ACADEMIC POLICY MANUAL

APPLIES TO ALL M1 MEDICAL STUDENTS WHO MATRICULATE ON OR AFTER JULY 1, 2013 and M2 and M3 STUDENTS ENROLLED DURING 2011-12 AND AFTER

Medical students who entered Stritch School of Medicine prior to July 2009 may be subject to the provisions of the Academic Policy Manual in effect at the time of their matriculation or as specified in official correspondence from the Office of the Dean.

Contact the Office of Student Affairs for more information.
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NOTICE OF NON-DISCRIMINATORY POLICY
Loyola University of Chicago admits students without regard to their race, color, sex, age, national or ethnic origin, religion, sexual orientation, ancestry, military discharge or status, marital status, parental status, or any other protected status to all the rights, privileges, programs, and other activities generally accorded or made available to students at Loyola. Loyola University of Chicago does not discriminate on the basis of race, color, sex, age, national or ethnic origin, religion, sexual orientation, ancestry, military discharge or status, marital status, parental status, or any other protected status in administration of its educational policies, admission policies, scholarship and loan programs, and athletic and other Loyola administered programs. Otherwise qualified persons are not subject to discrimination on the basis of disability. If you have questions about this policy or believe you have been discriminated against because of your race, color, age, sex, national or ethnic origin, religion, sexual orientation, ancestry, military discharge or status, marital status, parental status, disability or other protected status, please contact the EthicsLine reporting hotline at 855-603-6988 or submit a report online at www.luc.edu/ethicsline.

RIGHTS RESERVED
Loyola University Chicago Stritch School of Medicine reserves the right to change, at any time, without notice, the policies and procedures announced in this manual, technical standards, graduation requirements, fees and other charges, curriculum, course structure and content, and other such matters as may be within its control, notwithstanding any information set forth in this manual. The medical school and university reserves the right to refuse to admit or readmit any student at any time should it be deemed necessary in the interest of the student or of the medical school and university to do so and to require the withdrawal of any student at any time who fails to give satisfactory evidence of academic ability, earnestness or purpose, or active cooperation in all requirements for acceptable scholarship. This manual is for informational purposes only and shall not be construed as creating a contract between Loyola University Chicago Stritch School of Medicine and any student.

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MISSION STATEMENT

Loyola is committed to scholarship and the education of medical professionals and biomedical scientists to prepare people to lead extraordinary lives. Our school, including its faculty, trainees and staff are called to go beyond facts, experimentation, and treatment of disease in an environment that encourages innovation, embraces diversity, respects life, and values human dignity.

INTRODUCTION

The Academic Policy Manual provides students with information regarding the academic policies, regulations, and procedures of the school and university and applies to all students registered in Loyola University Chicago Stritch School of Medicine (Stritch). Failure to comply with and/or remediate in accord with policies will normally result in actions to change the student's academic status as authorized by the Stritch School of Medicine.

Accreditation
Loyola University Chicago Stritch School of Medicine is accredited by the Liaison Committee on Medical Education.

Student Responsibility
It is the responsibility of each student to acquire an active knowledge of all the policies and regulations set forth in this manual. Students who need additional interpretation, require assistance in handling a potential problem, or encounter a situation that is not covered by this manual or the other policies cited in this document are encouraged to contact the Office of Student Affairs.

Stritch faculty, administration, and staff communicate with students primarily via school email. Students have a responsibility to check their Stritch email frequently and not less than weekly.

Access to and Disclosure of Student Records
FERPA Rights. The Family Educational Rights and Privacy Act of 1974, as amended, (FERPA), as amended, specifically addresses the rights of students as they pertain to their education records. Education records are those records which directly relate to the individual student currently or formerly in attendance and are maintained by Loyola University Chicago (Loyola). The following information serves as Loyola’s annual notification of the students’ rights and provides links to valuable resources to help members of the Loyola community better understand their responsibilities under FERPA.
Important Notice:

As of January 3, 2012, the U.S. Department of Education’s FERPA regulations expand the circumstances under which your education records and personally identifiable information (PII) contained in such records — including your Social Security Number, grades, or other private information — may be accessed without your consent. First, the U.S. Comptroller General, the U.S. Attorney General, the U.S. Secretary of Education, or state and local education authorities (“Federal and State Authorities”) may allow access to your records and PII without your consent to any third party designated by a Federal or State Authority to evaluate a federal- or state-supported education program. The evaluation may relate to any program that is “principally engaged in the provision of education,” such as early childhood education and job training, as well as any program that is administered by an education agency or institution. Second, Federal and State Authorities may allow access to your education records and PII without your consent to researchers performing certain types of studies, in certain cases even when we object to or do not request such research. Federal and State Authorities must obtain certain use-restriction and data security promises from the entities that they authorize to receive your PII, but the Authorities need not maintain direct control over such entities. In addition, in connection with Statewide Longitudinal Data Systems, State Authorities may collect, compile, permanently retain, and share without your consent PII from your education records, and they may track your participation in education and other programs by linking such PII to other personal information about you that they obtain from other Federal or State data sources, including workforce development, unemployment insurance, child welfare, juvenile justice, military service, and migrant student records systems.

1. Loyola students have the right to inspect and review their education records within 45 days from the day the University receives a request for access.

Students of Loyola University Chicago have the right to inspect and review their education records within 45 days from the day the Loyola receives the student’s request for access. If a student wishes to review parts of their education record that are not directly available to them through LOCUS or MyLumen, the following procedures should be followed:

1. submit a written, signed request to the director of the department maintaining the record being requested
2. identify the record(s) to be inspected
3. state to whom the record is to be released, and
4. indicate the purpose of the request

The university official will make arrangements for access and notify the student of the time and place where the records may be inspected. If the records are not maintained by the University official to whom the request was submitted, that official will advise the student of the correct official to whom the request should be addressed.
The academic and administrative offices of the university maintain records that are unique to their relationship with individual students. These offices and records maintained by these offices include, but are not necessarily limited to the following:

- **Bursar's Office**: Student account files and Perkins loan information.
- **Departments and Colleges**: Academic advising records, admission files, including ACT, SAT and TOEFL scores, and high school and college transcripts and other scholastic records.
- **Financial Assistance**: Financial assistance application files, student federal work-study information, scholarships and Stafford loan information.
- **Intercollegiate Athletics**: Injury reports, scholarship contacts, performance records, height and weight information.
- **Registration and Records**: Permanent record of academic performance (grades, transcript, including supporting documents), course schedules, transfer credit articulation.
- **Residence Life**: Residential life and housing services files.
- **Student Life**: Student activity files, student disciplinary files, multi-cultural programs and services files, and intramural sports files.
- **Student Services**: Career planning and placement files, international program files, services files, and learning assistance services files.
- **Undergraduate Admission and other admission offices**: Admission files on prospective students.
- **University Library**: Circulation records.

Please note that the **Stritch School of Medicine** and the School of Law maintain their own admissions, registrar, financial, and student affairs offices and keep records similar to those listed for the same central university offices.

2. **Loyola students have right to request the amendment of their education records that they believe are inaccurate or misleading.**

A student may request, in writing, that Loyola amend a record that he or she believes is inaccurate, misleading, or otherwise in violation of the student's privacy under FERPA. The student should write the university official responsible for the record (see above), clearly identify the part of the record the student wants changed, and specify why the record should be changed. If the University decides not to amend the record the student will be notified in writing of the decision. The student will be advised of the right to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the student when he or she is notified of the right to a hearing.

3. **Loyola students have the right to consent to disclosures of personally identifiable information contained in their education records, except to the extent that FERPA authorizes disclosure without consent.**
Consent to disclose personally identifiable information must contain the following information:

1. the specific information to be released;
2. The purpose for the release;
3. The Identity of the person to whom the information is being released; and
4. Student’s signature and date signed.

Permission to release may also be granted in the form of a transcript or verification of education request.

One exception which permits disclosure of personally identifiable information contained in your education records without your consent is disclosure to school officials with legitimate educational interests. A school official is a:

- Person employed by the university in an administrative, supervisory, academic or research, or support staff position (including campus police and security personnel and health staff), acting in the student’s educational interest within the limitations of their "need to know."
- Person or company with whom the university has contracted as its agent to provide a service in lieu of using university employees or officials (such as an attorney, auditor, or collection agent, temporary staffing agencies and outsourced vendors)
- Person serving on the Board of Trustees.
- Student serving on an official committee, such as a disciplinary or grievance committee, or assisting another school official in performing his or her tasks.

Outsourced vendors are those parties helping the university provide students access to services relating to their education. For example, the bookstore will be provided with course schedules to assist students with procuring textbooks and other course materials.

The university may disclose a Loyola University student's education records, without consent, to officials of another postsecondary education institution in which the student has applied or seeks to enroll.

4. Loyola students have the right to refuse to permit the university to disclose "Directory Information." Directory Information is information contained in an education record that would not generally be considered harmful or an invasion of privacy if disclosed. Loyola has designated the following personally identifiable information as public ("directory") information:

- Name
- Residency Match Information
- Address(es)
- Telephone number(s)
- School e-mail address
- Photograph
- Major and minor field(s) of study, including the college, division, department, institute or program in which the student is enrolled
- Dates of attendance
- Grade level, e.g., M1, M2, M3, M4
- Enrollment status, e.g., undergraduate or graduate, full-time or part-time
- Date of graduation
- Degree(s) received
- Honors or awards received, including selection to a dean's list or honorary organization
- Participation in officially recognized activities and sports
- Weight and height where the student is a member of athletic teams

Directory Information will never include the following:

- Race
- Gender
- Social Security Number (or a part thereof)
- Grades
- GPA
- Country of Citizenship
- Religion

Loyola students have the right to have the release of their Directory Information blocked. The Directory Information Block Request Form (PDF) is available to make this request of the Office of Registration and Records. FERPA blocks expire on the first day of classes of the next academic year and must be renewed each academic year.

Please note the following impact of placing a Directory Information Hold on your record:

- Loyola receives many inquiries for Directory Information from a variety of sources outside the institution, including friends, parents, relatives, prospective employers, the news media and honor societies. Having a Directory Information Hold on the student’s record will preclude release of such information, even to those people.
- A non-disclosure hold applies to all elements of directory information on your record. Loyola does not apply a non-disclosure hold to individual directory information items.
- The University assumes no liability as a result of honoring your request. Loyola assumes no responsibility to contact you for subsequent permission to release the hold.
- Loyola officials must inform the requestor of information that, “Loyola University Chicago Stritch School of Medicine has no record of the named individual being a student at our institution.”

5. Loyola students have right to file a complaint with the U.S. Department of Education, Family Policy Compliance Office, concerning alleged failures by the university to comply with the requirements of FERPA.
Family Policy Compliance Office
U.S. Department of Education
400 Maryland Avenue, SW
Washington, DC 20202-5901

Inquiries about the use of directory information or any other FERPA related matter should be directed to Mary Van Houten, Director, Office of Registration and Records, Loyola University Chicago Stritch School of Medicine, by phone (708-216-5291) or by e-mail (mavanhouten@luc.edu).

ONLINE RESOURCES

- Family Policy Compliance Office (FPCO)
- FERPA General Guidance for Students (from FPCO)
- FERPA Regulations (from FPCO)
- U.S. Department of Education

TECHNICAL STANDARDS

Stritch School of Medicine seeks to produce broadly educated physicians who are capable of acquiring advanced knowledge and skills in all areas of medicine. Stritch’s broad-based education draws upon the Jesuit tradition, which emphasizes the full development of students through rigorous academic programs and through opportunities for leadership in the service of others.

The primary focus of all Stritch students and graduates is the health and well-being of their patients. We believe that the welfare of our students’ future patients is well-served by our approving for the practice of medicine those students who are able to provide a full spectrum of patient care.

Technical Standards for Admission, Retention, Promotion, and Certification for the MD Degree
The technical standards for the Stritch School of Medicine define the essential functions that an applicant or medical student must be able to perform in order to be admitted to Stritch, progress satisfactorily through our program of study, and graduate. In accordance with the Americans with Disabilities Act (ADA), Stritch has implemented these policies and procedures to ensure equal access to educational opportunities to persons with disabilities. But, it should be clear that the awarding of the MD degree certifies that the individual possesses a broad base of knowledge and skills requisite for the practice of medicine as a generalist physician, not a specialist. An avowed intention to practice only a particular
specialty does not alter the requirement that all students take the full curriculum. Each person considering application to Stritch should be guided by a frank self-assessment of their capabilities and the ability to perform the essential functions of the academic and clinical training program.

The medical curriculum requires demonstrated proficiency in a variety of cognitive, problem-solving, manipulative, communicative, and interpersonal skills. To achieve these proficiencies, Stritch requires that each student be able to meet the following minimum standards for physicians that must be examined and enforced in the admissions process and in the determination whether an MD degree may be awarded.

A. **Observation.** Through independent observation the student must be able to acquire information in the basic medical sciences, including that obtained from demonstrations and experiential activities. The student also must be able to observe accurately from a distance and close at hand and acquire information directly from the patient, as well as from other sources, including written documents, images, slides, videos, and films. This level of observation and information acquisition requires the functional use of vision, hearing, and somatic sensation.

B. **Communication.** Students must be able to effectively speak, hear, read, and write in a tutorial, classroom, and assessment setting. Students must be able to speak to, hear, and observe patients in a clinical setting, record information accurately and clearly, speak and write English fluently, and communicate with patients effectively and in a sensitive manner. A student also must be able to communicate effectively with members of the healthcare team in oral and written form and in patient care settings where clinical decisions may depend on rapid communication.

C. **Motor Coordination.** Students must be able to elicit information independently from patients by palpation, auscultation, percussion, and other diagnostic maneuvers. Students should be able to respond to emergency situations in a timely manner and provide or direct general emergency care, such as airway management, cardiopulmonary resuscitation, placement of intravenous catheters, simple wound repair, and basic obstetrical procedures. Such activities require sufficient physical mobility, coordination of both gross and fine motor neuromuscular function, balance, equilibrium, and functional use of the senses of touch, vision, and hearing.

D. **Intellect.** Students must be able to identify, define, and solve problems in a timely and effective manner. This critical skill demanded of physicians requires the ability to work effectively with measurements and calculations; to learn and reason in a variety of settings, including formal lectures, small group discussions, individual teaching sessions, clinical teaching sessions and independent learning activities; to self-evaluate; and to integrate, analyze, and synthesize data concurrently in a multi-task setting. In addition, students must be able to comprehend three-dimensional relationships and understand the spatial relationship of structures.
E. **Behavioral and Social Attributes.** Students must possess good emotional health, ethical awareness, and the self-discipline needed for suitable use of their intellectual abilities, the exercise of good judgment, and the timely and safe completion of tasks and responsibilities. They must be able to adapt to rapid change, display flexibility, and learn to function in the face of stressful situations and uncertainties. Students need to demonstrate honesty, integrity, and altruism and are expected to manifest empathy and concern for patients and their families, colleagues, members of the healthcare team, and the community-at-large. In accord with the Jesuit educational tradition of Stritch, students must be genuinely able to take into account the spiritual needs and faith-tradition of patients and to call upon the resources of chaplains as members of the healthcare team.

The above standards are a means to fulfill our obligation to give medical students a comprehensive medical education, rooted in common knowledge, skills, competencies and behaviors, which is the prerequisite for entry into specialized post graduate training programs. It is possible that Stritch’s adherence to these standards may disqualify some students, including some with disabilities. If the candidates are unable to fulfill the essential functions of the academic training program, they are not appropriate candidates for admission, matriculation, or graduation.

Students who have been accepted for admission to Stritch are required to acknowledge that they understand and can meet the minimum technical standards required to complete the curriculum.

There are two sets of circumstances when issues regarding disabilities might arise:

1. **Pre-enrollment.** In compliance with the ADA, Stritch makes no pre-admission inquiry regarding disability. In general, students with disabilities are identified or self-identify before enrollment in order to qualify for the possibility of accommodation(s). Once identified, students must complete documentation requesting any reasonable accommodation and submit to an evaluation process (see Appendix A) to determine whether and which accommodations are deemed reasonable and consistent with the technical standards of Stritch. The results of this evaluation, if positive, will be sent to the Dean for final approval. Although some assistance may be provided to a student requesting a reasonable accommodation, the use of human intermediaries who may interject their powers of selection and observation in place of a student’s will ordinarily not be permitted.

2. **Post Matriculation.** Students who identify a disability post matriculation and wish to request reasonable accommodations are expected to notify the Associate Dean for Student Affairs regarding their requests, and then follow an evaluation process (see Appendix B) the results of which are sent to the Dean for final approval.

Candidates must be aware that approval for and the provision of reasonable accommodations at Stritch does not mean that similar accommodations would be granted elsewhere or by national licensing review boards.
REGISTRATION

New students must:

- complete forms that include biographical information, legal residency, proof of U.S. citizenship or permanent residency or a current two-year grant of Deferred Action for Childhood Arrivals (DACA) from the U.S. Citizenship and Immigration Services at the time of application, and education history
- obtain a student identification card
- complete a Criminal Background Investigation Consent Form
- complete the registration process before tuition and fees are paid to the Bursar

Returning students are required to complete an updated registration form at the beginning of every academic year and report changes promptly. Returning students who have renewed their two-year grant of DACA must present their updated Employment Authorization Document. The registration and cancellation of specific elective courses must be in accordance with the policies and procedures outlined in the Elective Course Catalog.

Tuition and Fee Payment
All tuition, required fees, and hospitalization insurance payments are due and payable by the end of Friday of the first week of classes for M2, M3, and M4 students and the Friday of orientation week for M1 students. Failure to make payments or financial arrangements according to the above schedule will result in a late fee and may result in the student being denied participation in educational activities, including removal from enrollment in all courses and no credit for that period.

All indebtedness to the university (tuition, fees, and fines) must be discharged in order to be eligible for graduation.

Bursar policies: http://www.stritch.luc.edu/bursar

Financial Aid Office policies: http://www.stritch.luc.edu/finaid

COMPLIANCE

Local, state, and federal agencies and regulations mandate student participation in training sessions, certification programs, or clearance activities. Other sessions are required by Loyola to enable students to learn about specialized software used in patient care settings or other skills. Sessions are typically scheduled in coordination with registration activities and new academic year orientations. These requirements may vary from year to year.
The roster of such activities and e-learning modules is published annually and may include topics such as the following or others that will be announced:

- Basic Life Support
- Clinical Staff Annual Mandatories (safety, compliance, HIPAA, and patient safety)
- Clinical Tools
- Criminal history records background check
- EPIC Electronic Medical Record
- Evidence-Based Medicine
- OSHA (Occupational Safety and Health Administration)
- Veterans Administration Hospital registration and background check

Students must fulfill all requirements that are offered through e-learning modules, workshops, or through other participation formats to remain in good standing.

## GRADUATION REQUIREMENTS

### General Requirements

A candidate for the degree of Doctor of Medicine must:

- successfully complete at least four academic years as a regularly matriculated student
- demonstrate to the Student Promotions Committee successful fulfillment of all academic, clinical, and school requirements for the degree
- demonstrate professional and ethical behavior
- post a passing score for United States Medical Licensing Examination (USMLE) Step 1 by the final month of the Year 3 curriculum
- must sit for Step 2 CK and CS by the start of the final semester of enrollment and post a passing score for USMLE Step 2 CK and CS no later than two months before the end of the student's Year 4 calendar
- All elective weeks required to graduate must be on your schedule no later than 1 month prior to graduation and all other graduation requirements must be met no later than 1 month prior to graduation. Otherwise your graduation will be delayed and you will not be permitted to participate in the ceremony.
- comply with all the requirements and policies of the medical school and university
- discharge all indebtedness to the university
- be present at the conferring of the degree unless specifically excused

### United States Medical Licensing Examinations (USMLE)

USMLE is a national licensing exam that is administered in three parts or steps by the National Board of Medical Examiners (NBME). Step 1 is taken at the end of Year 2 and Step 2 usually is taken in Year 4. Step 3 is taken following graduation in the first
postgraduate year. Complete information regarding these exams can be found at the USMLE website.

Tests are administered at USMLE test centers contracted by the National Board of Medical Examiners. Students should consult USMLE publications regarding registration deadlines, fees, test administration procedures, score reporting procedures, and re-examination policy.

**Step 1**

- Students in good standing are required to take USMLE Step 1 before the official calendar start date of the Year 3 calendar (pending performance on a required NBME self-assessment exam, provided by SSOM near the end of that academic year, this date may be changed).
- Students’ readiness to sit for USMLE Step 1 will be evaluated by the Student Promotion Committee based upon performance in courses and the mandatory NBME practice exam(s) provided by SSOM. Students identified by the Student Promotion Committee in consultation with the Academic Review and Intervention Committee who do not meet the recommended level of performance will be reviewed and advised on a case-by-case basis to define an appropriate preparation plan and timing of their Step 1 exams. *Scoring guidelines are distributed by the Academic Center for Excellence.*
- Students with INC or unremediated F grades from Year 2 are required to satisfactorily complete those courses prior to sitting for Step 1.
- Students who are required to remediate Year 2 courses and do so successfully must take Step 1 no later than 6 weeks after the start date on the Year 3 calendar (pending performance on a required self-assessment exam)* in order to be promoted to Year 3.
- Students not achieving recommended scores on the required self-assessment exam will be reviewed and advised on a case-by-case basis by the Office of Student Affairs in consultation with the Academic Center for Excellence to define an appropriate preparation plan and timing of their USMLE Step 1 exam.
- Students who must retake USMLE Step 1 are subject to a change in their Year 3 schedule to provide a study block and are required to meet with the Office of Student Affairs and the Academic Center for Excellence to establish a preparation plan for a second attempt. Normally, students begin their re-take preparation in the clerkship block following receipt of score results and no later than February of their M3 year. No clerkship is scheduled during the study block.
- Academic progress may be delayed to allow adequate Step 1 preparation time at the discretion of the Academic Review and Intervention Committee in consultation with the Student Promotion Committee. Students who fail USMLE one or more times are subject to review by the Student Promotion Committee and the recommendations of that committee.
- Stritch limits students to three attempts to sit for Step 1.
- Students who do not pass Step 1 by the end of the Year 3 curriculum, are not permitted to enroll in Year 4 and are terminated by administrative action from Stritch.
No more than the equivalent of one academic year of time off cumulatively may be taken for the purpose of studying for second and third USMLE re-examinations.

**Step 2 CK (Clinical Knowledge) and Step 2 CS (Clinical Skills)**

- Students should take Step 2 CK and CS after successful completion of all required Year 3 courses (pending performance on a required NBME self-assessment exam provided by SSOM near the end of the academic year, this date may be changed).
- Students’ readiness to sit for Step 2 CK and CS will be evaluated by the Student Promotion Committee based upon performance in clerkships, the mandatory NBME practice exam(s) provided by SSOM, and the Ambulatory Skills Assessment Exam. Students identified by the Student Promotion Committee in consultation with the Academic Review and Intervention Committee who do not meet the recommended level of performance will be reviewed and advised on a case-by-case basis to define an appropriate preparation plan and timing of their Step 2 exams. **Scoring guidelines are distributed by the Academic Center for Excellence**
- Students must sit for Step 2 CK and CS by December 31st of Year 4 and post a passing score for USMLE Step 2 CK and CS no later than two months prior to graduation in order to be eligible to participate in the commencement ceremonies.
- Students with unremediated F or INC grades are normally required to satisfactorily complete those courses prior to sitting for Step 2 CK and CS.
- Stritch limits students to three attempts each to pass Step 2 CK and Step 2 CS.
- Students who do not pass Step 2 CK and CS on first attempt may petition the Office of Student Affairs for an extension of time not to exceed one year and three total attempts to fulfill this requirement. An extension of time is granted based on the structure and potential efficacy of the proposed study plan.

Students are advised to consult the [USMLE](https://www.usmle.org) website to determine score reporting dates for the test date selected.

**Length of Time to Complete Graduation Requirements**

Students must complete a minimum of four academic years. Students are expected to graduate after four consecutive academic years of enrollment except when a student is:

- granted an approved LOA due to documented health problems or personal tragedy;
- approved to pursue an educational or research experience outside of the standard four consecutive year medical school curriculum; or
- advised by the Student Promotion Committee to alter their academic schedule.

**CURRICULUM REQUIREMENTS**

The curriculum consists of required core courses and clerkships, electives, academic requirements (case papers and clinical rounds), and topics in medicine offered through vertically integrated courses *(see Topics in Clinical Medicine – Vertically Integrated Courses).*
Year 1 and Year 2
Year 1 and Year 2 each consist of two semesters of 20 calendar weeks, including 19 weeks of classes. Specific course information can be found on the Loyola University Medical Education Network (LUMEN) website.

Required Year 1 courses:

- Behavioral Medicine & Development
- Function of the Human Body
- Host Defense
- Molecular Cell Biology & Genetics
- Patient Centered Medicine 1
- Structure of the Human Body

Required Year 2 courses:

- Mechanisms of Human Disease I and II
- Patient Centered Medicine 2
- Pharmacology and Therapeutics I and II
- Attendance at two Ethics Grand Rounds

Students must take all required courses offered in the pre-clerkship curriculum at Stritch and record a grade according to the regular schedule and school calendar. Proficiency exams are not offered for the purpose of exempting a student from any graduation requirement.

Year 3 and Year 4
Year 3 includes 44 weeks of required clerkships and four weeks of research and clinical electives. Year 4 includes 12 weeks of required clerkships and 30 weeks of elective time. At least 12 weeks of required and/or elective coursework must be completed in the final semester of enrollment. This may not be reduced by elective credits accrued in earlier semesters of enrollment. Specific course information can be found on the LUMEN website.

Students must comply with the teaching site’s standards, rules, regulations, administrative practices, and policies.

Year 3 curriculum:

- Family Medicine Clerkship
- Medicine Clerkship
- Obstetrics & Gynecology Clerkship
- Patient Centered Medicine 3
- Pediatrics Clerkship
- Psychiatry Clerkship
- Surgery Clerkship
• Neurology Clerkship
• Clinical or research electives (see Electives)
• Attendance at two Ethics Grand Rounds (four total required in Years 2 and 3 combined)
• Completion of an Ethics Case Analysis Paper (due in the first month of Year 4)
• Successful completion of vertical curriculum as specified below with a final comprehensive examination for vertically integrated curricular topics (see Topics in Clinical Medicine – Vertically Integrated Courses section)

Year 4 curriculum:
• Critical Care Subinternship
• Ward Subinternship
• Emergency Medicine Clerkship
• Clinical or research electives (see Electives)

**Topics in Clinical Medicine – Vertically Integrated Courses**
Certain topics (e.g., preventive medicine, radiology, end of life care) are taught throughout the first three years of the curriculum in multiple courses and clerkships. Each topic is designated a Vertically Integrated Course (VIC) and is reported on the Stritch transcript under one required course heading: Topics in Clinical Medicine (TICM).

Acquisition of knowledge, skills, and professional attitudes and behaviors is evaluated as part of the course/clerkship examination(s) in which the material is presented and by a final comprehensive exam given after all of the individual components of a VIC are completed. Each VIC and the TICM is graded as Pass/Fail. **Attaining a Pass in TICM is required** for graduation and to do so, a student must receive a Pass in each individual VIC. Failure on any component of an exam or exams necessitates taking and passing a make-up exam. Failure on a make-up examination requires remediation as deemed appropriate by the specific VIC Course Director.

**Bioethics and Professionalism**
Students are required to successfully complete the following components:

• attend four Ethics Grand Rounds by the end of Year 3
• submit an Ethics Case Analysis Paper due in the first month of Year 4 and receive a passing grade

**Electives**
The current curriculum requires completion of a minimum of 26 weeks of electives, most of which must be completed within the 34 weeks available in the Year 3 and Year 4 curriculum.

• No more than three (3) elective weeks earned in Year 1 and Year 2 may be applied toward graduation.
• Electives taken in Years 1-2-3 must be intramural.
• Year 4 electives may be intramural or extramural, but the maximum number of extramural weeks permitted to be applied toward the MD degree is 12 weeks.
• The majority of electives, 16 weeks of the 26 weeks minimum, must be at least four (4) weeks in length.
• Students must be enrolled in at least 12 weeks of required and/or elective clerkships in the final semester of enrollment before graduation.

Students are limited to eight (8) weeks of credit in internationally-based global health electives and individually designed electives (i.e., an elective not listed in Stritch’s or another US allopathic medical school’s elective catalog).

Elective approval is granted within guidelines whose primary purpose is to confine the educational program to sites at which coursework can be regulated as to content, orientation, and from which meaningful evaluation of student performance can be obtained from an appropriate faculty member. Complete policies, regulations, and rationale regarding a student’s preparation of their elective program, its content, and the registration procedures are published in Stritch’s Elective Course Catalog.

In conferring the MD degree, Loyola University Chicago is obligated by various licensing agencies to certify that students meet certain program requirements, including the very important one of time in residence. Such certification is obviously invalid if a significant amount of the elective educational experience occurs outside the surveillance of our faculty. The primary reasons for these constraints arise from our institutional accountability to licensing and accreditation agencies and our concern with appropriate cost reimbursement.

Students must comply with the teaching site’s standards, rules, regulations, administrative practices, and policies. Electives must be registered and cancelled in accordance with the policies and procedures outlined in the Elective Course Catalog.

## COMPETENCY REQUIREMENTS

**Competencies**
Stritch School of Medicine requires medical students to develop competency in six areas of performance to the level expected of new physicians entering graduate medical education programs.

Students are broadly trained and prepared to undertake graduate medical education training and choose careers in academic medicine, community medicine, and/or research. Faculty members are committed as teachers, mentors, and role models to support the development of these student competencies:

• Medical Knowledge
• Interpersonal and Communication Skills
• Professionalism, Moral Reasoning, and Ethical Judgment
• Clinical Skills and Patient Care
• Lifelong Learning, Problem Solving, and Personal Growth
• Social and Community Context of Healthcare

Stritch School of Medicine Goals and Objectives provides a detailed description of these competencies. Competencies are evaluated in all Stritch courses and students are required to successfully meet competency standards to be eligible for promotion and graduation.

Competency Committee
The Competency Committee reviews the school's competency-based learning objectives for each course and clerkship and utilizes student performance data with respect to the specified learning objectives to target, develop, and calibrate assessment instruments for each of the six required competencies.

Academic Review and Intervention Committee
The Academic Review and Intervention Committee (ARIC) is responsible for monitoring student performance on examinations and evaluations of competencies, small group activities, and clinical experiences to identify students who require observation, intervention, and/or remediation. An action plan based on individual needs will be designed and monitored by the committee in collaboration with the student. ARIC will report to the Student Promotion Committee.

Student Promotion Committee
The Student Promotion Committee (SPC) is responsible for overseeing and enacting the policies regarding the academic and professional standards of all medical students and their programs toward graduation.

The SPC reviews student academic performance and competency status after each semester and after USMLE Step 1 and Step 2 examinations. In addition, the committee review will determine a student’s academic status as he/she progresses through the curriculum and approve them for advancement and eventually graduation. The committee recommends with regard to the following:

• Promotion, probation, repeat of coursework, suspension, withdrawal or termination of a student for academic or professional concerns
• Determination of satisfactory progress
• Monitor and advise on required remediation programs as developed by ARIC or course/clerkship directors concerning SSOM competencies and academic progress
• Determination of whether a student has fully satisfied the requirements for a medical degree.

The committee seeks to support and develop students’ academic and professional competence and strengthen the overall academic environment toward successful degree completion.
ACADEMIC CALENDARS AND SCHEDULES

Official academic calendars and course/clerkship schedules for each curricular year are published on SSOM website. The academic calendar sets the beginning and ending dates of each enrollment term and specifies approved vacation periods and no-class days. The course/clerkship schedule provides a daily list of class sessions and times. Changes are normally not made to the calendar or schedule once the term has started except for unforeseen exigencies and only with the approval of the Office of Educational Affairs in collaboration with the Office of Registration and Records.

Examinations

The Office of Registration and Records publishes an examination schedule at the start of each semester. It is the student’s responsibility to confirm the exact time, place, and format of all announced exams. Students are obligated to take examinations on the days and times specified on the course/clerkship schedule and by the course/clerkship administration.

Students may be excused from an examination for:

- serious illness, which must be documented by a note addressed to the Associate Dean for Student Affairs from a physician who is caring for the student or Loyola’s Student Health Service
- emergency situation, which must be reported to the Associate Dean for Student Affairs or designate, citing evidence for granting an authorized absence; the Associate Dean, in consultation with the Course/Clerkship Director, approves the absence.

Students who are excused from examinations are responsible for initiating arrangements for the make-up examination with the Course/Clerkship Director and Associate Dean for Student Affairs. This needs to be done immediately upon return to class in cases of sudden illness or emergency situations. Unauthorized absence from an examination generally results in a score of zero for which the consequence is normally failure of the course.

Changes in exam schedule for other personal reasons, except as noted above, are not normally made.

PERMANENT RECORDS

Permanent File Contents

A student’s permanent file as maintained in the Office of Registration and Records contains the following documents:
• admission application
• registration information
• Stritch transcript (electronic version only beginning with Class of 1997)
• transcripts from all post-secondary schools from which a degree was awarded or evidencing successful completion of a program required for admission to Stritch
• grades and written evaluations, including competency assessments and narrative comments
• USMLE score reports (electronic version only)
• notations of awards for academic achievement
• status and name changes
• photograph
• other important correspondence addressed to the student
• Medical School Performance Evaluation (MSPE), also called the Dean's Letter

**FERPA Compliance**
Letters of recommendation, including those sent as part of the application for admission to Stritch and those submitted to support the residency application process, are not kept in the student's file. Disclosure of the student's permanent academic records to anyone other than recognized school officials with a legitimate need to know must have prior written consent of the student. Requests for information and letters of consent to release these records from the student are maintained in accord with FERPA guidelines.

The Family Educational Rights and Privacy Act of 1974 ([FERPA](https://www.ed.gov/policy/fään/index.html)) protects the confidentiality of these records. Refer to the *Access to and Disclosure of Student Records* section or contact the Office of Registration and Records for further assistance.

Directory information is normally released without your prior consent upon request unless there is a written request on file with the Office of Registration and Records to withhold your directory information.

**Transcript of Grades**
The precautions the Office of Registration and Records takes in issuing transcripts are intended to protect the student's right to privacy:

• transcripts may be issued upon written request of the student
• only official transcripts are issued by the Office of Registration and Records
• all financial obligations to the university must be met prior to issuance of a transcript
• only the record of the work done and grades earned while registered at Loyola University Chicago Stritch School of Medicine is included
• USMLE scores and class rank are not listed
• original copies of records and documents submitted upon entering Stritch cannot be released or copied
CLINICAL SCHEDULING

Clerkship Track
Students are assigned by lottery to a track that determines the sequence in which they take required clinical courses, commonly referred to as clerkships, and electives. Information about the clerkship track system and the policies that govern the lottery process are published separately and distributed to M2 and M3 students.

Departments also conduct lotteries that determine a student’s teaching site assignment. All required clerkships must be taken at Loyola University Medical Center or a site designated by Stritch for that clerkship. Students must comply with the assigned teaching site’s standards, rules, regulations, administrative practices, and policies.

Workweek
Clinical Educational hours are supervised clinical and academic activities related to patient care, which do not include reading/studying time spent away from the clinical site, on any required clerkship or elective at Loyola University Medical Center or affiliated site. Clinical Educational activities must follow these guidelines:

- students are limited to a maximum of 80 hours/week, including all call activities
- at least one day (24 hours in duration) in seven is free of all clinical responsibilities
- a 10-hour time period between all daily duty periods and after in-house call to allow adequate time for rest, personal activities, and study

Any amendment to Stritch’s guidelines will be announced should national review of workweek standards occur or local review within Loyola determine that a change is necessary.

On-Call
The objectives of in-house and on-call activities include learning and knowing how a hospital functions differently at night as opposed to normal daytime hours, caring for patients not primarily assigned, learning how to communicate with colleagues about their care, and recognizing and treating acutely ill patients who require emergent hospital admission.

In-house call must not be more than every fourth night of continuous on-site duty, including in-house call, and must not routinely exceed 24 consecutive hours. However, students may remain on duty for up to six additional hours to participate in didactic learning activities or to assist in the transition of care of assigned patients.

Transportation Voucher Post-Call
Any student who considers him/herself too tired or fatigued to drive home safely and is unable to obtain other alternative transportation should call a taxi. Reimbursement for a round trip between the clerkship site and student’s local address and back to the clerkship site for the next clerkship day is provided through Stritch. The student should promptly
submit the original fare receipt to the Senior Associate Dean for Medical Education’s office at Stritch for processing a reimbursement.

**GRADES**

Final grades are determined by the individual courses and clerkships using methods appropriate to the skills and knowledge they evaluate. These can include multiple choice and written exams, objective structured clinical exams (OSCEs), student projects and presentations, laboratory exercises, small group problem-solving sessions, and clinical floor performance. Students can be evaluated in up to six areas of performance and behavior, which are called competencies. Students must meet the minimal requirements in each of the competency areas evaluated in order to successfully pass a course or clerkship (see Competency Requirements).

Students must complete end of course and clerkship evaluations by the indicated deadlines before their grades are released.

**Honors at Graduation**

Students achieving a grade average based on grades earned through the end of March in their final year, equivalent to 3.5, 3.7, and 3.9 on a four-point scale, are recommended respectively for the graduation honors of *cum laude* (with honor), *magna cum laude* (with high honor), and *summa cum laude* (with highest honor).

**Grading System**

<table>
<thead>
<tr>
<th>Grade</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>H</td>
<td>Honors</td>
</tr>
<tr>
<td>HP</td>
<td>High Pass</td>
</tr>
<tr>
<td>P</td>
<td>Pass</td>
</tr>
<tr>
<td>P++</td>
<td>Pass (Pass/Fail courses only)</td>
</tr>
<tr>
<td>P*</td>
<td>Remediated Pass</td>
</tr>
<tr>
<td>U</td>
<td>Unsatisfactory (only used for Year 3 and Year 4 clerkships)</td>
</tr>
<tr>
<td>F</td>
<td>Failure</td>
</tr>
<tr>
<td>INC</td>
<td>Incomplete</td>
</tr>
<tr>
<td>WD</td>
<td>Withdrawn (this grade can only be given prior to final exams when a student has officially withdrawn or been granted a leave of absence.)</td>
</tr>
</tbody>
</table>

**Grade Reporting**

- Year 1 and Year 2 grades are reported to the Office of Registration and Records within two weeks (excluding official holidays) of the final examination or scheduled class session.
- Year 3 and Year 4 grades are reported to the Office of Registration and Records within 30 days (excluding official holidays) of the final examination or scheduled class session.
- All grades earned in properly registered courses are recorded on the student's official transcript.
- Written evaluations that accompany a letter grade documenting overall performance become part of a student's permanent record. Students are expected to review these evaluations.

**Class Rank**
Class rank is computed only after all grades have been collected at the conclusion of Year 3 and is usually announced no later than September of Year 4. A final class rank is computed after graduation.

- Class rank is not posted on the official transcript and may only be released by the school with the written authorization of the student.
- Transfer students do not receive a class ranking.
- P++, U, and INC grades are not used in computing class rank.
- Class ranking places a student in the upper, middle, or lower third of the class.

**Petition for Review of Grade Assigned**
A student who wishes to request review of the final grade received in a course/clerkship/elective may do so by submitting a written petition to the Course/Clerkship/Elective Director with a copy to the Associate Dean for Student Affairs. Petitions must specifically state the reason for requesting a review and must be submitted within two months of the date the grade was posted.

A student who is dissatisfied that the response did not address the concerns stated may request a review of his/her appeal to the Course Director (Year 1 courses, Year 2 courses, and PCM 3) or to the department chair of the clerkship/elective (Year 3 and Year 4) within one month of receipt of the original response to the petition. In Years 3 and 4, a final petition to the Senior Associate Dean for Medical Education must be limited to concerns relating to the violation of school policy, course's stated grading procedure, or that an unjust decision was rendered. Petitions filed longer than two months following posting of the grade in question are not heard.

## PROBATION

Any student who loses good standing status shall be placed on academic probation for a specified period recommended by the Student Promotion Committee. The student will be notified in writing of the probationary status, both when it starts and when it ends. The following guidelines apply to academic probation. A student loses good standing for the following reasons:
- Fails a course, clerkship, or elective;
- Fails to achieve required competency levels;
- Fails to maintain acceptable academic ethics and professional behavior; and/or
- Fails USMLE Step 1 or 2.

After the student has completed the required course(s) and/or competency and/or retake of the appropriate national examination, the SPC will again review the academic record of the student who is on academic probation. The SPC will determine if the student will be reinstated to good standing.

**FAILURES AND REMEDIATION**

A student who has failed a course, clerkship, elective, or board exam, may be placed on academic probation by the Student Promotion Committee. The student is required to engage in an academic advisement process through the Office of Student Affairs and the Academic Center for Excellence in collaboration with the student advisor and/or Course/Clerkship/Elective Director when appropriate. Such a process also might be suggested by the Academic Review and Intervention Committee.

A remediation plan for students who have failed is developed by the appropriate parties according to policy guidelines. Engaging in the proposed recommendations made by the Academic Review and Intervention Committee is considered mandatory by the Stritch deans and faculty. The Student Promotion Committee will review students’ adherence to the remediation process as well as the remediation outcome in deciding if a student will be promoted to the next academic year.

**Year 1 and Year 2**

**Remediation of a Single Failure**

Students with one final course grade of F must attempt to pass a make-up examination offered by the course prior to the start of the next academic year. The Course Director is responsible for producing an examination that is rigorous enough to assure that the student has achieved competency in the material. The remediation examination schedule is determined by the Office of Student Affairs and the Academic Center for Excellence in consultation with the Course Director according to the time lines shown below. A student with a failing grade below 60% may be denied the opportunity to remediate the failure by an end of year exam and may instead be required to repeat the course. The Course Director will make recommendations to the Student Promotion Committee to assist in determining if summer remediation is an option.

- A Year 1 remediation exam is scheduled at the end of the academic year and must be completed at least one week prior to the start of the next academic year. The schedule is set to allow the student a study period and the exam must be taken according to the date specified by Stritch.
• A Year 2 remediation exam is scheduled to allow the student ample time to complete the course and prepare to take the USMLE Step 1. Students with an unremediated F or INC grade(s) from Year 2 are required to satisfactorily complete those courses prior to sitting for Step 1.

Students needing to remediate a course should expect to alter their summer schedules based on input from the Course Director, Office of Student Affairs, and Academic Center for Excellence.

Prior to sitting for a remediation examination, a student should engage in a supervised review period under the direction of the Course Director and the Academic Center for Excellence. Remediation exams are not offered mid-year due to their potential disruption of focus on courses in progress during the next semester.

The following remediation conditions apply:

• An F grade successfully remediated by passing a make-up examination can only be converted to a P* grade. The P* grade is defined on the Stritch transcript key as a Remediated Pass.
• A student must have earned a P (or higher) or P* in every course attempted to be eligible for promotion to the next curriculum level.
• A single F grade not successfully remediated by passing a make-up examination requires repetition of the entire course.
• A student required to repeat a course must do so at Loyola and is not eligible to participate in any courses offered at the next level while repeating a course.
• While a course repeat normally takes place during the next academic year, the student may request, or Stritch may require, that the student take a leave of absence to seek learning or personal assistance, or engage in remedial work, prior to attempting to repeat the failed course.
• Stritch strongly recommends that a student repeating a course also audit other courses for which a P* or marginal P grade was received in order to sustain readiness for taking the USMLE.
• The transcript of a student who must repeat a course will permanently show the original F grade. In the repeated course, a student may earn a grade of Honors, High Pass, or Pass.
• A student who fails the same course a second time is dismissed by administrative action of the Stritch School of Medicine.

**Remediation of Multiple Failures**
A student who fails four or more courses in any one academic year during Year 1 or Year 2 of the curriculum is not permitted to remediate any of these failures and the student is terminated from enrollment. Grades of U and INC are not counted under this rule.

If a student fails five courses in Year 1 and Year 2 of the curriculum combined, then no remediation of the fifth course is allowed, irrespective of whether the earlier failures were remediated, and the student is dismissed.
A student with three or fewer final course grades of F in a given year must attempt to pass make-up examinations offered by the course prior to the start of the next academic year. The Course Director is responsible for producing an examination that is rigorous enough to assure that the student has achieved competency in the material.

The remediation examination dates are determined by the Office of Student Affairs and the Academic Center for Excellence in consultation with the Course Director according to the time lines shown below:

- Year 1 remediation exams are scheduled at the end of the academic year and must be completed at least one week prior to the start of the next academic year. The schedule is set to allow the student a study period prior to each exam and the exams must be taken according to the date specified by Stritch.
- Year 2 remediation exams are scheduled no later than mid-July following the end of Year 2 in order to allow sufficient time for the student to prepare to take the USMLE Step 1 no later than 6 weeks from the start date on the Year 3 calendar.
- Students with unremediated F or INC grades from Year 2 are required to satisfactorily complete those courses prior to sitting for Step 1.

Students needing to remediate courses should expect to alter their summer schedules based on input from the Course Director, Office of Student Affairs, and Academic Center for Excellence.

Prior to sitting for remediation examinations, a student should engage in a supervised review period under the direction of the Course Director and the Academic Center for Excellence. Remediation exams are not offered mid-year due to their potential disruption of focus on courses in progress during the next semester.

The following remediation conditions apply:

- A student must have earned a P (or higher) or P* in every course attempted to be eligible for promotion by the Student Promotion Committee to the next curriculum level.
- F grades successfully remediated by passing a make-up examination can only be converted to P* grades.
- The P* grade is defined on the Stritch transcript key as Remediated Pass.
- A student must successfully remediate by make-up exam at least one of the three initially failed courses to earn the opportunity to repeat up to two courses not successfully remediated through the make-up exam opportunity.
- A student who must repeat one or two courses must do so at Loyola and is not eligible to take any courses offered at the next level while repeating a course.
- While this repeat normally takes place during the next academic year, the student may request or Stritch may require that the student take a leave of absence to seek learning or personal assistance or engage in remedial work prior to attempting to repeat the failed courses.
• Stritch strongly recommends that a student repeating a course or courses also audit courses for which a P* or marginal P grade was received in order to sustain readiness for taking the USMLE.
• The transcript of a student who must repeat course(s) permanently shows the original F grade. In the repeat year, a student may earn a grade of Honors, High Pass, or Pass in a repeated course.
• A student who fails the same course a second time is automatically dismissed by administrative action of the Stritch School of Medicine.

Assignment of an Incomplete Grade
• An INC grade is only given prior to a final exam upon recommendation of the Course Director and approval of the Associate Dean for Student Affairs, usually in cases of illness, emergency, or personal tragedy.
• INC grades should be removed within two weeks from the end of the course or in accord with an alternate plan approved by the Course Director and Associate Dean for Student Affairs.
• A student without an approved alternate plan who has not cleared the INC grade before the start of the next academic year will have the INC grade converted to an F grade.
• An INC grade can be changed to an H, HP, P, U, or F grade.

Assignment and Remediation of Meets with Concern Competency Evaluation
Students who receive a Meets with Concern assessment in one or more competencies in one or more courses are subject to review by the Academic Review and Intervention Committee with input from the appropriate Course Director(s) to determine if a remediation process is necessary.

Assignment and Remediation of Does Not Meet Competency Evaluation
A Does Not Meet assessment in any course or any competency may affect the final grade in that course. A plan to address the deficiency or deficiencies is determined by the Student Promotion Committee with input from the appropriate Course Director(s).

Year 3 and Year 4
The Student Promotion Committee will review students’ performances in all officially registered Year 3 and Year 4 required and elective courses and clerkships, and all competency evaluations to determine eligibility for degree completion.

Academic Failure
Academic failure may result from:
• Failing performance in examinations or other required assignments (see U grade section below).
• Unsatisfactory performance of those responsibilities assigned to the student with respect to patient care (clinical performance).
• Not meeting expected competencies.
• Behavior that is judged by the student's immediate supervisory faculty to be inappropriate, disruptive, or, in any way, deleterious to the delivery of proper and humane medical care.
• Supervisory faculty documents inappropriate behavior in writing to the Course/Clerkship/Elective Director, who then notifies the student in writing; the student meets with the Course/Clerkship/Elective Director who determines an appropriate course of action that may include, but is not limited to, terminating the student's participation in the course/clerkship/elective.
• Termination of clinical performance automatically results in an F grade for the entire course/clerkship/elective and is referred to the Student Promotion Committee for appropriate action according to the Academic Policy Manual, including placing the student on academic probation.

Assignment and Remediation of a U Grade
If a student's clinical performance is satisfactory, but performance on exams, papers, or projects is unsatisfactory, the Clerkship Director may report a U or F grade depending on the severity of the deficiency.

• The U grade is normally used when a student's clinical floor performance is evaluated as fully satisfactory, but the objective evaluation indicated that the student's knowledge of the course content is marginally unsatisfactory.
• The U grade should be remediated within three months from the date the U grade was posted. Upon prior written petition from the student or the Clerkship Director to the Associate Dean for Student Affairs, additional time may be granted to remove the U to avoid conflict with another upcoming exam or course in progress, or other serious reason.
• The U grade can only be converted to a P or F grade. The department may recommend or require additional remedial work prior to offering the student an opportunity for clearing the U grade. No academic credit is given for remedial work.
• Only one remediation opportunity is offered to remove a U grade. The remediation should be appropriate to the portion of the coursework in which the student’s performance was marginally unsatisfactory.
• A U grade in a second course or clerkship requires evaluation of the student’s progress and action by the Student Promotion Committee, including placing the student on academic probation. Three or more U grades in Year 3 and Year 4 may be cause for additional remediation or repetition of coursework.

Assignment and Remediation of an F Grade
An F grade is reported if a student fails the clinical performance portion or receives an overall fail on the performance or competency components evaluated. The student has one opportunity to remediate this grade. The remediation is appropriate to the failed component(s) of the course.

• If a student fails clinical performance and other components, the entire course/clerkship/elective must be repeated and all components must be remediated.
simultaneously. Remediation must be completed within the equivalent of one academic quarter (three months) from the end of the course. The Course/Clerkship/Elective Director and/or the Student Promotion Committee may require additional remedial work for a student prior to the start of the prescribed remediation period.

- If clinical performance was satisfactory, but other components were failed, the student is expected to remediate the relevant components and, usually, at least half of the clinical component. The Course/Clerkship/Elective Director and/or the Student Promotion Committee may require or recommend additional remedial work, including additional clinical experience beyond half of the course/clerkship/elective. No academic credit is given for remedial work.

- If clinical performance was unsatisfactory, the student must repeat no less than half and, in some cases, the entire course/clerkship/elective, including exams, papers, and projects even if these components were originally passed.

In all instances of a failure, the student is required to complete the remediation under the supervision of faculty designated by the Course/Clerkship/Elective Director. In the case of a failed extramural elective, the appropriate medical school department in consultation with the Student Promotion Committee determines a suitable remedial experience. Remediation of a failed clinical course/clerkship/elective may result in delayed graduation and/or modification of the remainder of the student’s academic program.

If the student successfully remediates, the Course/Clerkship/Elective Director reports a grade change from F to P* (passed by remediation). If the student does not successfully remediate, an F grade is reported and the student is dismissed due to academic failure by administrative action of the Stritch School of Medicine.

**Remediation of Multiple Failures**

Students may not receive a P* or F grade in more than two required or elective courses/clerkships. If an F grade is reported for a third required or elective course/clerkship, the student is automatically dismissed by administrative action of the Stritch School of Medicine.

**Assignment and Remediation of Meets with Concern Competency Evaluation**

Students who receive a Meets with Concern assessment in one or more competencies in one or more courses/clerkships/electives are subject to review by the Academic Review and Intervention Committee and the Student Promotion Committee with input from the appropriate Course/Clerkship/Elective Director(s) to determine if a remediation process is necessary.

**Assignment and Remediation of Does Not Meet Competency Evaluation**

A plan to address these deficiencies is determined by the Academic Review and Intervention Committee and the Student Promotion Committee with input from the appropriate Course/Clerkship/Elective Director(s) to determine the form and format of the remediation.
# ATTENDANCE

## Year 1 and Year 2

Students have the professional responsibility to participate in and interact with faculty in scheduled course sessions during Year 1 and Year 2, including laboratories, lectures, and other learning activities.

Attendance is mandatory in Patient Centered Medicine courses, clinical courses, and any other course or course component for which attendance is announced as required, such as small group sessions and objective structured clinical examinations (OSCEs).

### Unexpected/Emergency Absences from Required Activities

Examinations or other required academic activities missed due to illness or other legitimate, serious, extenuating reasons may be made up only if the Course Director and Associate Dean for Student Affairs or designate have received notice of the absence, in advance if non-emergent or as soon as possible if emergent, and granted permission for an excused absence. Absence due to illness requires written documentation from the Student Health Service and/or the physician caring for the student submitted to the Office of Student Affairs.

### Non-Emergent Absences from Required Activities

Petitions for approved absences for serious but non-emergent reasons from activities in which attendance is mandatory (i.e., examinations) must be submitted prior to the start of the course, if possible, but in no case less than one month before the date in question. Such petitions are be reviewed by the Course Director, Course Coordinator, and Associate Dean for Student Affairs or designate. A student must have a serious reason for an excused absence or request for a change in an exam date. The petition should detail the nature of the conflict and available supporting documentation should be attached (e.g., copy of a jury summons or invitation to present a poster). **A petition for permission to be absent is a request, requires review, and is not automatically approved simply by submission.** In granting permission, the logistics and feasibility of rescheduling the missed academic activity are weighed and the student is notified of the decision. Approval to reschedule an examination specifies a date later than the original test date on which the test must be taken. An examination cannot be rescheduled to a date earlier than the original exam date.

Non-emergency absences not requested at least a month in advance of the start of the clinical course cannot be accommodated.

## Year 3 and Year 4

Attendance is mandatory in Patient Centered Medicine courses, clerkships, electives, and any other course/clerkship/elective components where attendance is announced as required (see No Class Days and Absences).
• Students are eligible for regularly scheduled vacation periods according to the official academic calendar.
• Additional discretionary time off may also be possible within the student's schedule as stipulated in the published policies of the clerkship track system.
• M3 and M4 students must complete an Application for Discretionary Time in my LUMEN in advance for approval of any one week period during which they wish to not be enrolled in full-time courses.
• Complete policies governing availability of discretionary time in Year 3 and Year 4 are published in the Stritch Elective Course Catalog. In general, students should not take more than eight weeks off beyond the regularly scheduled vacation break weeks allowed in Year 3 and Year 4.

Absences
Any length of absence from any required activity or course/clerkship/elective component may need to be made up at the discretion of the Course/Clerkship/Elective Director according to the form and/or format specified by the department.

Unexpected/Emergency Absences
During Year 3 and Year 4, any unexpected absence due to illness or other serious emergency requires prompt notification by the student to the Associate Dean for Student Affairs or designate and to the Course/Clerkship/Elective Director. This notification constitutes a request for an excused absence due to a legitimate extenuating reason. The Office of Student Affairs alerts the course/clerkship/elective department and/or director of the absence if the student is unable to do so.

Examinations or other required academic activities that are missed may be made up only if the Associate Dean for Student Affairs has granted permission for the absence. Illness requires written documentation from the Student Health Service and/or the student’s physician.

Non-Emergent Absences
Petitions for approved absences for non-emergent reasons are reviewed by the Course/Clerkship/Elective Director and Associate Dean for Student Affairs or designate and a decision is made to approve the request or not. A student must have a serious reason for an excused absence in Year 3 and Year 4 (e.g., wedding of a sibling or research presentation). Should a student have a serious reason for wishing to take a day or two off, a written petition must be submitted at least one month prior to the start of the course/clerkship/elective in which the absence would occur.

The petition detailing the nature of the conflict should be sent to all of the following individuals: 1) Course/Clerkship/Elective Director, 2) Course/Clerkship/Elective Coordinator, and 3) Associate Dean for Student Affairs. Supporting documentation should be attached (e.g., copy of a jury summons) to the petition, which requires review and is not automatically approved simply by submission. By notifying the relevant school offices at least one month in advance, the student’s clerkship specialty service and call schedule is considered and adjusted to minimize the effect of any days off. The student is
notified of the decision by the Course/Clerkship/Elective Director or the Office of Student Affairs. Non-emergency absences not requested at least a month in advance of the start of the clinical course cannot be accommodated.

**No Class Days**

Students are excused from courses, clerkships, and electives on the days listed below. Students should refer to the official academic calendar for the dates that these holidays are scheduled at Stritch each year. Clinical students could be on duty or on call during weekends following or preceding a No Class Day.

- Martin Luther King Day observance
- Match Day (M4 students only)
- Good Friday* through Easter Sunday inclusive
- Memorial Day*
- July 4th Independence Day*
- Labor Day*
- Thanksgiving Day through that Sunday inclusive (clinical students are not on-call the day before Thanksgiving)

*If a clinical student is on-call the day prior, he/she is excused by 10:00 pm.

**On-Call During No Class Days**

- Students on required subinternships at Loyola University Medical Center or affiliated sites could be on-call on No Class Days (except Thanksgiving Day through that Sunday) if it is their scheduled turn on-call and, in the opinion of the Clerkship Director, taking call is in the best interest of patient care and educational intent.

**Special Notes**

The St. Luke Celebration occurs in October on dates announced in the official academic calendar. Class schedules during this week may be modified to permit special events that mark this Loyola tradition.

St. Albert’s Day is observed in the fall and dates are published in the official academic calendar. Students participating or attending may do so according to Stritch’s announced attendance guidelines.

On holidays designated by the Veterans Administration Hospital that are not on the official Stritch academic calendar as No Class Days (Columbus Day, US Presidents Day, Veterans Day), students assigned to that site must attend with their assigned service.

Students who need additional interpretation of the attendance policies are asked to contact the Office of Student Affairs.
LEAVE OF ABSENCE

General Policies and Procedures
All leave of absence (LOA) requests must be submitted in writing to the Associate Dean for Student Affairs and normally approved in advance of the proposed starting date. Usually, a student must be in good academic standing, have no outstanding U or F or Inc grades on his/her transcript, and have satisfied all graduation requirements normally expected for the student's level of training before the request is granted.

Requests for a leave of absence not covered by the various leave categories described below are considered on an individual basis by the Associate Dean for Student Affairs and may be reviewed by the Student Promotion Committee.

A LOA typically may not exceed one calendar year in length except as described below. Students are expected to graduate after four consecutive academic years of enrollment except when a student is:

- granted an approved LOA due to documented health problems or personal tragedy;
- or
- approved to pursue an educational or research experience outside of the standard four consecutive year medical school curriculum.

The Academic Policy Manual and graduation requirements in effect for the reinstated student's new graduating class will apply to the student for the balance of their enrollment at Stritch.

Students may be required to vacate their assigned locker, mailbox, and learning cluster cabinet, as well as make disability insurance premium payments directly to the vendor. Depending on the timing of the LOA, students may not be eligible for the university’s hospitalization insurance plan during the leave. Students on leave may be eligible to retain other student services upon payment of the usual fees. Details are available in the Bursar Office.

Health Related Leave
LOA requests for illness must be submitted in writing to the Associate Dean for Student Affairs together with a letter from a physician caregiver that:

- stipulates the existence of a medical condition of such nature that a leave of absence is recommended,
- specifies that an appropriate course of therapy will be instituted,
- identifies the supervising physician, and
- indicates that a progress report authorized by the student will be submitted prior to reinstatement.

Additional supporting documentation may be required depending on the circumstances.
A LOA for health-related reasons may be approved for periods up to one year. The Associate Dean for Student Affairs, in consultation with the Student Promotion Committee, may extend a health LOA in unusual circumstances upon written request of the student.

The student should submit a formal petition to resume medical training to the Associate Dean for Student Affairs preferably at least four months in advance of the anticipated date of return. In all cases of approved leaves of absence for health-related reasons, the student is not permitted to return to class unless the physician caregiver also has certified in writing to the Associate Dean for Student Affairs that the student is capable of resuming a full course load in medical school.

**Special Academic Programs**

A leave of absence also may be approved for the following activities:

- study for an advanced degree in scientific areas related to medicine, for example, MD/PhD program
- research activities related to medicine, but not necessarily directed toward an advanced degree
- study in specialized areas not available at the Stritch School of Medicine and not necessarily directed toward an advanced degree
- to engage in a Stritch approved remediation study plan for course, clerkship, elective, or USMLE remediation

Students must submit a proposal describing the purpose and goals of the leave. Approval is given only if the value of the proposed program is considered unique and sufficient to outweigh the disadvantages of interruption of the regular medical curriculum. Decisions for leaves in this category are reviewed by the Associate Dean for Student Affairs in consultation with the Student Promotion Committee if necessary. The decision in these cases also is influenced by logistical constraints associated with translocation of students from one graduating class to the succeeding one.

Students accepted into Loyola’s MD/MS or MD/MA degree programs normally may be granted up to a one-year leave. Students accepted into the MD/PhD dual-degree program and making satisfactory academic progress may be granted successive one-year leaves of absence upon the recommendation of the MD/PhD Steering Committee to enable the student to complete the PhD requirements.

Student transitions in enrollment between the Stritch School of Medicine MD degree program and the Loyola Graduate School PhD program are detailed in the **Timeline for MD/PhD Students**, available in the MD/PhD office at the health sciences campus.

If the Graduate School or the MD/PhD Steering Committee notifies the student and Stritch that the student is not making satisfactory progress toward completion of the MA, MS, or PhD graduate degree, then the Associate Dean for Student Affairs in consultation with the Student Promotion Committee determines whether the LOA granted by the Stritch School of Medicine should by continued or revoked. If the leave is revoked, the student is expected to resume full time medical training toward the MD degree on or before the
beginning of the next academic semester at Stritch according to the course start dates for
the student's level of enrollment, or voluntarily withdraw from the Stritch School of Medicine
within one month of the leave's revocation. In either case, there is an annotation on the
medical school transcript regarding the revocation of the leave.

Other Absences
Prolonged absences in excess of normal discretionary time and regularly scheduled
holidays and vacations for reasons other than those stated above are not normally
approved. Specifically, requests for the following reasons are not approved:

- pursuit of a non-medically related program or unstructured activity,
- employment,
- preparation for the first time taking of USMLE exams (pending performance on a
  required NBME self-assessment exam provided by SSOM near the end of the
  academic year, this date may be changed)
- self-study
- time off solely to consider alternative career options
- residency interview travel
- other activities not related to the completion of the MD degree requirements

Written requests for leaves of absence for reasons not covered in this Academic Policy
Manual are considered on an individual basis by the Associate Dean for Student Affairs
and may be reviewed by the Student Promotion Committee.

VOLUNTARY WITHDRAWAL, DISMISSAL, AND APPEAL
PROCEDURES

Voluntary Withdrawal
Withdrawal from the Stritch School of Medicine requires the student to secure permission
from the Associate Dean of Student Affairs. The student is responsible for executing the
withdrawal form, financial aid exit interview, meeting all financial obligations to the
university and Stritch, and return of all university and school property, including keys, library
materials, parking card, equipment, and photo identification badge. Students also must
vacate their assigned lockers, mailbox, and learning cluster cabinet. If these procedures
are not followed, the student is not in good standing or eligible for tuition refund, if any.

Students who request a voluntary withdrawal do so with the full knowledge that the Stritch
School of Medicine is under no obligation to consider a readmission application.

Dismissal
Students who do not satisfactorily fulfill the requirements for promotion and graduation
contained in the Academic Policy Manual may be subject to temporary suspension or
dismissal. A student who is dismissed has the right to appeal the action to dismiss or
otherwise change enrollment status.
## Appeal Procedures
Students have the right to appeal an action to dismiss or otherwise change enrollment status. The student's petition must be submitted to the Senior Associate Dean for Medical Education in writing within 30 days of receipt of the letter of dismissal or enrollment status change. The Student Appeal Board normally convenes within a month to hear a petition received. The student is informed in writing of the date, time, and place of the hearing. The student may represent themselves and/or ask members of their peer group and/or a Loyola faculty member - any ally - to accompany them to the meeting. Allies may speak on behalf of the student if the student wishes. Legal counsel is not present at the hearing; and no photography, videotape, or audiotape recording is permitted. The Student Appeal Board considers student appeals on a case-by-case basis. The recommendation of the Student Appeal Board is forwarded to the Dean for review and approval. The Dean or designate notifies the student in writing of the final decision both by email and certified mail, return receipt requested.

If a student is dissatisfied with the action of the Student Appeal Board and the Dean, he/she may submit a petition for a final appeal to the University through the Senior Vice President for Health Sciences and Provost. This appeal petition must be in writing and received by the Senior Vice President for Health Sciences and Provost within 30 days of notification by the Dean. The Senior Vice President for Health Sciences and Provost or designate reviews the appeal. Under Loyola University Chicago’s due process norms, a student’s appeal to the Senior Vice President for Health Sciences and Provost must be limited to concerns relating to the violation of an official University or medical school policy or procedure or that an unjust decision was rendered.

The Senior Vice President for Health Sciences and Provost or designate informs the student in writing of the appeal procedure and outcome of the appeal. Students are not entitled to any additional appeals within the University.

## PROFESSIONAL BEHAVIOR

### Expectations for Medical Students
Stritch School of Medicine students are expected to grow in the knowledge, skills, attitudes, and behaviors expected of individuals who are training to become physicians. Our mission requires respecting all individuals, creating and maintaining a positive learning environment, and consciously adhering to model standards of behavior and interaction that are consistent with our institution’s Catholic and Jesuit heritage.

Our students are assumed to be of high moral character, expected to conduct themselves in a professional manner, and behave as socially responsible citizens in keeping with the professional norms of medicine. Students also are expected to maintain high ethical standards and practice academic honesty in all of their educational endeavors. These actions are echoed in our competencies - six areas of performance and behavior that
students must successfully meet in order to be eligible for promotion and graduation. Competencies are assessed in all courses and are components of the evaluation process.

To maintain a learning environment where individuals are encouraged and expected to perform to high standards, certain behaviors are considered unprofessional and unacceptable. For example:

- accepting assistance from or giving assistance to another student during an exam or in the preparation of any graded material
- plagiarism
- inappropriate access to, misuse of, or theft of information or records
- sabotaging another student’s laboratory experiment
- misusing another person’s signature
- falsifying academic grades or clinical evaluations, research data and/or results
- physical and verbal intimidation, bullying, or harassment
- lying, cheating, and fabricating information
- harassment (both sexual and non-sexual), patterns of sexual innuendo, obscenity, and defamation
- discriminatory actions based on race, gender, ethnicity, sexual orientation, and religion or other status protected by law

The following statements are expectations for all students at the Stritch School of Medicine. Professionalism is considered in determining satisfactory academic progress. Failure to meet these expectations is grounds for consideration of dismissal. These guidelines are not exhaustive, but represent the kind of conduct and professional behavior that is mandatory in the educational and clinical environment.

- To conduct oneself in a manner that is appropriate for the learning and patient care environments with suitable dress and grooming.
- To practice academic honesty in all examinations, course, clerkship, and elective assignments.
- To be punctual and reliable in meeting obligations for courses and clerkships, including timeliness on rounds, lectures, and small-group experiences; meeting on-call requirements; seeking permission for any required days off; and providing proper notification for absence due to illness or true personal emergency.
- To tell the truth at all times, but especially concerning patient care matters, such as correctly reporting history, physical, laboratory, and other examination findings. Responding to a question with “I don’t know” when that is the truth, is always the best answer.
- To behave in a collegial way that enhances the ability of others to learn or care for patients. Verbal or physical abuse of other students, employees, faculty, and healthcare professionals; sexual harassment; a pattern of offensive comments; and other improper and disruptive behaviors are unprofessional and unacceptable.
- To use the highest standards of professional, ethical, and moral conduct and conscientiously care for patients under all circumstances associated with their illnesses.
• To relate in a proper and professional manner to patient families, especially under the always emotional and often tragic circumstances of a patient’s illness.
• To refrain from any action or conduct that may be considered unprofessional or unethical or embarrass or detract in any manner from the reputation of our school, faculty, and students.

**Academic Honesty**

All allegations of academic dishonesty must be documented and submitted to the Associate Dean for Student Affairs within a reasonable period of time after the alleged incident. The Associate Dean for Student Affairs will:

• notify the student(s) in writing of the allegation and documentation,
• request a written response, and
• inform the student(s) of the review process and appeal procedures to be followed.

Upon receipt of all pertinent materials, the Associate Dean for Student Affairs notifies the Senior Associate Dean for Medical Education, relevant Course/Clerkship/Elective Director(s), and relevant teaching department(s) of the allegations and provides all the submitted information. The Senior Associate Dean for Medical Education or designate determines if there appears to be sufficient substance to the allegations to proceed with a hearing.

In the event of a hearing, the Senior Associate Dean for Medical Education or designate will:

• select senior faculty members not involved in the case to be part of an ad hoc committee composed of three to seven members;
• chair and convene the committee within 30 working days of receipt of the written allegations and student(s) response;
• notify the student(s) of the date/time of the hearing as the student(s) has the right to be present and accompanied by a peer or faculty member if the student(s) so desires (no legal counsel, photography, audiotaping, or videotaping is permitted); and
• invite other faculty and staff to serve ex-officio on the committee, and student witnesses to participate in the hearing as necessary.

The decision and recommendations of the ad hoc committee are presented to the Dean for approval. The student(s) is promptly notified in writing by the Dean or designate of the outcome of the hearing and the Dean’s decision.

The student(s) has the right of an appeal of the decision to the Student Appeal Board within 30 days of the Dean's notification. A student who is dissatisfied with the action of the Student Appeal Board may submit a petition for a single appeal to Loyola University Chicago through the Senior Vice President for Health Sciences and Provost within 30 days of the Student Appeal Board's recommendation. All decisions of the Dean and the Senior Vice President for Health Sciences and Provost are documented in the student’s official academic file. In the event allegations are dismissed, no actions are recorded in a student’s official academic file.
**Student Wellness**

As future physicians, medical students have a responsibility to maintain their own health which includes preventing or addressing acute or chronic disease, including mental illness, disabilities, and occupational stress. When a student’s wellness is compromised so then is the safety and effectiveness of the medical care she or he provides. “When failing physical or mental health reaches the point of interfering with a physician’s ability to engage safely in professional activities, the physician is said to be impaired.”*

If a student’s health is compromised, she or he needs to take measures to address the problem by seeking appropriate help and engaging in an honest self-assessment of one’s own ability to continue in education or clinical training. The medical profession that the student is now joining has an obligation to ensure that its physicians, as well as all learners, are able to provide safe and effective care for others and to avoid unreasonably disrupting the normal education processes and orderly operation of Stritch. This obligation is fulfilled by promoting health and wellness among all members of the health care team, including one’s self. At times, an intervention may be needed when the wellness of a colleague appears to have become compromised.

Students will not participate in patient care or school related activities when physical, mental, or emotional lack of fitness could interfere with the quality of that care or disrupt the school community. It is a student’s own responsibility that if such a situation occurs to notify her or his clerkship (or elective) director or the Assistant Dean of the third or fourth year so that the student can leave those clinical responsibilities and an appropriate, but confidential intervention can occur. The misuse of any potentially addictive, abusive, or illicit drugs is strictly forbidden, regardless of year of training, and is incompatible with safe clinical performance. If such a problem is identified, the student will be removed from clinical (or curricular) activities and an appropriate, confidential referral made to help her or him to address and effectively manage this illness. Finally, students must not use alcohol or other drugs when they are expected to be participating in patient care, patient settings or curricular related activities.

SSOM’s goal is to ensure that students are engaged in a process that maintains their wellness, and when necessary, helps students to effectively address any situations when they are demonstrating behavior that creates a direct threat to the safety or health of others or unreasonably disrupts the normal education processes and orderly operation of Stritch. SSOM also has an obligation to ensure provider wellness to those individuals whose care SSOM graduates will provide in their future profession as physicians. When a student’s health is impaired, SSOM will limit or stop her or his education until she or he can safely return and assume expected educational responsibilities.
Student Mistreatment and Harassment

Loyola University Chicago is committed to maintaining an environment that respects the dignity of all individuals. Accordingly, the Stritch School of Medicine does not tolerate mistreatment by or of its students, faculty, and staff.

Abusive Conduct
Abusive conduct is strictly prohibited. Abusive conduct includes any intentional conduct that inflicts or attempts to inflict bodily harm upon any person or group of people, any reckless action that could result in bodily harm to others, and any action that would reasonably cause another to be fearful that their health or safety is in immediate danger. When a student harms or attempts to harm oneself, the student may be required to meet with the Associate Dean of Student Affairs and/or may be referred to the Assistant Dean of the third or fourth year so that the student can leave those clinical responsibilities and an appropriate, but confidential intervention can occur (see Student Wellness).

Dating and Domestic Violence
All members of the University community should be able to live free from all forms of violence, especially from those with whom they share or have shared a special relationship. Accordingly, dating and domestic violence are strictly prohibited.

Dating violence is any violence, including but not limited to physical or sexual abuse or threat of abuse, between two people who are or have been in a social relationship of a romantic or intimate nature. The existence of such a relationship will depend on the length and type of the relationship and the frequency of interactions between the persons involved.

Domestic violence is a felony or misdemeanor crime of violence (under Illinois law) between two people who are or have been in an intimate or romantic relationship, who share a child in common, or who live or have lived together as spouse or intimate partners. Violence against any person by that person’s caretaker or guardian (such as abuse against an elderly, young, or disabled person) may also be considered domestic violence.

Harassment and Bullying
Ours is a community of care, where all people are treated with dignity and respect; accordingly, harassment and bullying are prohibited. Harassment is intentional aggressive behavior towards another that is severe or repeated and that seriously interferes with a person’s ability to benefit from the University’s programs and services. Bullying is intentional aggressive behavior towards another that is severe or repeated and that would be likely to intimidate, hurt, demean, control, or diminish a reasonable person. Both harassment and bullying may be verbal or physical, and may occur through electronic means (cyber-bullying). Bullying and harassment can occur through one isolated, but severe, incident, or through a pattern of repeated incidents.
Hazing
Hazing is a broad term encompassing actions or activities often associated with initiation or group associations which inflict or attempt to cause mental or physical harm or anxiety, or which demean, degrade, or disgrace any person, regardless of location, intent, or consent of participants. Hazing can also be defined as any behavior that intentionally or unintentionally endangers the physical or mental health of a student for the purpose of initiation, full admission, or affiliation with any organization or group. Any activity that promotes a class system or subjects a certain sub-group to subservience in any form may also be considered hazing.

Hazing is expressly prohibited by the University and by Illinois law (720 ILCS 120).

Sexual Misconduct
Sexual misconduct is sexual activity of any kind and between any two persons without consent, and is expressly prohibited. The requirements of this policy apply to all individuals regardless of sexual orientation, sex, or gender expression or identity.

“Consent” means freely given, mutually understandable permission – a clear “yes” to engage in a specific sexual activity. Consent to one form of sexual activity does not automatically mean consent is given for any other sexual activity. Similarly, past consensual sexual activity with a person does not grant consent for any future sexual activity with that person. Consent may be withdrawn at any time. All sexual activity must cease when consent is withdrawn. Silence alone does not constitute consent. Consent cannot be gained by force, threats, or coercion. A person is incapable of giving consent if they are incapacitated by alcohol, drugs, or any other physical or mental impairment. In order to give consent, an individual must be of legal age – which in Illinois is seventeen (17) years old. Consent may not be given between persons who are related to each other within the degrees wherein marriage is prohibited by law in Illinois.

Sexual misconduct offenses prohibited by this policy include but are not limited to those categorized as follows:

a. Non-Consensual Sexual Penetration
   Non-consensual sexual penetration (commonly known as rape or sexual assault) is defined as:
   - any sexual penetration (anal, oral, or vaginal, including any contact between mouth and genitals)
   - however slight
   - using any body part
   - or object
   - by a person upon another person, regardless of sex or gender identity
   - without consent (as defined above)

b. Non-Consensual Sexual Contact
   Non-consensual sexual contact (also a form of sexual assault) is defined as:
   - any intentional sexual contact
• however slight
• using any body part
• or object
• by a person upon another person, regardless of sex or gender identity
• without consent (as defined above)

Sexual contact includes intentional contact by any body part or object with the breasts, buttocks, groin, or genitals; or making another individual touch you or themselves on the breasts, buttocks, groin, or genitals using any body part or object. Sexual contact may also include other intentional bodily contact that is done in a sexual manner.

c. Sexual Exploitation

Sexual exploitation occurs when an individual takes non-consensual or abusive sexual advantage of another. The behavior may not otherwise fall under the definition of other sexual misconduct offenses. Examples of sexual exploitation include, but are not limited to:

• prostituting oneself or another
• soliciting or receiving payment or compensation in exchange for sexual activity
• non-consensual video or audio-taping of sexual activity
• exceeding the boundaries of consent (for example, letting friends hide in a closet to watch you having consensual sex, or posting consensual sexual photos to a public website without permission to do so)
• peeping (watching someone without their knowing)
• knowingly transmitting a sexually transmitted infection (STI) to another individual
• sexual activity that would be considered incest under Illinois law
• sexual activity between any person and a person under seventeen (17) years of age

d. Sexual Harassment

Sexual harassment is broadly defined as unwelcome conduct of a sexual nature (including but not limited to unwelcome sexual advances; requests for sexual favors, and other verbal, nonverbal, or physical sexual conduct) that is serious or pervasive (repetitious) enough to substantially interfere with or limit a reasonable person’s ability to participate in or benefit from the University’s educational programs or services.

Stalking

Stalking is a serious offense, and is expressly prohibited. Stalking is a course of conduct (two or more acts) directed at a specific person that would cause a reasonable person to feel fear for their safety or the safety of others or to suffer substantial emotional distress. Examples of stalking acts may include, but are not limited to, the following:

• non-consensual communication, including fact-to-face communication, telephone calls, voice messages, emails, written letters, gifts, or any other communications that are undesired
• use of online, electronic, or digital technologies, including: posting of pictures online, sending unwanted/unsolicited email or chat requests, posting private or public messages on social media sites, installing spyware on someone’s computer, and using GPS to monitor a person
• pursuing or following someone or waiting uninvited near place where a person frequents
• surveillance or other types of unreasonable observation, including staring or peeping
• trespassing or vandalism
• gathering information about an individual from friends, family, or co-workers
• threatening harm to self or others

Any of the above acts may still be considered stalking behaviors even if facilitated by a third party. Substantial emotional distress means significant mental anguish or suffering that may, but does not necessarily, require medical or other professional treatment or counseling.

Bias-Motivated Discrimination and Misconduct
It is prohibited to discriminate or otherwise engage in misconduct against any person or group of people based on one’s actual or perceived: race, color, national origin, gender expression or identity, sexual orientation, disability, religion, age, socio-economic class, citizenship status, military or veteran status, pregnancy, or any other characteristic protected by applicable law. Discrimination is the unjust or preferential treatment of another wholly or partially because of the subject’s protected characteristic(s). Bias-motivated misconduct is any other offense listed in this Academic Policy Manual against another where the subject was selected wholly or partially because of protected characteristic(s). Incidents involving discrimination or bias-motivated misconduct threaten to disrupt the environment of care and mutual respect that is central to Loyola’s educational mission. Such incidents will be promptly investigated and may result in serious sanctions.

Conduct Procedures for Student Mistreatment and Harassment

All complaints are taken seriously and attempts are made to respect confidentiality, although this may not be fully feasible at all times given the need to conduct a thorough investigation and take corrective action. While medical students may be reluctant to discuss mistreatment for fear of reprisal, they often desire that alleged mistreatment incidents undergo proper investigation. To address these student concerns, the Stritch School of Medicine provides informal channels through which students may discuss their concerns and receive counseling, as well as formal reporting mechanisms through which complaints are investigated and appropriate remedies applied. These procedures encourage medical students who believe they were mistreated to bring that episode to the attention of appropriate individuals within the school.
The following procedures at the Stritch School of Medicine are consistent with existing Loyola University Chicago policies on mistreatment and sexual harassment and seek to provide:

- a process that is sensitive to the student’s situation,
- opportunities to confidentially seek advice,
- an effective mechanism to initiate investigation, and
- a process that supports corrective action.

**Informal Misconduct Procedure**
Students are encouraged to find support by informally discussing their concerns with a variety of resources, including Office of Campus Ministry chaplains, Pastoral Care chaplains, and personal counseling services. Students can voice their concerns and utilize this as a time to reflect and determine the appropriate next step. In some instances, students may choose to resolve the problem informally without the aid of medical school administration.

Consultation and counseling with chaplains functioning within the scope of their capacity as pastoral counselors may remain confidential at the student’s request. In the Catholic faith, this would mean a priest who is administering the sacrament of reconciliation, or confession. Confidentiality cannot be guaranteed when chaplains receive a report of a crime.

**Formal Misconduct Procedure**
Students may choose to initiate formal procedures through the Associate Dean for Student Affairs. Confidentiality cannot be guaranteed due to the need to investigate; however, every caution is taken to maintain the student’s privacy.

The Associate Dean for Student Affairs investigates formal complaints to determine severity, scope, and appropriate further action. Any actions determined to involve serious misconduct by any member of the faculty, administration, staff, student body, or agent of the Stritch School of Medicine or Loyola University Medical Center is referred to the Dean for further action.

Every case is handled individually, and in some cases certain elements of these procedures may not be necessary. Proceedings conducted pursuant to this section shall be informal, fair, and expeditious. Except where expressly adopted, the rules and procedures of criminal and civil courts – including rules of evidence – shall not govern student conduct proceedings. Deviations from the timelines or procedures described here shall not invalidate a proceeding or decision unless significant prejudice to a student or to the University results.

**Student Rights in the Conduct Process**
All students have the right to be treated with dignity and respect throughout any interaction with the conduct process. Students also have the following procedural rights in the conduct process:
1. To have notice of the allegations before the hearing and have the allegations explained clearly and fully at every level of the conduct process
2. To be present throughout the hearing but not during the deliberation process of the conduct administrator or board
3. To be accompanied by an advisor, if desired
4. To review all documentation concerning the allegations during the hearing
5. To refute information provided by witnesses
6. To be advised of the appeal process

Generally, respondents or other students involved in an incident do not have a right to review the incident report itself until a point in the hearing determined by the Associate Dean of Student Affairs. However, in cases where either (a) the respondent was not present at the time an incident was documented, or (b) the incident was not documented by a University or SSOM official, the respondent may review the incident report by request in person before the hearing.

**Incident Reporting and Case Referral**
Cases of alleged student misconduct shall be referred to the Associate Dean of Student Affairs through an incident report. Anyone can submit an incident report describing alleged student misconduct. Incident reports should contain the date, time, and location of the incident, the names of individuals involved, and a narrative description of the incident. Incident reports may be submitted by email to the Associate Dean of Student Affairs or in person by making an appointment to meet with the Associate Dean of Student Affairs.

Incident reports should include the name, phone number, and email address of the complainant. While anonymous incident reports will be reviewed, Stritch’s ability to address alleged behavior from anonymous sources is significantly limited; therefore, anonymous reports are discouraged.

The timeline for case resolution varies due to several factors, but the established goal is to resolve a case fully within 30 days of receiving a report. The submission of an incident report does not automatically initiate any conduct proceedings and in some cases no action may be taken.

**Consideration and Investigation**
Upon receipt of an incident report, the Associate Dean of Student Affairs will begin an investigation. If there is reasonable belief that a violation has occurred, allegations will be assigned individually to relevant students.

If the Associate Dean of Student Affairs finds no reasonable belief that a violation may have occurred, the case may be closed with no further action taken.

In some cases, the Associate Dean of Student Affairs may determine that an informal response would best resolve the situation. Examples of informal responses include a warning to cease current behaviors, referral to mediation, and changes in academic, work, or living arrangements.
Cases are addressed by incident. Therefore, when any combination of more than one student is involved, the matter may be handled as a single case. All respondents may be adjudicated at the same time utilizing the hearing type appropriate for the highest level of alleged violation.

**Notice to Respondent**

1. **Allegation Letter**
   In most cases, when a case is processed the Associate Dean of Student Affairs will send an allegation letter to the respondent(s) by University email containing the following:
   a. A brief description of the alleged misconduct, including the time, date, and place the incident allegedly occurred
   b. A list of any University/SSOM policies allegedly violated
   c. The type of hearing in which the case will be adjudicated or resolved
   d. Information about when the hearing is to take place or be scheduled
   e. A reminder that students may obtain an advisor to support them through the conduct process

2. **Acceptance of Responsibility**
   Occasionally the Associate Dean of Student Affairs may send students an acceptance of responsibility letter in lieu of an allegation letter. An acceptance of responsibility letter contains the same information as a letter of allegation, except it provides the respondent the option to forego a hearing and accept responsibility for an alleged violation. Acceptance of responsibility letters are only used for relatively minor incidents at the discretion of the Associate Dean of Student Affairs. Respondents may always decline to accept responsibility and request a hearing instead. Failure by a student to respond to an acceptance of responsibility letter within five business days will result in the decision being finalized, and any proposed sanctions will be applied.

   Decisions rendered by either acceptance of responsibility or failure to respond pursuant to an acceptance of responsibility letter may not be appealed, except on the grounds that the student did not have a reasonable opportunity to receive and respond to the letter.

3. **Informational Meeting**
   Occasionally students will be notified that they must meet with the Associate Dean of Student Affairs for an informational meeting. Such meetings are mandatory and may be needed to investigate an incident, clarify a report, obtain personal statements, notify a student of emergency administrative action, or otherwise discuss an alleged incident with students involved.

**Hearings**

1. **Scheduling**
   Hearings are scheduled by the Associate Dean of Student Affairs. The respondents will receive an allegation letter with the time and date of the
scheduled hearing. The respondents will have 24 hours to reschedule the hearing if needed; otherwise a decision will be made based on the information available.

It is the student’s ultimate responsibility to schedule and attend a hearing. Hearings will be scheduled around students’ classes, but otherwise hearings are mandatory and take precedence over conflicting obligations, including athletic events, student organization meetings, and work commitments.

If a student fails to respond to an allegation letter or to schedule or attend a hearing by the hearing deadline, the Associate Dean of Student Affairs may make a decision based on the information available.

2. Type of Hearing
Most student conduct cases are resolved prior to a hearing; however, if necessary, an administrative hearing will be held facilitated by the Associate Dean of Student Affairs with participation from three to five representatives from the faculty and staff. These committees have authority to impose all sanctions, including SSOM suspension or dismissal. Hearings may not be available during study days, final exam periods, breaks, or the summer term.

3. Hearing Format
Hearings generally proceed according to the following format:
   a. Introduction of all parties present (including witnesses, when applicable) and of the hearing procedures and expectations
   b. Review and signing of the “Student Rights in the Conduct Process” form
   c. The Associate Dean of Student Affairs describes to the respondent(s) the nature of the alleged conduct at issue and the University/SSOM policies allegedly violated
   d. Respondent(s) are given opportunity to (i) accept full responsibility for all allegations, (ii) accept responsibility for some allegations and refute others, or (iii) refute all allegations
   e. Witnesses are excused until statements are needed (if applicable)
   f. Respondent(s) (and complainant(s) when applicable) are given opportunity to provide a personal account of the alleged incident
   g. Respondent(s) (and complainant(s) when applicable) have the opportunity to inspect all documentation relevant to the case that will be used to make a decision
   h. Any applicable parties are questioned, including witnesses (if applicable)
   i. Respondent(s) are provided a final opportunity to make any closing comments
   j. The Associate Dean of Student Affairs may excuse all parties for deliberation, if needed
   k. Respondent(s) (and complainant(s) when applicable) are notified of the decision and any related sanctions either immediately after deliberation or, when further deliberation is needed, typically within 5 business days
4. **Deliberations**
   Deliberations are closed to all parties except the committee members.

5. **Decision**
   At or after the conclusion of a hearing, the Associate Dean of Student Affairs will issue a decision about each individual respondent’s allegations. Each allegation will result in one of the following two outcomes:
   
   a. Not Responsible - If it is concluded that it is more likely than not that the respondent did not violate University/SSOM policy, or if there is not enough information available to find a respondent responsible, a finding of “not responsible” will be issued and the allegation will be dismissed. No sanction will be assigned and the allegation will not be reported to parties outside the University as part of the student’s disciplinary record.
   
   b. Responsible - If it is concluded that it is more likely than not that the respondent did violate University/SSOM policy, or if the student accepts responsibility for violating University policy, a finding of “responsible” will be issued and appropriate sanctions will be assigned. In all cases, the Associate Dean of Student Affairs shall confirm all decisions and sanctions via a decision letter that will be sent to the respondent(s) via the student’s Outlook account. Decision letters are usually sent within five business days of the decision.

6. **Preponderance of the Evidence**
   The standard of evidence required for an Associate Dean of Student Affairs or committee to determine responsibility is known as a “preponderance of the evidence.” This means that the Associate Dean of Student Affairs or committee must determine that it is more likely that an alleged violation occurred than that it did not occur.

7. **Disqualification or Recusal**
   If the Associate Dean of Student Affairs or members of a hearing committee believe themselves to be unqualified to serve in such a capacity for personal or official reasons, they may recuse themselves. Respondents may not object to the membership of the committee except for reasons of official or personal conflict of interest. The Associate Dean of Student Affairs will determine the validity of such objections and make a final determination whether or not to disqualify a committee member.

**Other Hearing Elements**

1. **Advisors**
   Any complainant or respondent involved in the conduct process may be accompanied by one advisor of their choice throughout the conduct process. The role of an advisor is to provide a comforting and familiar presence for the student or student organization. The choice whether or not to invite an advisor is solely that of the student(s) involved. The Associate Dean of Student Affairs must be
notified via email that an advisor will be present at least two business days before the scheduled meeting or hearing, unless circumstances call for an expedited hearing.

An advisor may not speak in a hearing unless asked a direct question by the Associate Dean of Student Affairs or committee members. Advisors may not ask questions, interject, coach, advocate for, or otherwise speak on behalf of a student or student organization. An advisor may not function as legal counsel or "represent" a student or student organization for the purposes of the SSOM conduct process. Advisors may not also serve as witnesses in a hearing about the same matter.

If an advisor is an attorney, this must be disclosed to the Associate Dean of Student Affairs, and LUC SSOM reserves the right to have its own legal counsel present for the hearing. If any advisor conducts themselves in a manner inconsistent with these guidelines, then the individual will no longer be considered an advisor and the Associate Dean of Student Affairs may excuse the individual from the conduct process.

2. Privacy
Privacy applies to respondents, complainants, witnesses, advisors, the Associate Dean of Student Affairs, and members of hearing committees. All individuals are expected to adhere to the regulations set forth by the Family Educational Rights and Privacy Act (FERPA) of 1974, as Amended, regarding the dissemination of information pertaining to the student conduct process. All proceedings are private and unauthorized recording by any means is prohibited. All notes taken during student conduct proceedings by any party present will be gathered and destroyed. Only the Associate Dean of Student Affairs may include notes in the case file. SSOM reserves the right to share information regarding the case with other appropriate parties on a need-to-know basis.

3. Written Statements
Students may be required to submit a signed written statement responding to the allegations up to 24 hours prior to the hearing. This statement should be submitted to the Associate Dean of Student Affairs.

4. Witnesses
Witnesses are permitted in the hearing process and may be invited by a respondent, complainant, the Associate Dean of Student Affairs, and/or hearing committee. A witness is someone who can provide a firsthand account of something seen, heard, or experienced relating to the alleged incident. “Character witnesses” and other witnesses deemed to be irrelevant by the Associate Dean of Student Affairs or committee are not permitted. The Associate Dean of Student Affairs may meet with witnesses as a part of the investigation before the hearing, and may limit the number of witnesses permitted to attend the hearing. A list of witnesses must be submitted at least two business days before
the hearing. This list should include contact information and a brief description of each witness’s contribution. It is the responsibility of the party who invites the witness to request the witnesses’ attendance at the hearing. If a witness is unable or unwilling to attend the hearing, the witness may provide a signed written statement to the Associate Dean of Student Affairs by the hearing date. The hearing may proceed even if all witnesses are not present.

5. Authorized Audio and Video Recording
In some cases, at the discretion of the Associate Dean of Student Affairs, audio or video of hearings may be recorded. Any recording of a hearing becomes property of SSOM and may be retained as part of the disciplinary record. Recordings may be reviewed in deciding an appeal, or may be used internally for documentation or training purposes.

Sanctions
When a student or student organization is found in violation of these standards in this Academic Policy Manual, any of the following types of sanctions may be assigned. Sanctions should be appropriate to the violation(s) for which they are assigned, considering the context and seriousness of the violation, the respondent’s demonstrated commitment not to engage in the same behavior in the future, and the respondent’s prior conduct history (if applicable).

Compliance with all assigned sanctions within the time allocated is mandatory. Failure to complete or comply with any assigned sanction, or failure to meet an assigned deadline (if applicable) may result in further disciplinary action, including but not limited to: billing the student’s University account a $150 fee and placing a disciplinary hold on a student’s University account preventing the student from registering, adding a course, or obtaining transcripts until the sanction is completed.

Where it is reasonably believed that a violation of these Academic Policies has been committed against any person or group because of the person’s or group’s race, color, religion, ancestry, national origin, age, disability, gender, sexual orientation, any other characteristic protected by applicable law, or because of the perception that a person or group has some such characteristic, sanctions may be enhanced up to and including SSOM suspension or dismissal.

1. Sanction Descriptions
   a. Alcohol and/or Drug Education Referral - Students may be sanctioned to participate in or complete various educational programs focused on alcohol and other drugs.
   b. Educational Experience or Project - Educational experiences or projects may include attendance and participation in an event, workshop, special project, or other initiative. Such experiences provide space for students to reflect upon their conduct, identify harm to self or to the community, explore why such conduct was unacceptable, and/or educate other students about SSOM’s policies. Examples of such projects include reflection or research
papers about a specific topic or issue, and/or participation in the Campus Involvement Challenge, Restore LUREC, or the Values Workshop. Deadlines for educational experiences may vary.

c. Fines - Fines are punitive monetary costs intended to dissuade students from violating SSOM Academic Policies. Fines may be paid directly to the SSOM Bursar’s Office by delivering or mailing a check, money order, or cash in the exact amount of bills. Fines collected are used to fund services and programs for students. Failure to pay a fine will result in the amount being billed directly to the student’s University account (no penalty is assigned if a student chooses to have the amount billed). Fines must typically be paid within two weeks of assignment.

d. Loss of Privileges - Students who have engaged in misconduct may temporarily or permanently forfeit certain privileges otherwise afforded to them. Examples include but are not limited to restrictions on access to the University network, email, or other computing systems, and restrictions from accessing certain facilities, programs, or services of the University (such as Fitness Center, the Information Commons, specific, study abroad programs, etc.).

e. Restitution - Restitution is monetary compensation required of students who have taken, misused, damaged, or destroyed SSOM, public, or private property or services. Amounts charged to students may include cost to repair, replace, recover, clean, or otherwise account for the property or services affected.

f. Restorative Service Hours - Restorative service hours may be assigned to provide students the opportunity to symbolically repair harm caused and restore a sense of balance in the community. All service hours must be completed (a) at a non-profit organization, (b) under supervision of an employee or volunteer coordinator who is not a relative of the student, and (c) without payment or other compensation for the work performed. Restorative service hours may, but need not, be completed for an office or department of Loyola University Chicago. Restorative service hours may not count towards service learning hours or other community service required by another program, scholarship, or organization. Court-mandated community service may count towards restorative service hours. In some cases, students will be directed to complete their service under the guidance of a specific staff or faculty member (Mentored Service). Deadlines for restorative service hours vary based on number of hours, academic calendar, and other factors.

g. Student Organization Sanctions - Any sanction may be modified to apply to registered or sponsored student organizations. Additionally, certain sanctions will only apply to student organizations. For example, an organization’s national representatives, officers, and/or advisors may be officially notified of the incident as part of a sanction. In cases of serious or repeated misconduct by a student organization, the organization’s registration may be suspended (temporary) or terminated (permanent). Suspension/termination prohibits the organization, its members, and its
supporters from conducting any activity on any University campus or at any University-associated event that in any way promotes the goals, purposes, identity, programs, or activities of the organization.

h. SSOM Dismissal - Dismissal from SSOM (also commonly known as expulsion) is the most serious disciplinary action and means the permanent exclusion of the student from the University. Dismissal may include forfeiture of all rights and degrees not actually conferred at the time of the dismissal; permanent notation of the dismissal on the student’s disciplinary record; withdrawal from all courses according to the policies of SSOM; and forfeiture of tuition and fees. Any student dismissed from SSOM must refrain from visiting the University premises except when engaged in official business approved in advance and in writing by the Associate Dean of Student Affairs.

i. University Probation - University probation is formal notice that a student’s behavior or pattern of behavior was unacceptable and caused harm to the University community. During the probation period, students should demonstrate a willingness and ability to respect and comply with the standards of behavior appropriate to a Jesuit, Catholic university. Students on University probation may not represent the University in any official capacity, and may be required to resign from any office or committee appointment associated with Loyola University Chicago and Stritch School of Medicine. Continued misconduct of any kind (even of a kind different from that which resulted in probation) during the probation period may result in University suspension or dismissal. Students on University probation may not study abroad until after their probation period has ended. University probation is typically assigned for a minimum of the rest of the semester, and may last until graduation. For student organizations placed on University probation, the organization is ineligible to request money from the OSA or MSU for the duration of their disciplinary period.

j. University Suspension - University suspension involves the temporary removal of the student from the University for a specified period of time, with the understanding that the student may be returned to good standing at the completion of the suspension period after having satisfied any accompanying conditions. Suspension from the University further entails being withdrawn from all enrolled courses or clerkships, forfeiting all applicable fees, and restriction from visiting the University premises except when engaged in official business approved by the Associate Dean of Student Affairs. University suspension may also include any other disciplinary action that is judged to be of value to the student. Persons notified of a student’s University suspension status may include: academic deans, Campus Security, or other appropriate personnel at the discretion of the Associate Dean of Student Affairs. Suspended students may not study abroad or travel with SSOM, and may not be approved to study abroad until 90 days after their suspension period has ended. University suspension is typically assigned for a minimum of the rest of the semester, and may last any number of years. When a suspension period is over and
the student has completed the conditions accompanying the suspension, the student must contact the Associate Dean of Student Affairs requesting reinstatement and providing documentation demonstrating that the student has satisfied the terms of the suspension (if applicable). The Associate Dean of Student Affairs may, if needed, require a meeting with the student before permitting re-enrollment. The student may re-enroll at SSOM only after the Associate Dean of Student Affairs has made an affirmative decision, notified the student, and released the hold on the student’s University account.

k. University Warning - A University Warning is an official notice to the student that the student’s conduct was inappropriate and violated the SSOM Academic Policies. University Warnings are only assigned for relatively minor violations.

l. Other Sanctions - Any reasonable sanction may be assigned that appropriately promotes the education and development of a student or student organization, ensures safety, or otherwise furthers the mission of the SSOM.

2. Final Exams and Sanctioning
Policy violations occurring during study days or final exams may result in immediate suspension or restriction of access to SSOM facilities. Additionally, sanctions that are assigned for violations occurring during study days or final exams may be increased or extended to convey the importance of maintaining a peaceful SSOM environment during those periods.

3. Sanctions Specific to Study Abroad Programs
The following are additional sanctions that apply only to students studying abroad. All other University sanctions may also be applied to students studying abroad as needed. Amounts of fines are converted from US dollars (US$) to appropriate international currencies.

4. Notification of Home Institution (Visiting Students – Domestic and International)
The SSOM reserves the right to notify students’ home institutions of serious violations of the SSOM Academic Policies.

Emergency Administrative Action
The Associate Dean of Student Affairs and designees shall have the authority to immediately suspend a student from the SSOM or restrict activities of a student on-campus pending disciplinary procedures when it is believed that the presence of the student would seriously disrupt the SSOM or constitute a danger to the health, safety, or welfare of the SSOM community or property. In such cases the student will be notified in writing of the emergency administrative action. Academic deans, Campus Security, or other personnel may also be notified of the action as needed.

Some examples of emergency administrative actions include:
1. Limitations on University Activities and Access

Limitations on University activities and/or access to University facilities may be imposed for a specified period of time. Activities or access that may be limited include, but are not limited to: eligibility for service as an officer or member of any University organization or University committee; eligibility to receive or maintain any award from the University; attendance at University-sponsored social events; access to any University-owned facilities or grounds; and contact or association with specific members or groups of the University community.

2. No Contact Directive

The Associate Dean of Student Affairs or a hearing committee may direct a student to have no contact with another individual for a specified period. This directive may be stated in writing before, as a result of, or after a hearing. In some cases, such a directive may be imposed before the initiation of any hearing proceedings, in which case the directive will only apply in the interim period until the conclusion of the student conduct process (if needed, a subsequent directive may be re-issued after the hearing). The person(s) who is protected by this directive may receive a written statement notifying them that such a directive has been issued, as permitted by applicable law.

**Gender-Based Misconduct and Title IX**

Under Title IX of the Educational Amendments Act of 1972, LUC Stritch School of Medicine (SSOM) has a responsibility to respond promptly and effectively when SSOM becomes aware of sexual misconduct and/or any other conduct motivated by sex, gender, or gender-expression that creates a hostile educational environment. Investigations of reported conduct must be impartial and reliable. Responses to reported conduct must adequately stop the behavior, prevent its recurrence, and address its effect. Every effort will be made by SSOM to conclude Title IX investigations within 60 days of a filed report or notification. Any criminal investigation that may take place does not relieve SSOM of its duty to respond.

Gender-based misconduct includes all forms of dating and domestic violence and sexual misconduct as defined in the Academic Policy Manual. Additionally, stalking, while it may be motivated by many different reasons, is initially presumed to be gender-based misconduct and is addressed as such. Gender-based misconduct also may include any other misconduct where the complainant is targeted because of sex, gender, or gender-expression.

Members of the SSOM community, guests, and visitors all have the right to be free from gender-based misconduct. Therefore, whenever a respondent is found to have engaged in gender-based misconduct, serious disciplinary sanctions will be assigned with the goal of ensuring the misconduct stops and is not repeated. Additionally, individuals who engage in such behavior who are not students (including visitors to the Health Sciences Division (HSD) campus and/or individuals engaged in HSD-affiliated programs or services) are subject to loss of privileges, limitations on HSD access, and criminal prosecution.
1. Relevant Definitions and Concepts
   a. “Coercion” means unreasonable pressure for any activity. For example, when an individual makes clear that the individual does not want sex, wants to stop, or does not want to go past a certain point of sexual interaction, continued pressure beyond that point can be coercion.
   b. “Complainant” in this section means any person who reports being the victim, or survivor of gender-based misconduct, whether or not the person actually chooses to pursue an investigation into the incident.
   c. “Consent” means freely given, mutually understandable permission – a clear “yes” to engage in a specific sexual activity. Consent to one form of sexual activity does not automatically mean consent is given for any other sexual activity. Similarly, past consensual sexual activity with a person does not grant consent for any future sexual activity with that person. Consent may be withdrawn at any time. All sexual activity must cease when consent is withdrawn. Silence alone does not constitute consent. Consent cannot be gained by force, threats, or coercion. A person is incapable of giving consent if they are incapacitated by alcohol, drugs, or any other physical or mental impairment. In order to give consent, an individual must be of legal age – which in Illinois is seventeen (17) years old. Consent may not be given between persons who are related to each other within the degrees wherein marriage is prohibited by law in Illinois.
   d. “Date-rape drug” means any substance intended to incapacitate another person so the person may be taken advantage of. Any intoxicant used for such a purpose, including alcohol, is considered a date-rape drug.
   e. “Force” means the use of physical violence, threats, intimidation (implied threats), and/or coercion to overcome resistance or objection. Consent cannot be gained using force.
   f. “Incapacitation” means a state where an individual is temporarily or permanently impaired by mental and/or physical deficiency (such as when sleeping or blacked out), disability, illness, or by the use of alcohol or other drugs to the extent that the person lacks sufficient understanding to make rational decisions or engage in responsible actions. A person who does not comprehend the “who, what, when, where, why, or how” of a sexual interaction may be incapacitated. The respondent’s own use of alcohol or other drugs will not excuse incidents of gender-based misconduct.
   g. “Investigator” means a highly trained faculty or staff member who is assigned by the Title IX Deputy to investigate and adjudicate allegations of gender-based misconduct.
   h. “Sexual activity” may include intercourse and other intentional sexual contact regardless of the gender, sex, sexual orientation, or preference of individuals engaging in sexual activity.

2. Role of the Title IX Coordinator and Deputy Coordinator
   The Title IX Coordinator or Deputy Coordinator is responsible for ensuring that the SSOM responds appropriately and in compliance with all applicable laws to reports and notifications of gender-based misconduct. The Title IX Coordinator is
available to meet with any student who reports gender-based misconduct and oversees prevention, training, and education efforts related to gender-based misconduct for the SSOM community. The Title IX Coordinator and designated Deputy Coordinator are highly trained Loyola administrators responsible for ensuring that the University responds appropriately and in compliance with all applicable laws to reports and notifications of gender-based misconduct. Please see the University Title IX website at http://luc.edu/hr/titleix.shtml for additional information and resources.

3. Rights of Students in Instances of Reported Gender-Based Misconduct

Students who experience any gender-based misconduct or who report such misconduct to University officials can expect the following:

a. All allegations of such behaviors will be treated seriously.

b. All students will be treated with dignity and respect and in a non-judgmental manner.

c. Both parties will be afforded timely notice of any required meetings, and will have the opportunity to review any investigative report after the investigation has concluded but before a formal hearing is held.

d. Complainants will be informed in writing of available reporting options outside of the SSOM misconduct reporting systems (Cook County Sheriff’s Police general number 708-865-4700, Campus Security 708-216-9077 or 911 from any phone on campus).

e. Whenever the University investigates a complaint or allegation of gender-based misconduct, every reasonable attempt will be made to process the case according to the wishes of the complainant. This effort will be balanced with the University’s obligation to ensure the safety of the community.

f. University personnel will never force complainants to report nor discourage them from doing so. The University will seek to minimize the reporting burden on the complainant.

g. At all points throughout the conduct process, complainants and respondents each may choose to be accompanied by an advisor of their choice. For more information about the role of an advisor, see the section on Advisors under Other Hearing Elements found on page 53. [recheck page number]

h. Complainants and respondents will be notified simultaneously and in writing of outcome of the case, any sanctions imposed, and the rationale for the decision and sanctions.

i. Complainants will be informed in writing of available counseling, health, mental health, victim advocacy, legal assistance and other services available for complainants within the institution and in the community.

j. Complainants may request immediate assistance with transportation, working, or other measures to prevent unnecessary or unwanted contact or proximity to a respondent when reasonably available. Such accommodations may be requested if reasonably available, even if the complainant elects not to pursue the conduct process or press criminal
charges. Whenever possible and to the extent that it does not impede the providing of such accommodations, the University will maintain as confidential any accommodations or protective measures provided.

k. Complainants and respondents both have the right to choose whether to be physically present in the hearing room. Accommodations may be requested by either party to arrange for remote or private participation.

4. Complainant’s Choice of Resolution

Complainants of gender-based misconduct may decide whether and how they want to proceed with any formal investigation or resolution process. A complainant may choose to pursue resolution through the SSOM conduct system, the criminal or civil courts, both, or neither. Complainants may always initiate or withdraw from the formal resolution process at any time. No SSOM employee should minimize or downplay any report or pressure any complainant to proceed in a way that makes the complainant uncomfortable.

In some limited circumstances, (see exceptions below), the Title IX Deputy Coordinator may need to take action through the SSOM conduct process and/or report incidents to the legal authorities contrary to the complainant’s wishes. In such instances, however, strong consideration will still be given to the complainant’s preferences.

a. Serious Imminent Threat Exception

Notwithstanding any other information in this policy, in instances where there is an imminent and severe threat to the safety of the Health Sciences Division community, SSOM administrators, in private consultation with Campus Security, may issue immediate timely warnings or otherwise pursue disciplinary action to protect the University community. Such measures are required by law. In such instances, the Title IX Deputy Coordinator will make a reasonable attempt to notify the reporter(s) and/or complainant(s) beforehand. No personally identifiable information about the reporter(s) or complainant(s) will be included in any warning issued.

b. Mandatory Child Abuse Reporting Exception

Notwithstanding any other information in this policy, the Illinois Abused and Neglected Child Reporting Act (325 ILCS 5/1-11.8) requires that all personnel of institutions of higher education must notify the Illinois Department of Child and Family Services of any allegation or reasonable suspicion of current child abuse or neglect upon a person under the age of 18. In such instances the Title IX Coordinator will also be notified of the report.

i. Formal Reporting, Investigation, and Hearing

The Associate Dean of Student Affairs coordinates the adjudication of all formal complaints of gender-based misconduct allegedly committed by students. Because of the unique requirements for such investigations under Title IX, the
process for conducting such investigations and hearings is specifically described here.

a. Formal Reporting
   A variety of formal reporting options are available to any individual who believes gender-based misconduct has occurred and who wishes to bring it to the attention of SSOM. Once SSOM receives a report of alleged gender-based misconduct, SSOM is obligated to assess the situation to determine if the incident poses an imminent and severe campus threat.

   *EthicsLine*: Students are encouraged to report incidents directly through the EthicsLine reporting hotline (855) 603-6988 or website (www.luc.edu/ethicsline). Reports submitted through EthicsLine go directly to the LUC Title IX Deputy Coordinator. Students can expect follow up within three business days of filing a report.

   *Reporting to Faculty or Staff*: Students may also inform any University faculty or staff member directly. Within 24 hours of being notified, all faculty and staff – except those who are explicitly designated as confidential resources below – are expected to report alleged violations involving students to the Title IX Coordinator via an EthicsLine report. The following offices are particularly well-equipped to assist students who wish to formally report an incident:

   - Campus Security (708) 216-9077 or 911 from any phone on campus
   - Office of Student Affairs (708) 216-3220

   *Anonymous Reporting*: anonymous reports (where the identity of the person reporting is never shared) can be submitted through EthicsLine. Anonymous reporting seriously limits the ability of SSOM to respond to and address incidents. Although every report will be investigated, in many cases no formal action will be possible when the identity of the harmed party remains unknown.

b. Initial Informational Meeting with the Title IX Deputy Coordinator
   Within three days of the Title IX Deputy Coordinator receiving a report or notification of alleged gender-based misconduct involving a currently enrolled SSOM student, the Title IX Deputy Coordinator will request to meet individually with the complainant and respondent. These meetings usually occur within five business days. At these meetings, the Title IX Deputy Coordinator will review SSOM’s procedures and the rights of both parties and will share information about available resources and support services. The Title IX Deputy Coordinator may also explain any interim measures that will be in place while the investigation proceeds.
c. Investigation Process
The formal investigation of gender-based misconduct begins once a report has been assigned to Title IX Investigators by the Title IX Deputy Coordinator. The roles performed by the Associate Dean of Student Affairs in this section are fulfilled by the Title IX Deputy Coordinator (supervisory) and Title IX Investigators (investigation). Both the respondent and the complainant will be notified in writing of the preliminary allegations when a formal investigation has begun. The Title IX Deputy Coordinator oversees this investigation process.

The Title IX Investigator will:
- Request meetings and separately interview complainant(s), respondent(s), and relevant witnesses (if applicable)
- Coordinate the collection of all relevant information, including written statements by the complainant(s), respondent(s), and/or witnesses; physical evidence; etc.
- Submit a Final Investigation Report, summarizing the investigation to the Title IX Deputy Coordinator.
- Attend and participate in the conduct hearing.

The length of time for an investigation can vary. Typically, the investigation takes between two and four weeks.

d. Formal Hearing Process
After the investigation, the Associate Dean of Student Affairs will review the Final Investigation Report, assign final allegations, and schedule the hearing. Hearings for cases of alleged gender-based misconduct will typically be adjudicated by a committee of three to five staff and/or faculty from the HSD campus who are also trained Title IX investigators. The committee will be chaired by the Associate Dean of Student Affairs or appropriate designee.
Hearings will be scheduled within five business days of a completed investigation and will take place within ten business days of the completed investigation whenever possible. At least three business days before the hearing, complainants and respondents may each review copies of the Final Investigation Report and any other relevant information that will be considered by the committee. It is the parties’ responsibility to arrange to review the Final Investigation Report before the hearing if they would like to do so. Parties are not provided time to familiarize themselves with the report once the hearing has commenced.

At the request of a complainant or respondent, the Associate Dean of Student Affairs will take appropriate action to maintain a safe environment for all participants during the hearing. Such actions may include separating parties via a screen, coordinating for remote participation via telephone or video, etc. All such requests must be communicated to the Associate Dean of Student Affairs at least three business days prior to the hearing.
During the hearing, usually only the investigators, complainant, respondent, committee members, witnesses, and/or advisors may be present. A hearing may be conducted in the absence of any party or witness at the discretion of the Associate Dean of Student Affairs. Witnesses will be present only when sharing information with the committee. All reasonable attempts will be made to ensure the safety and comfort of the parties present.

The committee will use the Final Investigation Report as a basis for the hearing. Beginning with the complainant, both parties will have the opportunity to share an opening statement, after which the committee will ask questions of any attendees as needed. At any time the committee may break to deliberate in private, temporarily excusing all participants. All conversation takes place between the committee and the parties present. The complainant and respondent do not directly question or "cross examine" one another during the hearing.

If the complainant or the respondent does not attend the hearing or chooses not to speak, these procedures will still be followed and a decision will be made based on the information available. The complainant, the respondent and the case investigators may be given the opportunity to make opening and/or closing remarks.

Hearings may be audio taped to preserve a record of the hearing. The committee’s private deliberations will not be taped or otherwise recorded. The recording is the property of Stritch School of Medicine. Participants (including advisors) are prohibited from making their own recordings.

The Associate Dean of Student Affairs reserves the right to remove from a hearing any individual who impedes the conduct process. In such cases a case may be recessed or continued at the discretion of the Associate Dean of Student Affairs.

e. Findings and Notice of Outcome
The respondent and complainant will be informed simultaneously in writing by the Associate Dean of Student Affairs as to the outcome of the case, any sanctions imposed, and the rationale for the decision and sanctions. Decisions will be communicated in writing within two business days of the conclusion of the hearing.

f. Sanctions
All forms of dating and domestic violence, sexual misconduct, and stalking are among the most serious offenses at Loyola. Sanctions for such violations vary depending on the circumstances, but may include any of the following: Educational experience or Project; Extension of Emergency Administrative actions; Loss of Privileges; Suspension, or Dismissal; Student Organization Sanctions; or Probation, Suspension, or Dismissal.
The safety and concerns of the complainant, the respondent, and the community will be considered in determining appropriate sanctions.

g. Appeals
In cases of alleged gender-based misconduct, both complainants and respondents may appeal all or part of the outcomes of a case within 72 hours. Once an appeal has been submitted by one party, the other will be notified and will have another 72 hours to submit a statement in support of or also appealing the decision. Appeal requests will not be exchanged (i.e. if one party files an appeal, the other may file a statement independently of the appeal, but may not view the original appeal). Appeals are decided by the Dean of Stritch School of Medicine.

ii. Retaliation and Gender-Based Misconduct
Especially in cases of gender-based misconduct, it is critically important that the SSOM community be free to report information that helps to ensure the safety and well-being of the community. SSOM will make every effort to ensure that no student will be subject to any adverse action (either by SSOM or by another person or group) because they report what they honestly believe to be a violation of SSOM/University policies.

Accordingly, any act of retaliation by a student taken against a complainant, witness, reporter, or other individual in response to the reporting or investigation of an allegation of gender-based misconduct is a serious violation of the SSOM Academic Policy and will result in expedited and serious disciplinary action up to and including dismissal.

Also, no officer, employee, or agent of SSOM, may retaliate, intimidate, threaten, coerce, or otherwise discriminate against any individual for reporting an incident to SSOM or otherwise exercising their rights or responsibilities in the conduct process in good faith. Any individual who experiences retaliation by a member of the SSOM community is encouraged to report it directly to the Title IX Deputy Coordinator or to EthicsLine.

iii. Confidential Resource
A confidential resource is also available for students to discuss incidents that have occurred without a report being submitted to the Associate Dean of Student Affairs. The following is a resource where such confidentiality can be assured:

- Perspectives 24/7 Call Center  800-456-6327

Most faculty and staff are required to report incidents to the Title IX Coordinator. If a reporter is unsure how private or confidential a staff or faculty member can keep a report, the reporter should ask prior to disclosure. Faculty and staff are expected to respond honestly and identify alternative resources if needed.
The following are other confidential support resources off-campus:

- Chicago Rape Crisis Hotline (888) 293-2080 (sexual assault)
- National Sexual Assault Hotline (800) 656-4673 (sexual assault)
- Between Friends Chicago (800) 603-4357 (dating/domestic violence and stalking)
- National Stalking Resource Center (800) FYI-CALL (dating/domestic violence and stalking)

Bias-Motivated Incidents

Loyola University Chicago does not discriminate on the basis of race, religion, color, sex, age, sexual orientation, national or ethnic origin, disability, or any other characteristic protected by applicable law.

In addition to these protected characteristics, it is also a violation for any student to discriminate or otherwise engage in misconduct against any person or group based on actual or perceived gender expression or identity, socio-economic class, citizenship status, military or veteran status, or pregnancy.

In such cases where a subject is targeted because of one’s identity, that person’s access to Loyola’s education mission is compromised. Accordingly, such behavior is strictly prohibited.

1. Procedures for Reporting Bias-Motivated Incidents

Loyola University Chicago has implemented EthicsLine Reporting Hotline, through a third party internet and telephone hotline provider, to provide the University community with an automated and, if desired, anonymous way to report activities that may involve discrimination or other bias-motivated misconduct. Students may file an anonymous report through the website at www.luc.edu/ethicsline or by dialing (855) 603-6933.

The University strongly encourages all faculty, staff, students, administrators or other concerned parties to notify the Associate Dean of Student Affairs or use this EthicsLine system to report bias-motivated incidents or other suspected or wrongful acts of conduct by SSOM community members. No SSOM administrator, faculty, staff or student may interfere with the good faith reporting of suspected or actual wrongful conduct; no individual who makes such a good faith report shall be subject to retaliation, including harassment or any adverse employment, academic, or educational consequence, because of making a report.

2. Investigation and Adjudication of Bias-Motivated Incidents

Reports submitted to the Associate Dean of Student Affairs or via the EthicsLine system will be handled as promptly and discreetly as possible, with facts made available only to those who need to investigate and resolve the matter. Due to the nature of certain claims, SSOM may be limited with respect to the actions it may be able to take in response to a report if the individual submitting the report does not wish to make his or her identity known.
Incidents where the alleged perpetrator is a faculty or staff member will be investigated and adjudicated according to faculty or staff disciplinary processes respectively.

- Reports against Students
  When a report alleges misconduct by a student, the Associate Dean of Student Affairs will review the complaint for investigation. Following the investigation, if sufficient evidence is found to initiate the student conduct process, a report will be submitted on behalf of the investigator(s) to the Associate Dean of Student Affairs for adjudication by hearing or other appropriate conflict resolution process.

- Reports against Faculty
  When a report alleges misconduct by a faculty member, the HSD Provost’s Office or Human Resources will review the complaint and typically will refer the case to the Academic Chairperson, Dean, Dean’s designee, or other appropriate senior academic officer for investigation. Following the investigation, if sufficient evidence is found to initiate disciplinary action against the faculty member, a report will be submitted on behalf of the investigator(s) to the appropriate individual to initiate the disciplinary process in accordance with the Faculty Handbook.

- Reports against Staff
  When a report alleges misconduct by a staff member, the HSD Provost’s Office or the Human Resources Office will review the complaint and typically will refer the case to the staff member’s supervisor for investigation. Following the investigation, if sufficient evidence is found to initiate disciplinary action against the staff member, appropriate steps will be taken through the HR Office.

In some cases, efforts may be made to resolve the complaint using mediation or other less formal conflict resolution processes. If such efforts are unsuccessful, a hearing or other more formal disciplinary process may be initiated.

**Appeals**

Respondents who are found responsible for a violation may appeal all or part of the decision according to the following guidelines. In cases of alleged gender-based misconduct, complainants may also appeal all or part of the decision. An appeal is not a re-hearing of the case. Appeal requests should be submitted to the SSOM Dean’s Office. They will be reviewed by the SSOM Dean or the Dean’s designee, who will determine if there are sufficient grounds for the appeal.

Respondents who fail to appear for a scheduled hearing of which they were reasonably notified, and respondents who accept responsibility pursuant to an acceptance of responsibility letter may not appeal the decision.
1. Grounds for Appeal
Any request for appeal must be based on one or more of the following grounds:
   a. New substantive information is available that could not have been
discovered by a diligent respondent at the time of the hearing and that
would have likely changed the outcome of the case.
   b. A substantive procedural error or error in the interpretation of University
policy occurred that denied the respondent the right to a fair hearing and
decision.
   c. The finding (as to responsibility or sanctions or both) was manifestly
contrary to the information presented at the hearing (i.e. the decision was
clearly unreasonable and unsupported by the great weight of information).

2. Timeline and Format
A student has 72 hours from the time the decision letter is sent to request an
appeal. Failure to submit a request within this period waives the right to appeal
and renders the decision final.

While a request for appeal is under review (final decision is pending), sanctions
and other disciplinary actions may be enforced on an interim basis at the
discretion of the Associate Dean of Student Affairs or University administration.

For complainants in cases of alleged dating or domestic violence, sexual
misconduct, or stalking, notification of the ability to appeal
will be included in the
victim notification letter and the same designated appeal period applies.

Students are typically notified of the final decision within five business days of the
appeal request; however, at times further investigation may require a longer
period of consideration.

3. Content
Requests for appeal must include the grounds for appeal, a personal statement
explaining in detail why the student is contesting the results of the hearing, and
any relevant documentation available that substantiates or clarifies the request
for appeal.

4. Review and Final Decision
All properly completed requests for appeal will be considered by the Dean or the
Dean’s designee, who will determine whether there is sufficient basis for
modifying the original decision. The Dean or Dean’s designee may or may not
request to meet with the respondent, complainant, or other relevant individuals
before making a final decision.

The responsibility lies with the appealing student (either respondent or
complainant) to provide clear and convincing information demonstrating that the
original process or decision was substantively flawed.
The Dean or Dean’s designee will choose one of four possible outcomes for all appeals:

a. Affirm the original decision and uphold the original sanction(s)
b. Affirm the original decision but modify the original sanction(s)
c. Overturn all or part of the original decision and uphold, modify, or remove the sanction(s) appropriately
d. Remand the case for a rehearing.

Students will be notified of the final decision within two weeks of receipt of the request.

The disposition of a case by the Dean or appropriate designee following an appellate review is final within the University and is not subject to further review.

**Victim Notification**

In accordance with applicable law, SSOM may disclose to an alleged victim (usually the complainant) the result of a disciplinary proceeding against an alleged perpetrator (respondent) of a crime of violence (alleged or attempted commission of the following offenses: arson, assault offenses, burglary, criminal homicide, manslaughter, murder, destruction/damage/vandalism of property, kidnapping/abduction, robbery, and forcible sex offenses) or non-forcible sex offense (statutory rape, incest). All information about the outcome of an incident of alleged dating or domestic violence, sexual misconduct, or stalking may also be disclosed to the complainant in such a case. These disclosures may be made even without the consent of the respondent.

More information about federal regulations requiring such disclosures may be found at 34 CFR Part 99, App. A, which is available at [www.ed.gov/offices/OM/fpco/ferpa](http://www.ed.gov/offices/OM/fpco/ferpa).

**Parent or Guardian Notification**

For students over the age of 21, the University will only notify emergency contacts when there is concern that the student is in some danger or may pose a danger to others.

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**DRESS CODE, APPEARANCE, AND SCRUB ATTIRE**

Students are expected to be in compliance with the following appearance and uniforms standards of the Stritch School of Medicine, which are in accord with the uniform policy of Loyola University Medical Center. *Students assigned to clinical sites other than LUMC are responsible for learning and following the clinical site’s policies and procedures concerning scrub attire.*

**General Dress Standards**

**Preclinical**

- During the preclinical years, students are expected to dress appropriately in the academic, business, and clinical areas on campus.
- Shirt and shoes are required in educational, administrative, and clinical buildings and on the property that is adjacent to them. Gym clothes (except inside the Fitness Center), low cut tops, short shorts, and bathing suits are not suitable inside or outside of campus buildings.
- Closed toe shoes are required in laboratory areas for safety.

**Clinical**
- Students are expected to maintain a professional appearance in the clinical settings. Clothing should be business-like; necklines and hemlines should be conservative.
- Students should wear clean, pressed, well-fitting personal attire; undergarments should be worn.
- Daily hygiene must include clean body, teeth, and clothes; heavily scented fragrances should be avoided.
- Hair should be clean, well-groomed and tied back when engaging in patient care activities or operating machinery.
- Well-groomed beards, sideburns, mustaches are allowed, but may not interfere with personal protective face gear. Extreme cosmetic/make-up applications should be avoided.
- Nails should be well-manicured and polish color, if worn, should be conservative. Nail length should not interfere with clinical activities and safety of patients or staff.
- Body piercing, tattoos, and jewelry should be discreet; jewelry is not permitted in operating rooms.
- Shoes should be clean and in good condition; closed toe shoes are recommended for safety.
- T-shirts, cropped tops, very short skirts, spaghetti strap tops, flip flops, jeans, shorts, sweat shirts, and sweat pants are not acceptable.

**Identification Badges**
Students must wear a Loyola photo ID badge along with the Stritch student nametag on the vest pocket of their white coat. ID badges issued at other clinical teaching sites should be worn in addition to the Loyola ID when at the other clinical site.

**White Coat**
Students should wear a clean, pressed, short white coat in clinical areas. Coats should be plain, white, with no embroidery above the vest pocket and an official LUMC patch may be sewn on the sleeve. A long white coat must be worn in lieu of a short coat at LUMC whenever green or blue scrub attire also is worn (see Scrub Attire section).

**Scrub Attire**
- Students should arrive at the medical center campus in appropriate street clothing. Scrubs are not to be worn going in to or out of clinical areas, or between clinical areas and other campus buildings.
- Scrubs can be worn where performance of procedures is a major component of the patient care activities (i.e., operating rooms, trauma bay/emergency room, burn center, and surgical intensive care). Green, blue, and other colors of scrub attire must be restricted to the designated areas specified by the medical center. Students
are expected to change from scrub attire as soon as possible when it is no longer necessary to wear such garb as a uniform.

- Scrub attire provided by the medical center is their property and must be returned immediately after use.
- After use, scrubs are not to be worn if they have bodily fluids on them. Scrubs should be changed immediately if they become contaminated.
- Scrubs worn outside of procedure areas are to be covered with a long lab coat that must remain buttoned at all times. Do not sit in the cafeteria or other areas with an unbuttoned lab coat if wearing scrubs.
- Surgical hats, booties, or masks are not to be worn outside of the operating room or procedure areas.

**RELATED POLICIES**

Loyola University Chicago, Stritch School of Medicine, and clinical sites used for training have approved and published policies and procedures that must be followed to avoid a change in the student’s academic status, withholding of grades, denial of course registration, being asked to leave an instructional or clinical area, removal from campus, or withdrawal of the normal rights and privileges of a student.

Some important non-academic policies are not included or described in detail in this manual. Relevant policies are published by the source department and listed below. A link, if available, to the primary document or departmental website is included.

- Medical students are required to adhere to the policies that govern access to and release of Protected Health Information (PHI); and use of electronic medical records.
- Medical students should familiarize themselves with the Bloodborne Pathogens Exposure Control Plan and understand what to do in case of exposure.
- Computer use in the university and medical school is subject to Information Technology Services Policies & Guidelines, including access and use, access and acceptable use, email, ownership and use of data, and peer-to-peer file sharing. Students are expected to abide by these policies when using university, medical school, and computer resources of any kind.
- Loyola’s Copyright Resources includes information on duplication of copyrighted media, copyright information as applied to library reserves, and so forth. Students are expected to abide by these policies when using university, medical school, and clinical training resources of any kind.
- Students are subject to the policies published by the Bursar’s Office.
• In compliance with federal requirements, students must meet the expectations described in the Financial Aid Office policy: Satisfactory Academic Progress for Financial Aid Eligibility that can be found by scrolling down past the list of credit reporting agencies.

• Click here for a list of Stritch School of Medicine Administrators.

AWARDS AND HONOR SOCIETIES

Most of these awards and honors are presented to Stritch students at the Honors Day and Graduation programs. Some include a monetary award. The great majority recognize professional qualities, service, and scholastic excellence. This list is subject to change.

Awards

Dr. John R. Tobin Outstanding Leadership Award
For a record of exemplary leadership on campus or in the community, scholarship, and adherence to Judeo-Christian ethical principles. Caliber and breadth of involvement and academic record is considered.

Faculty Medallion For Excellence In The First Year Curriculum
For academic excellence in the first year of the basic sciences curriculum.

Faculty Medallion For Excellence In The Second Year Curriculum
For academic excellence in the second year of the basic sciences curriculum.

Faculty Medallion For Excellence In The Basic Sciences
For academic excellence in the first and second years of the basic sciences curriculum.

Father Fahey Outstanding Service Scholarship
For a selfless and unflagging record of commitment and contribution to the service of others, particularly those medically underserved or socially marginalized, and whose actions are a positive role modeling of the Jesuit ideals. Financial need is considered.

Geoffrey Gunnar Memorial Scholarship
For scholastic excellence and a desire to advance educational goals in some specific area.

Gissur Brynjolfsson, MD, Scholarship
For dedication and commitment to achieving a medical education through perseverance in the face of challenges.
Bioethics And Professionalism Honors Program
Achieved by students enrolled in the three-year portfolio based Honors Program, which includes completion of and reflection upon selected academic and service activities and presentation of a capstone research project under the direction of a mentor.

Research Honors Program
For achievement in research during medical school, as well as the completion of the MD with Research Honors Curriculum.

Margaret Raiford Hano Memorial Nephrology Award
For outstanding clinical performance in nephrology at Loyola University Medical Center in either the third or fourth year.

Outstanding Performance in Family Medicine Clerkship
For the best overall combination of achievement in the clinical and didactic components, demonstrated professional and humanistic qualities, and positive contributions to the learning and patient care endeavors of the healthcare team.

Outstanding Performance in Medicine Clerkship
For the best overall combination of achievement in the clinical and didactic components, demonstrated professional and humanistic qualities, and positive contributions to the learning and patient care endeavors of the healthcare team.

Outstanding Performance in Neurology Clerkship
For the best overall combination of achievement in the clinical and didactic components, demonstrated professional and humanistic qualities, and positive contributions to the learning and patient care endeavors of the healthcare team.

Outstanding Performance in Obstetrics/Gynecology Clerkship
For the best overall combination of achievement in the clinical and didactic components, demonstrated professional and humanistic qualities, and positive contributions to the learning and patient care endeavors of the healthcare team.

Outstanding Performance in Pediatric Clerkship
For the best overall combination of achievement in the clinical and didactic components, demonstrated professional and humanistic qualities, and positive contributions to the learning and patient care endeavors of the healthcare team.

Outstanding Performance in Psychiatry Clerkship
For the best overall combination of achievement in the clinical and didactic components, demonstrated professional and humanistic qualities, and positive contributions to the learning and patient care endeavors of the healthcare team.
Outstanding Performance in Surgery Clerkship
For the best overall combination of achievement in the clinical and didactic components, demonstrated professional and humanistic qualities, and positive contributions to the learning and patient care endeavors of the healthcare team.

President's Medallion
As part of the annual Loyola University Chicago Founder's Day celebration, one student from each school of the university is honored and recognized for outstanding scholarship, leadership, and service.

Ralph P. Leischner, Jr., MD, Memorial Scholarship
For exemplary compassion, integrity, enthusiasm, and commitment to lifelong learning. Financial need is considered.

St. Ignatius Award For Outstanding Contribution to Teaching Peers
For performance that best exemplifies positive and consistent contributions to the teaching and learning environment of their peers in classroom, small group, laboratory, or clinical settings.

Other Awards
Other awards and scholarships are available through outside institutions and agencies. Announcements of these are promulgated to the student body upon their receipt from the sponsoring agency.

Honor Societies
Alpha Omega Alpha Honor Medical Society
The criteria for induction into Loyola’s Epsilon Chapter are scholastic excellence and total score performance on USMLE Step 1. The total number of student members elected from any class shall not exceed one-sixth the total number expected to graduate in that class.

Alpha Sigma Nu Jesuit Honor Society
Recognizes Jesuit college or university students who have distinguished themselves in scholarship, loyalty, service, and commitment to the Jesuit ideals of higher education. Approximately fifteen percent of the student body may be inducted annually.
Policy on Diversity and Inclusion

Stritch School of Medicine is dedicated to building a diverse and inclusive community that upholds access, equity, and excellence as core values. We believe that diversity and inclusion are integral to our mission of transformative education, innovative discovery, and service to others. Our Jesuit tradition calls all faculty, students, and staff to intentionally honor the dignity of all persons and to promote social justice.

**Stritch maintains a zero tolerance policy for harassment, discrimination, and learner mistreatment of any kind. These behaviors are unacceptable and inconsistent with our commitment to excellence and respect for all.**

Stritch’s Office of Diversity and Inclusion was created to foster the optimal learning environment. The Dean serves as the Chief Diversity Officer and ensures that all students, staff, and faculty are made aware of the school’s Policy on Diversity and Inclusion. The Liaison Committee on Medical Education standards regarding diversity and inclusion serve as a minimum standard for our efforts.

Stritch maintains institutional funding support for the operations, administrative personnel, programs, and activities that support the recruitment and retention (academic support, professional development, career advancement) of diverse students, faculty, and staff.

The Office of Diversity and Inclusion is represented on medical student selection committees, including the Committee on Admissions, and is responsible for the education of committee members regarding unconscious biases and upholding diversity and inclusion initiatives during the medical student selection process.

Stritch requires every search committee to be diverse in composition and include the Assistant Dean for Diversity or an equity ambassador to ensure that diversity and inclusion are explicit goals of the committee. The equity ambassador is a senior faculty member who has undergone training on unconscious biases and is recommended by the Assistant Dean for Diversity. Prior to the start of the search and in consultation with the Assistant Dean for Diversity, the search committee Chair is responsible for demonstrating a good-faith effort and a plan to identify and interview candidates from underrepresented groups.

With the assistance and support of medical school administration, Stritch departments track and collect demographic data on appointments, promotions, and departures in order to report annually to the Dean and Chief Diversity Officer to facilitate advancements in diversity progress, identify areas of success, and detect areas in need of improvement.
APPENDIX A
Process for the Assessment of Applicants in Meeting Technical Standards

1. The review of each application takes into account the necessity of meeting the technical standards.

2. Applicants with disabilities may be identified through their applications, supporting documentation, or through the interview process.

3. In the case of an applicant identified as having disabilities that is accepted or assigned a ranking by the Committee on Admissions (COA) that would result in an acceptance, the Technical Standards Review (TSR) Committee assesses the applicant’s ability to meet the specified technical standards in question. This committee works in concert with the Assistant Dean for Admissions and Recruitment, Associate Dean for Student Affairs, and Associate Dean for Educational Affairs.

4. The TSR Committee may request that the disabled applicant submit detailed documentation from a qualified health professional regarding the nature of his/her functional abilities and limitations. The committee also may request additional information, including review of the applicant’s case by appropriate specialists. (See guidelines for documentation listed below.)

5. The TSR Committee collaborates with the disabled applicant to identify what seem(s) to be the reasonable accommodation(s) necessary to enable the applicant to meet the (specified) technical standards in question.

6. The TSR Committee then reports to the COA regarding the applicant’s ability to meet the full complement of Stritch’s Technical Standards for Admission, Retention, Promotion, and Certification for the M.D. Degree.

7. The COA, subsequent to its review of the TSR Committee report, makes a judgment about whether or not the applicant can, in light of Stritch’s technical standards, successfully complete the program and forward that judgment to the Senior Associate Dean for Medical Education.

8. After appropriate consultation or further discussion, the Senior Associate Dean for Medical Education forwards a judgment to the Dean who makes the final decision.
APPENDIX B
Process for the Assessment of Students in Meeting Technical Standards Should Disability Become Evident/Problematic Post Matriculation.

1. A matriculated student who develops a disability that requires special accommodation(s) or whose disability becomes evident or problematic so as to require special accommodation(s) must submit a formal request for such to the Associate Dean for Student Affairs.

2. If, after reviewing the case, the Associate Dean for Student Affairs judges that the case is deserving of further consideration, it is referred to the TSR Committee for evaluation.

3. The TSR Committee, to address the nature and limitations of the disability that might preclude the student from meeting the technical standards, may request the student to submit detailed documentation from a qualified health professional regarding the nature of his/her functional abilities and limitations and/or request a review of the student’s case by appropriate specialists. (See guidelines for documentation listed below.)

4. The TSR Committee then collaborates with the disabled student, Associate Dean for Educational Affairs, and appropriate faculty members and staff to identify the potential accommodation(s) needed to assist the student in meeting the technical standards required to successfully complete the medical education program.

5. Following a comprehensive review, the TSR Committee makes a recommendation regarding the student’s ability, with the accommodation(s) identified as reasonable, to meet the technical standards in order to complete his/her medical education.

6. The Associate Dean for Student Affairs meets with the student to review the findings and recommendation of the TSR Committee, indicate that these become part of the student’s permanent academic record, and asks the student to attest in writing that he/she has participated in this review.

7. The TSR Committee then forwards its recommendation to the Senior Associate Dean for Medical Education:
   - EITHER that the student is allowed to continue enrollment at Stritch on condition of following the approved plan for reasonable accommodations;
   - OR that the student is discontinued from enrollment at Stritch due to his/her inability to meet the school’s technical standards.

8. The Senior Associate Dean for Medical Education, after appropriate consultation or further discussion, forwards a judgment to the Dean who makes the final decision. The normal appeal processes remain open to the student.
APPENDIX C
General Disability Documentation Guidelines followed by LUC and Stritch:
http://www.luc.edu/sswd/documentation.shtml
Under Step 2 of the above web page, click on the appropriate disability for the required documentation.

**Documentation must be:**
- current, in most cases within three years of the current date
- submitted by a qualified professional/service provider on official letterhead
- relevant to the student's needs at the university
- comprehensive

**Documentation must include:**
- diagnostic statement including the most recent evaluation
- current impact of, or limitations imposed by, the condition
- treatments, medications, devices, or services currently prescribed or used to minimize the impact of the condition
- expected duration, stability, or progression of the condition
- type of accommodations and services the student may have previously received; if no accommodations have ever been made, the documentation should explain that fact
- recommendations for accommodations and recommendations for treatment

If the original documentation is incomplete or inadequate to determine the extent of the disability or reasonable accommodation, the university has the discretion to require additional documentation. Any cost incurred in obtaining additional documentation is the responsibility of the student.

In addition to the basic documentation for a condition listed above, recommendations from the treating professional are welcome and are given consideration in evaluating a request. Recommendations should:

- provide a clear description of the recommended accommodations
- connect the recommended accommodations to the impact of the condition
- provide possible alternatives to the recommended accommodations
- include a statement of the level of need (or consequences of not receiving) the recommended accommodations

**SPECIFIC GUIDELINES FOR ADD/ADHD**

All documentation must be submitted on official letterhead of the professional/service provider describing the disability.

I. A qualified professional must conduct the evaluation. Professionals, such as psychologists, neuropsychologists, psychiatrist, and other relevantly trained medical doctors, must have comprehensive training and relevant experience in
differential diagnosis and the full range of psychiatric disorders. Documentation must include the following:
A. Name
B. Title
C. Professional credentials
D. License or certification
E. Area of specialization
F. Employment and state of employment

II. Testing must be current within the past three (3) years.

III. Documentation must be comprehensive.

A. Evidence of early impairment: relevant historical information must demonstrate that the symptoms of ADHD existed in childhood and manifest in more than one setting.

B. Evidence of current impairment: the following areas must be investigated:

1. Statement of presenting problem: evidence of ongoing impulsive/hyperactive or inattentive behaviors significantly impairing functioning in two or more settings must be provided.
2. Diagnostic interview – information from various sources should include, non-exclusively, the following:
   a) History of presenting attentional symptoms
   b) Developmental history
   c) Relevant medical and medication history
   d) Relevant psychosocial history and any relevant interventions
   e) Academic history
   f) Relevant employment history
   g) Relevant history of prior therapy
   h) Relevant family history of any learning, physical, or psychological difficulties
   i) A review of prior psychoeducational test reports for support of diagnosis
   j) A description of current attention-related functional limitations in educational settings.

C. Alternative diagnoses or explanations should be ruled out. The evaluator must rule out the possibility of alternative diagnoses, medical and psychiatric disorders as well as educational and cultural factors affecting the individual.

D. Relevant testing information must be provided. Neuropsychological or psychoeducational assessment is required and is important in determining the impact on an individual’s current ability to function in academically related
settings. Relevant background information must be included in the evaluation report to support the diagnosis. Tests should determine the following:

1. Intellectual ability
2. Memory functions
3. Attention tests
4. Continuous performance

E. The following themselves do not substantiate the diagnosis of ADHD:
   1. Grade equivalent scores
   2. Test scores
   3. Surveys and checklists

F. Identification of DSM-IV criteria.
   In diagnosing ADHD, it is particularly important to address the following criteria:
   1. Symptoms of hyperactivity/impulsivity or inattention causing impairment must have been present in childhood
   2. Current symptoms have been present for at least the past six months
   3. Impairment from symptoms exists in two or more settings
   4. Impairment in social academic or occupational functioning is clear
   5. Symptoms are not better accounted for by another mental disorder when not occurring exclusively during the course of a Pervasive Development Disorder, Schizophrenia, or other Psychotic Disorder and are not better accounted for by another mental disorder.
   6. Documentation must include a specific diagnosis. A specific diagnosis of ADHD expressed in direct language and based on the DSM-IV diagnostic criteria.
   7. An interpretative summary must be provided. A well-written interpretative summary based on a comprehensive evaluative process MUST include the following:
      a) Demonstration of the evaluator having ruled out alternative explanations
      b) Indication of how characteristics of ADHD are chronic and evident in different settings
      c) Indication of whether or not the individual was evaluated while on medication, and if the medication was beneficial
      d) Indication and discussion of the limitation ADHD presents to the individual in the testing context for which accommodations are requested
      e) Indication of how specific accommodations mediate the effects of ADHD symptoms
      f) Each accommodation recommended by the evaluator must include a rationale.

A. The multifaceted evaluation must describe:
1. The impact of the diagnosed ADHD on a specific major life activity
2. The degree of impact on the individual, including intensity and frequency of the symptoms

B. The diagnostic report must:
1. Include specific recommendations for accommodations that are realistic and can be reasonably provided
2. Validate the need for services based on the individual’s present level of functioning in the educational setting

Documenting a Learning Disability
All documentation must be submitted on official letterhead of the professional/service provider describing the disability.

I. A qualified professional must conduct the evaluation. Professional evaluators must have comprehensive training and experience relevant to the adolescent and adult LD population, including populations that are culturally and linguistically diverse. Documentation must consist of the following:
   • Name
   • Title
   • Professional credentials
   • License of certification
   • Area of specialization
   • Employment and state of employment

II. Testing must be current.
Within the past three (3) years for a high school student and within the past five (5) years for an adult.

III. Documentation must be comprehensive: a comprehensive assessment battery (not to be limited to an individualized educational plan [IEP] or a 504 plan) and the resulting diagnosis report must contain the following items: a diagnostic interview, assessment of aptitude, measures of academic achievement and information processing.

A. Diagnostic interview.
An evaluation report should include the summary of a comprehensive diagnostic interview with relevant academic historical information.
1. A summary with a description of the present problems
2. Relevant medical history, including absence of a medical basis for the symptoms
3. Academic history, with prior standardized test scores
4. Relevant family history, including primary language and level of English fluency
5. Reports of class performance
6. Relevant psychosocial history
7. Relevant employment history
8. A discussion of dual-diagnosis
9. Alternative or co-existing mood, behavioral, neurological, and/or personality disorders,
10. An exploration of possible alternatives that may mimic a learning disability

B. Assessment
For the neurological or psychological evaluation to illustrate a substantial limitation to learning the comprehensive assessment battery must contain the following domains:

1. Aptitude and cognitive ability: A complete intellectual assessment with all subtests and standard score. Suggested tests might include:
   a) Woodcock-Johnson Psychological battery – Revised tests of Cognitive Ability
   b) Kaufman Adolescent and Adult Intelligence Test
   c) Stanford-Binet Intelligence Scale (4th ed.)

C. Academic Achievement: A comprehensive achievement battery with subtests and standard scores indicating current level of functioning in the academic areas of: reading (decoding and comprehension), match, oral and written language. Suggested Tests might include:

1. Scholastic Abilities Test for Adults (SATA)
2. Stanford Test of Academic Skills (TASK)
3. Woodcock-Johnson Psychological Battery-Revised: Tests of Cognitive Ability
4. Wechsler Individual Achievement Test (WIAT)

Or, specific achievement tests such as:

1. Nelson-Denny Reading Skills Test
2. Stanford Diagnostic Mathematics Test
3. Test of Written Language (TOWL-3)
4. Woodcock Reading Mastery Tests-Revised

D. Information processing: The specific areas to be addressed include short and long-term memory, sequential memory, auditory and visual perception, processing speed, executive functioning and motor ability. Acceptable instruments might include:

1. Detroit Tests of Learning Aptitude-3 (DTLA-3)
2. Detroit Tests of Learning Aptitude-Adult (DTLA-A)
3. Information from subtests on WAIS-III or Woodcock-Johnson Psychological Battery-Revised: Tests of Cognitive Ability
IV. Documentation must include a specific diagnosis. The diagnostician is encouraged to use direct language in the diagnosis and documentation of a learning disability, avoiding the use of such terms as ‘suggests’ or ‘is indicative of.’

V. Actual test scores from standardized instruments must be provided. The data, including standard scores and/or percentiles, must logically reflect a substantial limitation to learning, and both the nature and severity of the LD(s) for which the candidate is requesting accommodations.

VI. Each accommodation recommendation must include a rationale. The diagnostic report must include the following:
A. Specific recommendations for accommodations including explanations
B. Description of the impact of the LD on a specific major life activity and the degree of impact on the individual
C. Specific test results or clinical observations to support recommendations.

VII. An interpretive summary must be provided.

A clinical summary must indicate the following: the evaluator ruled out all alternative explanations for academic problems such as poor education, poor motivation and/or study skills, emotional problems, attentional problems, and cultural/language differences.
A. How the presence of a learning disability is evident in patterns of cognitive ability, achievement and information processing.
B. The degree of substantial limitation to learning presented by the learning disability and the degree to which it affects the individual in the context for which accommodations are being requested.
C. How specific accommodations mediate the effects of the specific disability
D. The summary should also include any record of prior accommodations or auxiliary aids.

Documenting a Medical Disability

The student must submit documentation on official letterhead of the professional/service provider describing the disability. The provider must be a professional qualified to diagnose and treat the disability.

The documentation should include in narrative form a description of the disability and include the following medical information:
A. Diagnosis, date of diagnosis and last contact with student
B. Description of symptoms which meet the criteria for this diagnosis
C. A list of current medication(s), dosage, frequency, and adverse side effects
D. How the disability affects the student physically
Documenting a Psychological Disability

The individual must submit recent documentation on official letterhead of the professional/service provider describing the disability. The provider must be a professional such as a psychiatrist, psychologist, or other appropriate professional who is qualified to diagnose and treat the disability.

The documentation should include in narrative form a description of the disability and include the following medical information:

A. Diagnosis, date of diagnosis and last contact with student
B. Description of the symptoms that meet the criteria for this diagnosis
C. A list of current medication(s), dosage, frequency and adverse side effects
D. How the disability affects the student physically

The documentation should also describe how the psychological disability may affect the student academically and suggested recommendations for academic accommodations. The documentation should also provide data that support the types of accommodations being requested.

The student provides the verification documentation to the Associate Dean of Student Affairs. The cost of obtaining the professional verification or documentation is the responsibility of the student.

These guidelines are adapted from the Educational Testing Service Policy Statement for Documentation of Attention Deficit/Hyperactivity Disorder in Adolescents and Adults, 1997.
APPENDIX D: Drug Screening Policy

Loyola University Chicago Stritch School of Medicine (SSOM) has developed policy and procedures that govern the specific methods for obtaining drug screening and procedures for release and storage of such information. It is the policy of Stritch to be in compliance with Loyola University Chicago Alcohol and Other Drugs Policy (http://www.luc.edu/media/lucedu/policy/pdf/alcoholandotherdrugspolicy.pdf).

Since SSOM will provide a safe and healthy environment, we prohibit the illegal use or misuse of substances. Standards of conduct and disciplinary sanctions will be imposed for the unlawful possession, use or distribution of illicit drugs and alcohol by SSOM students on LUC property or as part of any of its activities including other properties (clinical or otherwise) it uses. The unlawful manufacture, distribution, dispensing, possession or use of a controlled substance, prescription medication or the unlawful possession and use of alcohol is harmful and prohibited in and on a LUC owned and controlled property, properties it uses or as part of any of its activities (including required and elective clerkships and any volunteer programs affiliated with SSOM curricular activities).

No student is to report to class, clerkship or attend any university activity while impaired by any substance or impaired by drugs or alcohol. Violation of these policies by a student will be reason for evaluation/treatment for a drug/alcohol disorder and possible suspension or termination. Students may be required to submit to random drug screens (DS) at the request of the Associate Dean or Assistant Dean for Student Affairs or the Student Progress Committee. If a screen is required, the student will be sent to Certified Background. Certified Background is a third-party administrator contracted with the SSOM to perform student drug screenings.

Please note, if a student violates the SSOM drug policy, disciplinary action up to and including expulsion and/or referral for prosecution consistent with local, state and federal law may be taken by SSOM administration. See the reference below to the SSOM Academic Policy regarding further disciplinary action by the college.

Start of M3 Year (Third year orientation and clinical skills training curriculum)
Clinical training sites increasingly require that all students who rotate at their institution complete a DS or background check prior to the beginning of those rotations. In order to comply and facilitate this requirement, part of the required process of Third year orientation and Clinical skills training curriculum requires all students complete their registration through Certified Background and complete a DS test. As a third-party administrator, Certified Background will facilitate tracking, management of records and scheduling of such DS tests when necessary. Under no condition will a student be allowed to begin M3 clinical rotations without first completing their registration with Certified Background and releasing to SSOM the results of any required drug screening.
Procedure
Prior to the start of the M3-year, all rising M3 students will be notified to visit the Certified Background website to begin their application process. If their clinical clerkship site requires DS, then they will set up an appointment for a DS.

- Students visiting the site (www.certifiedbackground.com) for the first time will be asked to register with a Package Code that will be supplied. Students will review contents of the package and review costs. The student will then be asked to read and approve the agreement, authorize the tests and grant permission to Certified Background to share information with the appropriate parties at Stritch.
- The student will then be asked to enter personal information such as name, address, social security number (necessary for future Criminal Background checks), and their 11 digit (including leading zeroes) Loyola ID number that is available on their LOCUS account, email address and so on. Students will be asked to create a password (your e-mail address is your login name) and select a security image.
- The student will then select the drug test link and will be directed to a location close to them. Payment for this initial DS test is the responsibility of the student and is expected at that time. The site accepts credit cards, money orders and electronic payments (credit card payments can be paid in full or split into three separate payments).

Successfully passing the drug screening protocol is required before a student may begin the clinical portion of the third year. It is strongly advised that students register and if required begin testing prior to June 1st.

A student with a positive test for controlled substances may be contacted by the Medical Records Office (MRO) of Certified Background for more information such as use of prescribed medication, or presence of other health related issues that could influence assay results. All prescriptions must be current and prescribed in the student’s name and ordered by their physician.

Failure to provide acceptable documentation regarding possible use of prescription drugs that could confound the assay will result in a positive test result recorded for that student. Failure to respond to a query from Certified Background within 3 days of initial contact will require that a positive test result be recorded for that student.

Management of Screening Results
Results of a positive DS will be released to the SSOM Office of Student Affairs for review and will be kept on file in the Office of Student Affairs. Any results or information from a positive DS that lead to questions of ability to safely participate in the required educational program will be handled on a case-by-case basis. Failure to adhere to this procedure requires that a positive test result be recorded for that student.

Students whose DS assay containing drugs of abuse or report of a positive assay will be required to undergo evaluation by a substance abuse professional through Perspectives, the company contracted by the LUC Health Science Division (HSD) to provide counseling.
services to HSD students. This clinical evaluation will determine the level of treatment needed to address the substance problem. At this time, the student will be required to sign a Release of Information allowing Perspectives to report to SSOM administration student compliance with all treatment recommendations and follow up. The treatment agreement will detail the recommendations of Perspectives. As part of the treatment program, students with a positive assay may be required to submit to random follow up drug testing during their remaining time as a student at SSOM and must have a negative test result before they can return to school and continue with their education or engage in SSOM sponsored activities. Failure to contact Perspectives within one day of being notified of positive test results or failure to cooperate fully with the evaluation including signing all necessary releases may result in disciplinary action. Appeals by a student and/or request from SSOM for follow up drug testing of a student following all treatment and follow up recommendations will be handled by the Associate Dean and Assistant Dean for Student Affairs.

Students with a positive initial assay who are compliant with treatment and have a subsequent assay that is negative will be allowed to begin or resume their education or clinical patient contact with the advice and consent of the Associate Dean and Assistant Dean for Student Affairs. Students who initially fail the screening process or any noncompliance with policy and procedures resulting in recording a positive test result will be reported to the Office of Student Affairs and are grounds for dismissal, as explained in the SSOM Academic Policy Manual.

Confidentiality
All documents associated with implementation of the drug screening procedure at Stritch will be maintained in secure files and stored apart from the student’s regular education records in the Office of Student Affairs. Stritch will not disclose these records or the contents without a signed consent form received from the student except to SSOM personnel who have a need to know the information to comply with legal process or otherwise required by law.