognize the value of each person and honor their unique contributions to our community. *Develop and express your own value as your fifth value.*

## Statement on Equal Educational Opportunity

The University of Texas at Austin is committed to an educational and working environment that provides equal opportunity to all members of the University community. In accordance with federal and state law,

the University prohibits unlawful discrimination, including harassment, on the basis of race; color; religion; national origin; gender, including sexual harassment; age; disability; citizenship; and veteran status. Discrimination on the basis of sexual orientation, gender identity, and gender expression is also prohibited pursuant to University policy. Any member of the University community who believes they have been subject to discrimination, harassment, or retaliation should contact the [Office for Inclusion and Equity](#) in person at SSB 3.212, Austin TX 78712; via e-mail at [equity@utexas.edu](mailto:equity@utexas.edu); or by phone at (512) 471-1849.

## Facilities

As the heart of the Dell Medical School and front door for the medical district, the Health Learning Building on The University of Texas at Austin campus is the primary home for students and faculty. The two other buildings in the initial phase of construction, the Health Discovery Building and the Health Transformation Building, were completed in the summer of 2017. These 21st-century facilities will anchor Austin's health district and form a laboratory for medical education, clinical care, research and health care redesign.

Dell Medical School is predicated upon collaboration - between health professionals, students, faculty and the community - and the Health Learning Building is designed to foster interaction. An open stairway from the first floor to the fifth spans the length of the building, encouraging physical activity facilitating chance meetings of students and faculty as they move between floors.

Learning spaces support the theme of cooperation with flexible configurations that can accommodate both small groups and large lectures, all incorporating the latest technology. As the primary home for students and faculty, the entire building was designed to foster interaction, with a café and ample indoor and outdoor seating, an open stairway, meeting rooms, comfortable seating, and study terraces.

Clinical learning sites will be primarily within Seton Healthcare Family clinical facilities, including the newly constructed hospital, Dell Seton Medical Center at The University of Texas.

## Libraries

In addition to our virtual medical library, students also have access to all of the resources of the University libraries, and our partner Seton Health Care's resources.

## Financial Assistance

### Financial Aid

The Office of Financial Aid offers various forms of financial assistance to all university students; these are described in the [General Information Catalog](#). With the help of our friends from the education and medical community, as well as the Michael and Susan Dell Foundation, a financial aid program has also been established for medical students. Dell Medical School provides financial assistance to students pursuing the MD in the form of scholarships, grants, and loans.

The various types of aid and loan programs provided by the Dell Medical School include: Texas Public Educational Grants, College Access Loans, Health Professional Loans, Hazelwood Act Funds, Direct Stafford Loans and Alternative Private Loans, along with any available school-sponsored scholarship funding.

### Endowments

The University and the Dell Medical School have adopted as one of their major objectives the development of endowment funds for the exclusive



support of the Medical School and its priority objectives. These include foremost the recruitment and retention of the preeminent scholars and teachers and support of outstanding students and educational programs.

## Admission

Dell Medical School seeks to recruit and train future physician leaders who want to revolutionize the way people get healthy and stay healthy. To that end, the Admissions Selection Committee is looking for evidence of excellence in four areas:

- a. **Personal Attributes:** integrity and ethics; reliability and dependability; service orientation; social and interpersonal skills; teamwork; capacity for improvement; resilience and adaptability; cultural competence; oral communication.
- b. **Life Experiences:** students and physicians will repeatedly fall back on their unique life experiences, as they treat patients and work with colleagues. A broad range of such experiences will create a valuable diversity of perspectives.
- c. **Academic Accomplishment:** Dell Medical School has adopted a leading-edge curriculum that's uniquely designed from scratch and focused around 21st-century health care. A strong academic record indicates that students will excel in this accelerated curriculum.
- d. **Mission Contribution:** Dell Medical School seeks to create a vital, inclusive health ecosystem and help make Austin a model healthy city. Students with demonstrated strengths in leadership, creativity, teamwork, resilience, and community engagement will help further advance this mission.

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To be a successful physician leader in 21st-century health, you need a large portfolio of competencies. There is very little evidence that the “smartest” applicant with the best undergraduate grades will make the best physician or the best graduate of a medical school.

Understanding, however, that academic capability is necessary to successfully navigate the rapid pace of medical education, the Dell Medical School's Admission Selection Committee will carefully review each applicant's history for evidence of academic aptitude and stamina. The Admissions Selection Committee wants to ensure that every Dell Medical School student possesses the broad range of attributes, experiences, contributions, and capabilities necessary to succeed as a student and a physician.

## Application Procedure

All applicants must utilize the [Texas Medical & Dental Schools Application Service \(TMDSAS\)](#). TMDSAS will transmit your application before transcripts, letters or MCAT scores are uploaded. Dell Medical School will proceed with the first review, but the full application review will not occur until after those documents have been uploaded to TMDSAS and transmitted to Dell Medical School.

### First Review

In order to best use the resources of the faculty and staff, the first review is based primarily on overall GPA and GPA earned in science courses, as calculated by TMDSAS. Every application will be reviewed by a member of the Admissions Selection Committee or Admissions Office staff. This review will also consider MCAT, Socio-Economic Status (SES), graduate work or degrees, GPA trends, and other evidence of academic ability.

## Invitation to Submit Secondary Application

In an effort to give a greater number of applicants the opportunity to present themselves to Dell Medical School's admissions committee, the school uses a unique video secondary application. If selected for further consideration, the applicant receives an email invitation with details on how to prepare and submit the video through a free online portal. The secondary application consists of questions that address specific aspects of the school's mission. In a two-minute response for each question, the candidate speaks to how their experiences will help them contribute to this work. The priority deadline for the secondary application is November 15; application will be reviewed only after the secondary is submitted.

Candidates who feel they would represent themselves better in a written format are given the opportunity to request a written version of the secondary application.

### Full Review

The Full Review involves a careful reading of the entire application by two admissions staff and/or members of the Admissions Selection Committee. Each applicant will receive a ranking, relative to all other applicants in the Full Review, in eight categories:

- a. Personal attributes
- b. Life experiences
- c. Academic preparation
- d. Contribution to and fit with the [mission](#)
- e. Teamwork
- f. Community engagement
- g. Problem-solving for betterment of others
- h. Resilience

Each reviewer will then assign an overall ranking based on a summative impression of the application. The Admissions Selection Committee will utilize these rankings to determine which applicants will be invited for an interview.

### Invitation to Interview

The invitation to interview will be sent to the e-mail address submitted in the TMDSAS application. It will include a link to the website where the applicant may schedule a half day interview experience. Interview will occur on six different days. There will be two interview sessions on each interview date; one half of the applicants in the morning and the other half in the afternoon. The morning and afternoon sessions are identical.

### Interview Day

In the week leading up to the interview, students will receive detailed information about the interview day, which will include parking, the specific schedule, diagrams and maps. Applicants will be provided with a clear understanding of what will happen during the interview experience before they arrive.

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## Transfer Students From Other Medical Schools

The University of Texas at Austin Dell Medical School will strive to admit applicants and matriculate a class best suited to contribute to the mission and vision of the Dell Medical School while assuring equity, impartiality, and excellence in the admissions process. The University of Texas at Austin is committed to maintaining [Equal Educational](#)

Opportunity (p. 4) and non-discrimination as outlined in the University policy.

## Policy

The University of Texas at Austin Dell Medical School permits medical students to apply for transfer into the medical education program if:

- a. Positions are available;
- b. The transfer applicant is in good standing at a medical school accredited by the Liaison Committee on Medical Education;
- c. The transfer applicant has successfully passed Step 1 of the United States Medical Licensing Exam; and
- d. The transfer applicant demonstrates academic achievements and other attributes comparable to students admitted to the Dell Medical School.

Transfer applicants successfully admitted to the Dell Medical School must start at the beginning of the second year of the medical education program. There will be no transfer applicants considered for entry into the Dell Medical School in the third or fourth years of the education program.

Applicants for transfer admission should contact the Office of Admissions. The final decision on transfer applications is made by the Admissions Selection Committee.

Current students that wish to transfer to another medical school should meet with the Associate Dean for Student Affairs.

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## International Applicants

The Dell Medical School is not accepting international applicants at this time.

## Advanced Standing

Dell Medical School admits transfer students in advanced standing to the second year of study. Dell Medical School does not accept transfers for the third or fourth years of medical school.

## Requirements

The Admissions Selection Committee is charged to ensure that every Dell Medical School student possesses the broad range of attributes, experiences, contributions and capabilities necessary to succeed as a student and a physician.

## Mission Contribution

Dell Medical School has a unique mission and vision. Every aspect of the application will be evaluated for the presence or absence of qualities that align with the mission.

## Personal Attributes and Life Experiences

The personal statements, experiences reported in the application, letters of evaluation, and interview sessions are especially helpful in this evaluation. Applicants are encouraged to view all short essay questions in the Texas Medical & Dental Schools Application Service (TMDAS) and the Secondary Application as opportunities to demonstrate personal qualities and strengths to the Admissions Selection Committee.

In addition, applicants are encouraged to meet with those being asked to write letters of evaluation to review strengths in personal attributes and life experiences' domains and encourage them to highlight these.

## Academic Ability

Grade point averages (GPAs) in specific coursework, transcripts, and MCAT scores are more mathematically expressed than other assessed areas, and this information will be used to help consider applicants in the evaluation process. However, simple mathematical comparisons do not provide a complete picture. Hence, all the data gathered from these sources will be considered in the context of other attributes, experiences, and qualifications to help provide an overall picture.

## Medical College Admission Test (MCAT)

Dell Medical School does not set a minimum MCAT score. The MCAT score is evaluated as one indicator among many others and must be considered in light of those other factors. The Admissions Selection Committee will accept MCAT scores from the 2015 version as well as the previous version up to five years prior to the applicant's expected date of matriculation.

## Grade Point Average (GPA)

The minimum overall TMDAS-calculated GPA for consideration is 3.2 on a standard 4 point scale. An applicant's GPA in prerequisite courses and biology, chemistry, physics, and math courses are also considered, but no minimum has been set. In addition to overall GPA, the Admissions Selection Committee will evaluate grade trends, the rigor of coursework, and advanced science coursework.

## Prerequisite Courses

Dell Medical School supports the movement toward competencies. Applicants are free to demonstrate competencies by any means; for most, the easiest method will be through satisfactory performance in appropriately rigorous coursework. Any applicant that believes competency has been established by some alternate means is invited to petition the Admissions Selection Committee ([applydellmed@utexas.edu](mailto:applydellmed@utexas.edu)).

Competency is demonstrated by completing the following courses:

- **Biology:** Eleven semester hours, two of which must be labs (a genetics course is strongly recommended).
- **Physics:** Eight semester hours, two of which must be labs.
- **Chemistry:** Twelve semester hours, to be comprised of a combination of:
  - Two semesters of organic chemistry and one semester of general inorganic chemistry (for a total of nine semester hours with three semester hours of lab); or
  - Two semesters of general inorganic chemistry and one semester of organic chemistry (for a total of nine semester hours with three semester hours of lab).
- **Biochemistry:** Three semester hours of biochemistry.
- **English:** Three semester hours of composition-based English.
- **Math:** Three semester hours of statistics.

These courses must be completed at a regionally accredited U.S. college or university. AP and correspondence courses are acceptable if the official transcript indicates specific course numbers and credits granted. A grade of "C" or higher must be recorded in each of these courses. Any quarter-hour credit equals two-thirds of a semester-hour credit.

## Transfer From Other Medical Schools

The University of Texas at Austin Dell Medical School permits medical students to apply for transfer into the medical education program if:

- a. Positions are available;
- b. The transfer applicant is in good standing at a medical school accredited by the Liaison Committee on Medical Education;
- c. The transfer applicant has successfully passed Step 1 of the United States Medical Licensing Exam; and
- d. The transfer applicant demonstrates academic achievements and other attributes comparable to students admitted to the Dell Medical School.

Transfer applicants successfully admitted to the Dell Medical School must start at the beginning of the second year of the medical education program. There will be no transfer applicants considered for entry into the Dell Medical School in the third or fourth years of the education program.

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## International Applicants

The Dell Medical School is not accepting international applicants at this time.

## Tuition and Fees

### Tuition

For information regarding Dell Medical School tuition, please see the Tables: Tuition for Fall and Spring section under Tuition and Fees in the [2023-2024 General Information Catalog](#).

### Fees

For information regarding Dell Medical School fees, please see the Tables: Tuition for Fall and Spring section under Tuition and Fees in the [2023-2024 General Information Catalog](#). Included in the fees are the Medical Student Resource fee which covers lab, technical and curriculum delivery expenses; a Student Support fee which covers the use of University Health Services clinics, personal counseling and mental services, recreational and fitness facilities, campus Union facilities, and regional shuttle services; a Malpractice Insurance fee of \$25 is also assessed.

### Other Expenses

Health insurance can be purchased through the University.

## Refunds

### Refunds for Withdrawing from the University

For information regarding tuition refunds, please see the Tuition Adjustments section under Tuition and Fees in the [2023-2024 General Information Catalog](#).

## Policies and Procedures

The Policies and Procedures are guidelines to help students navigate academic tasks and understand policies concerning enrollment and attendance, examinations, student performance and grading, and more. All medical students are subject to the academic regulations

of the University and are responsible for making certain they meet all requirements and deadlines.

## Academic Policies

The Academic Policies are guidelines to help students navigate academic tasks.

### Academic Grievance Policy

#### Scope

This policy applies to grievances, which include academic actions or decisions based on student academic performance that directly affect a student's academic status or standing, such as, but not limited to, being required to repeat a course or year of study, being placed on probation, being suspended from the program or being dismissed from the Dell Medical School program. When a student is affected by an adverse academic action or decision made by the Medical Student Academic Standing Committee (MSASC), the student may appeal the action or decision using the process described below.

This policy does not apply to grievances for a course or clerkship grade. See [Appeal of Grade Policy](#) (p. 10).

#### Policy

A student may appeal any decision of the MSASC. Any adverse action based on academic performance alone will be deferred until the grievance is resolved. Adverse actions based on conduct or professionalism will be in effect until the grievance is resolved.

A student must file written notice of his or her grievance with the Chair of the Medical Student Academic Standing Committee within ten business days from the date the written notice of decision was received. In the written grievance, the student must describe in detail the rationale for his or her grievance and propose a resolution. The student has the right to meet with the Associate Dean for Student Affairs to review the processes and procedures related to filing an academic grievance and to discuss the preparation of appropriate documentation for an Ad Hoc Appeals Committee to review and consider.

The Chair shall appoint three faculty members to an Ad Hoc Appeals Committee who will hear the appeal of an adverse event for any individual student, with one to serve as chair. Faculty members will be selected by the MSASC Chair based on the appeal being considered. Faculty members invited to serve on the appeals committee are expected to recuse themselves from service if any conflict of interest exists.

The Ad Hoc Appeals Committee shall schedule a hearing date within 30 business days of the written student grievance being received by the MSASC Chair. The Ad Hoc Appeals Committee may choose to meet with any faculty, administrator, or other person in order to understand context. The student may appear before the Ad Hoc Appeals Committee to make a statement and respond to questions. The student may bring an ally to the hearing. If that ally is an attorney providing legal advice, the Ad Hoc Appeals Committee Chair must be notified 10 days before the hearing and an attorney representing the school shall be present. The MSASC Chair will be responsible for writing up the decision, in consultation with the Ad Hoc Chair.

The MSASC Chair shall notify the student, in writing, of the Committee decision within 10 days of the hearing date.

In the event the student is dissatisfied with the Ad Hoc Appeals Committee decision, the student may file a written appeal to the UT Austin Dell Medical School Executive Vice Dean for Academics within



ten business days of the date the written decision was received. The student's appeal to the Executive Vice Dean for Academics must include a justification statement for the appeal and copies of all documentation the student provided to the MSASC. Upon review of the student's record and appeal, the Executive Vice Dean for Academics may meet with the student, or others, before rendering a decision of the Ad Hoc Appeals Committee, or modify that decision. Within ten business days from receipt of the student's appeal, the Executive Vice Dean for Academics shall provide a written decision to the student, with copies sent to the Associate Dean for Student Affairs, the Associate Dean for Undergraduate Medical Education, and the Chair of the Ad Hoc Appeals Subcommittee.

The decision of the Executive Vice Dean for Academics is final. All sanctions being deferred pending the resolution are immediately placed into effect.

## Academic Standing Policy

### Scope

Provide an administrative outline for the classifications of academic performance of medical school students progressing through the prescribed curriculum. Provide a balanced and supportive framework for identifying students that may be at-risk of unsuccessfully progressing through the academic requirements and adherence with all stipulated academic, professional, and conduct standards as well as all University and University of Texas System rules and regulations.

### Policy

Medical student academic standing shall be formulated and issued in accord with a student's performance in and progression through required curriculum, milestones, exams, adherence with professional expectations, and other requirements.

- a. Medical Student Academic Standing Committee  
As a primary and governing agent of this policy, the Medical Student Academic Standing Committee (MSASC) shall operate as described in the Faculty Bylaws and make decisions in accord with a student's performance in and progression through required curriculum, milestones, exams, adherence with professional expectations, and other requirements.
  - i. The MSASC will uphold and adhere to the policies herein detailed for presiding over the academic standing for students of the School.
  - ii. The committee will convene at least twice per year.
  - iii. Members of the Committee are required to recuse themselves from any discussions in which a person, if aware of all facts, deems a conflict of interest exists.
  - iv. The School will provide an opportunity for students to present before the MSASC at any time when their academic standing is to be voted upon.
- b. Definitions
  - i. Academic Standing Classifications  
Dell Medical School classifies academic standing through using two distinct classifications. The standing of a student is reported on a semesterly basis onto the official academic transcripts issued by the University Registrar.
  - ii. Internal Designations  
The School additionally categorizes students in a subset of designations. This subset is solely for the internal and uniform tracking of students that are encountering academic challenges. Designations are not punitive or adverse in their issuance and will not be reported externally. Designations will serve as the

tracking mechanism for academic support counselors and institute a support structure for students.

- c. Classifications
  - i. Good Standing  
A student who is progressing through the prescribed curriculum and is anticipated to satisfy graduation requirements within the standards as listed in the corresponding policy.
  - ii. Scholastic Probation  
A student, after extensive remediation, has either: ultimately failed to progress in the curriculum; will be unable to satisfy graduation requirements indefinitely; or has committed or abetted in severe misconduct.
    1. The general outline for placement on Scholastic Probation, and where may be alternatively and holistically applied by the MSASC, consists of:
      - a. Failure to be promoted from one academic cohort to another for more than two consecutive academic years
      - b. More than two school-initiated placements on a Leave of Absence (Academic)
      - c. Committing and or abetting severe misconduct as jointly deemed by the MSASC and the Professional Committee
    2. As Academic Standings are formulated on a semesterly basis, a student's placement on Scholastic Probation will be reviewed by the MSASC ahead of each of the subsequent semester's standing issuance. A student may be removed from Scholastic Probation where a student complies with the requirements as set forth by the MSASC upon the change in standing.
- d. Internal Designations
  - i. Temporary Deficiency
    1. Assignment
      - a. Student is assigned a grade of one 'X' on a course/ clerkship; or
      - b. Student is assigned when they fail an exam that forms part of a course/clerkship
    2. Removal
      - a. Student is assigned a passing grade in replacement of an 'X,' or
      - b. Student passes an examination that formed part of a course/clerkship
  - ii. Academic Concern
    1. Assignment
      - a. Student fails an entire course/clerkship; or
      - b. Student fails any examination administered outside a course/clerkship and which is formative of their graduation requirements; or
      - c. Student is assigned more than one 'X' across multiple courses/clerkships in a semester
      - d. Student is referred to the Professionalism Committee
    2. Removal
      - a. Student remediates academic deficiencies; or
      - b. Student is cleared by the Professionalism Committee
  - iii. Academic Warning
    1. Assignment
      - a. Student is referred to the MSASC by the Professionalism Committee; or
      - b. Student fails multiple courses/clerkships
      - c. Student maintains one or more grades of 'X' for more than one academic year
    2. Removal

- a. As deemed acceptable by the MSASC; or
  - b. Student addresses grades of 'X'
3. Additional Conditions
- a. Where deemed appropriate by the MSASC, a student may be required to cease participation in extracurricular activities or committees.
  - b. Where deemed appropriate by and prescribed by the associate dean of undergraduate medical education, a student may need to attend regular meetings with an academic counselor/advisor.

## Academic Workload and Duty Hour Policy Scope

Medical student workloads must support students' learning while maintaining an appropriate level of engagement with the learning environment. The specific details of these expectations will vary somewhat depending on the phase of the educational program, clinical specialty or rotation, but must take into account the impact of fatigue on learning and patient safety, reinforce the fact that duty-hours restrictions, like other compliance requirements for physicians, are consistent with the necessity of meeting professional standards and ensure balance between educational priorities, service needs of the clinical setting and the students' personal wellness. The duty-hour restrictions on students during clinical clerkships and courses are modeled after the American Council on Graduate Medical Education (ACGME) guidelines for residents.

### Policy

Course and Clerkship Directors are expected to plan and manage courses, including all scheduled activities and expected independent work, within the academic workload and duty-hour parameters approved by the Dell Medical School's Undergraduate Medical Education Curriculum (UMEC) Committee. It is the responsibility, as a part of professionalism, for the student to abide by medical school requirements regarding duty-hour restrictions. Violations of the Academic Workload and Duty-Hour Policy should be reported to the Office of Medical Education.

### Preclerkship Curriculum (MS1)

The preclinical courses are organized into module blocks of varying lengths, using various teaching and learning formats. The preclinical curriculum includes block and longitudinal courses that have scheduled activities and learning events.

#### Workload Limits

- Maximum of 20 hours of required scheduled activities per week
- Approximately 2 hours of assigned preparation materials per each hour of required scheduled activities averaged over the course of a week.
- Students in good standing may take student enrichment electives, which will not count towards required activities or duty-hour limits.

For all required content, no matter the venue (lecture, case discussions, small group discussions and exams), a scheduled hour is logged as a formal instruction hour.

The total workload for an average student in the MS1 preclinical year must be kept to a maximum of 60 hours per week. This should provide time for the student's personal wellness and social engagement.

## Clinical Clerkships and Clinical Selectives (MS2 and MS4)

Clinical clerkships and rotations vary in length. Students are assigned to various clinical sites and work under the supervision of designated faculty and residents. During clinical clerkships and courses, medical students are expected to participate in all required clinical and didactic activities. Examples of such activities include: direct patient care, patient rounds, patient documentation, case conferences and interactive lectures. Students are expected to assume increasing levels of responsibility and accountability for healthcare delivery, as appropriate under the supervision of faculty and residents. The amount of time needed for a student to adequately meet his or her responsibilities varies depending on rotation, and can include overnight call.

Duty-hour expectations include all required activities in the clinical years; therefore, if a student has clerkship duties and additional expectations from a longitudinal course, the hours are added cumulatively and in total must remain within the duty-hour limits.

MS2 and MS4 students are expected to abide by the following duty-hour limits (modeled after ACGME guidelines for residents):

- Must be limited to 80 duty hours per week.
- Must be scheduled for in-house call no more frequently than every third night, when averaged over a four-week period.
- Must be limited to a maximum of 24 hours of continuous duty in the clinical setting and up to four hours of additional time may be used for activities related to patient safety, such as providing effective transitions of care, and/or education
- Must not be assigned additional clinical responsibilities following 24 hours of continuous in-house clinical duty.
- Should have 8 hours free of clinical duty between shifts. They must have at least 14 hours free of clinical duty after 24 hours of in-house clinical duty.

Students should report duty-hour violations to the Clerkship Director or Coordinator.

The Office of Medical Education will continuously monitor violations to the Academic Workload and Duty-Hour Policy and will alert the clerkship director, or other departmental leadership, and the Undergraduate Medical Education Curriculum Healthcare Delivery Subcommittee of any violation during a student's MS2 and MS4 years.

### Non-clinical Courses (MS3)

The courses scheduled in the Innovation, Leadership and Discovery phase of the curriculum are highly individualized and variable based on a student's customized plan of study. On average, a student should not be expected to have a total workload of greater than 60 duty hours per week.

## Educational Accommodations Policy & Procedures

### Educational Accommodations Policy

Dell Medical School follows the policies of the University of Texas at Austin <https://diversity.utexas.edu/disability/using-accommodations/>.

Students requesting only written exam accommodations can discuss those accommodations with Student Affairs at the beginning of the semester. Student Affairs will alert the Course Directors and the Curriculum Office.

Any other accommodations must be discussed with the Course or Clerkship Directors and appropriate instructors in compliance with the policies of the University of Texas at Austin.

## Dell Med Accommodations Procedures

### Students

- a. General steps for using accommodations at UT are here <https://diversity.utexas.edu/disability/using-accommodations/>.
- b. Students should submit documentation of a disability and register with Disability and Access (D&A) in order to receive academic accommodations. While there is no deadline to register with D&A, students are encouraged to reach out to D&A well in advance of their need for accommodations. Instructions for how to register are here <https://diversity.utexas.edu/disability/how-to-register-with-ssd/>.
- c. Students are required to submit a request for a current accommodation letter each semester in which they are requesting accommodations. In an effort to access accommodations for the duration of the semester, it is recommended that students request accommodation letters in June for their summer and fall enrollment and again in late December for access to accommodations in the spring semester. (Dell Medical School operates in two 6-month semesters each year.)
- d. Upon receipt of the accommodation letter, students should contact the Office of Student Affairs to schedule a meeting with the Associate Dean. Students requesting **only** written exam accommodations can discuss those accommodations with the Office of Student Affairs at the beginning of the semester. Student Affairs will alert the Course Directors and the Curriculum Office.
- e. Any other accommodations must be discussed with the Course or Clerkship Directors and appropriate instructors in compliance with the policies of the University of Texas at Austin.
- f. If there are questions or concerns about how approved accommodations are implemented, students should contact their assigned Access Coordinator (AC) within the D&A Office.
- g. Failure to submit accommodation letters in a timely manner may result in a delay in the implementation of those accommodations. To ensure that there is sufficient space and staff to proctor exams, students should provide at least 10 business days' notice for testing accommodations on NBME Shelf Exams, Observed Structured Clinical Examinations (OSCE's), and Lab Practical Exams.

### Disability and Access (D&A)

- a. Documentation of a disability should be submitted to D&A for review. Documentation guidelines are here <https://diversity.utexas.edu/disability/documentation-guidelines/>. Accommodations are determined on a case-by-case basis through an interactive process with D&A staff during the intake appointment. More information about the intake appointment can be found here <https://diversity.utexas.edu/disability/intake/>. Accommodations cannot interfere with essential program requirements and are contingent upon specific learning objectives and essential requirements of the course.
- b. Submitted requests for accommodation letters are processed within 3-5 business days. Students and staff from Dell Medical School's Office of Student Affairs are notified via email that an accommodation letter has been processed and is available in the D&A Online Portals.
- c. Questions and concerns about how accommodations are implemented within the Dell Medical School should be directed to the student's assigned AC.

Dell Medical School Office of Student Affairs

- a. Upon receipt of an accommodation letter, Student Affairs staff will notify Course Directors and Curriculum Office and meet with CD(s) and student, as needed, to discuss the application of the accommodations in various settings (e.g. LGI, PILLARS, LAB, DOCS, Clinical experiences, OSCE's, longitudinal courses.)
- b. Meeting with the CD is not required if the student does not wish to utilize accommodations in a particular course.
- c. Accommodations are not retroactive and will only be provided after notifying the course/clerkship director.

### Course Directors (CD)

- a. Meet with student and the Office of Student Affairs staff, as needed, to discuss the implementation of accommodations. Course expectations and requirements should be reviewed to determine appropriate accommodations in the specific course setting. (This discussion may be completed via email if there are no issues that require discussion.)
- b. Provide accommodations in accordance with the letter from D&A. The CD should not provide accommodations outside the scope of those listed in the accommodation letter. If the student needs to request changes to their accommodations, they should contact their assigned D&A AC.

## Appeal of Grade Policy

### Scope

Grades are generated by the course/clerkship director. Should there be a disagreement about a grade assignment in a course or clerkship, the student may appeal the assigned grade.

### Policy

The University of Texas at Austin Dell Medical School students have the ability to timely appeal all grades and evaluations and to have that appeal resolved in a timely manner.

The procedures for a grade appeal are:

- a. A student must file a written appeal with the course or clerkship director within five business days from the date the grade was posted. In the written appeal, the student must describe in detail the basis for the appeal and propose a resolution. Without unanticipated extenuating circumstances affecting the testing experience, performance on a written exam will not be considered as a part of an appeal.
- b. The course or clerkship director will review the written appeal. The course or clerkship director will provide the student a written decision within five business days of receipt of the student's written appeal.
- c. Should the student be unsatisfied with that decision, the student may file a written secondary appeal to UT Austin Dell Medical School Associate Dean of Undergraduate Medical Education within five business days from receipt of the course or clerkship director's written decision. The student's secondary appeal must include a justification statement articulating why the appeal is warranted, along with all documentation provided to the course or clerkship director in conjunction with the initial appeal. Upon review of the student's record and appeal portfolio, and within five business days from receipt of the student's secondary appeal, the UT Austin Dell Medical School Associate Dean for Undergraduate Medical Education will provide a written decision to the student and course or clerkship director. The UT Austin Dell Medical School Associate Dean for Undergraduate Medical Education may:

- i. Allow the course or clerkship director decision to stand;
- ii. Modify the course or clerkship director's decision; or
- iii. Make an alternate decision.

Any unsatisfactory grade will be forwarded to the Medical Student Academic Standing Committee for administrative action, if needed.

## Attendance and Absence Policy

### Scope

Becoming a competent physician requires your physical presence. Attendance contributes to a student's education and professional identity formation. We expect our students to actively participate in the curriculum and to recognize that certain activities require their presence and active engagement in order for teamwork, meaningful learning, assessment, and feedback to take place. Moreover, patients will increasingly rely on you, and your clinical skills, as you progress through medical school. Our strict attendance policy is meant to prepare you for this responsibility and the rigors of practicing clinical medicine as well as foster professional identity formation.

### Policy

Attendance is required for many educational activities and strongly encouraged for all others. Course/Clerkship syllabi will clearly outline the attendance expectations for educational activities.

Attendance expectations are in accordance with duty hour guidelines. Note that some clinical, laboratory, and other experiences are impossible to make-up without repeating the entire course and/or academic year.

#### What is an acceptable absence?

- An acceptable absence generally includes but is not limited to:
- Acute illness (related to physical and mental health; may require a doctor note.)
- Death in the family
- Presenting original research work (as presenting author) at an academic conference
- Religious holidays
- Residency interviews
- Preventive/Routine Care Absences: absences of less than ½ a day to address preventive or recurring health care issues, when unable to schedule during non-academic activities

Acceptable absences should be arranged 4 weeks in advance of the absence and with permission from the Course/Clerkship/Elective Director (or as soon as practical if related to acute illness or emergency). Students are expected to complete the Absence Request Form (found on the Student Wiki, Canvas, and all syllabi). In the event of any absences, your course/clerkship/elective director will determine on a case-by-case basis if the student will be assigned further work, a makeup assignment, or a combination of both.

### MS1: Essentials

**Educational Activity:** Small group sessions (e.g. PILLARS, IPE, DOCS, laboratories, etc.)

**Attendance Expectation:** Required

**Rationale:** Professional responsibility to your small group. Active learning requires participation for maximal benefit. Content will not be covered elsewhere; participation is required for maximal benefit. Clinical skills develop through guided practice. Clinical practice cannot be replicated passively. Achieving inter-professional competencies require interaction with colleagues.

**Educational Activity:** Large group interactive sessions

**Attendance Expectation:** Strongly encouraged

**Rationale:** Interaction requires participation for maximal benefit.

### MS2 & MS4: Delivery & Exploration

**Educational Activity:** Clinical experiences (e.g. core clerkships and electives)

**Attendance Expectation:** Required

**Rationale:** Clinical application and practice cannot be replicated with passive activities. Professional identity formation requires working with role models and participating in patient care responsibilities.

**Educational Activity:** Intercessions

**Attendance Expectation:** Required

**Rationale:** Opportunity for bidirectional communication of upcoming events; Location for core teaching (longitudinal courses); Time to prep for upcoming deadlines.

Illness of two days or less (one day in a two or four-week clerkship or elective) will not require make-up work (unless it conflicts with curriculum required to pass the clerkship such as a shelf exam). Acceptable absences for any other reason (or for illness over two days; one day in a two/four-week clerkship or elective) will require further clinical work, a make-up assignment, or a combination of both, to be determined by the clerkship director.

### MS3: Growth

**Educational Activity:** MS3 Year

**Attendance Expectation:** Varies

**Rationale:** Dependent on the educational path of the student. Will be agreed upon prior to beginning MS3 year.

**Educational Activity:** Intercessions

**Attendance Expectation:** Required

**Rationale:** Opportunity for bidirectional communication of upcoming events; Location for core teaching (longitudinal courses); Time to prep for upcoming deadlines.

Make-up work for all missed intercessions is required.

### Other Graduation Requirements

**Educational Activities:** Milestone 0, CPX, DOCS Transition Week, & Milestone 1

**Attendance Expectation:** Required

**Rationale:** Successful participation provides assessment data or skill development needed to proceed to the next phase of education.

If unable to participate as scheduled, make-up work will be required.

#### What is the policy for getting an acceptable absence?

- Medical/Acute Illness: Physician and therapy appointments are acceptable. Every effort should be made to schedule routine or non-emergent care outside of required curriculum. A signed medical note may be required.
- University Holidays: Students are not expected to be in attendance on official University Holidays unless on clinical rotations. While on clinical rotations, students are to follow the schedule of the clinical site they are assigned. Exceptions are at the discretion of the clerkship/rotation leadership.
- Religious Holidays: A student who misses classes or other required activities, including examinations, for the observance of a religious holiday should inform the instructor no less than 4 weeks in advance of the absence as possible, so that arrangements can be made to complete an assignment within a reasonable time after the absence.
- Conference attendance: Students may have opportunities to attend conferences for enrichment or to present scholarship/research. If



a student is the primary presenter of a poster or abstract, they may be excused from required activities for the day of the presentation. Students may not attend a conference for enrichment only. The absence must be requested no less than 4 weeks before the presentation date, and must include an acceptance letter from the national organization/conference.

- Residency Interviews: Every effort should be made to schedule required curriculum outside of residency interview time. If you have a residency program interview, the name and contact information of the residency program must be included with the absence request.
- Jury Duty: Medical students may frequently be exempted from Jury Duty, due to clinical expectations. If not, the school will make every effort to provide make-up opportunities for missed experiences.
- Military Service: (From the General Information Catalog) "In accordance with section 51.9111 of the Texas Education Code, a student is acceptable from attending classes or engaging in other required activities, including exams, if he or she is called to active military service of a reasonably brief duration. The maximum time for which the student may be acceptable has been defined by the Texas Higher Education Coordinating Board as "no more than 25 percent of the total number of class meetings or the contact hour equivalent (not including the final examination period) for the specific course or courses in which the student is currently enrolled at the beginning of the period of active military service." The student will be allowed a reasonable time after the absence to complete assignments and take exams. Policies affecting students who withdraw from the University for military service are given in the Withdrawal section.
- Unforeseeable events: Students who miss educational activities for unforeseeable events such as illness, family or other emergency must notify the course director and the Associate Dean for Student Affairs. This may require additional documentation. Documentation of illness will not require a specific diagnosis.

#### **Weather or Unsafe Conditions**

When weather conditions lead to closure of UT Austin or Austin ISD some clinical locations may also be closed but others may not be closed. Students should consider their personal safety in traveling to an educational activity or if the activity can be appropriately managed with a virtual option. Unlike classroom-based activities on an undergraduate or K-12 campus, medical education can be challenging to reschedule and/or help may be appreciated in the clinical environment. Students may opt out of participation if their personal situation requires it without penalty but appropriate communication with affected parties is required. Course/ clerkship/elective directors will work with students to review or provide missed material.

#### **Tardiness**

Excessive Tardiness may be considered as a conduct matter by the Professional Conduct Committee and/or may be reflected in final assessment.

#### **What are the possible outcomes of unacceptable absences?**

- Unacceptable absences will be taken into consideration when assessing a student's professionalism and it may impact the final grade.
- Multiple unacceptable absences may result in a report to the Professional Conduct Committee, a final failing grade for the course/ clerkship/elective and the need to repeat the course/clerkship/ rotation.

## **Direct Observation of Core Clinical Skills Policy**

### **Scope**

In order to assess students' acquisition of core clinical skills, behaviors, and attitudes specified in the DMS core competencies, faculty members will directly observe each student performing a history and physical examination in the clinical setting.

### **Policy**

Clerkship directors will be responsible for ensuring that every medical student in their required clerkship is directly observed by a faculty member performing a history and a physical examination on a patient appropriate to the clerkship in a clinical setting. The observation must include documentation of results and be signed by both the medical student and faculty member. Signed documentation will be collected by clerkship coordinators and reported to the Office of Medical Education no later than 4 weeks after the conclusion of each required clerkship rotation.

### **Distribution**

#### **Clinical Faculty**

The Office of the Executive Vice Dean for Academics will post the policy on the Faculty Affairs webpage, send annual reminders to all established clinical faculty at the start of each academic year, and provide a copy to all new clinical faculty when hired.

#### **Medical Students**

The Office of Medical Education (OME) will require that the policy be included in the syllabus for each clerkship and DMS clinical elective. OME will also ensure the policy is posted on the Student Affairs website.

## **Electives and Away Clinical Rotation Policy**

### **Scope**

Elective opportunities are intended to allow students the opportunity to explore their particular career interests.

### **Policy**

The University of Texas at Austin Dell Medical School curriculum encompasses twenty (20) weeks of required electives that must be taken during the MS3 or MS4 years. No more than eight (8) weeks of required electives may be taken elsewhere. Students are strongly encouraged to consult with faculty and their Academic Advisors and use electives to both explore potential career choices and to broaden their medical expertise. The student's Academic Advisor, or his or her designee, must approve a student's electives prior to beginning the experience.

Additionally, all off-campus elective rotations must be approved by the Office of Student Affairs at least one month before the off-campus elective rotation or course begins. Credit will not be given for any off-campus elective rotation or course that has not been approved in advance.

The Office of Student Affairs has a centralized system to review the proposed off-campus elective prior to approval, to ensure the return of a performance assessment of the student while on the off-campus elective, and to retain an evaluation of the off-campus elective by the student. The decision to approve an off-campus elective will take into account the following information and any other information deemed appropriate by the dean's office:



- Potential risks to the health and safety of patients, students, and the community
- The availability of emergency care
- The possibility of natural disasters, political instability, and exposure to disease
- The need for additional preparation prior to, support during, and follow-up after the elective
- The level and quality of supervision
- Any potential challenges to the code of medical ethics adopted by the home school

Paperwork that must be submitted to the Office of Student Affairs prior to approval of an off-campus elective rotation includes: the "Course Approval" form, a written letter or email of acceptance from the physician preceptor with the start and end dates of the course/rotation, and a course description of learning objectives and responsibilities during the rotation. Forms must include a complete address and telephone number for the off campus location and residence address for the student while at the off-campus site. Forms will not be approved after the rotation has already begun.

## Graduation Requirements

### Scope

The Medical Student Academic Standing (MSAS) Committee is charged with reviewing the academic progress and professional development of each student during all components of the four-year medical education program and to recommend to the Faculty Senate for graduation only those students who have satisfactorily completed all graduation requirements and demonstrated consistent professional conduct appropriate for a physician.

### Policy

There will be a single standard for graduation, regardless of which option students select for year 3, Innovation, Leadership, and Discovery. Graduation requirements are set by the Undergraduate Medical Education Committee. Students will enter under a single standard with any changes to graduation requirements being made in time for notification of new matriculants prior to the start of their first academic year. Graduation requirement must be completed within six (6) years of matriculation. Rare exceptions to the six-year rule must be approved by the MSAS committee with the support of the academic deans.

## Graduation Requirements

- Successful passage of each year of the four-year curriculum as defined in the Student Academic Performance and Grading Policy and Academic Standing Policy.
  - Orientation
  - All MS1 required courses
  - All MS2 required clerkships (IM, Surg, Pedi, WH, Neuro, Psych, EM) and Milestone 0
  - Successful completion of ILD Course
  - Successful completion of all longitudinal courses and longitudinal clerkships
  - Other requirements (typically completed in the MS4 year, but can be done prior to the MS4 year)
    - Acting Internship (2 x 4 weeks) = 8 weeks \*one designated as Core AI, both completed at Dell Med
    - Critical Care = 4 weeks
    - Geri/Palliative = 2 weeks
    - Electives = 20 weeks

- Milestone 1 = 1 week
- For a Total of 35 weeks.

Electives counting toward graduation requirements:

- No more than 8 weeks of away electives
- No more than 8 weeks may be done in 2-week electives
- No more than 4 weeks may be professional development

2. Complete all progress testing: CBSE required for MS1 student in June and one CBSE voucher provided for student to complete either USMLE Step 1 or Step 2 exam to be used at student's discretion.

3. Passing scores with no more than three failing grades on any combination of the required licensure exams USMLE Step 1 and Step 2 CK as defined in the United States Medical Licensing Examination (USMLE) Policy.

4. A passing overall score on the comprehensive Clinical Performance Examination (CPEX).

5. Demonstrated professionalism as defined in the Medical Student Conduct and Discipline Policy.

## Distribution

The policy will be posted on the Student Affairs website and reviewed annually with the Medical Student Academic Standing Committee. Matriculating students will receive the policy prior to beginning the first course. Any student experiencing professionalism problems will be reminded as part of the remediation process.

## Leave of Absence, Withdrawal, and Dismissal Policy

### Scope

Provide an administrative outline for changes to status for students of the School.

### Policy

The School and Medical Students will adhere to administrative protocol for changes in enrollment status which may be temporary or permanent and school or student initiated. Statuses will be reflected on official academic records where applicable.

- Status Definitions
  - Enrolled
 

A student is registered and paid within a semester. Enrollment in a semester procedurally generates a calculation of an academic standing for the student.
  - Leave of Absence
 

A student may voluntarily or involuntarily enter a temporary separation from the School. A student will not be enrolled in courses and will not have an academic standing generated for their semesters of their absence.
  - Withdrawn
 

A student permanently exits their program of study.
  - Dismissal
 

A student is permanently removed from their program of study.
- Leave of Absence Standards
  - Leave Types
    - Personal
 

The student faces medical, familial, or other personal circumstances that inhibit their immediate progression in the program.

2. Enrichment
 

The student elects a course of study that is outside the parameters of their program completion, opts for a development of their research interests, and/or vies an extracurricular opportunity applicable to their studies.
  3. Academic
 

The student exhibits persistent academic challenges and has not successfully remediated their deficiencies. A student shall address academic circumstances and their continuity in the program.
- ii. Initiation of Leave
    1. Student Initiation
      1. A student will visit with the associate dean for student affairs and be counseled on the implications of a leave of absence. The student will initiate documentation to enter the leave. A student will select a corresponding purpose of the leave as defined in this policy.
      2. The documentation of the leave will be forwarded through pertinent departments of the School which will each append stipulations for reinstatement.
      3. Once the documentation has been completed, the form will be forwarded to the Office of the University Registrar for execution and notation on the student's record. A copy of the finalized documentation will be sent to the student within one month of the leave's start date.
    2. School Initiation
      1. The School may initiate a leave of absence for the following circumstances:
        - a. A student is unable to request leave for themselves
        - b. A student is deemed as needing a leave of absence for medical reasons
        - c. A student is not able to meet technical standards
        - d. A student is deemed as needing a leave of absence for academic deficiency
        - e. As consequence and sanction of not upholding professional conduct expectations
      2. An agent of the school will initiate documentation for the student having been necessitated for placement on a leave. The intent shall be presented before the Medical Student Academic Standing Committee (MSASC) for final approval.
      3. A student shall have the opportunity to appear before the MSASC ahead of the MSASC's vote.
      4. The MSASC may exercise latitude to circumvent a student's opportunity to respond to the proposed leave of absence only where a student is deemed unable of responding to the initiated leave.
  - iii. Extensions of Leave
    1. A leave of absence and/or any extension may be granted for a minimum of one semester but shall not exceed one academic year.
    2. Leave extensions must be approved by the MSASC.
    3. A student forfeits their consideration to return from leave and, through virtue of their agreement to take leave, withdraws from the School when the student fails to:
      - a. Remain in contact throughout their leave (having three unreturned phone calls, three unanswered email messages, and one unanswered certified letter)
      - b. Submit a Change of Enrollment Status form indicating their return sixty days ahead of their most recently approved anticipated return date
- c. Request an extension of their leave within sixty days of their most recently approved anticipated return date.
- iv. Reinstatement
    1. Documentation signaling requesting a reinstatement must be submitted to the Office of Student Affairs no later than sixty days before the requested return date.
    2. All conditions for reinstatement as stipulated in the initiation documentation must be fulfilled prior to the reinstatement date.
    3. The conditions for reinstatement may be modified by the MSASC if the school learns of significant additional concerns while the student is on leave.
    4. Students that have entered or have been placed on leave which related to a medical circumstance are be required to furnish written clearance from their attending health professional for reinstatement. This clearance will ensure their full mental and physical capacity to safely attend patients, adhere with technical standards, and progress in the curriculum without inflicting any personal detriment.
- III. Withdrawal
 

A student may withdraw from the School by submitting specified documentation which indicates such and their acceptance of the following:

    - i. The permanency of this action and its reflection on official academic records
    - ii. Fully forfeiting eligibility or consideration for readmission into the School
  - IV. Dismissal
 

A student may be dismissed from the School as a consequence or result of unacceptable academic performance or professional misconduct. This permanent and involuntary separation from the School will be enacted by the MSASC and will render the student ineligible for readmission to their current degree program.

    - i. A student that is being considered for dismissal will have the opportunity to appear before the MSASC ahead of the final decision to be dismissed.
    - ii. Once a decision has been finalized, official documentation will be completed by the Office of Student Affairs and forwarded to the Office of the University Registrar for execution.
  - V. Modified Academic Load
 

The associate dean for medical education and the associate dean for student affairs may permit a student to continue enrollment on a modified academic load. In this modification, a student is temporarily excused from some curricular expectations. The student will adhere to a plan of action which has been formulated jointly by the aforementioned deans. A student will be enrolled in a normal academic load when the approved plan is executed and the temporarily assigned measured are completed.

## Medical Student Supervision Policy

### Purpose & Scope

This policy applies to individuals who supervise medical students across all courses and clerkships at all training sites. The purpose of this policy is to ensure that the school adheres to expectations that protect patients and ensure student safety, and to describe the mandatory training, teaching, and assessment skills required to be a medical student supervisor.

Appropriate supervision ensures that medical students are provided with opportunities to learn that are progressive and commensurate with the student's level of training and in accordance with the supervisor's level of training and specialization.

## Supervisors in the Clinical Setting

A supervisor has the capacity to allow a learner to receive progressive responsibility for patient care. Examples of possible supervisors include:

- Attending Physician within a Dell Medical School training sites both inpatient and ambulatory
- Resident Physician, Intern, or Fellow in a Graduate Medical Education (GME) program within DMS
- Allied health professionals, such as Nurses, Physician Assistants, Nurse Practitioners, Social Workers, etc. where appropriate to the clinical activity

## Levels of Supervision - Direct vs. Indirect

- a. Observer – The student observes and does not perform any tasks
- b. Perform Under Direct Supervision - The student performs a task with the supervisor physically present in the same location as the student; able to provide direct instruction/feedback to the student; able to take over patient care duties if and when necessary
- c. Perform Under Indirect, but Immediately Available Supervision - The supervisor may not be physically present with the student; however, they are on-duty, immediately available on site, and can be called to the physical location of the student if and when necessary.
- d. The limitations for the requirements of proximity and timing of supervision, as well as the specific tasks that a student may perform without direct supervision depends on various factors, including
  - the level of training (i.e. year in medical school);
  - the skill and experience of the student within the scope of the clinical care situation;
  - the familiarity of the supervisor with the student's skills;
  - the acuity of the situation and the degree of risk to the patient.

## Clinical Supervision - General Guidelines for non-procedural supervision

- In the clinical setting medical students are primarily under indirect supervision. It should be noted that in any instance, the supervisor should always be available.
- The course/clerkship/site director will determine who can supervise the medical student, such as fellows, residents, and/or appropriately credentialed allied healthcare providers.
- All medical students, during the course of their educational curriculum, may conduct medical interviews and perform physical examinations on patients with their consent.
- The supervisor will review all of the medical student's documentation in a patient's medical record and provide correction to the record and feedback to the student for educational purposes.
- Clinical decisions and orders are never formulated or enacted by medical students without a supervisor's input. Student documentation of the components of evaluation and management within a patient's record must be verified by the supervisor before they are considered a part of the patient's record.

The above guidelines are applicable to all clinical experiences where medical students participate.

## Procedure Supervision - General Guidelines

- Medical students may be assigned to provide patient care services for medical procedures, under direct supervision.
- It is required that a medical student be appropriately directly supervised during all clinical procedures in which they are involved;

including, but not limited to bedside, emergency department, and/or operating room procedures.

- Medical students are expected to assume developmentally appropriate, graduated levels of involvement/participation in procedures during their training. Procedures that medical students should be proficient in when completing medical school, defined by the Association of American Medical Colleges (AAMC) Entrustable Professional Activities (EPAs) for entering residency, include venipuncture and inserting an intravenous line. Fourth year students may develop competency in these technical skills under direct supervision such that their clinical supervisor may decide to allow a student to perform these minor procedures as well as simple suturing under Indirect Supervision with Direct Supervision immediately available and with the consent of the patient. These are the only procedures that may proceed to indirect supervision at the discretion of the supervising faculty member who is ultimately responsible for the care of the patient.
- The degree of supervision needed will take into account: the complexity of the procedure, the stability of the patient, potential for adverse effects, and the demonstrated competence, and responsibility of each student in order to ensure the safety and comfort of the patient and the student.
- In all cases, the supervisor must have privilege or authorization to perform the procedure in which they are supervising.

## How DMS Monitors Clinical and Procedural Supervision

Any students with concerns about the adequacy and availability of supervision they are receiving are encouraged to address their concerns as soon as possible. Students are instructed to contact their Site and/or Course or Clerkship Director/Coordinator regarding any immediate concerns with supervision. Additionally, reports can be made via anonymous "just in Time" feedback through Canvas, the office of Student affairs or the UME office within the Department of Medical Education.

Students report on the adequacy and availability of supervision during mid-rotation check-in meetings and via end of course/clerkship evaluations and questionnaires. Course and Clerkship Directors review student feedback in evaluations, as well as during mid-rotation feedback, and provide prompt follow-up to address any supervision concerns that may arise.

The Health Care Delivery Curriculum Subcommittee and the Office of Medical Education reviews data on an ongoing basis to identify any ongoing trends of supervision concerns being reported.

## Mid-Course/Clerkship Required Formative Feedback Policy

### Scope

In order to allow sufficient time for improvement, each medical student is provided with feedback by a faculty member by the mid-point of courses and clerkships of four weeks' duration or longer.

### Policy

Required course and clerkship directors are responsible for developing a formal process to provide each student with formative feedback that includes a chance for individual discussion with a supervising faculty member about their performance. Course and clerkship coordinators are responsible for collecting signed documentation of completion of mid-point feedback sessions for each student while the course/clerkship is still in progress. Signed documentation of completion of mid-point feedback sessions will

be submitted to the Office of Medical Education at the conclusion of each course/clerkship rotation.

## Distribution

### *Clinical Faculty*

The Office of the Executive Vice Dean for Academics will post the policy on the Faculty Affairs webpage, send annual reminders to all established clinical faculty at the start of each academic year, and provide a copy to all new clinical faculty when hired.

### *Residents & Fellows*

The Graduate Medical Education Office will post the policy on the New Innovations website, distribute the policy at new resident and fellow orientation, and be responsible for an annual reminder sent to all continuing residents and fellows.

### *Medical Students*

The Office of Medical Education (OME) will require that the policy be included in the syllabus for each clerkship and DMS clinical elective. OME will also ensure the policy is posted on the Student Affairs website.

## Policy on Student Evaluation of Courses and Teachers

### Scope

The evaluation by students of the curriculum and teachers provides important information for continuous quality improvement.

### Policy

Dell Medical School students are required to evaluate each of the required courses, core clerkships, and enrolled clinical electives. In addition to evaluation of a curricular component, students are also required to evaluate teachers with whom they have spent a significant amount of time, e.g., small group discussion leaders, lab instructors, attendings, residents.

Requiring participation in the evaluation process as a professional responsibility is helpful in preparing future physicians to value their role in the continuous process of improvement of health care delivery and patient care. After a student receives one warning, failure to complete required evaluations will be addressed as a professionalism problem following the procedures of the Medical Student Professionalism Policy.

### Distribution

The policy will be distributed to students during orientation with regular reminders included in the email announcing the opening of all course and teacher evaluation surveys.

## Promotion Policy

### Scope

The Medical Student Academic Standing Committee (MSASC) is charged with reviewing the academic progress and professional development of each student during all components of the four-year medical education program and to promote from one phase of the curriculum to the next, only those students who have satisfactorily completed all promotion requirements and demonstrated consistent professional conduct appropriate for a physician.

### Policy

In order to progress through the curriculum toward graduation, each student must meet the requirements for promotion from each phase of the curriculum.

#### a. Promotion Requirements

##### i. Promotion from MS1 to MS2

1. Successful completion with passing grade of all block courses
2. Successful completion with passing grade of DOCS, Leadership and IPE
3. Successful completion with passing grade of Milestone 0
4. Completion of CBSE (or CBSSA)
5. Good Professional Standing

##### ii. Promotion from MS2 to MS3

1. Successful completion with passing grade of all clerkships
2. Successful completion with passing grade of DOCS, Leadership and IPE
3. Good Professional Standing

##### iii. Promotion from MS3 to MS4

1. Successful completion with passing grade of the ILD block assignment (some programs have known elements extending into the MS4 year- this must be monitored by the ILD coordinator and reported out at each MSASC meeting.)
2. Successful completion with passing grade of DOCS, Leadership and IPE
3. Good Professional Standing

#### b. Provisional Promotion

The MSASC may "provisionally promote" a student missing one or more aspects of the promotion criteria if there is a clear, timely, and reasonable plan to complete those components within a prescribed time frame.

#### c. USMLE

Students must take Step 1 and Step 2 prior to December 31 of the MS-4 year.

Failure to obtain passing grades in coursework or meet promotion requirements may result in academic actions at the discretion of the MSASC. Academic actions may include, but are not limited to: additional remediation, extended time for completion of requirements, repeating portions of the curriculum, leave of absence, or dismissal. The decisions of the MSASC will be enforced by the Administration, unless the student chooses to appeal. A student may appeal a decision of the MSASC as detailed in the Academic Grievance Policy

## Semester Credit Hours Policy

The institution will have policies and procedures for determining the credit hours awarded for courses and programs that conform to commonly accepted practices in higher education and to Commission policy. (*Definition of Credit Hours*)

### Narrative

The University of Texas at Austin Dell Medical School (DMS) adheres to the following definition of the credit hour: a credit hour is an amount of work represented in intended learning outcomes and verified by evidence of student achievement that is an institutionally established equivalency that reasonably approximates not less than—

(1) One hour of classroom or direct faculty instruction and a minimum of two hours of out of class student work each week for approximately fifteen weeks for one semester or trimester hour of credit, or ten to twelve weeks for one quarter hour of credit, or the equivalent amount of work over a different amount of time; or

(2) At least an equivalent amount of work as required in paragraph (1) of this definition for other academic activities as established by the institution including laboratory work, internships, practica,



studio work, and other academic work leading to the award of credit hours." (1)

(3) When calculating the weeks – guideline used was if classes are held for at least 50% of the week, it counts as a full-time week.

(4) The minimum attribution of credit per semester is one hour.

## Policy

DMS will indirectly employ the credit hour as the measure of educational credit a student may receive for reporting or other purposes when necessary. Distance education and hybrid courses will use the same credit hour requirements as face-to-face courses.

The use of the credit hour will follow the rules, regulations, and guidelines as specified by the Southern Association of Colleges and Schools Commission on Colleges, the federal government, the Texas Administrative Code, and the Liaison Committee on Medical Education all as specified in the references section of this policy. <sup>(2) (3) (4) (5)</sup>

The Dell Medical School does not use the credit hour as a measure for which students receive credit or progress. However, the weeks of instruction will be converted to credit hours using the following methodology.

Exception: The Liaison Committee on Medical Education (LCME), a specialized national accrediting body for all allopathic medical schools, will accredit the Dell Medical School curriculum. The LCME requires a minimum of 130 weeks of instruction for the MD degree <sup>(5)</sup>. The DMS is 180 weeks over approximately 4 years. The 180 full-time weeks of credit are equivalent to 175-195 credit hours using the following:

MS1 Courses contact hours include but are not limited to lectures, laboratory, small group discussions, case-based learning activities and problem solving. **Average contact time per week is approximately 15 - 18 hours so one week of full-time instruction in the DMS curriculum is equivalent to one (1) credit hour.** In the clinical experiences of the MS2, MS3, and MS 4 years actual contact time is greater. Because the educational approach is fundamentally different, with less emphasis on formal didactic instruction and study and greater emphasis on experiential learning, the number of contact hours needed to meet the equation that one full-time week equals one (1) credit hour is increased to between 40-70 contact hours per week. The credit hour equivalents of clinical rotations and electives is 1 hour per week. Students will also complete longitudinal components of the curriculum, which run in tandem with the MS1 – MS4 courses and clerkships. Credit hours are assigned to these courses based on contact hours and are comparable to other courses where the average contact time per week is approximately 15 - 18 hours for one (1) credit hour in non-clinical courses and 40-70 contact hours for one (1) credit hour for clinical courses. See Appendix A

## Sources

(1) Federal Regulation 34 CFR 600.2: "Except as provided in 34 CFR 668.8(k) and (l),

(2) Texas Administrative Code, Title 19, Part 1, Chapter 4, Subchapter A, Rule 4.6

(3) Southern Association of Colleges and Schools Commission on Colleges Credit Hours Policy Statement

(4) Southern Association of Colleges and Schools Commission on Colleges, The Principles of Accreditation, Federal Requirement 4.9, p.40

(5) Functions and Structure of a Medical School: Standards for Accreditation of Medical Education Programs Leading to the M.D. Degree, Copyright May 2012, Liaison Committee on Medical Education, (ED-4), p.7

## Appendix A

### Dell Medical School Credit Hours Equivalent 2022

#### YEAR 1 = 52 Total Credit Hours

- Cells to Populations = 8 Total Credit Hours
- Structure & Function = 12 Total Credit Hours
- Medical Neuroscience = 4 Total Credit Hours
- Foundations of Disease = 7 Total Credit Hours
- Mechanisms of Disease = 15 Total Credit Hours
- Developing Outstanding Clinical Skills (DOCS) = 2 Total Credit Hours
- Interprofessional Health Education (IPE) = 2 Total Credit Hours
- Leadership 1 = 2 Total Credit Hours

#### YEAR 2 = 53 to 57 Total Credit Hours

- Milestone 0 = 1 Total Credit Hour
- Internal Medicine Clerkship = 8 Total Credit Hours
- Neurology Clerkship = 4 Total Credit Hours
- Psychiatry Clerkship = 4 Total Credit Hours
- Women's Health Clerkship = 8 Total Credit Hours
- Pediatrics Clerkship = 8 Total Credit Hours
- Surgery Clerkship = 8 Total Credit Hours
- Emergency Medicine Clerkship = 4 Total Credit Hours
- Optional Clinical Electives (count toward MS4 requirement) = 2-4 Total Credit Hours\*
- Primary Care Family & Community Medicine = 2 Total Credit Hours
- Developing Outstanding Clinical Skills = 2 Total Credit Hours
- Interprofessional Health Education = 2 Total Credit Hours
- Leadership 2 = 2 Total Credit Hours

\*Not counted in total hours for Year 2

#### YEAR 3 = 10 to 51 Total Credit Hours

- Innovation, Leadership and Discovery (ILD) = 2 Total Credit Hours
- Interprofessional Health Education = 2 Total Credit Hours
- Developing Outstanding Clinical Skills = 2 Total Credit Hours
- Leadership 3 = 2 Total Credit Hours
- Primary Care Family and Community Medicine = 2 Total Credit Hours

#### Distinctions

- Distinction in Research = 30 Total Credit Hours
- Distinction in Clinical Innovation and Design = 30 Total Credit Hours
- Distinction in Social Entrepreneurship = 30 Total Credit Hours

#### Coordinating Board Approved Dual Masters Degrees\*\*

- Master of Business Administration
- Master of Education
- Master of Public Health\*\*\*
- Master of Science in Health Care Transformation
- Master of Public Affairs
- Master of Science in Engineering
- Master of Arts

\*\*Dual Master Degrees range from a total of 30 to 41 Credit Hours

\*\*\*Dual degree program with other institution



## YEAR 4 = 37 Total Credit Hours

- Acting Internship 1 = 4 Total Credit Hours
- Critical Care = 4 Total Credit Hours
- Acting Internship 2 = 4 Total Credit Hours
- Electives (minimum of 4/maximum of 6 four-week elective blocks; may be taken in MS3 or MS4 year) = 20 Total Credit Hours
- ILIAD (Integrating Leadership, IPE and DOCS) = 2 Total Credit Hours
- Milestone 1 = 1 Total Credit Hour
- Geriatrics/Palliative Care = 2 Total Credit Hours

The credit hour equivalents for the Dell Medical School is as follows:

- Year 1 = 48 full-time weeks
- Year 2 = 49 full-time weeks
- Year 3 = 49 full-time weeks
- Year 4 = 34 full-time weeks
- Total Years 1 through 4 = 152 to 197 Total Credit Hours

## Student Academic Performance and Grading Policy

### Scope

Students at The University of Texas at Austin Dell Medical School are evaluated in multiple ways, each to be outlined in individual course syllabi and as described in other policies. Faculty and staff are responsible for disseminating student evaluation methods in writing to students in the course syllabus prior to the start of each course. Methods of assessment may include: narrative feedback, exams, written/computer-based reviews, participation, Objective Structured Clinical Exams (“OSCEs”), peer review, oral presentations, etc.

### Policy

The Dell Medical School has established committees to oversee the educational program and to monitor academic performance of its medical students. The Undergraduate Medical Education Curriculum Committee (UMEC Committee) is the body that provides central oversight and makes recommendations to the Dell Medical School’s Dean and Executive Vice Dean for Academics regarding the overall design, management and evaluation of a coherent and coordinated curriculum. The Medical Student Academic Standing Committee (“MSASC”) is charged with reviewing the academic progress and professional development of each student during all components of the four-year medical education program and making recommendations to the Dean and Executive Vice Dean for Academics accordingly. The primary responsibility of the MSASC is to recommend for graduation only those candidates who have satisfactorily completed all graduation requirements and demonstrated consistent professional conduct appropriate for a physician.

Each course director will submit a grade no later than 4 weeks after rotation completion, including narrative. All grades are processed through the Office of Medical Education and submitted to DMS Records Office who will transmit to the Registrar’s Office. Upon assigning a non-passing grade, the course director must provide timely written notification to the student. The Associate Dean for Undergraduate Medical Education and the Associate Dean for Student Affairs are to be copied on that notification.

The academic standards for successful completion of the preclinical courses, clerkships and clinical courses are determined by the course directors, clerkship directors and course directors, respectively, each adhering to a grading rubric approved by the UMEC Committee. The

process by which a student may appeal a grade or evaluation received is set forth in the medical school’s Appeal of Grade Policy.

## Grade Definitions

- P (Pass) - Successfully completed all course requirements
- F (Fail) - Did not successfully complete all requirements, no credit given. A failing grade will not be removed from the transcript.
- H (Honors) - Met a specified higher level of performance. Clinical Courses of 4 weeks or longer duration and in the Innovation, Leadership and Discovery Course are the only courses available for the grade of H – Honors.
- PR (Pass After Remediation) - Successfully completed all course requirements but required additional time or testing opportunities beyond those described within the course syllabus
- W (Withdrawal) - Student Withdrew from the University
- X (Temporary) - Temporary delay of grade due to extenuating circumstances approved by the Office of Medical Education. An X will be changed to another grade when student has completed coursework. If the student does not complete the coursework within a designated time period, the grade will be changed to Fail
- Q (Drop) - Student dropped the course: A “Q drop” is recorded on the transcript when the course is dropped after 20% of the workdays in that course have been completed. (a “Delete drop” is not recorded on the transcript)
- I (Incomplete) - Permanently incomplete. An Incomplete will not be removed from the transcript.

For dual-degree courses, the grade submitted by the course director, in accordance with the grading system in use by that school is reported on the transcript.

## Remediation

To remediate a grade of F or I:

The course must be taken again and passed, or a course that meets the same graduation requirement must be taken and passed. The exact structure of a course re-take will be determined by Course/Clerkship Director with approval from the Associate Dean of Undergraduate Medical Education. An Honors grade is not available in a repeated enrollment of that course.

To remediate a grade of X:

The exact structure of the remediation will be determined by Course/Clerkship Director with approval from the Associate Dean of Undergraduate Medical Education. If the X grade is due to failure of any graded component of the course, a grade of Honors is not permitted.

To remediate performance in a non-graded course:

Any graduation requirement that is not a graded course (CBSE, NBME exams, CPX, Professionalism outside a single course, etc.) must be remediated. CBSE must be taken. NBME and CPX exams must be repeated until a passing score is obtained. (See USMLE Policy for details about NBME remediation). Professionalism concerns must be resolved to the satisfaction of the MSASC.

Any student with the need to remediate any graduation requirements may be provisionally promoted at the discretion of the MSASC but may not graduate until it has been remediated to the satisfaction of the MSASC. (See promotion – and graduation policy)

# United States Medical Licensing Examination (USMLE) Policy

## Scope

The United States Medical Licensing Examination (USMLE) is jointly sponsored by the National Board of Medical Examiners and the Federation of State Medical Boards. A passing score on each portion of the USMLE is accepted by medical boards in every state as evidence of core competency to practice medicine.

The University of Texas at Austin Dell Medical School has established policies pertaining to the timing and passage of the USMLEs in order to optimize career outcomes for students and to ensure that graduates meet all related licensing requirements.

## Policy

In order to graduate from The University of Texas at Austin Dell Medical School, students must take and pass the USMLE Step 1 and the USMLE Step 2 CK (Clinical Knowledge). In order to be eligible to enter the match you must have taken both exams by December 31 of your MS4 year.

A student who receives three failing grades on any combination of these required licensure exams will be considered for dismissal by the Medical Student Academic Standing Committee.

## Admission Policies

The Admissions Policies are guidelines to help navigate the admissions process.

## Admissions Selection Policy

### Scope

The University of Texas at Austin Dell Medical School will strive to admit applicants and matriculate a class best suited to contribute to the mission and vision of the Dell Medical School while assuring equity, impartiality, and excellence in the admissions process.

Successful candidates for admission to the Dell Medical School must have a citizenship or residency status that allows them to obtain employment in graduate medical education upon graduation in order to be licensed to practice medicine and must meet certain standards of capability and perform essential functions with or without reasonable accommodations to be considered for admission.

The University of Texas at Austin is committed to [Equal Educational Opportunity](#) and [Non-Discrimination](#) as outlined in UT Austin policy.

### Policy

The Admissions Selection Committee shall make all selection decisions and will function free from any political, financial, or personal pressures. Members of the Admissions Selection Committee will be appointed by the Dean, and shall be comprised of at least 2/3 faculty members and may include community leaders, students, and others.

To be considered for admission to the Dell Medical School, applicants must:

- Be a U.S. Citizen or Permanent Resident.
- Meet certain standards of capability and be able to perform essential functions with or without reasonable accommodations as referenced in the [Technical Standards and Essential Functions Policy](#).
- Meet [pre-requisite course requirements](#).

Selection decisions will be based on a holistic review of each applicant and will take into consideration the following criteria:

- Personal Attributes:** Including, but not limited to, integrity and ethics; reliability and dependability; service orientation; social and interpersonal skills; teamwork; capacity for improvement; resilience and adaptability; cultural competence; and oral communication skills.
- Personal Experiences:** Including, but not limited to, public service; leadership; extracurricular activities; work history; geographic diversity; diversity of experience and background; history of overcoming disadvantage or adversity; and other experiences that may contribute to unique perspectives.
- Academic Competence:** As reflected by the applicant's official transcripts, graduate study (if any), and the Medical College Admissions Test with consideration for the rigor of the previous course(s) of study.
- Mission Contribution:** Qualities, including but not limited to, leadership, creativity, teamwork, community engagement, and resilience that uniquely relate to and could contribute to the mission of the Dell Medical School.

## Technical Standards and Essential Functions Policy

### Scope

The University of Texas at Austin Dell Medical School has a responsibility to current and future patients to train qualified Dell Medical School students that are capable of providing a standard of care incumbent upon a well-trained, competent physician. For this reason, the Dell Medical School requires students to participate in and demonstrate certain standards of capability necessary to the education process and/or the practice of medicine.

Accepted students must meet certain standards of capability with or without reasonable accommodations for matriculation, continued enrollment, and graduation with the MD degree.

The University of Texas at Austin is committed to maintaining [Equal Educational Opportunity](#) and [Non-Discrimination](#) as outlined in UT Austin policy.

### Policy

Accepted applicants and students must meet certain standards of capability with or without reasonable accommodations.

## Technical Standards and Essential Functions

**Observation:** A medical student must be able to demonstrate adequate sensory function (e.g., vision, hearing and touch) to observe a patient accurately at a distance and close at hand.

**Communication:** A medical student must be able to communicate effectively in both oral and written form. The student must also be able to perceive communication from others whether it be written, verbal, or non-verbal including intonation, changes in mood, activity, and posture.

**Psychomotor Skills:** A medical student must be able to perform the maneuvers necessary to perform a physical exam, render routine and emergent care, and safely execute the motor movements required to provide general care and emergency treatment to patients. Examples of these include, but are not limited to, palpation, auscultation, percussion, application of pressure, movement around the immobile patient as needed to perform procedures such as maintaining a sterile field and surgical and non-surgical procedures.

**Intellectual and Cognitive Abilities:** A medical student must be able to problem-solve effectively and rapidly; learn; reason; calculate; formulate and test hypotheses; memorize; process; analyze; rapidly integrate and synthesize information; and apply information in an environment of high stress and distraction.

**Behavioral and Social:** A medical student must exercise professional judgment and promptly complete all responsibilities attendant to his or her academic work, teamwork, and patient care. The student must possess the ability to develop mature, sensitive and effective professional relationships with peers, faculty, staff, and members of the healthcare team. The student must be able to give and receive constructive feedback. The student must demonstrate the ability to process feedback and utilize it to conform his or her behavior to expected professional standards. The student must manage adversity and stress in order to prevent its impacting his or her abilities in these competencies.

Any student that would like accommodations in order to meet the technical standards should contact the University of Texas Office of Services for Students with Disabilities.

## Transfer Policy

### Scope

The University of Texas at Austin Dell Medical School will strive to admit applicants and matriculate a class best suited to contribute to the mission and vision of the Dell Medical School while assuring equity, impartiality, and excellence in the admissions process.

The University of Texas at Austin is committed to maintaining Equal Educational Opportunity and Non-Discrimination as outlined in UT Austin policy.

### Policy

The University of Texas at Austin Dell Medical School permits medical students to apply for transfer into the medical education program if: 1) positions are available; 2) the transfer applicant is in good standing at a medical school accredited by the Liaison Committee on Medical Education; 3) the transfer applicant has successfully passed Step 1 of the United States Medical Licensing Exam; and 4) the transfer applicant demonstrates academic achievements and other attributes comparable to students admitted to the Dell Medical School.

Transfer applicants successfully admitted to the Dell Medical School must start at the beginning of the second year of the medical education program. There will be no transfer applicants considered for entry into the Dell Medical School in the third or fourth years of the education program.

Applicants for transfer admission should contact the office of admissions. The final decision on transfer applications is made by the Admissions Selection Committee.

Current students that wish to transfer to another medical school should meet with the Associate Dean for Student Affairs.

## Visiting Student Clinical Elective Policy

### Scope

The University of Texas at Austin Dell Medical School will strive to admit applicants and matriculate students best suited to contribute to the mission and vision of the Dell Medical School while assuring equity, impartiality, and excellence in the admissions process.

Applicants for visiting student rotations must demonstrate academic achievements and other attributes comparable to students admitted to the Dell Medical School.

The University of Texas at Austin is committed to maintaining Equal Educational Opportunity and Non-Discrimination as outlined in UT Austin policy.

### Policy

The Dell Medical School permits visiting medical students to apply for no more than 8 weeks of advanced clinical electives in the Dell Medical School's medical education program provided:

A: Application through VSLO

- a. that advanced clinical elective positions are available;
- b. the visiting student applicant is in good standing at an accredited medical school;
- c. the visiting student applicant has successfully passed Step 1 of the United States Medical Licensing Exam;
- d. the visiting student applicant has completed all required core clerkships; and
- e. the visiting student applicant is enrolled in an LCME or AOA-accredited medical school.

B: The Dell Medical School currently only accepts international medical students through a formal MOU with The University of Texas and AMPATH Consortium, Indiana University School of Medicine, or The University of Texas at Austin and Benemerita Universidad Autonoma de Puebla, Mexico. These international students utilize a limited course catalog.

Applications through VSLO are screened and processed in accordance with the procedures published on the VSLO web page for Dell Medical School.

Visiting medical students accepted and registered in a Dell Medical School clinical elective position are subject to all applicable university and UT System policies and procedures.

## Communication Policies

The Communication Policies are guidelines to help students navigate communication.

### Social Media Policy

#### Scope

Social media is an important and powerful tool. Students of The University of Texas at Austin Dell Medical School are prohibited from disclosing Health Insurance Portability and Accountability Act (HIPPA)-protected and other confidential patient information in any medium, including via social media.

#### Policy

When using social media, students must:

- Respect patient/doctor confidentiality and the privacy rights of patients, including HIPPA-protected information and other confidential patient information.
- Understand that no material posted on social media is entirely private, and should be considered public and permanent.
- Understand and accept any legal or professional liability that accrues from posting on any social media platforms.

Students are strongly discouraged from sharing personal expressions in the form of text, photos, and/or images or video that could impair a student's ability to form a therapeutic relationship with patients or to have a professional relationship with medical colleagues and supervisors.

The inappropriate or illegal sharing of patient and other confidential information is subject to discipline pursuant to the university's Medical Student Conduct and Discipline Policy.

#### References:

Health Insurance Portability and Accountability Act (HIPAA): <http://www.hhs.gov/ocr/privacy/hipaa/understanding/>  
American Medical Association, Professionalism in the Use of Social Media: <https://code-medical-ethics.ama-assn.org/ethics-opinions/professionalism-use-social-media>

## Diversity, Equity and Inclusion Policies

The Diversity, Equity and Inclusion Policies are guidelines to help students navigate diversity

### Diversity Policy

#### Scope

Diversity is essential to fulfilling our mission of improving health of individuals living in Austin and Travis County and enhances the experience of medical students, faculty and staff, and patients. Dell Medical School recognizes the value of diversity and is committed to developing and implementing programs to recruit and retain diverse students, trainees (residents/fellows), staff, faculty, and senior administrative staff. Furthermore, Dell Medical School strives to establish a culture in which everyone feels valued and included. The School seeks out and actively recruits qualified students, trainees, faculty and staff from diverse backgrounds. In creating a diverse and inclusive environment, Dell Medical School recognizes the importance of one's race, ethnicity, age, gender, gender identity, gender expression, language, national origin, religion, sexual orientation, socioeconomic status, veteran status, and other traits. Given the sensitive nature of some of these diversity categories, we will report only on those categories tracked as underrepresented in medicine. Defined at DMS as race, ethnicity and gender patterns.

#### Policy

Dell Medical School aims to increase the number of individuals from groups traditionally underrepresented in medicine among Dell Med students, trainees (residents/fellows), staff, faculty and senior administrative staff. Diversity goals include:

- Developing and implementing programs to enhance the pipeline of individuals from groups traditionally underrepresented in medicine
- Recruiting and retaining diverse medical students, trainees (residents/fellows), staff, faculty, and senior administrative staff
- Creating a supportive learning and work environment (inclusive climate) for diverse medical students, trainees (residents/fellows), staff, faculty, and senior administrative staff
- Preparing our medical students and trainees (residents/fellows) to provide culturally sensitive care to our diverse patient populations
- Engaging Dell Medical School students, trainees (residents/fellows), staff, faculty, and senior administrative staff with Austin's diverse communities

- Developing and assessing the impact of evidence-based approaches to increase diversity in the healthcare workforce and deliver quality care to diverse patient populations

Dell Medical School commits to proactive recruitment practices for students, trainees (residents/fellows), staff, faculty, and senior administrative staff to enrich the learning/work environment and to promote dialogue, intellectual inquiry, and other activities critical to the School's success. Dell Medical School selects individuals for admission, appointment, or employment based on the principles of holistic review.

This includes selecting individuals on the basis of individual capability and potential for contribution to our mission of improving health in our community as a model for the nation and redesigning the academic health environment to better serve society.

Dell Medical School also embraces the commitment of the University of Texas at Austin to create a diverse, equitable, and supportive campus culture through its commitment to fulfilling the spirit of equal opportunity laws and policies as well as building awareness within the University community.

Dell Medical School's Office of Diversity, Equity, and Inclusion led by the Assistant Dean for Diversity oversees the development and implementation of policies and programs to: increase diversity among students, trainees (residents/fellows), staff, faculty and senior administrative staff, and create and sustain an environment that values a variety of perspectives and experiences. The Office of Diversity, Equity, and Inclusion team includes the Assistant Dean for Diversity, the Director of the Pre-Health Professions Program, and dedicated administrative support staff.

In accordance with this policy and the policies of the University of Texas at Austin, Dell Medical School does not discriminate in admissions, hiring, pay or promotion against students, faculty or staff based on any personal differences. The School's Office of Diversity, Equity, and Inclusion actively oversees compliance with this policy, measures and reports on its actual success, and reviews progress regularly to produce a richly diverse, tolerant, and vibrant learning community. Each department in the medical school is required to submit a Dell Medical School Departmental Diversity Report and Action Plan annually to the Assistant Dean for Diversity, the Executive Vice Dean of Academics, and the medical school Dean. In addition, we will administer a climate survey periodically to further assess the medical school climate. The Dell Medical School Office of Diversity, Equity, and Inclusion will use this information to develop strategies for improvement.

## Financial Policies

The Financial Policies are guidelines to help students navigate federal financial aid.

### Satisfactory Academic Progress for Financial Aid Eligibility

To continue receiving federal financial aid at Dell Medical School, students must demonstrate satisfactory progress (SAP) towards their academic objectives. SAP is calculated in three ways:

#### Qualitative

Students' qualitative academic progress is determined by the DMS Medical Student Academic Standing Committee. This committee reviews all student progress, regardless of whether a student is financial aid eligible and meets the minimum Title IV academic policy requirements, all students are reviewed equally. DMS's Academic Standing Committee takes into consideration all work completed by each student when



determining academic standing. Grades in each course must be passing or participating in a timely and identified remediation program.

## Quantitative

Students must successfully complete all prescribed courses of study of years one through four to meet DMS's graduation requirements. To continue receiving financial aid assistance, students must maintain academic standing consistent with DMS's graduation and curriculum requirements.

## Timeframe

The expected timeframe for the MD program completion is four years. The maximum timeframe allowable is 6 years subject to appeal to the Academic Standing Committee. After one semester of failing SAP, students will be issued a warning and will be permitted to receive aid for the next semester.

If a student fails after their warning semester, they will be deemed ineligible for financial aid the following semester.

Students not meeting minimum standards for SAP may appeal to DMS's financial aid office for reinstatement of financial aid eligibility. Circumstances considered as basis for an appeal may include, but not be limited to, family emergencies, medical illness or injury and other unexpected hardships.

## Health Policies

The Health Policies are guidelines to help students navigate health.

## Student Exposure to Infectious Disease Policy

### Scope

The spread of certain blood borne pathogens and highly infectious diseases is a health hazard for patients and care givers. This requires processes to protect patients and students from the spread of these diseases. The purpose of this policy is to educate, avoid infection, and respond to exposures or infection to protect the rights and health of both students and patients.

### Policy

#### Education and Evaluation

All Dell Medical School students and students visiting Dell Medical School shall receive prevention education. Those with an occupational exposure to a blood borne pathogen shall have the exposure evaluated and documented by a healthcare provider following the applicable post-exposure protocol.

#### Infection Control

Medical Students, like all health care workers, bear a responsibility to prevent the spread of infection. Pursuant to that responsibility, Medical Students will follow universal precautions at all times.

Occupational exposures to blood borne pathogens requiring immediate assessment and the possible initiation of prophylactic medical treatment are defined as: 1) percutaneous injury (e.g. needlestick, laceration with a sharp object); 2) contact of mucous membranes or ocular membranes; and 3) contact of non-intact skin (e.g. skin that is chapped, abraded) with blood or other potentially infectious fluid (e.g. semen; vaginal secretions; and cerebrospinal, synovial, pleural, peritoneal, pericardial and amniotic fluids; bloody body fluids and unfixed tissue). Occupational exposures requiring monitoring include the three above requiring prophylaxis

and contact with intact skin that is prolonged or involves an extensive area with blood or other potentially infectious fluid (semen; vaginal secretions; and cerebrospinal, synovial, pleural, peritoneal, pericardial and amniotic fluids; bloody body fluids and unfixed tissue). All exposures within those categories must report to the nearest Seton Emergency Room within 2 hours of the exposure.

A student exposed to infectious or communicable illness considered by the CDC as an occupational risk for healthcare workers, or known to have such infectious or communicable illness, or a student that suspects they have such an infectious or communicable illness are required to contact the UTHealth Austin Worklife Clinic and follow the recommendations of that clinic.

If these recommendations limit the student's ability to meet curricular requirements, the course director will attempt to accommodate if possible, and consult with the Associate Dean for Undergraduate Medical Education and Associate Dean for Student Affairs, as needed. Students should seek advising regarding implications for specialty training from Specialty Specific Advisor(s) in the field(s) of interest.

Should any clinic site be determined by the UTHealth Austin Worklife Clinic to be unsafe for learners, learner involvement at that site shall be prohibited until such time as the health risk is resolved.

## Detailed Procedures

Procedures for all situations described in this policy are detailed in the "Procedures for Student Exposure to Infectious Disease."

## Student Exposure to Infectious Disease Procedures

### Prevention and Education Protocol

All students will receive training in Universal Precautions as part of the Developing Outstanding Clinical Skills course prior to seeing patients. This training shall meet the minimum requirements for students as outlined in The University of Texas at Austin Bloodborne Pathogens Exposure Control Plan (Appendix E).

- All students will receive training in the Post-Exposure Protocol as part of the Milestone 0 session prior to beginning clinical coursework.
- Visiting Students will receive on-line training in Universal Precautions, and attest to having read and understood the policy and protocol as part of onboarding, prior to beginning a rotation.
- Should any clinic site be determined by the UTHealth Austin Worklife Clinic to be unsafe for learners, learner involvement at that site shall be prohibited until such time as the health risk is resolved.

### Post-Exposure Protocol

#### Applies to Dell Medical School Students and Visiting Students

Immediately post exposure:

- Clean the area of exposure or injury with soap and water, or flush mucous membranes thoroughly.
- Report exposure to your supervising faculty member, and if applicable, the charge nurse.
- Seek immediate care/treatment in the emergency department. Healthcare providers in the emergency department will recommend and initiate prophylaxis as appropriate.



- i. Students rotating in a Seton Family Healthcare Hospital:
  1. Within two hours of exposure, report to the Emergency Room in the Seton facility where you are working.
  2. Call the Seton Occupational Health HURT line to report your exposure 512-324-4878 or in-house at ext. 44878. Have the source patient name and Medical Record number, if possible.
  3. Inform the Emergency Room you are a Dell Medical School student - do not use your personal insurance.
  4. Register as a Seton Worker's Compensation case – do not use your personal insurance.
  5. Sign a release of medical information to facilitate follow-up care so results can be sent to the follow-up care provider.
- ii. Students who are working outside of a Seton Family Healthcare Hospital.
  1. Within two hours of exposure, report to the nearest Seton Emergency Room
  2. The student should request that the off-site facility (where the exposure occurred) test the source patient. This should happen before the source patient leaves the facility.
  3. Inform the Emergency Room you are a Dell Medical School student - do not use your personal insurance.
  4. Sign a release of medical information to facilitate follow-up care so results can be sent to the follow-up care provider.
- d. Students should also submit a report to UT Environmental Health and Safety (512-471-3511)
- e. If the exposure occurred at a Seton Healthcare Family Hospital, students must complete the Dynamic Online Event Reporting System (DOERS) accident report with the appropriate charge nurse, or the Seton Occupational Health Nurse as directed.
- f. The Emergency department will refer exposed persons a provider for ongoing evaluation treatment. Students should seek a first follow-up visit within 72 hours after the initial exposure.

Within 72 hours of exposure:

- a. Students should seek follow-up care from UTHealth Austin WorkLife Clinic.

## Visiting Students

In addition to following the post exposure protocol, visiting students should contact their home institution for further instructions once they have sought initial treatment following the Dell Medical School protocol. Dell Medical School students on an away rotation should check their host institution's policies, procedures, and resources for visiting medical students in need of emergent care, and follow-up with the UT Austin University Health Services.

## Accommodations and Advising

For students requiring accommodations to complete the curriculum, these accommodations are managed under the Technical Standards for DMS and the University Policy on Disabilities in collaboration with the Office of Services for Students with Disabilities.

Students with chronic infectious disease should discuss specialty training implications with a Specialty Specific Advisor.

References:

The University of Texas at Austin Bloodborne Pathogens Exposure Control Plan: <https://ehs.utexas.edu/working-safely/biological-safety/bloodborne-pathogens>

## Mistreatment Policies

The Mistreatment Policy are guidelines to help students navigate mistreatment.

## Learning Environment and Student Treatment

### Scope

Effective learning is best fostered in an environment of mutual trust, respect, confidence and acceptance between teachers and learners, regardless of role or level. Teachers and learners at The University of Texas at Austin Dell Medical School are expected to exhibit professional behaviors and attitudes, including respect for others and a commitment to excellence as part of the learning environment.

Medical educators have a duty to convey and model the knowledge, skills, values, and attitudes, required to deliver the expected standard of care and preserve the medical profession's social commitment to its patients and the community. Faculty are obligated to evaluate students' work fairly and honestly, without discrimination based on race, color, religion, national origin, age, disability, citizenship, veteran status, sexual orientation, gender identity, or gender expression.

Mistreatment will not be tolerated in the learning environment.

### Policy

Teachers must convey and model a standard of conduct conducive to a learning environment of mutual respect and trust. Teachers must not engage in any act of mistreatment in any form. Medical students shall have recourse to address any possible mistreatment and to have the matter investigated by appropriate persons and shall have access to grievance processes to provide remedy, sanction, or policy change when possible and indicated.

### Definitions

- a. Medical Student: For purposes of this policy, Medical Student shall include any person enrolled in a course of the Dell Medical School. This includes visiting students.
- b. Mistreatment: For purposes of this policy, Mistreatment arises when behavior shows disrespect for the dignity of others and unreasonably interferes with the learning process. It can take the form of physical punishment, sexual harassment, psychological cruelty, and discrimination based on race, religion, ethnicity, sex, age or sexual orientation.

Specific examples of mistreatment include (but are not limited to):

- Discrimination or offensive actions or offensive names or comments on the basis of race, gender, age, ethnicity, national origin, religion, sexual orientation, veteran status or disability;
- Humiliation, harassment or threat;
- Requesting or requiring students to perform personal services;
- Requesting or requiring students to engage in illegal or inappropriate activities or unethical practices;
- Use of grading or other forms of evaluation in a punitive or retaliatory manner.
- Teacher: For purposes of this policy, Teacher shall include individuals, such as residents physicians, fellows, full-time and volunteer faculty members, clinical preceptors, nurses, and ancillary support staff, who have a role that involves

observation, supervision, evaluation, or teaching Medical Student(s).

## Procedures

A student who feels mistreated may choose to address the behavior directly. Less severe instances may be best resolved by addressing it immediately and non-confrontationally. Students are encouraged to discuss the situation with a faculty or administrative mentor before and/or after this “informal” resolution process. If the informal process does not satisfactorily resolve the situation or the student prefers the formal process, the following procedures should be followed:

- I. Reporting Incidents:
  - i. A report alleging mistreatment by a student should be submitted by means of the student professional conduct reporting mechanism.
  - ii. A report alleging mistreatment by a faculty, staff, administrator, resident, or any other teacher should be submitted by means of the student treatment reporting mechanism
  - iii. A student may also report allegations of mistreatment to any administrator of Dell Medical School, the University Student Ombuds office, or any other University reporting tools /contacts. (E.g., <https://compliance.utexas.edu/department-investigation-and-adjudication> ; <https://titleix.utexas.edu/file-a-report>)
- II. Responding to reports:
  - i. Reports alleging mistreatment by students will be processed in accordance with the student professionalism policy.
  - ii. Reports alleging mistreatment by faculty, staff, administrator, resident, or any other teacher shall be submitted to the student treatment reporting mechanism
  - iii. An administrator who receives a complaint about the behavior of a faculty, staff, administrator, resident, or any other person with observation, supervision, evaluation, or teaching responsibility over a Medical Student, shall notify the Associate Dean for Student Affairs and/or the Associate Dean for Undergraduate Medical Education. If either of these Associate Deans is referenced in the complaint, a designee shall be appointed.
  - iv. The Associate Dean for Student Affairs and the Associate Dean for Undergraduate Medical Education shall assure that reports of mistreatment are processed promptly by appropriate University officials and appropriate officials of clinical sites or other entities affiliated with the Medical School, as necessary.
  - v. The Associate Dean for Student Affairs and the Associate Dean for Undergraduate Medical Education shall also require that the report be processed in accordance with all applicable laws and policies, including those set forth in the University’s General Information Catalog and the Graduate Medical Education Resident/Fellow Handbook.
    1. For example, if the alleged mistreatment involves unlawful discrimination or sexual or other forms of unlawful harassment, the matter will be referred to the University’s Office of Inclusion and Equity or Title IX Office (as appropriate) and be handled through University policies established for those offices.
    2. Additionally, in some cases, an investigation following the procedures of the General Information Catalog (for example) may require referral to another supervisory body (such as the human resource department of an affiliate) with greater authority to enforce sanction.
  - vi. The University and the Dell Medical School are committed to the fair treatment of all individuals involved in this process. Efforts will be made to maintain the confidentiality of any investigation related to or undertaken pursuant to this policy, to the extent

possible and without comprising the ability to conduct a prompt and fair investigation and resolution of the complaint.

- vii. The University and the Dell Medical School will not tolerate any form of retaliation against an individual who has made a good faith complaint of mistreatment. Individuals who believe that they have been retaliated against for raising concerns of mistreatment pursuant to this policy should contact the Associate Dean for Undergraduate Medical Education or the Associate Dean for Student Affairs.
- III. Sanctions:
    - i. Any individual found to have engaged in mistreatment may be subject to sanction(s) including but not limited to: formal warning, restitution, remediation, reassignment, dismissal, or termination of employment.
  - IV. Due process:
    - i. Any party retains the right of appeal pursuant to the jurisdictional authority enforcing any decision. Since this policy permits instances to be investigated by various internal departments or external entities (including, but not limited to: University Compliance Services, Title IX Office, Office for Inclusion and Equity, the Graduate Medical Education Office, and Human Resources or other investigatory offices within an affiliated entity), due process rights and any rights to appeal are as set forth in the policies utilized by the governing department or entity.

### II. Dissemination:

In order to ensure that faculty, residents, fellows, and students are aware of this policy:

#### Clinical Faculty

The Office of the Executive Vice Dean for Academics will post the policy on the Faculty Affairs webpage, send annual reminders to all established clinical faculty at the start of each academic year, and provide a copy to all new clinical faculty when hired/

#### Residents & Fellows

The Graduate Medical Education Office will post the policy on the New Innovations website, distribute the policy at new resident and fellow orientation, and be responsible for an annual reminder sent to all continuing residents and fellows.

#### Medical Students

The Office of Medical Education will require that the policy be included in the syllabus for each clerkship and DMS clinical elective. OME will also ensure the policy is posted on the Student Affairs website.

## Pre-Matriculation Policies

The Pre-Matriculation Policies are guidelines to help navigate pre-matriculation.

## Student Background Check Policy

### Scope

Medical students are entrusted with the health, safety and welfare of patients, have access to controlled substances and confidential information, and operate in settings that require the exercise of sound, professional judgment and ethical behavior. Thus, an assessment of a medical student’s suitability to function in such a setting is imperative to promote the highest level of integrity in health care services, the safety

interests of patients, to maintain a professional workplace, and the medical student's ability to obtain licensure.

Additionally, clinical healthcare facilities are required by accreditation agencies to conduct background checks for security purposes on individuals who provide services within the facility and especially those individuals who supervise care and render treatment. The University of Texas at Austin is obligated to meet the contractual requirements contained in affiliation agreements between the university and its clinical healthcare partners. Thus, the Dell Medical School requires background checks for all accepted applicants and medical students, as described below.

Applicants for admission who would not be able to participate in clinical rotations due to a criminal record or other activities revealed in a background check are unable to fulfill the requirements of the program and will not be admitted to the Dell Medical School. Enrolled students who cannot participate in clinical rotations due to a criminal record or other activities that are revealed in a background check are unable to fulfill the requirements of the program and may not be guaranteed continued enrollment in the educational program or be eligible for graduation with the MD degree.

## Policy

All persons accepted for admission to the Dell Medical School must complete a background check with a result deemed favorable prior to matriculation. A background check will be honored for the duration of enrollment if the student is continuously enrolled and there is no change in the favorable results of the student's background check. Any student who temporarily leaves the academic process for greater than 6 months will be required to attest that there has been no change in his or her criminal background check prior to re-entry into the program and may be required to complete a new background check at the discretion of the Associate Dean for Student Affairs. Any student who temporarily leaves the academic process for greater than 1 year will be required to complete a new background check, prior to re-entry. Any visiting student applying to complete an elective at the Dell Medical School shall supply evidence from his or her home institution of the visiting student's successful and current completion of a background check of a comparable nature.

An offer of admission will not be final until the completion of the applicant's background check with a result deemed favorable. Admission may be denied or rescinded based on a review of the background check. Any activity identified on the background check that was not reported on the TMDSAS application will be viewed as potential misconduct and grounds for rescinding an offer of admission. All students are required to immediately notify the Associate Dean for Student Affairs of being charged with any criminal act. Failure to do so will be viewed as an act of misconduct. Any falsification or omission of pertinent information may result in the denial of admission or dismissal from the Dell Medical School.

The expenses related to background checks are borne by the applicant or student. Background check results will remain separate from the academic record.

## Drug Screen Policy

### Scope

Medical students are entrusted with the health, safety and welfare of patients, have access to controlled substances and confidential information, and operate in settings that require the exercise of sound, professional judgment and ethical behavior. The University of Texas at Austin Dell Medical School has a responsibility to assure that patients are not under the care of impaired persons. Thus, an assessment of a

medical student's suitability to function in such a setting is imperative to promote the highest level of integrity in health care services, the safety interests of patients, a professional workplace, and the medical student's ability to obtain licensure.

Additionally, The University of Texas at Austin is obligated to meet the contractual requirements contained in affiliation agreements between the university and its clinical healthcare partners. To facilitate these requirements, the Dell Medical School will require urine drug screens for all accepted applicants and enrolled students.

Applicants and enrolled students must maintain a negative urine drug screen to fulfill the requirements of the program. Applicants or students with a positive test may not be guaranteed admission, continued enrollment in the educational program, allowed on clinical rotations or remain eligible for graduation with the MD degree.

## Policy

All accepted applicants and persons accepted for admission to the Dell Medical School must complete a urine drug screen testing. All persons accepted for admission to the Dell Medical School must have a negative result prior to matriculation. Students may be required to complete additional re-screening at any point, if there is reason to believe a student may be using or misusing drugs or other substances or if there is an extended absence from the education program.

All test results are reviewed by a Medical Review Officer to confirm a negative result or determine whether a positive result is due to a legally prescribed medication. A positive test will result in a report to the Associate Dean for Student Affairs for intervention and/or possible disciplinary action as authorized by policies, rules and regulations imposed by the university or The University of Texas System. A positive test may result in the withdrawal of an offer of acceptance, or, if after matriculation, dismissal from the program.

The expenses related to drug testing are borne by the accepted applicant or enrolled student. Drug test results will remain separate from the academic record.

## Health Insurance Policy

### Scope

All students enrolled at The University of Texas at Austin Dell Medical School are required to obtain and maintain health insurance coverage for the duration of his or her enrollment.

## Policy

The State of Texas has contracted with [Academic Health Plans](#) to provide an affordable insurance option for Texas students. However, students may choose any private insurance company to meet the above health insurance requirements. Students should be knowledgeable of the terms and conditions of their individual health insurance plans.

Confirmation of active, current health insurance coverage is required at the time of registration each term.

## Immunization Policy

### Scope

Medical students are entrusted with the health, safety and welfare of patients and operate in settings that require the exercise of sound, professional judgment and ethical behavior. A student's suitability to function in such a setting is imperative to promote the highest level of integrity in health care services and to protect the safety interests of the patients and the workplace. The University of Texas at Austin

Dell Medical School has a responsibility for the health and safety of its students and the community to prevent the spread of vaccine-preventable diseases.

Additionally, The University of Texas at Austin is obligated to meet the contractual requirements contained in affiliation agreements between the university and its clinical healthcare partners. To facilitate these requirements, the Dell Medical School requires certain immunizations for its students.

Applicants and enrolled students must receive certain immunizations and maintain up-to-date documentation of such immunizations for the duration of the program and in order to be in compliance with Centers for Disease Control and Prevention recommendations and Texas State law.

Applicants or students who are not current on their immunizations or who do not maintain current documentation regarding the same may not be guaranteed admission, continued enrollment in the educational program or eligibility for graduation with the MD degree.

## Policy

All persons accepted for admission to the Dell Medical School must provide documentation of current immunization and screening. Unless otherwise specified below, the following vaccinations and screening must be documented at the time of matriculation and maintained in current status while enrolled:

**TETANUS/DIPHTHERIA/ACELLULAR PERTUSSIS:** Documentation of one dose of Tdap vaccine. Td vaccine every 10 years thereafter;

**MEASLES (RUBEOLA):** Documentation of two doses of measles or MMR vaccine, or a positive titer confirming immunity (must include a copy of the laboratory report); first dose must be on or after the first birthday and doses must be at least 28 days apart;

**MUMPS:** Documentation of two doses of mumps or MMR vaccine, or a positive titer confirming immunity (must include a copy of the laboratory report); first dose must be on or after the first birthday and doses must be at least 28 days apart;

**RUBELLA:** Documentation of one dose of rubella or MMR vaccine administered on or after the first birthday, or a positive titer confirming immunity (must include a copy of the laboratory report);

**VARICELLA:** Documentation of 2 doses of varicella vaccine given at least 28 days apart, laboratory evidence of immunity, laboratory confirmation of disease (must include a copy of the laboratory report), or diagnosis or verification of a history of varicella or herpes zoster (shingles) by a healthcare provider;

**HEPATITIS B:** A complete hepatitis B vaccine series (3 doses of Engerix-B or Recombivax HB, or 2 doses of Heplisav-B) AND a positive antibody titer (quantitative hepatitis B surface antibody—lab report required) If the titer is negative or equivocal, receive one dose of the vaccine (as a booster) and repeat the titer 1 to 2 months later. If the second titer is negative or equivocal, finish the series and repeat the titer 1 to 2 months after the final dose. If the titer is still negative after a second vaccine series, test for HBsAg and total anti-HBc to determine HBV infection status.

**MENINGOCOCCAL:** All students under the age of 22 who are entering a public, private, or independent institution of higher education in Texas must provide documentation that they have had a meningococcal (bacterial meningitis) vaccine or “booster” dose during the five year period prior to but no later than ten days before the first day of the first semester they will enter that institution;

**INFLUENZA:** An influenza vaccine is required annually (Compliance is not required at point of matriculation, but is required annually thereafter); and

**TUBERCULOSIS:** Documentation of 2 negative TB skin tests (PPD) within two months of matriculation or, negative IGRA blood test (must include laboratory report), or if history of a positive TB test (IGRA or PPD), documentation of a negative chest X-ray within two months of enrollment (must send radiology report of chest X-ray).

Students may be exempted by means permitted within Texas and Federal Law. However, even if exempted, a student may be denied the opportunity to participate in training or patient care in certain health care facilities in accordance with the policies of those facilities.

All immunization records are reviewed by a Medical Review Officer within UT Austin's University Health Services to determine compliance. The UHS office will notify the student when not in compliance, and block registration from the next semester until the student is compliant. The Student Affairs office will be not be informed of immunization or any other health information, but will be notified that an applicant or student is compliant or non-compliant. Applicants or students who fail to comply with this policy may be subject to withdrawal of an offer of acceptance or disciplinary action, up to and including dismissal.

The expenses related to immunizations are borne by the student. Immunization records will remain separate from the academic record.

## Transcript Policy

### Scope

Students accepted into The University of Texas at Austin Dell Medical School must submit official transcripts from all previous colleges and universities attended in accordance with accreditation standards of the Southern Association of Colleges and Schools (SACS) and as described below.

### Policy

The Dell Medical School requires all accepted students to submit official transcripts from every regionally accredited college or university attended by the student. This includes:

- All colleges/universities at which students took a course, even if transfer credit was later accepted by another school.
- College-level courses taken while in high school, even if such courses did not count toward a degree at any college or university.
- Final transcripts that denote any certificate or degree earned from that institution along with the date during which this credential was earned.

The Dell Medical School will only accept official transcripts that are printed on the institution's transcript security paper and transmitted to the Dell Medical School in an official, sealed envelope from the institution's Office of the Registrar (or similar, official department of the institution), or through a secure electronic transmission.

Failure of an accepted student to submit all official transcripts to the Dell Medical School, or submission of transcripts that are materially different than what the student self-reported on his or her application relevant to academic performance and/or courses completed or expected to complete prior to matriculation, can result in the offer of admission being rescinded, or the student's being prevented from registering for future classes.



# Student Conduct Policies

The Student Conduct Policies are guidelines to help students navigate student conduct.

## Medical Student Professional Conduct Policy

### Scope

Professional conduct is a cornerstone of medical practice. Professional conduct is characterized by aspects of etiquette, defined as the customary code of respectful and considerate behavior among members of a profession, and virtue, defined as behavior manifesting high moral standards. We take the view that everyone can improve these skills. To improve, people need supportive feedback and a nurturing, growth-enabling culture and mindset.

Dell Medical School will evaluate and nurture the professional conduct of its medical students. As a curricular goal, opportunities to learn and grow will be anticipated in each course and clerkship. Medical student conduct will be noted across the curriculum using the online [Student Feedback Report](#) system. Any student, faculty, or staff member may use this online system to notice things people do well (model behavior) and areas that show opportunity for individual, community, and system improvement.

### Policy

Physicians and physicians-in-training are expected to develop and demonstrate an exemplary level of professional conduct. Dell Medical School shall provide a robust system for evaluating professional conduct, providing timely feedback to support medical student development, and a fair process for identifying and addressing growth opportunities while anticipating, mitigating, and learning from biases in order to protect students, faculty, and staff. The actions authorized under this policy intend to educate, support, and—when merited—remediate students with identified opportunities for improved professional conduct. Egregious behavior is addressed through a separate pathway detailed in the Sanction section at the end of this document.

## Medical Student Professional Conduct Committee

To meet the professional conduct objectives above, Dell Medical School shall establish a Medical Student Professional Conduct Committee (“Professional Conduct Committee”). The Professional Conduct Committee has two subgroups: the Professional Conduct Committee Triage Team (“Triage Team”) and the Education and Remediation Team. The Professional Conduct Committee and its subgroups include the following members:

- Professional Conduct Committee:
  - Eleven (11) Members selected from Dell Medical School Faculty and/or Staff
    - Eight (8) Voting Members selected from Faculty and/or Staff, including one member appointed as Chair
    - Three (3) Non-Voting Members (Associate Dean for Student Affairs, Associate Dean for Undergraduate Medical Education, Assistant Dean for Diversity)
  - Eight (8) Student Members
- Triage Team: three (3) Voting Members of the Professional Conduct Committee with a specific responsibility for initial investigation of feedback reports (detailed below).
- Education and Remediation Team: one Voting Member (Chair of the Professional Conduct Committee) and two Non-Voting

Members (Associate Dean for Student Affairs, Associate Dean for Undergraduate Medical Education)

## Faculty and Staff Membership of Professional Conduct Committee

- Faculty and Staff are eligible to be members
- Members are selected by a committee of the Executive Vice Dean of Academics and Chair of Medical Education, the Associate Dean for Student Affairs, and the Associate Dean for Academic Affairs.
- The term of appointment shall be 3 years and members may serve in successive terms.
- All members are expected to act as expeditiously as their other responsibilities will permit to ensure that feedback events are addressed in a timely manner.

## Student Membership of Professional Conduct Committee

- Two students per year from each class
- Candidates (4 from each class) are proposed through a nomination system. The Associate Dean for Student Affairs will discuss candidate suggestions with the students prior to making final approval.
- Term of 1-year renewable on agreement of committee and student.
- Role and commitment similar to other members – participation in discussions and providing input that inform the committee’s processes (1 meeting/month; 30 minutes of work or so in between)
- Exception: Students are recused from discussion and voting on feedback events.

## Feedback Event Process

### a. [Identification of Feedback Events](#)

Using an online Student Feedback Report system, faculty and students are encouraged to report feedback events, defined as a commendation or growth opportunity. Anonymous submissions are not acceptable, but confidentiality will be maintained to the extent possible. These reports are forwarded by automated process to the Triage Team. Any course evaluation of professional conduct rated as “marginal pass” or lower will also be reported to the Triage Team.

### a. [Triage Team Review](#)

The Triage Team will review all feedback events, and a confirmation email will be sent to the reporter within 48 hours notifying the reporter the review/triage is in process. Students mentioned in the feedback event will be notified when the Triage Team reviews the submission and begins their preliminary assessment.

The Triage Team will review all reports from the Feedback Event System and assign the incident to a pathway:

- *Commendation*: Exceptional and admirable professional conduct (e.g., community service, patient advocacy, or peer support)
- *Organizational Growth Opportunity*: System deficiencies or human error rather than personal growth opportunities (e.g., unclear or contradictory instructions)
- *Personal Growth Opportunity* (Former Level 1): Deviation from personal professional conduct that represents a one-time learning opportunity
- *Coaching Intervention* (Former Level 2): Single important Feedback Event or a pattern of Feedback Events as determined by the Professional Conduct Committee after receiving the report of the Triage Team



- *Student Success Plan* (Former Level 3): Feedback discussions and support during a Coaching Intervention do not result in expected insight and growth (e.g., serious or repeated concerns regarding professional conduct, failure to adapt to previous attempts to support improved behaviors)
- *Sanction*: Conduct that is an egregious violation of professional conduct standards and may impact the student's opportunity to obtain licensure will result in sanction up to and including referral to Medical Student Academic Standing Committee for possible adverse action up to and including dismissal from Medical School (e.g., unwillingness to participate in coaching or remediation, ongoing substance misuse, criminal activity, falsifying any record, or violence in any form)

If an incident is initially designated as a Personal Growth Opportunity, Coaching Intervention, or Student Success Plan, the Triage Team will meet with the student mentioned in the feedback event to understand their perspective before giving the event a preliminary designation. The final designation is determined by vote of the 8 voting members of the Professional Conduct Committee. Once a final designation is determined, a notification letter will be emailed to the student. Because Sanctions may involve situations that require rapid response (e.g., danger to a student or others) and are referred to groups outside of the Professional Conduct Committee (see Sanction section below), a Sanction may proceed as initially designated.

#### a. Responses to Feedback Events

Feedback events will be held in a secure file ("Professional Conduct file") by the Professional Conduct Committee. The Professional Conduct file is not related to a student's permanent academic file and students may request access via the Associate Dean for Student Affairs at any time. The response to a feedback event varies by incident pathway assigned by the Triage Team, outlined below.

#### Commendation

The Triage Team shall send a notice of the commendation with specific details, as available, to the student(s) and to the Associate Dean for Student Affairs. Commendations will be retained for possible inclusion in appropriate public forums.

#### Organizational Growth Opportunity

These will be directed to the units involved for optimal institutional learning and improvement. The result of the quality improvement endeavors catalyzed by these feedback reports will be communicated to the person who filed the event and more widely to Dell Medical School with the permission of those involved.

#### Personal Growth Opportunity

There are two varieties of Personal Growth Opportunities: Professional Conduct Growth Opportunities and Interpersonal Growth Opportunities. All feedback events identified to be Personal Growth Opportunities (both varieties) will be held in a Professional Conduct file to monitor for a pattern of Personal Growth Opportunities.

*Professional Conduct Growth Opportunities* may include conduct that occurs within a course and is subject to evaluation and grading impact outlined in the syllabus policies of that course (e.g., unexcused absence, tardiness, failure to complete assignments, communication lapses with patients, faculty, members of health care team, or peers, engaging in conduct disruptive to an effective learning environment). Professional Conduct Growth Opportunities are placed in the feedback event system at the discretion of the instructor and are strongly encouraged whenever a student receives a professional conduct evaluation of marginal pass

or lower in any course. These concerns are initially addressed by the instructor within the course through a course feedback discussion. A summary of course feedback discussions, relative to a Professional Conduct Growth Opportunity, must be submitted to the Professional Conduct Committee afterward.

*Interpersonal Growth Opportunities* can occur on-campus or off-campus when the event is related to Dell Medical School (e.g., disrespectful, unruly, and/or offensive behavior at DMS-sanctioned events, insensitive comments on social media, privacy and confidentiality violations). Interpersonal Growth Opportunities are placed in the feedback event system at the discretion of those involved. Interpersonal Growth Opportunities are to be addressed with a peer-to-peer feedback discussion, with trained peers available to assist. A summary document of the feedback discussion must be submitted to the Professional Conduct Committee afterward.

#### Coaching Intervention

If a simple majority of the Professional Conduct Committee agrees on a Coaching Intervention, they shall notify the Education and Remediation Team. The Education and Remediation Team shall develop a Coaching Intervention plan for the student. The Education and Remediation Team will update the full Professional Conduct Committee on progress.

If the situation is sufficiently resolved, the Coaching Intervention will be retained in the student's Professional Conduct file in order to monitor and respond to any repeated concerns. If the Professional Conduct Committee votes by a simple majority that the matter is not adequately resolved, the student may be referred back to the Education and Intervention Team for escalation to a Student Success Plan.

#### Student Success Plan

On vote of a simple majority of the Committee, or when the Coaching Intervention is not successful, the student may be asked to participate in a Student Success Plan developed and overseen by the Education and Remediation Team. The plan will include predefined consequences for not reaching the agreed goals. Student Success Plans shall be fully and clearly documented in the student's Professional Conduct file and will be referenced in any future concerns about the student. This may impact Professional Conduct Committee decisions in any future concerns.

Examples of additional actions that may be taken by the Professional Conduct Committee include, but are not limited to:

- Require the student to complete a chemical use assessment
- Require a fitness for duty evaluation
- Require a repeat administration(s) of the Criminal Background Check or Urine Drug Screen required at matriculation (may modify the drug panel to assess for specific drugs)
- A behavioral mentoring contract with designated persons
- A required mention of the incident in the MSPE

Inadequate completion of the Student Success Plan will lead to implementation of the agreed consequences to include potentially:

- Escalation to the level of a Sanction
- Referral to the University's Office of the Dean of Students
- Referral to the Medical Student Academic Standing Committee for consideration of an academic sanction including suspension or expulsion

#### Sanction

Medical student conduct that violates The University of Texas at Austin ("University") Code of Conduct, the University's *Institutional Rules*

on Student Services and Activities, any federal, state, or city laws and statutes, or any policies of the University and The University of Texas System may also be subject to the University's [Student Conduct and Academic Integrity Policy](#).

Should a student's conduct warrant consideration of any adverse action, the situation will be referred to the University's Office of the Dean of Students or to the Medical Student Academic Standing Committee, as appropriate. For any committee vote on a Sanction, the Chair of the Professional Conduct Committee will be recused. Should a situation involve a threat to the safety of the student(s) or others, the University's Office of the Dean of Students shall be immediately notified and is authorized to take interim action in accordance with the University's [Student Conduct and Academic Integrity Policy](#).

## Degrees

### DOCTOR OF MEDICINE

The Dell Medical School [Leading EDGE Curriculum](#) is designed to train not just doctors, but physician leaders who are as comfortable taking on transformational health challenges as they are caring for patients. Every curricular innovation is designed to focus students on the distinct challenges of 21st-century health and medicine, and to engage students' creativity in solving those challenges.

The plan for an innovative, highly integrated educational program incorporates guided self-directed learning, new technologies, interprofessional education, and health care delivery systems education. Students have the benefit of receiving a core leadership curriculum and the opportunity to pursue individualized paths to that leadership, created for each student based on experience and interest.

Generous opportunities with sufficient flexibility to pursue population health, health care redesign or translational/basic science research, scholarship, and dual degrees are integrated into the program.

On their path to completing the Doctor of Medicine degree students are required to identify either a distinction or a dual degree to further progress toward long-term goals and collaborate to improve health locally through a rigorous scholarly experience as a requirement for graduation.

## Distinctions

Through individualized experiences in the third year - the hallmark of a curriculum created from scratch to turn future physicians into leaders, a nine-month Innovation, Leadership, and Discovery block affords students the opportunity to pursue a distinction where they will concentrate full-time on advancing clinical practice through research, engage in the process of medical innovation, or focus on making an impact on the healthcare landscape in the community. During their engagement in their chosen distinction, students will also continue clinical practice in primary care, family, and community medicine with the option for other electives, as well as longitudinal courses in Developing Outstanding Clinical Skills, Interprofessional Education, and Leadership.

## Research

During the Research Distinction, students work with faculty to design and implement a project from multiple options spanning the spectrum of research at The University of Texas at Austin or our clinical partners. Working in a rigorous scholarly environment with a faculty mentor, they develop skills for investigation and learn how to communicate findings.

## Clinical Innovation and Design

During the Clinical Innovation and Design Distinction, student will focus on designing meaningful solutions to the current pressing needs in health care which requires the development of a variety of complex skills, including the ability to identify meaningful problems, design thinking to find creative solutions and entrepreneurship to implement them. Students actively learn the process of medical technology and process innovation by working with biomedical engineering graduate students in a structured and mentored experience. As part of the program, students identify concrete clinical needs and address them through technology.

## Social Entrepreneurship

During the Social Entrepreneurship Distinction, students will take a deep dive into social innovation, entrepreneurship, and capacity-building. Students completing the Distinction will learn how to leverage their knowledge of the healthcare system and medical expertise to make an impact in the healthscape (i.e., settings beyond the clinic). In this Distinction, students will learn how to move an idea for social impact from concept to reality, diversifying their skillset to include new skills in areas like program design, management, fundraising, impact evaluation and more.

## Dual Degrees

### Dual Degree Programs

During the Growth Year, a nine-month Innovation, Leadership and Discovery block, students have the opportunity to individualize experiences toward long-term goals by choosing to pursue one of several dual degree programs. All dual degree programs should be accomplished within the third year of medical school.

In dual degree programs, the degrees are awarded simultaneously with the Doctor of Medicine degree. To enter a dual degree program, the student must be accepted by both of the individual programs. Dual degree programs are offered in the following fields.

Major(s)	Degree(s)
Biomedical engineering	Master of Science in Engineering
Business administration	Master of Business Administration
Design	Master of Arts
Educational psychology	Master of Education
Health care transformation	Master of Science in Health Care Transformation
Humanities, health, and medicine	Master of Arts
Public affairs	Master of Public Affairs

### Dual Degree Programs with Other Institutions

The dual degree programs listed above lead to two University degrees; in other programs, students pursue degrees from the University and from another school at the same time.

### Doctor of Medicine/Master of Public Health

The Dell Medical School offers a dual degree program with the University of Texas Health Science Center at Houston School of Public Health leading to the Doctor of Medicine from the University and the Master of Public Health from the center. Applicants must apply separately and be admitted to both the Doctor of Medicine program at the University

and the Master of Public Health at the center. Students accepted into the dual degree program complete the program of work in both schools. The degrees are conferred separately by each institution. Additional information is available from the director of admissions at the Dell Medical School.

## Curriculum

The Dell Medical School curriculum is designed to train not just doctors, but physician leaders who are as comfortable taking on transformational health challenges as they are caring for patients. Every innovation, from the team-based learning to the Innovation, Leadership and Discovery Year, is designed to focus students on the distinct challenges of the 21st-century health and medicine - and engage students' creativity in solving those challenges. Students have the benefit of receiving core leadership curriculum and the opportunity to pursue individualized paths to that leadership, created for each student based on experience and interest.

### Four-Year Integrated Curriculums

#### Developing Outstanding Clinical Skills (DOCS)

The Developing Outstanding Clinical Skills integrated curriculum provides an understanding of the role of the physician in the clinical setting and the community through longitudinal small group and clinical learning experiences throughout the four years of medical school. During the first year, the course will focus on patient interviewing, physical diagnosis, physical exam, patient write-ups from students' clinical encounters, clinical reasoning, and developing the doctor-patient relationship and a professional, empathetic and inclusive physician.

#### Interprofessional Education (IPE)

The Interprofessional Education integrated curriculum will fulfill the school's vision by producing physicians who are prepared for interprofessional collaborative practice. The longitudinal curriculum will immerse learners in interprofessional inquiry, application, and leadership to yield a measurable impact and outcomes. The learning activities will be guided by core competencies in the areas of values and ethics for interprofessional practice, roles and responsibilities, interprofessional communication, and teams and teamwork. Medical students will learn and work with interprofessional students from social work, nursing, pharmacy, and nutrition, among others during their time at Dell Medical School.

#### Leadership

This [longitudinal course](#) creates a solid foundation in leadership by exposing learners to effective leadership approaches, skills and application exercises. Topics include leadership assessment (self and other), fundamentals, philosophy, skills, practices and behaviors. A rich health systems science curriculum is taught in year two. In year three, students apply their leadership skills to their individual projects and community engagement activities. In year four, students apply their skills within the medical environment through individualized experiences selected from a collection of opportunities.

#### Integrating Leadership, Interprofessional Education and Developing Outstanding Clinical Skills (ILIAD)

This course integrates the final year of all three longitudinal courses (DOCS, IPE and Leadership) into a single course that leverages learners' graduated autonomy in a mentor-supported, self-actuated

clinical learning environment to crystallize the professional identity of graduating Dell Med students in preparation for residency.

### Dell Medical School Institutes

Dell Medical School houses five institutes that bring together faculty, students, and outside experts to study healthcare issues in a number of important areas.

- Dell Pediatric Research Institute
- Design Institute for Health
- LIVESTRONG Cancer Institutes
- Value Institute for Health and Care
- Mitchel and Shannon Wong Eye Institute

## First Year

### Essentials Year

The 48-week pre-clinical curriculum will impart the foundational knowledge for students to prepare and succeed in medical school. This year is highly integrated and consists of eight courses with early clinical and interprofessional experiences.

#### Modules/Capstone

- Cells to Populations
- Medical Neuroscience
- Structure and Function
- Foundations of Disease
- Mechanisms of Disease

### Longitudinal Courses

- Developing Outstanding Clinical Skills
- Foundations for Interprofessional Collaborative Practice
- Foundations for Leadership Practice

## Second Year

### Delivery Year

The 48 week healthcare delivery curriculum consists of 40 weeks of required clerkships delivered as five eight-week block clerkships and one longitudinal clerkship, and six weeks of selective course options with a two-week vacation. Radiology, pathology and diagnostic content, as well as interprofessional experiences, are highly integrated throughout all clerkships. Three longitudinal courses with clinical skills, interprofessional experiences, and leadership practice continue into the second year.

#### Courses/Clerkships

- Milestone 0 (One week)
- Internal Medicine (Eight weeks)
- Women's Health (Eight weeks)
- Psychiatry (Four weeks)
- Neurology (Four weeks)
- Pediatrics (Eight weeks)
- Surgery (Eight weeks)
- Emergency Medicine (Four weeks)

## Longitudinal Courses

- Primary Care, Family, and Community Medicine
- Developing Outstanding Clinical Skills
- Interprofessional Education
- Leadership

## Electives

Select up to four weeks of electives

- Geriatrics and Palliative Care Elective (Two weeks)
- Internal Medicine Elective (Two weeks)
- Surgery Elective (Two weeks)

## Third Year

### Growth Year

Nine months of the third year will be reserved for the Innovation, Leadership and Discovery Block. During this block, students will pursue a dual master's degree or select one of the areas of distinction: clinical/translational research, population health, or design and innovation in health care. Students will continue their longitudinal Primary Care, Family, and Community Medicine clerkship and will have the opportunity to enroll in two four-week clinical electives to maintain their clinical acumen and explore career interests. Students also continue to meet monthly in the longitudinal clinical skills and interprofessional education courses and periodically for leadership practice. Students also take USMLE Step 1 and Step 2 CK and CS. Students complete a week-long clinical skills immersion at the end of this year to prime them for the MS 4 year.

### Block Rotations

- Independent Study or Dual-Degree Courses (Thirty-six Weeks)
- Clinical Electives or Vacation (Eight Weeks)

## Longitudinal

- Developing Outstanding Clinical Skills
- Interprofessional Education
- Leadership
- Primary Care, Family, and Community Medicine Clerkship

## Fourth Year

### Exploration Year

The fourth year consists of 37 weeks of curriculum with 14 weeks of required clinical rotations, 20 weeks of clinical or research electives and a three-week intensive residency preparation experience. Eleven weeks of vacation are afforded to students in order to prepare for residency program application and interview.

### Block Rotations

- Two Acting Internships (Four weeks each, eight weeks total)
- Critical Care (Four weeks)
- Geriatrics/Palliative Care (Two weeks)
- Electives (Twenty weeks)
- Milestone One - Transition to Residency (Three weeks)

## Longitudinal

- Integrating Leadership, Interprofessional Education and Developing Outstanding Clinical Skills

## Courses

### MED 180MD Molecules and Cells

The Molecules and Cells block integrates biochemistry, genetics and cell biology to provide a foundation of knowledge to medical students in the first year of instruction. Students will learn to apply their knowledge of normal cell structure and function to case-based clinical manifestations of human disease.

### MED 180OR Medical School Orientation 1

Orientation to the MS1 Curriculum and student experience

### MED 181MD Structure and Function

Integrated concepts in immunology; medical microbiology and infectious diseases; the pathological basis of human disease; pharmacologic principles and initial therapeutic decision making to lay the foundation for clinical medicine.

### MED 182MD Brain and Behavior

The Brain and Behavior course integrates the content areas of neuroanatomy, neurobiology and human behavior. Students will learn to recognize the anatomy, development, physiology, and radiological features of the nervous system and concepts of consciousness, perception, and emotion and relate them to clinical conditions. Students will learn clinical, pathological, etiological, and therapeutic options for common neurological and psychiatric conditions.

### MED 183MD Epidemiology/Biostatistics

The Epidemiology Capstone course integrates the content areas of epidemiology and biostatistics to provide a foundation in epidemiological terminology, study design, and methodology while begin blending to interpret and critique analyses found in epidemiological and clinical studies and explain and communicate current epidemiological problems informing scientific discussions of health problems. Students will also be able to describe the role of biostatistics in medical research and use appropriate statistical methodology and software tools to address medical problems.

### MED 184MD Foundations of Disease

Integrated concepts in immunology; medical microbiology and infectious diseases; the pathological basis of human disease; pharmacologic principles and initial therapeutic decision making to lay the foundation for clinical medicine.

### MED 185MD Mechanisms of Disease

Overview of the disease-specific concepts required to participate in patient care by integrating clinical medicine, microbiology, pathology, and pharmacology into organ system modules, and the pathophysiology of diseases, the differential diagnosis of cardinal symptoms, and treatment modalities. Includes other concepts such as radiology and diagnostics.

### MED 186MD Cells to Populations

Integration and application of biochemistry, genetics, cell biology, and normal cell structure and function to case-based clinical manifestations of human disease. Expansion of the pathogenesis of disease to also incorporate psychosocial and population-based effects.

### MED 187MD Medical Neuroscience

Neuroanatomy, neurobiology, and human behavior in the context of the anatomy, development, physiology, and radiological features of the



nervous system. Includes consciousness, perception, and emotion, how they relate to clinical conditions, and clinical, pathological, etiological, and therapeutic options for neurological and psychiatric conditions.

### **MED 191CS Clinical Skills**

Explores concepts in doctor-patient relationships, patient interviewing, physical exams, and basic counseling and clinical skills. Activities include peer and self-assessment skill building; physician's attitudes and conduct sessions; clinical skills development; and medical humanities issues, including ethics, professionalism, and practice management.

### **MED 191IE Interprofessional Practice**

Interprofessional teams explore concepts from the core competencies of the interprofessional collaborative: values and ethics for interprofessional practice, roles and responsibilities, communication, and teams and teamwork. Includes collaboration with other interprofessionals in different disciplines such as pharmacy, nursing, and social work.

### **MED 191LP Leadership Practice**

This course will create a solid foundation in leadership by exposing learners to effective leadership approaches, skills and application exercises. Topics will include leadership: assessment (self and other), fundamentals, philosophy, skills, practices, and behaviors.

### **MED 191MD Innovation, Leadership, and Discovery Block**

A nine-month Innovation, Leadership and Discovery block affords the opportunity to complete a large, independent distinction project or dual degree. All students are expected to achieve the same competencies during the Innovation, Leadership and Discovery block irrespective of the path they have chosen to pursue. All students will complete a scholarly project, submit an abstract, and present their project at ILD Scholarship Day.

### **MED 192MD Discovery and Inquiry**

Students who choose the Discovery and Inquiry option for their Innovation, Leadership and Discovery block have the opportunity to complete a large distinction project. Working in a rigorous scholarly environment with a faculty mentor, they develop skills for investigation and learn how to communicate findings. Throughout the nine months, students make progress toward long-term goals and prepare to present their work to the community.

#### **Distinction 1: Research**

#### **Distinction 2: Population Health**

#### **Distinction 3: Design and Innovation in Health Care**

#### **Distinction 4: Student Entrepreneur in Residence**

#### **Distinction 5: Clinical Innovation and Design**

#### **Distinction 6: Social Entrepreneurship**

### **MED 192CS Clinical Skills - Clinical World**

Explores concepts in doctor-patient relationships in the greater context of the clinical practice. Activities include monthly sessions, peer and self-assessment.

### **MED 192IE Interprofessional Education - Applications**

Medical students will experience IPE through the clinical clerkships. This curriculum will weave experiential and assessment elements into the clerkships. Additionally, medical students will prepare for the Scholarship year through online training in quality improvement and patient safety.

### **MED 192LP Leadership**

This course will expose learners to Healthcare Value and Systems through effective leadership approaches, skills, and application exercises.

### **MED 193CS Clinical Skills - Clinical Systems**

Explores concepts in doctor-patient relationships in the greater context of the clinical practice. Activities include monthly sessions, peer and self-assessment.

### **MED 193IE Interprofessional Education - Scholarship and Service**

Medical students will experience IPE through the clinical clerkships. This curriculum will weave experiential and assessment elements into the clerkships. Additionally, medical students will prepare for the Scholarship year through online training in quality improvement and patient safety.

### **MED 193LP Leadership Service**

Apply leadership knowledge and skill through case based learning, project work, and within the Innovation, Leadership and Discovery block.

### **MED 194CS Clinical Skills: Transformation**

The course facilitates the clinical skills to successfully achieve level 1 graduate medical education milestones through a curriculum that emphasizes graduated autonomy, self-growth and appraisal.

### **MED 194IE Interprofessional Education: Collaborative Practice**

The fourth year of the interprofessional integration curriculum will focus on applying the interprofessional learning lens to a local community health issue to gain lessons learned for application into residency training.

### **MED 194LP Leadership: Transformation**

Develop a personal leadership plan and customize the year to meet individual student goals; prepare students to enter residency with the skills needed to be a physician leader.

### **MED 195MD Student Enrichment Elective**

May be repeated for credit when the topics vary. Offered on the pass/fail basis only.

### **MED 199MD Integrating Leadership, IPE and Developing Outstanding Clinical Skills**

This course unifies the final year of all three longitudinal courses (DOCS, IPE, Leadership) into a single course that leverages learners' graduated autonomy in a mentor-supported, self-actuated, clinical learning environment to crystallize the professional identity of graduating Dell Med students in preparation for residency.

### **MED 296MD Student Enrichment Elective**

Enrichment Electives are non-credit elective courses that enhance students' education and broaden their sense of being. Enrichment Electives are not required for graduation.

**Topic 1: Clinical Informatics**

**Topic 2: Medical Spanish**

**Topic 3: Nutrition**

**Topic 4: Racial Disparities**

**Topic 5: Integrating Technology in Healthcare**

**Topic 6: Personal Genomics in Clinical Decision Making**

**Topic 7: Racial Dimension of American Medicine**

**Topic 8: Understanding Homelessness**

**Topic 9: Foundations in Global Health**

**Topic 10: Humanity Heart and the Art of Medicine**

**Topic 11: Introduction to Biomedical Device Design**  
**Topic 12: Narrative Medicine: Close Reading, Expressive Writing**  
**Topic 13: Independent Study**  
**Topic 14: Medicinema**  
**Topic 15: Culinary Medicine**  
**Topic 16: Healer's Art: Heart of Medicine**  
**Topic 17: Personal Genomics**  
**Topic 18: Lifelong Learning and Teaching**  
**Topic 19: Artificial Intelligence in Healthcare**  
**Topic 20: Environmental Issues that Impact Public Health**  
**Topic 21: Medical Anthropology**  
**Topic 22: Fundamentals of Health Innovation**  
**Topic 23: Gun Violence and Physicians**  
**Topic 24: Advanced Clinical Decision Making**  
**Topic 25: Health Advocacy Program**  
**Topic 26: Health Informatics for the 21st Century**  
**Topic 27: Medical Spanish I**  
**Topic 28: Medical Spanish II**  
**Topic 29: Congenital Heart Surgery**  
**Topic 30: Intro to Health Economics**  
**Topic 31: Exploring Two Sides of Migrant Health**  
**Topic 32: Optimizing Performance and Wellness in the Clinical Environment**  
**Topic 33: Changemakers in Health System Science**

**Topic 3: Neonatal Intensive Care Unit.** The student functions as an intern in the NICU and is supervised by the senior pediatric house officer. He/she takes patients in rotation with the other residents and is responsible for their evaluation, examination, management, and discharge. Along with this goes the responsibility for reading in depth about the patients and their problems, for checking on lab work, and seeing them each day, and for adequate documentation in the medical record. The student is responsible for attending high-risk deliveries along with the pediatric resident. The student participates in attending rounds with the rest of the house staff assigned to the NICU. The student is paired with a neonatologist and/or neonatal nurse practitioner. The student is responsible for talking with the families of babies assigned to him/her and participating in parent education regarding their newborn.

**Topic 4: Pediatric Intensive Care Unit.** The student will, through participation as an acting intern, develop skills in the assessment, stabilization, diagnosis and management of critically ill infants and children. The student should be responsible for 2-3 patients at all times. They will present on rounds, write the admission physical examination and history, daily notes, transfer and discharge summaries. In addition, students will be responsible for completing all on-line course modules.

**Topic 5: Pediatric Cardiovascular Intensive Care Unit.** Students will become part of the CVICU team, attending and participating in rounds, conferences, and daily patient management. They will interact with multiple disciplines, and provide supervised care for assigned CVICU patients and families. Students will develop a basic understanding of cardiac physiology, as demonstrated by children in the CVICU, learn how cardiac anatomy influences cardiovascular physiology, learn how altered cardiovascular physiology influences the function of other organ systems, develop basic understanding ICU monitoring systems, learn how to present patients and their data in an organized fashion (i.e. effective communication), learn how to document care succinctly in the medical record, and learn how to function in a multidisciplinary team environment.

## MED 380CC Critical Care Special Topics

**Topic 1: Medical Intensive Care Unit.** Student will be an acting intern in the medical ICU. They will be expected to take responsibility for their patient(s), including pre-rounding, presenting on attending rounds, forming an assessment and plan, following up on diagnostics studies, participating in therapeutic or diagnostic procedures, communicating with patient's family members, and coordinating care with consulting services as well as with nurses, respiratory therapists, physical therapists, case manager, etc. Student will also be expected to participate in rounds and be actively engaged in and learn from other patients on the service. Attending rounds occur approximately 8am-12pm every day, and there may be an additional didactic session in the morning, at which the student may be asked to present a topic. Student is expected to read about ICU medicine in general, and about their patients' conditions specifically. They will work closely with the ICU interns, residents, and attending on service. The medical ICU has abundant learning opportunities, and the enterprising student will take advantage of this. It is the ideal environment to observe and study cardiac and pulmonary physiology. It is an ideal setting in which to gain experience making critical decisions in a timely fashion.

**Topic 2: Surgery Intensive Care Unit.** The main goal of the SICU elective is to provide the student with an evidence based approach to the assessment and management of the critically ill patient. This will be accomplished relying on weekly didactics based on the provided CCM core curriculum and direct patient care. The student will be assigned up to three patients at a time for which they will be responsible for performing the daily assessment and formulating a treatment plan under the supervision of the SICU resident and SICU attending. By the end of the rotation it is expected the student will be able to diagnose and treat sepsis, ARDS, as well as be knowledgeable in the resuscitation of hemorrhagic shock and the burn patient. The student will be able to discuss the basic modes of positive pressure ventilation and perform basic ventilator management. Skills lab will consist of central line placement, chest tube placement and percutaneous tracheostomy. The schedule will be six days a week, one day off per week and no overnight call.

## MED 380EM Emergency Medicine

Exposes students to common clinical scenarios in Emergency Medicine with graduated expectations of clinical decision making and reasoning, recognizing and interpreting symptoms and signs of acute illness, differential diagnosis and treatment versus admission plans.

## MED 380GP Geriatrics/Palliative Care

Exposes students to common clinical scenarios in Geriatrics/Palliative Care with graduated expectations of clinical decision making and reasoning, recognizing and interpreting symptoms and signs of disease, differential diagnosis and treatment plans. Special consideration to pain management and polypharmacy.

## MED 380IM Internal Medicine Core Clerkship

Exposes students to common clinical scenarios in Internal Medicine with graduated expectations of clinical decision making and reasoning, recognizing and interpreting symptoms and signs of disease, differential diagnosis and treatment plans.

## MED 380MS Milestone Zero

This course provides a transition from scientific foundations courses to clerkships.

## MED 380PC Primary Care, Family and Community Medicine

Exposes students to common clinical scenarios in primary care with graduated expectations of clinical decision making and reasoning, recognizing and interpreting symptoms and signs of disease, differential

diagnosis and treatment plans. Content and clinical experiences related to each phase of the human life cycle that will prepare students to recognize wellness, determines of health and opportunities for health promotion.

### **MED 380PM Pediatrics Core Clerkship**

Exposes students to common clinical scenarios in Pediatrics with graduated expectations of clinical decision making and reasoning, recognizing and interpreting symptoms and signs of disease, differential diagnosis and treatment plans.

### **MED 380PN Psychiatry/Neurology Combined Core Clerkship**

Exposes students to common clinical scenarios in Psychiatry and Neurology with graduated expectations of clinical decision making and reasoning, recognizing and interpreting symptoms and signs of disease, differential diagnosis and treatment plans.

### **MED 380SM Surgery Core Clerkship**

Exposes students to common clinical scenarios in Surgery with graduated expectations of clinical decision making and reasoning, recognizing and interpreting symptoms and signs of disease, differential diagnosis and treatment plans.

### **MED 380WH Women's Health Core Clerkship**

Exposes students to common clinical scenarios in Women's Health with graduated expectations of clinical decision making and reasoning, recognizing and interpreting symptoms and signs of disease, differential diagnosis and treatment plans.

### **MED 381MS Milestone One**

A course to facilitate the transition from medical school to residency. The course reinforces unique DMS curricular themes, skills and attributes. Hones and assesses clinical skills and builds on professional success and wellness curriculum taught earlier in the program.

### **MED 381PC Advanced Primary Care, Family and Community Medicine**

Gain exposure to common clinical scenarios in primary care with graduated expectations of clinical decision making and reasoning, recognizing and interpreting symptoms and signs of disease, differential diagnosis and treatment plans. Hone skills with indirect oversight, given student experience.

### **MED 382NO Neurology Clerkship**

Exposes students to common clinical scenarios in Neurology with graduated expectations of clinical decision making and reasoning, recognizing and interpreting symptoms and signs of disease, differential diagnosis and treatment plans.

### **MED 383PH The COVID-19 Pandemic, Global Health on the Front Lines**

The COVID-19 Pandemic presents a once-in-a-lifetime learning opportunity for DMS students. DMS students are talented, knowledgeable, experienced, and passionate – at this moment in history, they can and should be involved in the pandemic response. DMS student involvement will not get in the way of the clinical or public health response, and every effort will be made to minimize risk to student health and well-being. This will take a team effort. True to the DMS spirit, for this elective we are truly “building the ship as we sail it.” We will need to work with speed and flexibility; it will require faculty, staff, and student input and direction; it may take swift, yet imperfect, decisions for sake of efficiency or safety or in general “just making the best out of the situation” but we will learn, help out, and do it together. At the end of the

day, our overarching goal is to stem the tide of this pandemic through this 2-week elective.

### **MED 390PN Psychiatry Clerkship**

Exposes students to common clinical scenarios in Psychiatry with graduated expectations of clinical decision making and reasoning, recognizing and interpreting symptoms and signs of disease, differential diagnosis and treatment plans.

### **MED 480CD Cardiology**

During the Cardiology 2-week elective, students will begin to develop and demonstrate the clinical skills, knowledge, and professional behaviors necessary to evaluate and care for adult patients who are under the care of a sub-specialist. Additionally, they will gain experience in the role of a consultant, under the careful guidance of the sub-specialty attending physicians.

### **MED 480CP Consultation and Inpatient Child Psychiatry**

During this 2-week child psychiatry elective the student will spend time at the Dell Children's Medical Center evaluating inpatient consultations from pediatricians, pediatric sub-specialists, and pediatric surgery sub-specialists. The student will do initial psychiatric evaluations and follow up visits. He/she will participate in treatment teams to plan and effect pharmacologic, psychotherapeutic, and systemic interventions. the student will be given assigned readings to report on and will participate in didactic conferences.

### **MED 480MK Orthopedic Surgery**

During this 2-week orthopedic surgery elective, students will participate in daily rounds with the team and other daily activities, participate in operating room, participate in outpatient clinic (1 day per week), evaluate patients in the ER as assigned by the supervising faculty and write a full focused consultation note, participate in scheduled conferences (2 mandatory conferences), take 1 overnight call with the on-call team, and participate in morning rounds on 1 weekend day.

### **MED 480NS Neurosurgery**

During this 2-week neurosurgery elective, students will participate in daily rounds with the team and other daily activities, participate in operating room, outpatient clinic (1 day per week), evaluate patients in the ER as assigned by the supervising faculty and write a full focused consultation note, participate in scheduled conferences, take 1 overnight call with the on-call team, and participate in morning rounds in 1 weekend day.

### **MED 480ON Hematology/Oncology**

During the Hematology and Oncology 2-week elective, students will begin to develop and demonstrate the clinical skills, knowledge, and professional behaviors necessary to evaluate and care of adult patients who are under the care of a sub-specialist. Additionally, they will gain experience in the role of a consultant, under the careful guidance of the sub-specialty attending physician.

### **MED 480PH Health Policy and Systems Change**

Students will attend didactic sessions in the mornings and will participate in community experiences in the afternoons. Didactic sessions will include topics such as local, state, and national health care structures including the ACA, basic health economics, current controversies and hot topics around health-related policy issues, stakeholder evaluation, and tools for advocacy, community engagement, and coalition building. Community experiences will include site visits to policy think tanks, legislative committees, local nonprofits, governmental agencies (e.g. CMS, DSHS). By the end of the rotation, students will produce a draft of a policy brief and present an "elevator pitch" on the topic to the class. They will also produce a draft of an op-ed on their

chosen topic for potential submission to a local, regional, or national publication.

### **MED 481DM: Medical Practice of Pathology**

The student will gain exposure to a full range of pathology tools utilized in diagnostic medicine. Unlike the 4-week elective rotation in Diagnostic Medicine open to only fourth year medical students, this 2-week elective rotation will be open to second year medical students with a special interest in the practice of pathology as a medical profession. The time will be focused on pathology and laboratory medicine as a career, in both the inpatient and outpatient settings to gain a strong understanding of how pathologists act as a team player in the care of patients.

The student will have the opportunity to observe a team approach between pathologists and radiologists in diagnostic medicine through attendance with the attending pathologist at the time of diagnostic tissue sampling of a lesion in question and also through attendance at the weekly integrated tumor boards/case conferences, whereby the clinical, radiology and pathology findings are presented and discussed to determine plans of action in patient care.

### **MED 481IM Infectious Disease**

During the Infectious Diseases 2-week elective, students will begin to develop and demonstrate the clinical skills, knowledge, and professional behaviors necessary to evaluate the care for adult patients who are under the care of a sub-specialist. Additionally they will gain experience in the role of a consultant, under the careful guidance of the sub-specialty attending physicians.

### **MED 481MK Musculoskeletal Institute IPU**

In this elective, students will work as part of Integrated Practice Units, gaining experience and understanding of the unique practice setting of an IPU. Students will learn about the structure and function of the team, the flow of patients through the care process, and the use of patient-reported outcomes to inform decision-making and drive ongoing quality improvement. This course may be of interest for students interested in musculoskeletal medicine, including orthopedic surgery, physical medicine and rehabilitation, neurology, palliative care, internal medicine, and family practice.

### **MED 481OP Ophthalmology and Retina**

Work with faculty to diagnose, test, and treat vitreoretinal diseases and various general ophthalmology conditions. Use a direct-ophthalmoscope, slit lamp, and other specialized instruments in performing an ophthalmic examination. Observe surgical procedures performed both in office and in the operating room. Participate in activities such as office practice, continuing medical education programs, emergency room call, hospital consultations, surgical procedures, civic activities, and medical staff meetings.

### **MED 481PH Immigrant Health**

Students will attend educational sessions in the mornings and will see patients at one of several clinical sites in the afternoons. Educational sessions will include both didactic teaching. The classroom didactics will include specific screening and practice recommendations (e.g. for medical conditions, mental health and trauma, social determinants of health, cultural competency, and legal status) that the students will apply in the clinical setting to help patients navigate the health system and improve health and well-being. Clinical sites will include outpatient primary care clinics in Austin that see large numbers of immigrants. By the end of the elective, students will be expected to submit a written reflection discussing an immigration-related health or healthcare problem noted during their patient encounters and what potential solutions could be implemented based on the concepts and

skills they learned during the course. They will also create an immigrant health resource toolkit for use in a local clinical setting.

### **MED 481PN Public Mental Health**

Students will be able to work closely with a psychiatrist and other mental health care professionals in a community setting during this 2-week elective. As the Local Mental Health and Intellectual and Developmental Disability Authority, Integral Care provides individuals with high quality mental health care, collaborates with community partners to strengthen programs and systems, and works to raise awareness of mental health issues in our community. During this elective, students will have the opportunity to work with patients and be able to observe community psychiatry work via outreach teams and outpatient clinics. During this elective, the student will encounter Dell Med psychiatry residents only on Tuesday afternoons.

### **MED 481SM Subspecialty Community Surgery**

The Subspecialty Community Surgery Elective will provide students an opportunity to interact directly with community private practice surgeons who have been mutually chosen by the Elective Director and student for a 2-week rotation. Students will gain insight into how a non-academic, busy surgical practice functions and will serve as an "apprentice" to the preselected surgical subspecialist. Beyond the clinical knowledge students will gain, the goals of this elective include exposure to the business of medicine. We expect the volunteer surgeries to teach students on how their practice functions as a free-standing business. Students will predetermine which areas of surgical practice they wish to be involved with and the Elective Director will work to find a mentor who meets the needs of the students.

### **MED 481WH Transition to OB/GYN Residency**

This elective will serve as a fourth-year medical student learning opportunity for prospective obstetrics and gynecology residents to facilitate their UME-to-GME transition. ACGME Milestones provide direct performance targets for residents as they enter and progress through their training. These milestones describe knowledge, skills, attitudes, attributes, and behaviors within the six core competencies. Elective students are expected to learn basic clinical/procedural skills and techniques using Milestone 1 as a guide. A combination of flipped classroom and case-based sessions will be used in the classroom and simulation sessions will be held to allow students to engage in hands-on practice of procedural skills.

### **MED 482CD Cardiology eConsults**

This is an asynchronous remote Elective in Cardiology for senior medical students. The student will gain expertise in an innovative method for caring for ambulatory patients with chronic or suspected cardiovascular conditions. The student will be expected to review excerpts of the patient's chart on the eConsult platform (Leading Reach). The student will review pathophysiology, pharmacology, diagnostic and treatment strategies and guidelines for care on each patient. The student will review pathophysiology, pharmacology, diagnostic and treatment strategies and guidelines for care on each patient. They will draft an eConsult on the platform that summarizes the patient's condition, basic cardiac diagnosis, acuity rating, and recommendations. The attending will modify and co-sign the note. The student will discuss the cases with the attending three times weekly. At the end of each week, the student will produce a report on clinical strategies on four major diagnoses per week (Valve, HF, CAD, Arrhythmia).

### **MED 482DM Evidence Based Imaging**

This online elective utilizes the American College of Radiology (ACR) online portal called "Radiology TEACHES" to teach medical students how to appropriately order clinical imaging. Clinical vignettes are integrated with "ACR Select" clinical decision support (CDS) to simulate ordering



studies on patients. As our country is trying to reign in healthcare costs, many hospital systems are incorporating decision support software into the ordering process, and it is important for student physicians to learn this process and the reasoning and evidence behind it. Students will learn how the ACR appropriateness criteria, which are evidence-based imaging guidelines, are incorporated into ACR Select and clinical patient care. The modules are supplemented with 2 online lectures and supplemental materials regarding evidence based medicine. Students will complete a pre-test, navigate several online modules with clinical vignettes, and complete a post-test.

### **MED 482IM Gastroenterology**

During the Gastroenterology 2-week elective, students will begin to develop and demonstrate the clinical skills, knowledge, and professional behaviors necessary to evaluate and care for adult patients who are under the care of a sub-specialist. Additionally, they will gain experience in the role of a consultant, under the careful guidance of the sub-specialty attending physicians.

### **MED 482PN Ambulatory Psychiatry**

The student will spend two weeks in various ambulatory psychiatric settings. They will have the opportunity to choose amongst multiple clinics. Additionally, the student will be able to observe electroconvulsive therapy during their time in this elective. By participating in this elective, the student will have more of an opportunity to see how an outpatient psychiatrist treats various psychiatric disorders such as depression, bipolar disorder, substance use disorders, schizophrenia, etc. While the majority of this elective will be observational, the student will have the opportunity to interact with patients and obtain collateral. Additionally, they will be asked to discuss patients' mental status exams and make treatment recommendations to the team. On Tuesdays, the student will partake in Psychiatry Residency Didactics or the Child and Adolescent Fellowship Didactics. Additionally, if interested, they can have some self-directed study time to work on their assigned written report.

### **MED 482SG Abdominal Transplantation**

Students will participate in the evaluation, surgical and medical management, and post-transplant care of adult and pediatric kidney transplant recipients. The outpatient clinical experience will consist of outpatient evaluation and management of pre- and post-transplant patients, while the inpatient surgical experience will provide the opportunity to participate in both living and deceased donor nephrectomies and kidney transplants. Students will learn from all members of the multidisciplinary transplant team and will attend weekly selection committee conferences.

### **MED 482SM Subspecialty Community Surgery**

The elective will provide students an opportunity to interact directly with community private practice surgeons who have been mutually chosen by the elective director and student for a 2-week rotation. Students will gain insight into how a non-academic, busy surgical practice functions and will serve as an "apprentice" to the preselected surgical subspecialist. Beyond the clinical knowledge students will gain, the goals of this elective include exposure to the business of medicine. We expect the volunteer surgeons to teach students on how their practice functions as a free-standing business. We envision students will predetermine which areas of surgical practice (e.g. Colorectal Surgery) they wish to be involved with and the elective director will work to find a mentor who meets the needs of the student.

### **MED 483IM Nephrology**

During the Nephrology 2-week elective, students will begin to develop and demonstrate the clinical skills, knowledge, and professional behaviors necessary to evaluate and care for adult patients who are under the care of a sub-specialist. Additionally, they will gain experience

in the role of a consultant, under the careful guidance of the sub-specialty attending physicians.

### **MED 483PN Mental Health at the Movies - Character as Case**

Mental Health at the Movies - Character as Case will offer a deep exploration of psychiatric conditions and treatment with an emphasis on psychotherapeutic skill. There will be three forms of engagement per day for an eight hour period. View 10 films that cover 10 different psychiatric conditions and psychotherapeutic techniques (4 hours/day), discuss conditions, treatments, social determinants and "what matters to the patient" as presented in the films with instructor (2 hours/day), read assigned articles and with a partner, create and perform a script of a dialogue of a psychotherapy session between patient and psychiatrist (2 hours of self-directed learning/day).

### **MED 483OP Introduction to Ophthalmology**

This course is designed as an introductory and familiarization course for second-year Dell Medical Students who are considering ophthalmology as a career choice or whose goals are to learn and practice taking an ophthalmic medical history and performing an ophthalmology specific physical examination as part of their medical education. Additionally students will have the opportunity observe and shadow academic and community-based affiliate faculty ophthalmologists in clinical practice. While the student will spend the majority of time in an office-based environment, at least 1/2 day each week will be spent in the operating room observing intraocular microsurgery performed by the assigned faculty member. The first week will be devoted to learning and practicing basic examination techniques such as: assessing visual acuity, recording ocular motility, observing the external ocular adnexa (eyelids, orbit, lacrimal system), performing a slit-lamp examination, and conducting a funduscopy examination. By the end of the course students will be able to perform will be expected to demonstrate basic proficiency conducting an ophthalmic examination. Students will receive information on residency application requirements and guidance on preparing and structuring a competitive resume. Students will learn of research opportunities in the field of ophthalmology available in the department, the medical school, or the university.

### **MED 483SM Plastic Surgery**

During this 2-week plastic surgery elective, students will participate in daily rounds with the team and other daily activities, participate in operating room, participate in outpatient clinic (at least 1 day per week), evaluate patients in the ER as assigned by the supervising faculty and write a focused consultation note, participate in scheduled conferences, and participate in morning rounds on 1 weekend day.

### **MED 484IM Endocrinology**

During the Endocrinology 2-week elective, students will begin to develop and demonstrate the clinical skills, knowledge, and professional behaviors necessary to evaluate and care for adult patients who are under the care of a sub-specialist. Additionally, they will gain experience in the role of a consultant, under the careful guidance of the sub-specialty attending physicians.

### **MED 484PH: The COVID-19 Pandemic, Global Health on the Front Lines**

The COVID-19 Pandemic presents a once-in-a-lifetime learning opportunity for DMS students. DMS students are talented, knowledgeable, experienced, and passionate – at this moment in history, they can and should be involved in the pandemic response. DMS student involvement will not get in the way of the clinical or public health response, and every effort will be made to minimize risk to student health and well-being. This will take a team effort. True to the DMS spirit, for this elective we are truly "building the ship as we sail it." We will need to work with speed and flexibility; it will require faculty, staff, and student

input and direction; it may take swift, yet imperfect, decisions for sake of efficiency or safety or in general “just making the best out of the situation” but we will learn, help out, and do it together. At the end of the day, our overarching goal is to stem the tide of this pandemic through this 2-week elective.

### **MED 484PN Community Psychiatry**

Students will actively participate at a minimum of two locations during this four week rotation - NAMI Austin and the Austin Clubhouse - which will offer students an appreciation of the available local mental health resources. Total of 35-40 hours per week, including supervision and reading/research for projects. Interested students will meet weekly with the Faculty Director for supervision and to process their experiences on the rotation. The students will be encouraged to keep a journal through their rotation of their experiences, thoughts, and reflections. Every student will do at least one project during the rotation. The only requirement of the project is that it benefits the local mental health community. Examples include presentations, community outreach, computer web design, etc.

### **MED 484PS Pediatric Cardiac Anesthesiology**

This elective rotation is designed to introduce students to all aspects of pediatric cardiac anesthesiology including intraoperative management of children and adults with congenital heart disease. At the conclusion of this elective, students should be familiar with the basic anatomy and physiology of the most common congenital cardiac sessions, the principles of cardiovascular anesthesia, cardiovascular pharmacology, cardiopulmonary bypass, and the fundamentals of the intraoperative and perioperative care of children and adults undergoing congenital heart surgery. This goal will be accomplished through a 2-week clinical rotation centered around the pediatric cardiac anesthesia team. During this time students can expect to: a) Observe and have hands-on experience (when appropriate) with all levels of pediatric cardiac anesthesia including: the operating room, Cath lab, MRI suites and cardiac care unit. b) Participate in patient handoffs between eh OR team and cardiac care unit. c) Attend multidisciplinary rounds. d) Develop and empathetic and patient-centered understanding of the experience of congenital hear patients and their families. e) Attend scheduled case conferences, research meetings, and quality assurance meetings. f) Participate in out-of-department anesthetic-related management when possible. g) Present one anesthesia-related topic at a departmental meeting or write a reflective essay. h) At orientation, be provided reading materials for use during the rotation. i) Be paired with an anesthesiologist on a daily basis and immediately involved in the care of patients with complex congenital heart disease.

### **MED 484SG Congenital Heart Surgery**

Congenital Heart Surgery is a complex and highly specialized field. First rate results are only achieved in centers that recognize the treatment of children with complex heart defects necessitate consistency, accuracy and diligence. The University of Texas Dell Medical School and Dell Children’s Medical Center have recognized this importance and created the Heart Center, with a multidisciplinary team approach. With that in mind, we welcome those students who wish to gain knowledge in the field with a hard-working, dedicated approach.

### **MED 484SM Anesthesiology**

During this 2-week anesthesiology elective, students will participate in preoperative evaluation and optimization, participate in intraoperative management, participate in postoperative management, evaluate patients in the ER for impending emergent/urgent surgery, participate in scheduled conferences, present one anesthesia-related topic at a departmental meeting, and participate in out-of-department anesthetic-related management when possible.

### **MED 485IM Internal Medicine Selective**

Exposes students to common clinical scenarios in Internal Medicine Subspecialties with graduated expectations of clinical decision making and reasoning, recognizing and interpreting symptoms and signs of disease, differential diagnosis and treatment plans.

**Topic 1: Hematology/Oncology**

**Topic 2: Infectious Diseases**

**Topic 3: Cardiology**

**Topic 4: Gastroenterology**

**Topic 5: Nephrology**

**Topic 6: Endocrinology**

### **MED 485SM Surgery Selective**

Exposes students to common clinical scenarios in Surgical Medicine Subspecialties with graduated expectations of clinical decision making and reasoning, recognizing and interpreting symptoms and signs of disease, differential diagnosis and treatment plans.

**Topic 1: Neuro Surgery**

**Topic 2: Plastic Surgery**

**Topic 3: Orthopedic Surgery**

**Topic 4: Anesthesia**

**Topic 5: Pediatric Surgery**

**Topic 6: Urology**

### **MED 486SM Urology**

During this 2-week urology elective students will participate in daily rounds with the team and other daily activities, participate in operating room, participate in outpatient clinic (1 day per week), evaluate patients in the ER as assigned by the supervising faculty and write a full focused consultation note, and participate in scheduled conferences.

### **MED 487PM Camp Medicine**

This is a 2-week elective. During the first week, students will have self-directed study to review provided modules on camp doctoring and common pediatric complaints as well as camp health center protocols. The goal of this week will be for students to familiarize themselves with basic camp medicine skills and to begin to understand the fundamental differences between working in a camp setting with limited resources compared to a clinic or hospital. They will also have opportunities to work with PEM faculty members in the emergency department of Dell Children’s Medical Center of Central Texas providing direct patient care during this first week. During the second week, students will live at Camp Longhorn in Burnet, TX and work directly with one or more PEM faculty members. Lodging, meals and a small travel stipend will be provided. Students will become part of the medical team where they will work in the health center alongside pediatric nurses, nursing students and paramedics under the direct supervision of a pediatric emergency medicine (PEM) physician to care for campers, counselors and other staff.

### **MED 489MD Independent Clinical Study**

The 80-hour elective allows students to participate in clinical shifts no shorter than 4 hours and no longer than 12 hours. These shifts must be in a single clinical discipline but do not have to be done consecutively (i.e. could be every Saturday or every Thursday afternoon). The purpose of this elective is to allow students to sharpen their skills before the fourth year or to explore an area of clinical interest. This elective may be completed during the spring semester of year 3, and requires approval through the Curriculum Office in the Department of Medical Education.

### **MED 489PM Classical Cases in Clinical Bioethics**

Students enrolled in this elective will participate in a two-pronged curriculum for improving one’s knowledge base in important historical

cases in bioethics and applying lessons learned from those precedents to current cases. The concept of casuistry and its application will be discussed as well as the shortcomings of such an approach. Students will gain knowledge in the interaction of medicine, bioethics, and the legal system as well as the nuances of practicing within a religiously-affiliated healthcare system. They will receive an introduction to the pediatric ethics committee at Dell Children's Medical Center and will participate in consultations that arise during their time in the course, as well as regularly scheduled meetings of the committee. Reading assignments will be provided and the primary method of evaluation will be assessment of participation in online forum discussions as well as in zoom/in-person lectures and group sessions.

### **MED 490MD Anatomy**

This course will allow senior medical students an opportunity to perform comprehensive dissections of a specific anatomical region (e.g. abdomen, pelvis, head & neck) that they will need to know in detail for their selected residencies (e.g. surgery, OB/Gyn, otolaryngology); and provide these students with an in-depth review of the clinical anatomy, anatomical variations, embryology and histology of such regions.

### **MED 490PM Transition to Pediatric Residency**

This elective will serve to prepare fourth-year medical students for their pediatric residency by providing high-yield learning sessions aimed at teaching the knowledge and skills required for a successful intern year. Learning sessions will include a variety of formats such as didactics, interactive sessions, role play, student-led case presentations, simulations, and observations. The course objectives are to provide students with resident-level medical knowledge, certain procedural/communication/interpretive skills, and the ability to lead and work within a multidisciplinary team. The ACGME competencies/milestones and the 13 EPAs have been used to develop the course objectives and evaluation criteria. 1. Didactic sessions will be led by attendings, hospital medicine fellows, chief residents, and the students themselves. Didactics will cover core topics important to pediatric residency such as the care of the well and sick newborn, typical and atypical growth and development, common inpatient/emergency/outpatient scenarios (dehydration, asthma, bronchiolitis, pneumonia, abdominal pain, malnutrition, rashes, skin and soft tissue infections, seizures, headaches, UTI, etc), quality improvement and patient safety, documentation, etc. 2. Interactive sessions will include student led morning-report style case presentations, presentation of sample H&Ps, order writing/entry, prescription writing, and discussions with different interdisciplinary professionals (nurses, therapists, etc). 3. Role playing sessions will focus on communication skills. Examples include difficult conversations with patients/families and the de-escalation of certain situations. 4. Procedural skill sessions will include discussion of indications/contraindications of, obtaining consent for, and the steps of performing common medical procedures (LP, catheterization, venipuncture, splinting, etc). Mannequins will be used to demonstrate competence in performing these procedures. 5. Simulation sessions will be preceded by a brief overview of PALS and NRP. Students will then use a simulation mannequin for various scenarios such as respiratory distress/arrest, shock, dysrhythmias, trauma, seizures, ingestions, etc. 6. Observational sessions will include observing and evaluating the resident's patient-hand off and inpatient rounds. These observational activities will be followed by group reflection and the generation of feedback.

### **MED 492IM Night Float**

Night float and cross coverage teams are increasingly relied upon to provide safe, quality care overnight, when the hospital functions with less staff and ancillary services. At night, residents have far less administrative tasks, allowing more time for formal education. Furthermore, without the benefit of a large daytime team and multiple

specialists, clinicians at night are afforded a larger degree of autonomy in direct patient care.

### **MED 493MD: Medical Volunteer**

Students will complete 80 volunteer hours for professional development credit.

**Topic 1: COVID Volunteer.** Students will complete 80 volunteer hours during the COVID-19 Pandemic crisis for professional development credit. Volunteer hours may consist of screening patients and contact tracing among other volunteer work during the global health crisis.

### **MED 494MD Telemedicine**

The student will gain expertise using phone and video to care for ambulatory patients. The student will be expected to review the patient's chart in the EMR. The student will review pathophysiology, pharmacology, diagnostic and treatment strategies and guidelines for care on each patient. They will prepare questions for the patient that explore relevant symptoms, reactions to medications and possible adverse effects of medications. During the telemedicine sessions, the attending will introduce the student to the patient. The visits can be done one of two ways depending on patient preference and practicality. 1) The attending will listen in as the student interviews the patient. The attending can either 1) "scribe", working on documentation as the student does the interview and examination, or 2) the student can scribe for the attending (depending in part on EMR access). The visit may evolve so that both happen to some extent. Alternatively the attending can take notes for feedback to the student about what worked well and where there are opportunities to improve. The attending will modify and co-sign student notes. The student will discuss the patients, diseases, relationship, psychosocial factors, and communication strategies with the attending after each telemedicine session, or after a set of them depending on scheduling and expediency. At the end of each week, the student will produce a report on clinical strategies on four major diagnoses per week.

### **MED 495IM Transitions of Care**

Health care in the United States is costly, fragmented, and often does not deliver effective outcomes. Developing a "Systems-Ready Physician" is an emerging and important part of undergraduate medical education. Systems thinking- the ability to appreciate and work with the complexities of interdependent systems – is an important aspect of becoming a Systems-Ready Physician. [Gonzalo] A complex systems issue is that of Transitions of Care. Transitions of care are critical times during a patient's medical management. In particular, patient transitions from the inpatient to the outpatient setting can be an especially complicated time, and one potentially fraught with errors if there is insufficient coordination and communication gaps. Ineffective transition of care contributes to hospital readmissions, medication errors, lack of adequate follow-up visits, and further complications. [McBryde] [Hesselink]. Effective transitions of care entail interprofessional teamwork, robust communication between inpatient and outpatient providers, as well as attention to detail. [Tang]

### **MED 498SM Comprehensive Cleft Care**

Children with congenital anomalies such as cleft palates represent a patient population with a unique set of needs and who require multidisciplinary care with craniofacial plastic surgeons, otolaryngologists, orthodontists, nutritionists, speech pathologists, and pediatricians to name a few. While increased emphasis on health systems science and value-based care has begun to be incorporated into medical education, the inclusion of experiential learning opportunities spanning multiple societies is often lacking. The creation of a multidisciplinary pediatric plastic surgery elective will allow students



exposure to the field of craniofacial surgery, gain interdisciplinary and interprofessional experience, and obtain a better health-systems perspective on how these complex patients navigate the care system. This goal will be accomplished through a 2-week clinical rotation centered around the pediatric plastic surgery team. In particular, students will focus on cleft palate care as these patients and families interact with a variety of medical specialties and support services. Students will spend time with the craniofacial plastic surgery team in the operating room, general pediatric plastic surgery clinic, multidisciplinary cleft palate clinic, and the inpatient settings. They will also interact with the other members of the cleft palate team such as nutrition, orthodontics, ENT, speech pathologists, and speech therapy.

### **MED 580DE Clinical Dermatology**

This course is designed for medical students who are either considering a career in dermatology or desire exposure to dermatology in preparation for a career in another field. The course has been designed to expose the student to all aspects of a dermatology practice. This four-week course includes exposure to general dermatology, pediatric dermatology, cutaneous oncology, procedural dermatology, phototherapy, dermatopharmacology and dermatopathology. The student will work one-one-one with residents and attendings in each of these fields. The student will be responsible for reading the assigned text and journal articles, preparing given assignments, and participating in weekly didactics including journal club. Students will also give 1 major presentation of a topic of their choice to the department during this rotation. Students will be expected to read a dermatology textbook (approximately 250 pages) while on the rotation. Students should be available on nights and weekend to join dermatology residents on call should they be called into the hospital. Activities will change slightly each week. A detailed schedule of conferences and clinical assignments will be given at the beginning of the rotation and/or beginning of each week.

### **MED 580DM Diagnostic Radiology and Pathology**

The student will gain exposure to a full range of radiology and pathology tools utilized in diagnostic medicine. There will be focused time spent on both radiology and pathology services separately. In addition, the student will have the opportunity to see how the diagnostic services work together in a team approach by attendance at the weekly integrated tumor boards/case conferences, whereby the clinical, radiology and pathology findings are presented and discussed to determine plans of action in patient care. A special emphasis throughout the rotation will be given towards 'integrated diagnostics', as it affects the cross-disciplinary practices of radiology, pathology, and genomics.

### **MED 580GH: Topics in Global Health**

This four to eight week elective in global health will be available to fourth year medical students at Dell Medical School during either the fall or spring semester. Since this elective takes place abroad, most students will participate in the late fall semester (November-December) or the spring semester (Jan-May) so as not to interfere with acting internships or residency interviews. Ideally, this is a 6-8 week elective given the travel time and to maximize immersion and learning, but a 4-week elective can be arranged as well. This elective will take place at our partner institution, Moi University School of Medicine and Moi Teaching and Referral Hospital in Eldoret, Kenya, through our membership in the AMPATH (Academic Model Providing Access to Healthcare) Consortium. The AMPATH Consortium is partnership between Moi University and Moi Teaching and Referral Hospital in Eldoret, Kenya, and a consortium of 13 North American university partners, including UT Austin Dell Medical School, and led by Indiana University School of Medicine. We have a formal Memorandum of Understanding, signed by Dean Clay Johnston, formally institutionalizing our membership in the AMPATH Consortium. AMPATH works across the tripartite academic mission of care,

education, and research to improve population health in western Kenya. Bilateral student and trainee exchange is a fundamental part of this partnership, in order to train the next generation of global health leaders. Moi University School of Medicine and Moi Teaching and Referral Hospital, as part of the AMPATH Consortium, have hosted over 1,500 North American medical students for their global health clinical rotation since the founding of the partnership in 1989. In the future, this elective will take place with our partner institution in Mexico, when established, which will follow the same principles as the AMPATH Consortium in Kenya. Medical students will primarily rotate with multidisciplinary teams on the internal medicine or pediatric inpatient wards at Moi Teaching and Referral Hospital, with some additional outpatient (e.g., HIV clinic) or sub-specialty clinical activities (e.g., Cardiac Care Unit) once per week. There is additional case-based and didactic educational sessions that they will participate in and attend weekly as well, including "morning report" case presentations, afternoon lectures on global health topics, weekly evening discussion groups on cultural or ethical topics, and weekly clinical lectures and small group discussions with Moi University medical students, as part of their curriculum. Students are partnered with a senior medical student from Moi University in Kenya in order to foster bilateral counterpart relationships, and facilitate navigation of the Kenyan academic environment, health system, and culture. A faculty member from Dell Medical School will provide guidance before, during, and after the elective and will accompany the student to Kenya providing on-site supervision for at least the first two weeks of their elective. Additional faculty supervision will be provided by faculty from Indiana University School of Medicine who are full-time on the ground in Kenya with visiting faculty positions and clinical responsibilities at Moi University School of Medicine. Moi University School of Medicine faculty physicians will also provide clinical supervision, oversight, and teaching. English is one of the official language of Kenya and all Kenyan medical professionals speak English, so language will not be a barrier to participation in this elective in Kenya. Students will live at the secure housing compound operated by Indiana University, called "IU House" that is a short walk from the hospital and medical school, and hosts North American students, residents, and faculty who are participating in the AMPATH Consortium (usually between 20-40 residents at any given time). This housing compound is secure with gated entry, 24/7 guards, and an alarm system. There is full meal service, Wi-Fi, and other amenities. There is additional opportunity to stay with their Kenyan medical student counterparts in the medical student dormitory that is directly across the street from the hospital and where all the Moi University medical students stay. The UT Austin International Office works in partnership with Dell Medical School in the development and implementation of the Global Health Program. The UT Austin International Office, which administers UT's study abroad and other sponsored international programs, as well as operates UT's Office of Global Risk and Safety, has vetted and approved this site in Kenya, and will similarly vet and approve any future sites in Mexico or elsewhere. Prior to participation in this elective, students will complete the Global Health Elective application form, including answering brief essay questions outlining their desire to participate in such an elective, and their career goals related to global health (see attached). Following this, students will meet with the Director of Global Health and the Course Director for this elective, Dr. Tim Mercer, as well as Sarayu Adeni, the Global Health Program Coordinator, and other affiliated Global Health faculty to further discuss students' interest and career goals, educate students about the elective experience, and set expectations. Following selection for participation in the elective, students will work with Global Health Division staff and faculty to complete pre-departure training and orientation, which is administered through modules in a structured and comprehensive "Canvas" course via the UT System (we can provide Medical Education access to this in order to review, or are happy to come and give a demo to Med Ed or the elective committee). Should demand exceed available space for this elective (not anticipated in academic



year 2019-2020), then this elective application, interview, participation in the Foundations of Global Health Enrichment Elective for MS1s, and participation in the Global Health Student Interest Group will all be factored into the selection process. Students are expected to self-pay for all costs associated with participation in this elective, including, but not limited to, airfare, visa fees, local travel, room and board, and other local accommodations / expenses. In the future, student scholarships may become available pending future division funding and budget priorities, but this is not an option at this time. Financial expectations will be made clear to students well in advance to allow time for ample planning.

### **MED 580OM Introduction To Physical Medicine And Rehabilitation**

During this rotation, students will be involved in the management of rehabilitation patients in a variety of settings including an acute trauma facility, a rehabilitation facility, in specialty clinics, and an outpatient private practice setting. Students will be given the opportunity to evaluate and assist in the management of patients with various rehabilitation conditions. Special emphasis will be given to understanding the goals and priorities in medical management of rehabilitation patients. Educational materials related to Physical Medicine and Rehabilitation will be provided for discussion and reinforcement of information presented in the clinical setting.

### **MED 580OP Comprehensive Ophthalmology and Retina**

This course will be an introduction to the clinical and surgical practice of ophthalmology, with exposure to general ophthalmology as well as subspecialties of retina, cornea, and oculoplastic. Students will be expected to develop basic ophthalmology examination skills, and will be exposed to a variety of common eye diseases and treatments. In addition, students will have an opportunity to participate in research projects if they desire.

### **MED 580PS Pediatric Surgery**

Attendance in office, hospital rounds, inpatient and outpatient surgery. Evaluation of patients in emergency department (including trauma); working with nurse practitioners and residents on the care of patients, caring for hospitalized pediatric surgical patients; and performing consultations. Participation in operative cases, including major and minor cases, laparoscopy, and thoracoscopy. Writing of notes on pediatric surgical patients. Attending conferences.

### **MED 580SG Interprofessional Wound Care Management.**

Students will partake in an immersive exposure to inter-professional wound care and the evaluation and diagnosis of common conditions needing wound care management. Students will be expected to participate in all aspects of patient care including but not limited to - operating, rounding, outpatient evaluation, performing history and physicals, interacting with consulting services and the wound care team. Students will make rounds, evaluate patients with new wound problems alongside the PT-Wound Care Team and participate in wound dressing management, learning techniques, equipment, and topical agents used to achieve optimal wound outcomes. Students will attend out-patient clinic with Wound-Ostomy Nurse Clinicians and Plastic Surgeons, and students will scrub into OR cases for wound debridements and tissue flaps. The student may accompany a home health nurse to a home visit to understand the operationalization of a discharge wound care plan to the patient's home environment.

### **MED 581CD Cardiology Consultation**

Students will see daily consults, formulating an assessment and treatment plan for each patient, which is then presented to residents and faculty. Exposure to exercise stress testing is provided, if desired.

Students spend time with residents and faculty. Students will interpret electrocardiograms and other noninvasive and invasive diagnostic tests.

### **MED 581CP Consultation And Inpatient Child Psychiatry**

The student will spend time at the Dell Children's Medical Center evaluating inpatient consultations from pediatricians, pediatric subspecialists, pediatric surgery subspecialists. The student will do initial psychiatric evaluations and follow up visits. He/she will participate in treatment teams to plan and effect pharmacologic, psychotherapeutic, and systemic interventions. The student will be given assigned readings to report on and will participate in didactic conferences.

### **MED 581DE Pediatric Dermatology**

Students will work one-on-one with Dermatology faculty, both in the outpatient clinic and the inpatient setting. There will be ample time for independent reading. Review of text and journal materials is essential. In addition, a brief presentation lasting less than 20 minutes on a dermatology topic of the student's choosing will be done during the rotation.

### **MED 581EM Pediatric Emergency Medicine**

This is a very active rotation. The Children's Emergency Center has over 76,000 patient visits per year. This is the only level 1 trauma pediatric emergency department available in Central Texas, and one of only 3 level 1 pediatric trauma centers in the state. The student will work approximately 32 hours per week with a full-time attending physician or pediatric emergency medicine fellow staffing the patients with the team. To the extent of the student's demonstrated ability, they will be an active participant in the assessment, planning of management, and the treatment of trauma, acute medical and surgical emergencies, and minor medical/surgical, drop-in patients.

### **MED 581GP Advanced Palliative Care**

This elective is an advanced clinical elective for students with an interest in palliative care. The elective will build on the DMS Palliative Care Geriatrics core clerkship. The goal of this elective is to expose students to the breadth and depth of palliative care, teaching them the appropriate knowledge, skills & professionalism necessary in the care of patients with advanced, incurable illness, including end of life issues. Areas of clinical focus will include the role of hospice and palliative medicine in the care of patients with chronic and advanced illness, the assessment of patients with advanced and terminal illness and practical symptom management. Students will also complete Vital Talk, and intensive training in communication skills for patients and families with serious illness. In addition to an inpatient palliative care experience at Dell Seton Medical Center and Seton Main, students will also spend time at the Livestrong Cancer Institute CaLM clinic to work in the outpatient oncology setting and have a dedicated week at Christopher House, the residential hospice facility of Hospice Austin. For students interested in pediatrics they can spend part of their inpatient time at Dell Children's under the supervision of the Pediatric Palliative Care Team.

### **MED 581NO Child Neurology**

Under the supervision of a faculty member, students will complete a history and neurological exam on children with a variety of neurological disorders, and present the information gathered along with their clinical decisions for feedback. The rotation will include a mixture of inpatient and outpatient activities. Students will also participate in neuro-imaging and EEG interpretations. Students will have the opportunity to conduct inpatient pediatric neurology consultations in collaboration with the pediatric neurology nurse practitioner, pediatric neurology resident, and faculty member. Students may be asked to prepare case presentations and expected to attend educational conferences (Grand Rounds, Noon Conferences, etc.)

### **MED 581NS Neurosurgery**

Students will participate in an immersive experience in neurosurgery, emphasizing the evaluation and diagnosis of common neurosurgical conditions. Students will be expected to participate in all aspects of patient care including but not limited to - operating, rounding, outpatient evaluation performing history and physicals, and interacting with consulting services and the neurosurgery team.

### **MED 581ON Hematology/Oncology**

Students will make daily hospital rounds and may attend one or more clinics per week with residents or members of the faculty. Students will be instructed in taking a medical history and performing a physical examination focused on hematologic and oncologic disorders. Students will be expected to attend weekly conferences including journal clubs, noon conferences, and a monthly Tumor board conference. There will be periodic didactic sessions aimed at instructing students in the interpretation of clinically relevant hematologic/oncologic data.

### **MED 581PM Pediatric Pulmonary**

The elective will consist of four weeks on the inpatient consultative service with opportunities for experiences in the outpatient hospital-based clinics (Cystic Fibrosis, Tracheostomy, Aerodigestive) and outpatient Pulmonary clinics. Students are encouraged to research a relevant topic of their choosing, to be reviewed with faculty. Students will demonstrate knowledge and acquire experience with the diagnosis and management of common disorders in the clinical practice of pediatric pulmonology.

### **MED 581PS Congenital Heart Surgery**

The elective rotation will expose the student to the field of congenital heart surgery, as well as the dynamics of functioning and communicating as a team. Students will have an opportunity to develop a thorough understanding of both normal and congenitally malformed hearts. They will also be exposed to methodologies for the surgical and non-surgical diagnosis and treatment of complex congenital heart disease. Students will participate in the operating room where they will observe and assist with complicated congenital cardiac repairs. There will also be a significant exposure to many of the other specialties that care for these children (i.e. Pediatric Cardiac Critical Care, Pediatric Cardiology, and Pediatric Cardiac Anesthesia). Day observerships with related specialties, such as Pediatric Cardiology, Echocardiography, Interventional Cardiology, and Pediatric Cardiac Anesthesia can be arranged upon request. This is a unique rotation and is designed for those students interested in pursuing careers in surgery or students interested in caring for children with heart disease.

### **MED 581SG Burn Surgery**

The MS-4 student enrolled in this elective will function as a member of the Burn Surgery team for the entire rotation. They will be expected to follow patients on the Burn surgery service, both in the ICU and Med/Surg wards, and make daily reports on rounds regarding their condition. Such reports are expected to include an assessment of the patient's condition with recommendations for further evaluation or changes in therapy based on that assessment. Students will write daily progress notes and enter orders on their patients, both of which will be reviewed and co-signed by a resident or attending. All senior students are expected to assist in the operating room and attend all outpatient clinics. Senior students will be expected to see inpatient consults, participate in burn resuscitations and present to residents and faculty.

### **MED 582OB Reproductive Endocrinology and Infertility**

This elective will give the student a broad overview of the clinical aspects of the sub-specialty Reproductive Endocrinology and Infertility. The REI team consists of two attending faculty members. Outpatient: This elective will build upon the skills acquired during the general Women's

Health clerkship, with a special focus on reproductive endocrinological conditions such as polycystic ovarian syndrome, amenorrhea, hyperandrogenism, recurrent pregnancy loss, general infertility, and oncofertility. The REI elective is an outpatient rotation and will include participation in ambulatory patient encounters. The outpatient clinic takes place in several half day sessions a week, rotating in the academic practice at UTHealth Austin primarily and also at a private fertility practice to give the student an overview of the subspecialty of REI. In addition, there will be exposure to interprofessional services commonly used by REI patients such as acupuncture and psychology. A half a day of week will be spent with our Oncofertility nurse practitioner at the Livestrong Institute. Students will receive formative feedback during these sessions. The student will have a basic gynecological ultrasound course (1/2 day per week) using the ultrasound simulator. The student will also perform a transvaginal pelvic ultrasound under direct observation at new patient encounters as appropriate. At the end of this course, the student will be able to measure the uterus and ovaries and to identify common gynecologic pathologies such as fibroids and ovarian cysts. Students will also participate in any surgeries occurring during the rotation, such as hysteroscopy. In addition, students will observe diagnostic techniques such as saline ultrasounds, hysterosalpingograms (HSG), attending level assisted reproductive technology procedures, such as semen analysis, sperm preparation for intrauterine insemination, oocyte retrieval, and in vitro fertilization (IVF) procedures.

### **MED 582ON Pediatric Hematology/Oncology**

The student will be exposed to the diagnosis and management of malignant diseases and hematologic disorders, and develop an appreciation for the diverse nature of common oncologic and hematologic problems in children. Patient care will be delivered in the inpatient setting. There may or may not be residents assigned to the service during any rotation.

### **MED 582OP Retina**

This elective has a strong emphasis on vitreoretinal diseases. Students work along with faculty in the diagnosis, testing and treatment of vitreoretinal diseases and various general ophthalmology conditions. They learn how to use a direct-ophthalmoscope, slit lamp, and other specialized instruments in performing an ophthalmic examination. Students will also observe surgical procedures performed both in office and in the operating room. Students are to participate in all activities in which the faculty is involved, including office practice, continuing medical education programs, emergency room call, hospital consultations, surgical procedures, civic activities, and medical staff meetings. The working hours of the faculty are the working hours of the student.

### **MED 582PH Health Policy and Systems Change**

The goal of this course is to have students become familiar with key policy issues that impact population health, to consider the impact physicians can have on policy, and to get some practice in skills for changing policies and systems. Students will attend didactic sessions in the mornings and will have self-directed study time in the afternoons. Friday afternoons will be reserved for group debriefs and/or student presentations. There will also be community site visits interspersed through the course which may include visits to policy think tanks, legislative committees, local nonprofits, Austin Public Health, local healthcare administrative meetings, and other pertinent health-related governmental agencies (e.g. CMS, DSHS). By the end of the rotation, students will produce an op-ed, a graphic policy brief, and an elevator pitch on a policy topic. Self-directed study time will be used for students to work on these products. The course will progress in 4 units. Week 1 will consist of an introduction to the physician's role in policy discussions and some basics of health policy (i.e. local, state,

and national health care financing structures, basic health economics and comparative health policy, current controversies and hot topics around health-related policy issues). Week 2 will focus on social policies that affect health (i.e. environmental policies, housing and land use, transportation policy, etc). Week 3 will focus on policy change skills development (i.e. stakeholder evaluation, community engagement/coalition building, op-ed writing, media and messaging). Finally, during week 4, students will finalize and submit their op-eds for publication and will have the opportunity to discuss policy topics with state legislators during the 2021 legislative session.

### **MED 582PM Pediatric Gastroenterology and Nutrition**

The student will function as the sub-intern on the Pediatric Gastroenterology Service being the preliminary consultant for both the inpatient and outpatient services. The student will obtain histories, perform physical examinations, and obtain laboratory data. He/she will present these data to the attending to formulate the final consultative report. The student will write daily progress notes under the supervision of the attending. He/she will also attend daily outpatient clinic, assuming a supervised role in the evaluation and management of referred patients. The student will be expected to observe and assist with gastroenterological procedures including endoscopy and liver biopsy.

### **MED 582PS Pediatric Neurosurgery**

Students will gain experience in the evaluation and treatment of pediatric patients with central and peripheral nervous system problems and in the skills and work habits desirable to function as a house officer on a Neurosurgery service. Duties include the work-up and care of inpatients, work-up of clinic patients, work up and care of neurosurgical patients in the emergency room, assistance in the operating room and daily inpatient rounds. There is opportunity for night call. The student is expected to attend teaching rounds and attend Neurosurgery related conferences.

### **MED 583CD Cardiology eConsults**

This is an asynchronous remote Elective in Cardiology for senior medical students. The student will gain expertise in an innovative method for caring for ambulatory patients with chronic or suspected cardiovascular conditions. The student will be expected to review excerpts of the patient's chart on the eConsult platform (Leading Reach). The student will review pathophysiology, pharmacology, diagnostic and treatment strategies and guidelines for care on each patient. The student will review pathophysiology, pharmacology, diagnostic and treatment strategies and guidelines for care on each patient. They will draft an eConsult on the platform that summarizes the patient's condition, basic cardiac diagnosis, acuity rating, and recommendations. The attending will modify and co-sign the note. The student will discuss the cases with the attending three times weekly. At the end of each week, the student will produce a report on clinical strategies on four major diagnoses per week (Valve, HF, CAD, Arrhythmia).

### **MED 583DM Diagnostic Pathology**

The goal of this elective is to familiarize 4th year medical students with the practice of anatomic and clinical pathology, with an emphasis in surgical pathology and forensic pathology. Effective test utilization as future interns and residents will be promoted and explored. Students will gain exposure to a full range of pathology tools utilized in diagnostic medicine, and they will learn how test results are communicated to the healthcare team to impact patient care. The student will have the opportunity to see how the diagnostic services work together in a team approach by attendance at the weekly integrated tumor boards/case conferences, whereby the clinical, radiology and pathology findings are presented and discussed to determine plans of action in patient care. Depending on the student's career goals, focused time in a subspecialty of surgical pathology such as neuropathology, gynecologic

pathology, urologic pathology, pediatric pathology, gastrointestinal pathology, hematopathology, and dermatopathology can be arranged after the introductory period. The last two weeks of the rotation will be focused on the practice of forensic pathology, including but not limited to death certification and toxicology.

### **MED 583EM Emergency Medicine**

Dell Seton Medical Center at the University of Texas at Austin is the only Level 1 Adult Trauma Center in Austin. The student will work with a full-time attending physician and be an active participant in the assessment, management, and the treatment of trauma, acute medical emergencies, and minor medical/surgical patients. The rotation will consist of 14 nine hour shifts with 3 of those shifts taking place at Seton Medical Center, a large community hospital, and the remaining 9 at DSMC-UT.

### **MED 583PM Pediatric Infectious Disease**

First contact with ID consults at Dell Children's Medical Center as well as participation in outpatient consultations. The student will be responsible for seeing ID consults in the hospital, and follow ups. Patients are seen on the general wards, as well as the pediatric intensive and neonatal intensive care units. The student will follow a panel of patients, present their progress daily to the attending of the month, and carry out proper evaluation and management. The student may also see patients with the attendings in the private office, but will not have their own panel of patients. The student will be expected to attend all pediatric conferences. A formal presentation on a subject of interest will be required during the rotation. Opportunities for clinical research may be available.

### **MED 583SG Cardiothoracic Surgery**

This elective rotation is designed to introduce students to all aspects of Cardiothoracic Surgery. With that in mind, we welcome those students who wish to gain knowledge in the field with a hard-working, dedicated approach.

### **MED 584CD Cardiology Immersion**

Introduce medical students to the breadth of cardiology including consultative cardiology(both at a safety net hospital (Dell Seton) as well as a tertiary hospital(Ascension Seton Medical Center Austin), ambulatory cardiology, cardiac imaging, cardiac stress testing, coronary intervention, structural heart disease intervention, advanced heart failure and device LV support, and electrophysiology. Improve diagnostic skills including ECG reading and familiarity with cardiac imaging especially ultrasound. Learn guideline based treatment in ambulatory, safety net and tertiary hospitals.

### **MED 584EM Rural Emergency Medicine**

Students rotating at Ascension Seton Highland Lances will learn to navigate the limitations and opportunities of working in a critical access, rural hospital with minimal specialist coverage. The range of patients seen includes those with minor emergencies to the critically ill, many requiring stabilization prior to admission or transfer. Students will be a part of the EM team including nurses, radiology and other EM staff to work cohesively to provide ideal medical care in a potentially difficult environment. They will work with physician attending now in charge of education the senior EM residents as well.

### **MED 584DM Diagnostic Radiology**

The goal of this elective is to familiarize 4th year medical students with the practice of radiology to promote effective test utilization as future interns and residents. Students will gain exposure to a full range of radiology tools utilized in diagnostic medicine, and they will learn how test results are communicated to the healthcare team to impact patient care. The student will have the opportunity to see how the diagnostic services work together in a team approach by attendance

at the weekly integrated tumor boards/case conferences, whereby the clinical, radiology and pathology findings are presented and discussed to determine plans of action in patient care. Depending on the student's career goals, focused time in a subspecialty of radiology such as musculoskeletal, neuro, or interventional can be arranged after the introductory period.

### **MED 585EM Introduction to Emergency Medical Services and Community Paramedicine**

The goal of this clerkship is to expose medical students to the EMS environment and the broad array of medical problems experienced by people calling 911, as well as the non-emergency services provided by EMS systems and the important role of EMS systems in providing community-based health services that keep people well and out of the hospital. Students will also experience first-hand how both the physical and social home and community environments impact people's health and their ability to access care.

### **MED 585PN Psychiatric Consultation - Liaison Service**

Students will evaluate a wide variety of psychiatric problems including depression, anxiety, suicide, substance abuse, head injury, psychosis, post-traumatic stress disorder, personality disorders and victims of violence or trauma, synthesize collateral information relevant to the psychiatric problem being addressed from the following sources: patient, medical records, members of the primary medical team (including nurses, social workers, and ancillary staff), and key family members, then apply it to formulating a treatment plan, develop an appropriate treatment plan for each assigned patient, which may include transfer to a psychiatric hospital, and compose psychiatric consultation notes and summarize findings in presentations to residents and attendings at morning rounds.

### **MED 585SG General Surgery**

The goal of this elective is to provide the 4th-year medical student applying for residency in General Surgery with an opportunity to work in one of the core resident teams in General Surgery including Acute Care Surgery, Vascular and Cardiothoracic Surgery, Surgical Oncology, and Elective General Surgery. Students will attend clinic and evaluate pre-operative and post-operative patients; they will participate in OR cases; they will round on in-patients and evaluate consults on patients in the hospital and emergency department. Students will attend resident Morbidity and Mortality conference, didactics, Grand Rounds and rotation-specific conferences alongside the residents to gain an understanding of what it's like to be a resident in our General Surgery Program.

### **MED 586IM Infectious Disease-General ID Consultation**

This elective consists primarily of inpatient Infectious Disease (ID) Consulting. The focus of the elective is the evaluation and therapy of infections common to medical, surgical, and other specialties. This is accomplished by the consultation team, which is comprised of an Attending physician, house staff, and students. Consults are called to the house staff who will perform or designate the student to perform a problem-oriented history and physical exam and collect pertinent past medical history, laboratory and radiological data. The information is discussed in conference with the team and the Attending physician so as to formulate an assessment and plan. All consults will be answered in 24 hours or less and patients are followed as long as assistance with management is needed. Students should attend morning report when possible. Medical student lectures are provided by the ID faculty and students should attend as scheduled.

### **MED 586PN Public Mental Health**

Students will be able to work closely with a psychiatrist and other mental health care professionals in a community setting during this 4-week

elective. As the Local Mental Health and Intellectual and Developmental Disability Authority, Integral Care provides individuals with high quality mental health care, collaborates with community partners to strengthen programs and systems, and works to raise awareness of mental health issues in our community. During this elective, students will have the opportunity to work with patients and be able to observe community psychiatry work via outreach teams and outpatient clinics. During this elective, the student will encounter Dell Med psychiatry residents only on Tuesday afternoons.

### **MED 587IM Gastroenterology**

1. Students will evaluate patients for gastroenterology consults. They will be supervised by residents and the cases will be seen and discussed by gastroenterology faculty. Students will see no more than 1 or 2 consults on any given day so that they have time to read about their patient(s). Further, on this elective, students will be out of the hospital by 5:00 by 6:00 pm. 2. Students will observe diagnostic endoscopic procedures. 3. Students will attend the Division Conferences including G.I. Course curriculum lectures, case conferences. The student will also attend any multidisciplinary conferences which involve case presentations of their patients.

### **MED 587PN Community Psychiatry**

Students will actively participate at a minimum of two locations during this four week rotation - NAMI Austin and the Austin Clubhouse - which will offer students an appreciation of the available local mental health resources. Total of 35-40 hours per week, including supervision and reading/research for projects. Interested students will meet weekly with the Faculty Director for supervision and to process their experiences on the rotation. The students will be encouraged to keep a journal through their rotation of their experiences, thoughts, and reflections. Every student will do at least one project during the rotation. The only requirement of the project is that it benefits the local mental health community. Examples include presentations, community outreach, computer web design, etc.

### **MED 587SM Otolaryngology-Head And Neck Surgery**

Four-week comprehensive introduction to outpatient and inpatient otolaryngology, in both an office setting and inpatient care. Students will attend office hours (clinic patients) with diverse faculty in both pediatric and adult practices, and also observe/participate in surgical cases, both in ambulatory and inpatient OR settings. Comprehensive exposure to ENT is expected, with some subspecialty experience included. Inpatient activities (e.g. rounding, inpatient consults) will vary, depending on patient census, but will occur primarily at DSMC, DCMC, and SMCA. Some travel to outpatient offices will be necessary, but will be minimized to the extent possible. Multidisciplinary conference participation will be included, and students will prepare a presentation to be given near the completion of the rotation.

### **MED 588IM Nephrology**

This elective will involve activities in both the inpatient and outpatient setting. The clinical experience is derived from the inpatient Nephrology Consult service and the Nephrology outpatient clinic. Students will have the opportunity to participate in the evaluation and management of patients in all of these areas. Patient care and teaching rounds with the Nephrology attending physician and renal resident are held Monday through Friday. Regular small group teaching conferences are held at frequent intervals to discuss cases and clinical problems.

### **MED 588MD Clinical Teaching**

Students will enhance skills in clinical teaching, mentorship, and performance assessment across a wide range of competencies, such as practice-based learning, systems-based practice, and leadership.



Students will identify strategies for teaching when time is limited and and practice role-modeling of patient-centered care.

### **MED 588PM Children's Health Express**

1. Students will improve upon pediatric history and physical skills in the context of an outpatient mobile clinic setting with an emphasis on assessing for social determinants of health needs as well as adverse childhood experiences. 2. Students will learn to consider factors outside of the healthcare visit itself when thinking about health and well being. 3. Students will gain an understanding of how to connect families with community partners and supports when SDOH needs and ACEs are identified. 4. Students will work on a self-directed project with a goal to learn more about a chosen community organization and suggest ways to either build on an existing partnership, improve upon the referral process to community partners, or create a way to educate families regarding a resource that is available to them.

### **MED 588SM Plastic Surgery**

In this 4-week course, students will achieve a level of clinical skill compatible with indirect supervision in the perioperative care of patients through the participation in clinic, hospital consults, operative procedures and postoperative in-patient and clinic care.

### **MED 589IM Endocrinology**

1. Students will evaluate patients in outpatient endocrine clinics, under faculty supervision. 2. Students will evaluate patients admitted to Dell Seton Medical Center for whom endocrine consultation has been requested, under resident & faculty supervision. 3. All cases will be presented to and discussed with faculty. 4. Students are to attend Internal Medicine Noon Conference.

### **MED 589SM Anesthesiology**

At Orientation, students are loaned a copy of "Dripps Introduction to Anesthesia." Students are assigned to an Anesthesiologist on a daily basis and will be immediately involved with clinical anesthesia with early emphasis on airway management. Students will observe and have hands on experience with all levels of anesthesia, including OB, Trauma, Neuro, and acute pain management. Students are expected to arrive weekdays at 06:30 AM and work until 03:00 PM. No call or weekend duties.

### **MED 590SM Urology**

Students will partake in an immersive exposure to urologic surgery and the evaluation and diagnosis of common urologic conditions. Students will be expected to participate in all aspects of patient care including but not limited to - operating, rounding, outpatient evaluation, performing history and physicals, interacting with consulting services and the urology team.

### **MED 591PN Proactive Consultation-Liaison Psychiatry: Proactive Behavioral Medicine Service**

Trainees rotate on a multidisciplinary teaching service with graduate level Psychiatry, Advanced Nursing, Social Work, and Clinical Psychology trainees. The value-based healthcare delivery model of Proactive C-L Psychiatry fosters a rich multidisciplinary learning environment. Our medical student trainees gain abundant direct experience with delivering comprehensive screening, appropriate preventative psychiatric intervention(s) and consultation to all hospital admissions. Newly admitted patients "at-risk" due to having known psychiatric/substance use disorder, maladaptive health behaviors, and/or chronic psychosocial stress are screened and stratified based on the likelihood those conditions predict preventable morbidity, medical complications, suboptimal hospital care or prolonged length of stay. The Proactive Behavioral Medicine Service is responsible for providing timely and appropriate evidence-based screening, focused psychotherapeutic or pharmacological interventions, patient/family advocacy, or providing

more comprehensive psychiatric evaluation(s) and treatment(s). Through direct experience with application of this proactive multidisciplinary model, team-members recognize the mechanisms driving improvements in patient care, population health management, staff satisfaction and care costs: earlier detection of psychiatric/behavioral needs, preventative interventions, stigma reduction, intra-professional education and collaborative approaches to patient care. Trainees gain proficiency in the use of standardized bedside screening procedures/instruments, co-development of care plans for managing maladaptive behaviors, collaboratively managing patients with psychiatric and other medical co-morbidity, and applying preventive strategies to mitigate the risk of complications from substance use disorder co-morbidity. Through regular multidisciplinary rounds with Psychiatry, Advanced Practice Nursing, Social Work and Clinical Psychology specialties, the medical student trainee considers clinical problems from varied perspectives. Close collaboration with these other disciplines further nurtures trainees' ability to think methodically through systems-level contributors to patient problems. The trainee hones their growing skills to recognize how and when to best leverage their role as patient care advocate, team-member, clinical information integrator, and resource manager in the best interest of providing optimal care for medical inpatients with co-morbid psychiatric or substance use disorders.

### **MED 592PN Psychiatry Research Electives**

May be repeated for credit when the topics vary. Offered on the pass/fail basis only.

#### **Topic 1: Neurobiology Drug Development**

#### **Topic 2: Developmental Neuroscience of Mood and Substance Use Disorders**

#### **Topic 3: Computational Neuroscience of Post-traumatic Stress Disorder**

#### **Topic 4: Inhibitory Strength and Control**

#### **Topic 5: Restraining Children Displaying Problematic Behaviors**

#### **Topic 6: Factors that Influence Motivated Behavior in Rodents**

#### **Topic 7: Dissecting Post-traumatic Stress Disorder**

#### **Topic 8: Molecular Design**

#### **Topic 9: Neurogenetics**

### **MED 593IM Primary Care Internal Medicine**

Students will actively participate in team based healthcare delivery in a primary care setting. The practice setting is an academic environment with a diverse patient population with a wide range of age and complexity of illness. Students will evaluate patients new to the practice as well as those with decades of continuity. Students will be able to recognize common disease states encountered in an internal medicine practice, determine an appropriate evaluation and plan, and interpret results of appropriate studies. Students will apply clinical skills learned in MS1 and MS2 rotations. Students will identify the preventive care opportunities for different age and risk groups and recommend an appropriate plan for the individual patient. Students will recognize the role of Value Based Medicine and apply the principles of "Choosing Wisely" in ordering safe, evidence based, and appropriate testing and interventions.

### **MED 593PN Clinical Neuromodulation**

This elective will provide rotating medical students with the opportunity to explore various modalities of neuromodulation therapies including participating in the clinical implementation of Electroconvulsive Therapy (ECT), Transcranial Magnetic Stimulation (TMS), Deep Brain Stimulation (DBS), and Vagal Nerve Stimulation (VNS). Students will also be able to participate in discussions about ongoing neuromodulation research including focused ultrasound, vagal nerve stimulation, TMS in combination with psychedelics, and TMS for suicidal ideation. Students will also have the opportunity to evaluation current treatment algorithms

for ECT and TMS and defend/refute these practice guidelines. Students will also have the opportunity to discuss aspects of neuromodulation research including funding, ongoing projects, and future directions of research.

### **MED 593SM Research**

In this focused research elective, students will commit to one of 2 tracks intended to complement the ILD Research Distinctions experience for the MS-3 year, but non-ILD Research Distinctions students may request Course Director approval based on their unique circumstances and goals. Track 1: Preparing for focused research - in this track, students acquire knowledge and skills around literature review, hypothesis and research question development and study design with the output of a completed IRB research submission. Students will work with our Medical Librarian, a research mentor and a subject matter expert mentor of their choosing. Students are expected to complete CITI training as well as the online course Understanding Data and Statistics in the Medical Literature (<https://leanpub.com/universities/courses/jhu/udsm1>). Track 2: Manuscript preparation - in this track, students work with their research mentor and other identified subject matter experts to analyze collected data and create a manuscript draft that is ready for journal submission.

### **MED 594IM Rheumatology**

Students will see patients with a wide array of rheumatologic disorders in both inpatient and outpatient settings. Students will see inpatients on the Rheumatology Consult Service at Dell Seton Medical Center, and outpatients at CommunityCare Southeast Health and Wellness Center. Students will learn about the diagnosis and treatment of rheumatologic disorders. Students will learn about the utility and interpretation of rheumatologic laboratory testing. Students will learn about the indication and potential adverse effects of immunosuppressive therapies. Students will spend time with rheumatology faculty, as well as rotating internal medicine residents (if present). Students will have 1 dedicated didactic session per week, in addition to teaching related to patients seen on service and in clinic.

### **MED 594SM Multidisciplinary Oncology**

In this elective, students will work as part of the team providing clinical care and care coordination for patients with complex oncologic conditions. Specifically tailored towards asynchronous and remote care, this elective focuses on the student's participation in gathering, synthesizing and presenting clinical data for Multi-Disciplinary Tumor Boards in the Ascension and UT Health Austin systems, then creating care summaries from the Tumor Board discussions for distribution back to patients' care providers. Students will also participate in weekly huddles with the LIVESTRONG Cancer Institute and Ascension-Seton Specialty Care Clinic teams. Students will conduct phone or telemedicine interviews with patients to gather history, retrieve and review records from diagnostic, imaging, pathology and other relevant studies, create a summary of the patient's clinical information to submit for the appropriate Tumor Board, present the patient at Tumor Board, record and summarize the Tumor Board recommendations, review the summary with the primary Faculty, then communicate recommendations as appropriate to the providers involved in the patient's care. Students will be expected to identify and complete this process for at least one patient from each of the following disease sites: Head and Neck, GI (esophagus, small bowel, colorectal-anal), liver/pancreas, skin/soft tissue, breast, thoracic, with a goal of 5-8 patients over the 4 weeks.

### **MED 595SM Subspecialty Community Surgery**

The Subspecialty Community Surgery Elective will provide students an opportunity to interact directly with community private practice surgeons who have been mutually chosen by the Elective Director and Student for a 4 week rotation. Students will gain insight into how a

non-academic, busy surgical practice functions and will serve as an "apprentice" to the preselected surgical subspecialist. Beyond the clinical knowledge students will gain, the goals of this elective include exposure to the business of medicine. We expect the volunteer surgeons to teach students on how their practice functions as a free-standing business. We envision students will predetermine which areas of surgical practice (e.g. Colorectal Surgery) they wish to be involved with and the Elective Director will work to find a mentor who meets the needs of the student.

### **MED 597MD Telemedicine**

The student will gain expertise using phone and video to care for ambulatory patients. The student will be expected to review the patient's chart in the EMR. The student will review pathophysiology, pharmacology, diagnostic and treatment strategies and guidelines for care on each patient. They will prepare questions for the patient that explore relevant symptoms, reactions to medications and possible adverse effects of medications. During the telemedicine sessions, the attending will introduce the student to the patient. The visits can be done one of two ways depending on patient preference and practicality: 1) The attending will listen in as the student interviews the patient. The attending can either 1) "scribe", working on documentation as the student does the interview and examination, or 2) the student can scribe for the attending (depending in part on EMR access). The visit may evolve so that both happen to some extent. Alternatively the attending can take notes for feedback to the student about what worked well and where there are opportunities to improve. The attending will modify and co-sign student notes. The student will discuss the patients, diseases, relationship, psychosocial factors, and communication strategies with the attending after each telemedicine session, or after a set of them depending on scheduling and expediency. At the end of each week, the student will produce a report on clinical strategies on four major diagnoses per week.

### **MED 598MD Professional Development Independent Study**

Students will work directly with the Office of Curriculum and the Undergraduate Medical Education Committee to determine if they may complete a 4-week professional development independent study elective allowing them time to work independently on various projects and opportunities that fit their plans after medical school graduation.

### **MED 599SM Comprehensive Breast Care**

In this elective, students will participate in all aspects of care related to patients with breast cancer - surgical oncology, medical oncology, radiation oncology, genetics counseling, plastics and reconstructive surgery and palliative care. Students will attend clinic and scrub OR cases for patients seen at UT Health Austin's Livestrong Cancer Institute and the Ascension Seton Cancer Care Collaborative, attend and present patients at breast tumor board, and participate in clinic and OR cases for breast reconstruction.

### **MED 680GY Acting Internship in Female Pelvic Medicine and Reconstructive Surgery**

Students will participate in a balanced ambulatory and surgical experience. Ambulatory experience will occur through participation at the Midtown Clinic as well as at the Integrated Practice Unit for patients with pelvic floor disorders. Surgical experience will be accomplished through participating in urogynecology cases at Seton Medical Center Austin and Dell Seton Medical Center at the University of Texas.

### **MED 680NO Acting Internship In Neurology**

Within the limits by law and hospital regulations, the student will function with the same responsibilities for patient care as a first-year house officer. The 4-week time period is divided into 2 weeks of inpatient general neurology and one week on the acute stroke service. One day per week will be spent in the ambulatory setting in the Neurology resident

continuity clinic. Average duty hours are Monday to Friday, from 7am to 5pm; as well as two weekend days of 7am-5pm coverage. The Acting Intern may choose to participate in one evening short call (5pm to 9pm) per week, to be arranged at her/his discretion. Attendance is expected at the Neurology resident lecture series one afternoon per week.

### **MED 680OB Acting Internship in Obstetrics-Labor and Delivery**

The student will work a combination of day and night shifts as part of the obstetrics team on Labor and Delivery. This will include management of actively laboring patients and scheduled deliveries, assessment of patients who present to triage with acute issues, and care of patients on the postpartum floor. The student will be responsible for following patients; this includes rounds, giving sign-out as well as receiving sign-out for cross-coverage, and completing appropriate paperwork. The student will have the opportunity to attend resident didactics on Thursday mornings.

### **MED 681OB Acting Internship in High Risk Obstetrics/ Maternal Fetal Medicine**

Elective medical students on the MFM rotation will follow patients on the inpatient antepartum service and participate in shared-decision counseling, procedures, and deliveries of these patients. Students will also have the opportunity to evaluate and follow patients in the various high-risk obstetric clinic locations, as well as in the ultrasound clinic. The students will work in a collaborative environment as part of a comprehensive care team under the supervision of the MFM faculty and rotating MFM residents. Clinical learning occurs during bedside rounds, board rounds, high-risk obstetric clinic, and ultrasound clinic. Formal structured learning will take place during Thursday morning didactics and the monthly Multidisciplinary conference. Students will be expected to take two labor and delivery call shifts during their elective rotation.

### **MED 682EM Acting Internship in Emergency Medicine**

Dell Seton Medical Center at the University of Texas at Austin is the only Level 1 Adult Trauma Center in Austin. The student will work with a full-time attending physician and be an active participant in the assessment, management, and the treatment of trauma, acute medical emergencies, and minor medical/surgical patients. The rotation will consist of 14 nine hour shifts with 3 of those shifts taking place at Seton Medical Center, a large community hospital, and the remaining 9 at DSMC-UT.

### **MED 682MK Acting Internship in Orthopedic Surgery**

Students will rotate on 4 different subspecialty services for 1 week at a time. Students will attend and participate in weekly didactic conferences held Thursday mornings from 0630 - 1100. On average, students will spend 2 days in clinics and 2.5 days in the operating room. Students will also be expected to attend any grand rounds or journal club events that take place outside of the Thursday morning didactics. Students will gain a broad exposure to different clinical disciplines within orthopedic surgery, improve their clinical skills in orthopedics and begin to build a foundation of clinical knowledge of musculoskeletal care.

### **MED 682PC Acting Internship in Family Medicine**

The student will spend time at Dell Seton Medical Center at the University of Texas rounding on the patients admitted to the Family Medicine inpatient service, as well as rounding on patients at a Family Health Center. The student will develop an appreciation for the interaction of medical, socioeconomic and psychological factors in the practice of family medicine and a greater understanding of the doctor-patient relationship. The student will have the opportunity to function as an intern with the Family Medicine inpatient service team. The student will undertake primary responsibility for patients assigned to his/her care and will be directly supervised by the upper level resident and faculty on the service. The student will make daily rounds with residents and

faculty (including weekends). Off-days will be scheduled for the student in rotation with the residents. The student will take short call (there is no night call as there is a Night FLOAT resident) and will serve as one of the patient's primary team providers. The student will also attend grand rounds, resident lectures, and other scheduled conferences within the Department of Family Medicine, as determined by the attending faculty and supervising resident.

### **MED 683MK Acting Internship In Pediatric Orthopedic Surgery**

The student will attend ambulatory clinics approximately 3-4 days a week and surgery approximately 1-2 days a week (generally 4 to 6 hours are spent in surgery). The student will take call with the on-call PA and MD once a week. The student will attend pediatric orthopedic conferences and journal clubs as well as attending the general orthopedic educational conference Thursday mornings at the Dell Medical School. Active study and participation is required. Students are also expected to independently read about their patient's orthopedic conditions prior to participation in surgical cases. Students will also see and evaluate patients independent or in collaboration with faculty members. They will be expected to organize patient information for oral presentations. The weekly schedule will be developed in consultation with the course director and other faculty. Daily schedule may vary regarding clinic vs. surgery time and call frequency is 1 day per week. Every other week, students will also participate in orthopedic radiology conference. Student will also round with the physician on hospital patients.

### **MED 683ON Acting Internship in Gynecologic Oncology**

This elective will build upon the skills acquired during the general Women's Health clerkship, with a special focus on the operative and medical management of women with gynecologic cancers. Students on this elective will be regarded as an acting-intern and will have graduated levels of responsibility and autonomy. The Dell Medical Gynecologic Oncology Service is comprised of two full time faculty attendings and two residents. Hospital coverage is provided at both Dell Seton Medical Center (DSMC) and Seton Medical Center Austin (SMCA). Students, in coordination with the resident and faculty team, will participate in the care of patients with medical and surgical problems at both locations. Students will interact with private Gyn Oncology attendings as well depending on workload.

### **MED 683PS Acting Internship in Congenital Heart Surgery**

The elective rotation will expose the student to the field of congenital heart surgery, as well as the dynamics of functioning and communicating as a team. Students will have an opportunity to develop a thorough understanding of both normal and congenitally malformed hearts. They will also be exposed to methodologies for the surgical and non-surgical diagnosis and treatment of complex congenital heart disease. Students will participate in the operating room where they will observe and assist with complicated congenital cardiac repairs. There will also be a significant exposure to many of the other specialties that care for these children (i.e. Pediatric Cardiac Critical Care, Pediatric Cardiology, and Pediatric Cardiac Anesthesia). Day observerships with related specialties, such as Pediatric Cardiology, Echocardiography, Interventional Cardiology, and Pediatric Cardiac Anesthesia can be arranged upon request. This is a unique rotation and is designed for those students interested in pursuing careers in surgery or students interested in caring for children with heart disease.

### **MED 684ON Acting Internship in Surgical Oncology**

In this 4-week course, students will achieve a level of clinical skill compatible with indirect supervision in the perioperative care of patients presenting with breast, GI, and/or skin/soft tissue malignancies, through



participation in clinic, hospital consults, operative procedures and postoperative in-patient and clinic care.

### **MED 684PM Acting Internship in Pediatric Intensive Care**

The student will, through participation as an acting intern, develop skills in the assessment, stabilization, diagnosis and management of critically ill infants and children. The student should be responsible for an average of 3 patients at all times. They will present on multidisciplinary rounds, write the admission physical examination and history, daily notes, transfer and discharge summaries. In addition, students will be responsible for completing all on line course modules. In addition, acting interns will be asked to present short (10 minute) educational presentations to their team on critical care topics from time to time during the rotation.

### **MED 685PM Acting Internship in Inpatient Pediatrics**

The student will have the opportunity to function as a pediatric intern on the inpatient service at Dell Children's Medical Center of Central Texas. He/she will be assigned to a team consisting of an attending, a senior resident, two junior residents, and junior clerkship medical students. The student will be assigned patients for who he/she will be responsible. The student will round with their inpatient team daily and attend morning reports and noon conferences. The student will participate in family-centered rounds by presenting their assigned patients to the families and teams. The student will have the opportunity to interact with the attendings, subspecialists, and other members of the healthcare team, including nurses, respiratory therapists, speech, occupational, physical therapists, and pharmacists. During rounds, students will have the opportunity to discuss evidence-based medicine and value-based care, taking into consideration patient safety and preferences. These core principles will be taught and role-modeled by team attendings and senior residents.

### **MED 686PM Acting Internship in Neonatal Intensive Care**

The student functions as an intern in the NICU and is supervised by the senior pediatric house officer. He/she takes patients in rotation with the other residents and is responsible for their evaluation, examination, management, and discharge. Along with this goes the responsibility for reading in depth about the patients and their problems, for checking on lab work, and seeing them each day, and for adequate documentation in the medical record. The student is responsible for attending high-risk deliveries along with the pediatric resident. The student participates in attending rounds with the rest of the house staff assigned to the NICU. The student is paired with a neonatologist and/or a neonatal nurse practitioner. The student is responsible for talking with the families of babies assigned to him/her and participating in parent education regarding their newborn.

### **MED 688PN Acting Internship in Psychiatric Consultation - Liaison Service**

Inpatient psychiatric consultations. The student will work as part of a team of other students, nurses, social workers, pharmacists, residents and faculty. During the elective students will enhance their knowledge of psychiatric care in a medical/surgical setting, gain advanced skills in the assessment and treatment of neuropsychiatric problems using a biopsychosocial model, and gain an understanding of the neuropsychiatric contribution to medical conditions found in a general hospital and regional trauma center. Students will have the opportunity to see a wide variety of patients in a general hospital and an emergency room setting. The student will participate in the role of a first-year resident on the Psychiatry Consult/Liaison service by being the primary individual responsible for assessment and treatment of patients, and answering directly to the psychiatry resident and attending faculty.

### **MED 689PN Acting Internship in Psychiatric Adult Inpatient Service**

Senior students receive individualized clinical inpatient experiences under supervision as part of a multidisciplinary treatment team that includes attending and resident(s), psychiatrists and 2nd year medical students. Senior students will be mentored to their strengths and coached on areas where they feel they need assistance for career and professional development. The students will master concepts such as bio-psycho-social formulation and treatment planning which will prove them superior clinicians whether they become a psychiatrist or not. Those senior medical students who want a broader view of psychiatry can be accommodated on a case-by-case basis. As senior students are expected to be more autonomous than 2nd year students, they will have time to focus on specialized topics (e.g. ECT, child, or consultation-liaison psychiatry) if desired.

### **MED 690IM Acting Internship In Medical Intensive Care**

This elective is for students who have completed a previous medicine elective and would like experience in the ICU. Supervised by the ICU resident and attendings, the student will have the opportunity to participate in procedures and twice daily ICU rounds.

### **MED 691IM Acting Internship in Inpatient Internal Medicine**

An Acting Intern (AI) will experience the roles and responsibilities of an intern on the team, while closely supervised. The goal of this course is to develop an independent thorough process in evaluation, diagnosis and management of Internal Medicine patients, and to prepare the student to function as an intern. The student will participate in the diagnosis and care of patients admitted to an acute care medical inpatient teaching service in a busy teaching hospital. He/she will serve in the capacity of a junior intern on a team consisting of an upper level resident and an attending physician. Responsibilities will include clinical work from approximately 6:30 am-5:30 pm on weekdays, rounds on weekends, and every sixth evening call. The team may also admit patients on other days of the call cycle. The student will be attending rounds, noon teaching conferences, Grand Rounds, as well as other departmental meetings and activities. An acting intern's schedule will typically mirror that of the resident on the team.

### **MED 691SM Acting Internship in General Surgery**

The student will function as a member of the Elective General Surgery team for the entire rotation, with the same responsibilities and duties as an intern or first year house officer, within limits set by law and hospital rules. Students will have same hours and call responsibilities as an intern. They will be expected to see patients in clinic, participate in operating room cases, and follow patients postoperatively, making daily written and oral reports regarding their condition. Such reports are expected to include an assessment of the patient's condition with recommendations for further evaluation or changes in therapy based on that assessment. Students will be expected to see inpatient consults and present to residents and faculty, and to assist in teaching, coaching and giving feedback to clerkship medical students.

### **MED 692SM Acting Internship in Acute Care General Surgery**

The student will function as a member of the Acute Care General Surgery team for the entire rotation, with similar responsibilities and duties as an intern or first year house officer, within limits set by law and hospital rules. Students will have same hours and call responsibilities as an intern. Students will function as a member of the acute care general surgery team. They will be expected to follow patients in the intensive care units and make daily reports on rounds regarding their condition. Such reports are expected to include as assessment of the patient's condition with recommendation for further evaluation or changes in therapy based on that assessment. All senior students are expected to assist in the operating room and attend all outpatient clinics. Senior



students will be expected to see inpatient consults, participate in trauma resuscitations and present to residents and faculty.

### **MED 696SM Acting Internship in Burn Surgery**

The MS-4 student enrolled in this Acting Internship will function as a member of the Burn Surgery team for the entire rotation, with similar responsibilities and duties as an intern. Students will have same work hours as an intern. They will be expected to follow patients on the Burn surgery service, both in the ICU and Med/Surg wards, and make daily reports on rounds regarding their condition. Such reports are expected to include an assessment of the patient's condition with recommendations for further evaluation or changes in therapy based on that assessment. Students will write daily progress notes and enter orders on their patients, both of which will be reviewed and co-signed by a resident or attending. All senior students are expected to assist in the operating room and attend all outpatient clinics. Senior students will be expected to see inpatient consults, participate in burn resuscitations and present to residents and faculty.

### **MED 697SM Acting Internship in Vascular Surgery**

The student will function as a member of the Vascular Surgery team for the entire rotation, with the same responsibilities and duties as an intern or first year house officer. Students will have same hours and call responsibilities as an intern. They will be expected to see patients in clinic, participate in operating room cases, and follow patients postoperatively, making daily written and oral reports regarding their condition. Such reports are expected to include an assessment of the patient's condition with recommendations for further evaluation or changes in therapy based on that assessment. Students will be expected to see inpatient consults and present to residents and faculty, and to assist in teaching, coaching and giving feedback to clerkship medical students.

### **MED 700CC Away Rotation - Critical Care**

Elective rotation completed at an away institution in Critical Care. All away rotations must be completed at an institution that is either accredited by the LCME or ACGME or must be approved by the Undergraduate Medical Education Committee. Off-campus rotations will need to be reported to the Office of Student Affairs in Medical Education a minimum of 4-weeks before the scheduled rotation is to begin.

### **MED 700CD Away Rotation - Cardiology**

Elective rotation completed at an away institution in Cardiology. All away rotations must be completed at an institution that is either accredited by the LCME or ACGME or must be approved by the Undergraduate Medical Education Committee. Off-campus rotations will need to be reported to the Office of Student Affairs in Medical Education a minimum of 4-weeks before the scheduled rotation is to begin.

### **MED 700CP Away Rotation - Child Psychiatry**

Elective rotation completed at an away institution in Child Psychiatry. All away rotations must be completed at an institution that is either accredited by the LCME or ACGME or must be approved by the Undergraduate Medical Education Committee. Off-campus rotations will need to be reported to the Office of Student Affairs in Medical Education a minimum of 4-weeks before the scheduled rotation is to begin.

### **MED 700DE Away Rotation - Dermatology**

Elective rotation completed at an away institution in Dermatology. All away rotations must be completed at an institution that is either accredited by the LCME or ACGME or must be approved by the Undergraduate Medical Education Committee. Off-campus rotations will need to be reported to the Office of Student Affairs in Medical Education a minimum of 4-weeks before the scheduled rotation is to begin.

### **MED 700DM Away Rotation - Diagnostic Medicine**

Elective rotation completed at an away institution in Diagnostic Medicine. All away rotations must be completed at an institution that is either accredited by the LCME or ACGME or must be approved by the Undergraduate Medical Education Committee. Off-campus rotations will need to be reported to the Office of Student Affairs in Medical Education a minimum of 4-weeks before the scheduled rotation is to begin.

### **MED 700EM Away Rotation - Emergency Medicine**

Elective rotation completed at an away institution in Emergency Medicine. All away rotations must be completed at an institution that is either accredited by the LCME or ACGME or must be approved by the Undergraduate Medical Education Committee. Off-campus rotations will need to be reported to the Office of Student Affairs in Medical Education a minimum of 4-weeks before the scheduled rotation is to begin.

### **MED 700GP Away Rotation - Geriatrics/Palliative Care**

Elective rotation completed at an away institution in Geriatrics or Palliative Care. All away rotations must be completed at an institution that is either accredited by the LCME or ACGME or must be approved by the Undergraduate Medical Education Committee. Off-campus rotations will need to be reported to the Office of Student Affairs in Medical Education a minimum of 4-weeks before the scheduled rotation is to begin.

### **MED 700GY Away Rotation - Gynecology**

Elective rotation completed at an away institution in Gynecology. All away rotations must be completed at an institution that is either accredited by the LCME or ACGME or must be approved by the Undergraduate Medical Education Committee. Off-campus rotations will need to be reported to the Office of Student Affairs in Medical Education a minimum of 4-weeks before the scheduled rotation is to begin.

### **MED 700IM Away Rotation - Internal Medicine**

Elective rotation completed at an away institution in Internal Medicine. All away rotations must be completed at an institution that is either accredited by the LCME or ACGME or must be approved by the Undergraduate Medical Education Committee. Off-campus rotations will need to be reported to the Office of Student Affairs in Medical Education a minimum of 4-weeks before the scheduled rotation is to begin.

### **MED 700MD: Away Rotation in Medicine**

Elective rotation completed at an away institution in Medicine. All away rotations must be completed at an institution that is either accredited by the LCME or ACGME or must be approved by the Undergraduate Medical Education Committee. Off-campus rotations will need to be reported to the Office of Student Affairs in Medical Education a minimum of 4-weeks before the scheduled rotation is to begin.

### **MED 700MK Away Rotation - Musculoskeletal**

Elective rotation completed at an away institution in Musculoskeletal. All away rotations must be completed at an institution that is either accredited by the LCME or ACGME or must be approved by the Undergraduate Medical Education Committee. Off-campus rotations will need to be reported to the Office of Student Affairs in Medical Education a minimum of 4-weeks before the scheduled rotation is to begin.

### **MED 700NO Away Rotation - Neurology**

Elective rotation completed at an away institution in Neurology. All away rotations must be completed at an institution that is either accredited by the LCME or ACGME or must be approved by the Undergraduate Medical Education Committee. Off-campus rotations will need to be reported to the Office of Student Affairs in Medical Education a minimum of 4-weeks before the scheduled rotation is to begin.

### **MED 700NS Away Rotation - Neurosurgery**

Elective rotation completed at an away institution in Neurosurgery. All away rotations must be completed at an institution that is either accredited by the LCME or ACGME or must be approved by the Undergraduate Medical Education Committee. Off-campus rotations will need to be reported to the Office of Student Affairs in Medical Education a minimum of 4-weeks before the scheduled rotation is to begin.

### **MED 700OB Away Rotation - Obstetrics**

Elective rotation completed at an away institution in Obstetrics. All away rotations must be completed at an institution that is either accredited by the LCME or ACGME or must be approved by the Undergraduate Medical Education Committee. Off-campus rotations will need to be reported to the Office of Student Affairs in Medical Education a minimum of 4-weeks before the scheduled rotation is to begin.

### **MED 700OM Away Rotation - Occupational Medicine**

Elective rotation completed at an away institution in Occupational Medicine. All away rotations must be completed at an institution that is either accredited by the LCME or ACGME or must be approved by the Undergraduate Medical Education Committee. Off-campus rotations will need to be reported to the Office of Student Affairs in Medical Education a minimum of 4-weeks before the scheduled rotation is to begin.

### **MED 700ON Away Rotation - Oncology**

Elective rotation completed at an away institution in Oncology. All away rotations must be completed at an institution that is either accredited by the LCME or ACGME or must be approved by the Undergraduate Medical Education Committee. Off-campus rotations will need to be reported to the Office of Student Affairs in Medical Education a minimum of 4-weeks before the scheduled rotation is to begin.

### **MED 700OP Away Rotation - Ophthalmology**

Elective rotation completed at an away institution in Ophthalmology. All away rotations must be completed at an institution that is either accredited by the LCME or ACGME or must be approved by the Undergraduate Medical Education Committee. Off-campus rotations will need to be reported to the Office of Student Affairs in Medical Education a minimum of 4-weeks before the scheduled rotation is to begin.

### **MED 700PC Away Rotation - Family Medicine**

Elective rotation completed at an away institution in Family Medicine. All away rotations must be completed at an institution that is either accredited by the LCME or ACGME or must be approved by the Undergraduate Medical Education Committee. Off-campus rotations will need to be reported to the Office of Student Affairs in Medical Education a minimum of 4-weeks before the scheduled rotation is to begin.

### **MED 700PM Away Rotation - Pediatric Medicine**

Elective rotation completed at an away institution in Pediatric Medicine. All away rotations must be completed at an institution that is either accredited by the LCME or ACGME or must be approved by the Undergraduate Medical Education Committee. Off-campus rotations will need to be reported to the Office of Student Affairs in Medical Education a minimum of 4-weeks before the scheduled rotation is to begin.

### **MED 700PN Away Rotation - Psychiatry**

Elective rotation completed at an away institution in Psychiatry. All away rotations must be completed at an institution that is either accredited by the LCME or ACGME or must be approved by the Undergraduate Medical Education Committee. Off-campus rotations will need to be reported to the Office of Student Affairs in Medical Education a minimum of 4-weeks before the scheduled rotation is to begin.

### **MED 700PS Away Rotation - Pediatric Surgery**

Elective rotation completed at an away institution in Pediatric Surgery. All away rotations must be completed at an institution that is either accredited by the LCME or ACGME or must be approved by the Undergraduate Medical Education Committee. Off-campus rotations will need to be reported to the Office of Student Affairs in Medical Education a minimum of 4-weeks before the scheduled rotation is to begin.

### **MED 700SM Away Rotation - Surgical Medicine**

Elective rotation completed at an away institution in Surgical Medicine, including Urology, Plastic Surgery, and Vascular Surgery. All away rotations must be completed at an institution that is either accredited by the LCME or ACGME or must be approved by the Undergraduate Medical Education Committee. Off-campus rotations will need to be reported to the Office of Student Affairs in Medical Education a minimum of 4-weeks before the scheduled rotation is to begin.

## **Dual Degree Courses**

### **MED 801BA, 802BA, 803BA, 804BA, 805BA, 806BA Topics in Business Administration**

Designation for courses taken at the McCombs School of Business for fulfillment of MBA dual degree requirements. Prerequisite: Graduate standing and admission to the McCombs School of Business Master of Business Administration Program.

### **MED 801BE, 802BE, 803BE, 804BE, 805BE, 806BE Topics in Biomedical Engineering**

Designation for courses taken at the Cockrell School of Engineering for fulfillment of MS dual degree requirements. Prerequisite: Graduate standing and admission to the Cockrell School of Engineering Master of Science in Engineering degree program.

### **MED 801ID, 802ID, 803ID, 804ID, 805ID, 806ID Topics in Design Distinction**

Designation for courses taken at the College of Fine Arts for fulfillment of Master of Arts in Design dual degree requirements. Prerequisite: Graduate standing and admission to the Master of Arts in Design program.

### **MED 801ED, 802ED, 803ED, 804ED, 805ED, 806ED Topics in Education**

Designation for courses taken at the College of Education for fulfillment of Master of Education dual degree requirements. Prerequisite: Graduate standing and admission to the College of Education Master of Education program.

### **MED 801HM, 802HM, 803HM, 804HM, 805HM, 806HM Topics in Humanities, Health and Medicine**

Designation for courses taken at the College of Liberal Arts for fulfillment of Master of Arts dual degree requirements. Prerequisite: Graduate standing and admission to the College of Liberal Arts Master of Arts program.

### **MED 801HT, 802HT, 803HT, 804HT, 805HT, 806HT Topics in Healthcare Transformation**

Designation for courses taken for fulfillment of the Master of Science in Health Care Transformation dual degree requirements. Prerequisite: Graduate standing and admission to the Master of Science in Healthcare Transformation program.

## **MED 801PA, 802PA, 803PA, 804PA, 805PA, 806PA Topics in Public Affairs**

Designation for courses taken at the Lyndon B. Johnson School of Public Affairs for fulfillment of the Master of Public Affairs dual degree requirements. Prerequisite: Graduate standing and admission to the Master of Public Affairs program.

## **MED 880BA Financial Accounting**

An examination of the information needs of capital market participants in a dynamic and complex socioeconomic system; emphasis on interpretation, measurement, and disclosure of economic events.

## **MED 801BA Strategic Career Planning**

Designation for courses taken at the McCombs School of Business for fulfillment of MBA dual degree requirements. Prerequisite: Graduate standing and admission to the McCombs School of Business MBA Program.

## **MED 880ED Topics in Learning and Motivation**

- Topic 1: Psychology of Learning
- Topic 2: History and Systems of Psychology
- Topic 3: Research Practicum in Human Development, Culture, and Learning Sciences
- Topic 4: Post Secondary Teaching Practicum
- Topic 5: Motivation and Emotion
- Topic 6: Instructional Psychology
- Topic 7: Academic and Student Affairs in Higher Education

## **MED 880ID Introduction to Design Thinking**

Explores the concepts of design thinking and human-centered design methods, with a focus on design process and problem solving.

## **MED 881BA Financial Management**

An exploration of concepts and techniques employed in investment decision making, working capital management, and financing the activities of a business.

## **MED 881ED Topics in Psychometrics**

- Topic 1: Measurement and Evaluation
- Topic 2: Psychometric Theory and Methods

## **MED 881ID Design in Health**

Exploration of creative design-based approaches and problem-solving methods and their application to solving contemporary health care challenges.

## **MED 882BA Statistics**

A unified approach to basic concepts in collection, analysis, and interpretation of data, emphasizing capabilities of different statistical methods and business applications. Students use statistical software packages.

## **MED 882ED Topics in Quantitative Methods**

- Topic 1: Fundamental Statistics

## **MED 882ID Topics in Storytelling**

- Topic 1: Brand Storytelling
- Topic 2: Introduction to Documentary
- Topic 3: Design Technologies I
- Topic 4: Graphic Design Print/Online
- Topic 5: Health Communication: Campaigns and Media
- Topic 6: Photography for Reporting Texas

## **MED 883ED Topics in Biological Basis of Behavior and Learning**

- Topic 1: Pediatric Psychology

## **MED 883ID Topics in Business Design**

- Topic 1: The Business of Design
- Topic 2: Innovation and Entrepreneurship
- Topic 3: Entrepreneurial Growth
- Topic 4: Opportunity Identification and Analysis
- Topic 5: Intellectual Property
- Topic 6: Health Law and Policy

## **MED 884BA Strategic Career Planning**

Issues surrounding career planning, including exploration and implementation. Professional development issues, including self-assessment.

## **MED 884ED Topics in Human Development**

- Topic 1: Mindfulness, Compassion, and the Self
- Topic 2: Individual Through the Life Cycle
- Topic 3: Social Psychology
- Topic 4: Fundamentals of Behavioral Theory and Interventions

## **MED 884ID Topics in Service Design**

- Topic 1: Designing for Human Behavior
- Topic 2: Healthcare Analytics
- Topic 3: Narrative Strategy and Media Design

## **MED 885BA Operations Management**

An introduction to the issues and decisions involved in the production of goods and services. Focuses on designing, operating, controlling, and improving the systems that accomplish production.

## **MED 885ED Topics in Quantitative Methods with Lab**

- Topic 1: Statistical Analysis and Experimental Design

## **MED 885ID Topics in Health Organization Design**

- Topic 1: Foundations of Organization Behavior and Administration

## **MED 886BA Marketing Management**

An introduction to the marketing perspective on strategy development and to the elements of marketing analysis. Includes the functional decision areas of the marketing manager, such as products and product lines, pricing policies, branding, promotion and advertising, and channels of distribution, and how organizations use these components to create, capture, and sustain value for the firm.

## **MED 886ID Sketching for Thinking and Communications**

Discussion of sketching as the fastest way to convey ideas, both in an ideation session or taking notes in a meeting. Explores the basic elements of sketching to visualize concepts and quickly bring alignment to any team.

## **MED 886ED Post Secondary Teaching**

Practicum in post-secondary teaching.

## **MED 887ID Introduction to Prototyping**

Studies within integrated design.

## **MED 888ID Healthcare Design**

Design techniques, case studies, and team critiques. Seminar component of Integrated Design 692.

### **MED 889ID Healthcare Design Lab**

Team-based, project-focused application of the principles of design to real-world health and wellness challenges. Lab component of Integrated Design 291.

### **MED 890BA Topics in Business III**

- Topic 1: Strategies for Networked Economy
- Topic 2: Financial Planning for Wealth Management
- Topic 3: Social and Ethical Responsibility of Business
- Topic 4: Healthcare Analytics

### **MED 891BA Topics in Accounting II**

- Topic 1: Performance Management and Control
- Topic 2: Business Analytics and Decision Modeling

### **MED 892BA Topics in Management II**

- Topic 1: Leading People and Organizations
- Topic 2: People Analytics

### **MED 893BA Topics in Management Information Systems III**

- Topic 1: Predictive Analytics and Data Mining
- Topic 2: Independent Study

### **MED 894BA Topics in Accounting III**

- Topic 1: Financial Statement Analysis

### **MED 895BA Topics in Finance**

- Topic 1: Valuation

### **MED 896BA Topics in Marketing**

- Topic 1: Analysis of Markets

### **MED 897BA Topics in Management III**

- Topic 1: Strategic Management
- Topic 2: Healthcare Tech Commercialization
- Topic 3: Entrepreneurial Growth
- Topic 4: Innovation Through Design Thinking
- Topic 5: Introduction to Entrepreneurship
- Topic 6: Advocacy
- Topic 7: Healthcare Business Ecosystem
- Topic 8: Art and Science of Negotiation
- Topic 9: Texas Venture Labs
- Topic 10: Management Sustainability
- Topic 11: Global Management
- Topic 12: New Venture Creation
- Topic 13: Global Management Studies

### **MED 899BA Topics in Law III**

- Topic 1: Business and Regulatory Aspects of Health Law
- Topic 2: Health Justice and Medical Legal
- Topic 3: Law for Entrepreneurs
- Topic 4: Healthcare Law and Policy

## **Medical School Catalog A-Z Index**



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