

## Pillar 3 Student Handbook

# Class of 2025

Updated: February 28, 2024

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#### Welcome

Congratulations, you have survived the rigors of Pillar 1, developed a strong base in medicine through Pillar 2, and now get to work on fine-tuning your skills in Pillar 3. By the time you leave Pillar 3, you will be ready to step into Residency with a solid foundation. We know this is not the end of your journey but a step to becoming a great physician. We are all lifelong learners, and we never stop improving our knowledge and skills.

As you enter Pillar 3 you will find that it is not as regimented as Pillar 2, which is by design. It allows you the opportunity to experience a variety of different aspects of medicine that you didn't have a chance to experience so far. Take this opportunity to expand your knowledge in a field that you find interesting, get experience with different sub-specialties, delve into various cultural opportunities, or just check out something that you may not experience again or just want to know more about. Enjoy this time while you work on making yourselves a more well-rounded physician.

As you go through the next 18 months, I will contact you to share your experiences throughout Pillar 3. I want to make your experience and the experiences of those to follow as rewarding as possible.

If you have any questions along the way all the administration and I are here for you. Do not hesitate to contact me as my door is always open.

Yours In Medicine,

Byron Scott Nielsen, MD Clinical Professor Pillar 3 director Byron.Nielsen@usd.edu

## **Contact Information**

- SSOM contact list, Student Affairs and OME quick reference lists can be found in the Contact List module of D2L.
- Student Counselling Services and Resources to Students can be found in the Mental Health& Wellness module of D2L.

## **Competencies**

• Updated SSOM Medical Student Competencies can be found under the Handbook, Scheduling, Forms & Resource Links module.

## Calendar (2024-2025)

• The calendar can be found on D2L under the Handbook, Scheduling, Forms & Resource Links module.

### **Overview**

• Pillar 3 consists of the last 16 months of medical education containing 16 required credits, 35 elective credits, and 14 vacation/flexible weeks. The amount of actual vacation weeks will vary for later entry into Pillar 3.

#### Scheduling

• Students can view and update their schedule on the <a href="https://apps2.usd.edu/medical/pillar-3/">https://apps2.usd.edu/medical/pillar-3/</a>

• Department assistants will contact students two weeks prior to the rotation start date with directions and/or contact information for the first day.

Please contact the department assistant first with scheduling questions or concerns.

- > Pillar 3 Family Medicine, Ben Gertner <u>Ben.gertner@usd.edu</u>
- Pillar 3 Internal Medicine, Espie Ortega <u>–Espie.Ortega@usd.edu</u>
- > Pillar 3 Neurology, Mercarte Sichmeller <u>Mecarte.Sichmeller@usd.ed</u>
- Pillar 3 OB/GYN, Pathology, Surgery, Staci Wolff <u>staci.wolff@usd.edu</u>
- Pillar 3 Pediatrics, TBD <u>pediatrics@usd.edu</u>
- Pillar 3 Psychiatry, Erin Boggs –<u>Erin.Boggs@usd.edu</u>
- Schedule changes should be arranged 15 working days before the start of a rotation.
- Restrictions:
  - Required rotations must be completed prior to week 60.
  - A maximum of 24 elective credits can be completed in each discipline.
    - Additional Sub-Internships and extramural rotations are considered elective credits.
    - Required rotations (SURG 764, FAMP 823, FAMP 810 and one four-week Sub-Internship) do not count towards this cap.
  - A maximum of 16 extramural credits can be completed.

#### **Residency and Career Planning**

• Updated resources can be found on D2L under the Residency and Career Planning module.

#### Student Advisors

• TBD

Handbooks and Syllabi

• Refer to each department module on D2L for further details & requirements.

### Professionalism

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- Students are expected to adhere to the ethical and behavioral standards of the profession of Medicine. Physicians must recognize responsibility not only to their patients, but also to society, to other health professionals, and to self.
- As a medical school, we emphasize the following professional behaviors:
  - Altruism Physicians subordinate their own interests to the interests of others.
    - Show appropriate concern for others, including going "the extra mile" without thought of reward
    - Put yourself "in others' shoes" while still maintaining objectivity
  - **Honor and Integrity** Physicians are truthful, admit errors, and adhere to high ethical and moral standards.
    - Display honesty, forthrightness, and trustworthiness
    - Model ethical behavior, including confronting or reporting inappropriate behavior amongst colleagues
    - Admit errors and seek and incorporate feedback
  - Caring, Compassion and Communication Physicians take time to talk to patients and families, break bad news with compassion, and communicate effectively with colleagues.
    - Work well with others
  - **Respect** Physicians treat patients with respect and deal with confidential information appropriately.
    - Demonstrate respect for and sensitivity to patients (beliefs, gender, race, culture, religion, sexual orientation, and/or socioeconomic status)
    - Maintain sensitivity to confidential patient information
    - Respect authority and other professionals within the interprofessional team
  - **Responsibility and Accountability** Physicians fulfill their professional responsibilities and are aware of their own limitations.
    - Meet deadlines and be punctual for all assigned tasks. This includes educational and professional practice requirements, e.g. immunizations, EMR training, infection control training, etc.
    - Follow policies and procedures, including attending all required educational activities
    - Assume responsibility when appropriate and ask for help when needed
    - Maintain neat personal appearance\*
  - Excellence and Scholarship Physicians demonstrate conscientious clinical decision making, seek to advance their own learning, and are committed to spread and advance knowledge.
    - Set and actively work toward personal goals
  - Leadership Physician's advocate for the profession and promote the development of others.
- Students will be assessed regularly by their attendings and coordinating committees based upon the behaviors listed above.
- Professional and Unprofessional Behavior Report Forms can be found in D2L or on the medical school Web Portal found under *Forms*.
- \* Students should be aware the clinical sites may have specific guidelines that need to be followed regarding facial hair, tattoos, piercings, etc. Students should wear a clean, white coat with a name badge at all times when engaged in any clinical activity. Surgical scrubs are

permitted in the operating room (OR) or emergency room but should NOT be worn out of the hospital. When leaving the OR for short periods or when on-call, students should always wear a white coat over the scrubs and change into new scrubs before returning to the OR.

#### **Electronic Medical Record (EMR)**

- As stated in its Medical Student Education Objectives, the Sanford School of Medicine expects that students will demonstrate *compassion for patients and respect for their privacy and personal dignity*. The Sanford School of Medicine Student Code of Professional Conduct prohibits *showing lack of compassion or respect for patients and others by breaching confidentiality*. Finally, the Affirmation of the Physician recited by students at matriculation and graduation states, *"I will hold in confidence all that my patient relates to me."* To that end, the following policy relating to the written, verbal, and electronic aspects of patient confidentiality and medical record use requires each student's attention and signature.
  - Access
    - Students should have access to existing records or other information about a patient under three conditions:
      - Access to specific patient information is a necessary component of their medical education.
      - Access to specific patient information is necessary for direct involvement in the care of that patient.
      - Access to specific patient information is necessary for conducting a research project for which there is documented IRB approval.
    - Access should be through the established policies within that hospital or clinic, and applies to verbal, written, email, electronic, or any other route of communication. All written and electronic records remain the property of the hospital or clinic.
  - Student Personal Medical Records
    - Students may not utilize their electronic health records to access their own records. If students need access to their own records, they must follow the usual patient processes and procedures for obtaining medical records.
  - Release of Medical Information
    - Students should not release medical information to outside parties without the direct supervision of faculty and then only with a signed authorization from the patient, a parent or custodial parent in the case of a minor, the patient's legal guardian or a person having the patient's Power of Attorney. This applies also to facsimile, voice and electronic mail.

#### Student-Generated Records

Records generated by a student as a result of course requirements or as part of patient care may or may not become part of permanent hospital or clinic records. Efforts should be made to remove patient- identifying information from any copies, printouts or electronic media storage kept by the student, used by the student for presentations or other patient care purposes, or transmitted to clerkship coordinators or other faculty. Patient-identifying information includes names, social security numbers, patient ID numbers, birth dates, initials, location or date of service, and attending physician's names or initials. In the event patient-identifying information is necessary for patient care or medical education purposes, it is imperative that attention be paid to patient confidentiality with respect to storage and carrying of records. When no longer needed, any records that contain patient-identifying information should be destroyed by use of a paper shredder or by other appropriate method of permanent destruction.

#### • Student Patient Encounter Log (SPEL)

- Maintenance of patient encounters in a student database is a requirement of the medical education program. SPEL entries should not include patient names, initials, date of birth or other identifying information.
- SPEL requirements are per discipline and can be reviewed in the handbook

#### • Verbal communication

- Verbal communication is an essential part of patient care as well as the learning process, and should follow these professional guidelines:
  - Verbal communication with the patient should occur under supervision of medical school faculty, though faculty presence may not be required.
  - Verbal communication with the patient's family members should be with patient consent.
  - Verbal communication regarding a patient should only be done in the appropriate setting and with individuals who are involved with the care of the specific patient.
  - Discussion of the patient as part of the education process should be conducted in an appropriate educational setting and in a professional manner.

#### • Electronic Transmission

- Due to lack of privacy, email, social media, texting, and similar electronic methods are inappropriate media for communicating any patient-related information. Patient information may be transmitted electronically only if required by the clerkship or educational program and then only to the appropriate faculty. Remember that all patient identifying information needs to be removed.
- Al policy reference
- Disposal
  - Patient information that is written or printed should be shredded immediately after use.
  - Electronic patient information should not be stored by the student and should be permanently deleted as soon as no longer needed.

## **Requirements**

#	Required Courses		
2	SURG 764 Surgery Specialties	4 weeks (2-2week rotations)	
1	FAMP 823 Emergency Room	3 weeks	
1	Sub-Internship (MEDC, FAMP, OGYN, PEDS, PTRY, or	4 weeks	
1	FAMP 810 Rural Family Medicine	4 weeks	
1	Transition to Residency	1 week	
1	Student Affairs Course	1 week	
	Total Required	17	
#	Elective Courses		
34	Elective courses	34 weeks	
	Total Elective	34 weeks	
	Total	51	

#	OTHER DOCUMENTS/ACTIVITIES	
	Self-Assessment and Individualized Learning Plan	To be completed in TEAMS
	IPE/ Inter-Professional Experience	Scheduled by OME, Occurs in the Parry Center or Rapid City
	Professionalism Paper	Uploaded to D2L
	First Friday Seminar series	First Friday of each month, information available in D2L

\*Restrictions:

- Required rotations must be completed prior to week 60
- Maximum of 24 elective credits can be completed in each discipline
  - Additional Sub-Internships and extramural rotations are considered elective credits
  - Required rotations (SURG 764, FAMP 823, FAMP 810 and one four-week Sub-Internships) do not count towards this cap

## **Coaching Program**

- Each student will be assigned a coach at Pillar 3 Orientation to work with throughout the Pillar 3 experience.
- The purpose of the coaching program is to provide a third support, separate from an advisor or mentor resource.
- Students will complete an individual learning plan through a secure TEAMs site with self-identified SMART goals specific to academic/professional growth and wellness as a Pillar 3 student. This plan will be shared with the coach. Additionally, your coach will share your professional goals and strategies with the Clinical Competency Committee.
- The individual learning plan aims to serve as a blueprint to mark student successes and reflection beyond Pillar 3.
- The Pillar 3 Coaching director (Dr. Hasvold) leads the coaching program and is overseen by the Pillar 3 Director.
- If you have questions regarding the coaching program, please reach out to your coach.

#### Inter-Professional Experience

- Completing one Inter-Professional Experience (IPE) ICU rounding simulation is a requirement in Pillar 3.
- Students will not receive a formal grade for this exercise, rather a summative evaluation that will be discussed by the Competency Committee. Lack of attendance may negatively impact your MSPE letter.
- IPE is an in-person activity, and students will need to account with this in your scheduled rotations.

## **Clinical Competency Committee**

- The purpose of the clinical competency committee is to review the academic success of all Pillar 3 students.
- Committee outcomes will be communicated to the students by their designated coach. If additional resources are suggested during the committee, students may receive additional communication.
- Students will complete an individual learning plan through a secure TEAMs site with self-identified SMART goals specific to academic/professional growth and wellness as a Pillar 3 student. This plan will be shared with the coach. Your coach will share your professional goals and strategies with the Clinical Competency Committee.
- Students will receive a One45 survey in May. The purpose of this survey is to streamline your academic and career interests to guide the committee in your residency match goals.

## Letters of Recommendation

- Students have access to pull and share grades and narrative feedback from One45. To ensure an expedited process with respective clerkship director(s), students are asked to pull and share their own grades and feedback.
- Students requesting a letter of recommendation are strongly advised to provide the director with a copy of their CV along with their grades.

## **Resources for Student Success**

- **P3 Academic Coach**—Helps review assessments and understand deficiency in learning; reflects on opportunities for improvement and setting goals for learning.
- **P3 Advisor/Mentor**—Understands the discipline they are hoping to match into and the expectations for a successful match into that discipline of choice. Is often an individual connected with residencies and other programs so that they are very familiar with expectations for a successful match in that program of choice.
- Approved advisor list—TBD.
- **Career Advisor/Student Affairs Advisor**—Dr. Reuter or Dr. Hansen; write the MSPE and helps them understand their resources for match (ERAS, VSLO, away rotations, etc.).
- **Sponsor**—This is a highly visible, nationally recognized career clinician in their respective career of choice (e.g. Dr. Timmerman for surgery); will often write a letter or recommendation for the learner.
- **Campus Dean**—Morale Support, Resource Support for Rotations, etc.

## **Professionalism Paper**

- Completing the professionalism paper by October 11, 2024, is a requirement in Pillar 3. Students will not receive a formal grade for this exercise. The purpose of this activity is for students to describe and reflect on their clinical experiences and growth relating to professionalism. Papers also provide students an opportunity to demonstrate their understanding of professionalism domains.
- The Expectations and Feedback Matrix and Behaviors of Professionalism SSOM can be found in the Professionalism Paper module of D2L.
- Students' papers will be reviewed by their coach and feedback provided. In addition, each student's campus dean will review and facilitate a conversation regarding professionalism in the learning environment.

## **First Friday Seminar Series**

- The monthly First Friday virtual sessions starts in March and consists of a large group Zoom lecture that will be designed to expand your skills and prep you for the transition to Residency.
- Sessions will be uploaded to D2L.
- Your attendance is expected. Lack of participation mayaffect your MSPE letter. It is understood that you may not be able to attend every sessions due to different commitments. Each lecture will be recorded and uploaded to D2L for later viewing.
- Speakers volunteer their time to provide this excellent educational opportunity.

## **Transition to Residency Course**

 Transition to Residency is a one-week required course scheduled later in the Pillar 3 experience. The goal of the course is to increase confidence as you transition to Residency. The course is applicable to all specialties and includes a variety of topics such as introducing milestones, individualized learning plans, common intern pages/responses, consultation skills, financial counseling, debt management, malpractice, residency wellness, reflective writing capstone, journal club, morning report presentations, graduate questionnaire completion, and incorporation of an OSCE-like exercise (challenging patient, communicating a medical error, IPE, etc).

Course Director: Dr. Jennifer Hasvold

Contact: Jennifer.Hasvold@usd.edu

## **Student Affairs Course**

- The SSOM Medical Student Affairs One-Credit course focuses on career and professional development, well-being, and financial literacy. The required sessions span the 4-year medical curriculum. Students will be registered for the one-credit course in the second spring semester of Pillar 3.
  - <u>Career Planning</u>: Prepare students to learn about themselves in anticipation of choosing a specialty and a successful match

- <u>Well-Being</u>: Sessions and exercises to encourage self-awareness and promote wellness amongst students
- <u>Financial Literacy</u>: Empower students to have the knowledge and tools to make good financial decisions and goals

## **Assessment, Evaluation, Grading and Appeals**

#### **Assessment Scales**

- Grading criteria for all Pillar 3 courses:
  - A ≥ 90.00%
  - B = 89.99% 80.00%
  - C = 79.99% 75.00%
  - D = 74.99% 60.00%
  - F < 59.99%

<u>Pillar 2</u>	<u>Pillar 3</u>
<b>100%</b> - Student met objective independently; Student is performing at the level of graduating 4 <sup>th</sup> year student. (exceptional)	<b>100%</b> - Student met objective independently.
<b>92%</b> -Student was able to meet the objective independently with minimal prompting by attending; performing at the level of an Pillar 3 sub-internship student. (above expectations)	<b>88%</b> -Student was able to meet the objective independently with minimal prompting by attending.
84% - Student needed assistance to meet objective; student is at the level of an average Pillar 2 student. (satisfactory)	<b>78%</b> - Student needed assistance to meet objective; additional practice is needed.
<b>76%</b> - Student required significant assistance to meet objective; Additional practice is needed to meet the expectations. (Satisfactory)	<b>68%</b> - Student required significant assistance to meet objective; major concerns exist and significant remediation is required.
<b>68%</b> - Student did not meet objective; Student is performing well below the level of their peers and major concerns exist and significant remediation is required. (unsatisfactory)	<b>60%</b> - Student did not meet objective; Student is performing well below the level of their peers and major concerns exist and significant remediation is required.

#### **Assessment in One45**

- Students are expected to complete evaluations of the rotation and attending. We value and appreciate your feedback, and without it, we cannot continue to improve our faculty development and curriculum.
- Attendings will complete an evaluation of the student at the end of the rotation. Students will receive notifications when evaluations are completed, and grades are finalized.
- Course evaluations will provide students with USD OEM wellness contact information.
- Students are encouraged to review grades and narrative feedback in One45.

#### **Resident Assessment**

• Students will be asked to evaluate residents throughout Pillar 3. The evaluations will be sent by the respective program coordinator. New Innovations emails may look like spam so please watch for these.

#### **Timely Completion of Evaluations**

- The following expectations will be placed upon each medical student during their time at the Sanford School of Medicine:
  - All evaluations must be completed by the Friday that occurs 2 weeks from the Friday after the student receives them in One45. Each student is expected to complete these evaluations before midnight on the due date.
  - If a student fails to accomplish this task on more than 2 occasions in Pillar 3, the student may be cited for failure to demonstrate professionalism in the completion of an assigned task by a representative of the Office of Medical Education, using the school's professionalism reporting form.
  - Department assistants will forward delinquent assessments to the respective director at 4 and 6 weeks.
  - In Pillar 3, medical students will receive evaluations approximately 3 days before the end of each block.
- Student wellbeing is supported throughout Pillar 3. Students are encouraged to communicate with the Chief Mental Health Wellness Director for professional coaching, clinical counseling for personal wellness, and the academic dean for any grade or coursework concerns. A Student Wellness Concern is reserved as a standing "To Do" for access to the Chief Wellbeing Officer.
- These evaluations are very important for the continued quality improvement of your faculty and the courses.

#### **Away Rotations**

• Assessments submitted by outside institutions not aligned to SSOM will be reviewed by a Clerkship Director to determine the final letter grade.

#### **Grade Appeals Process**

#### The Appeal of an Assigned Grade in a Course or Clerkship

This appeals process outlines how the OME handles appeals. This process follows the South Dakota Board of Regents Policy (see Policy 2.9) and the Medical Student Affairs Handbook but centralizes the process so that appeals are submitted within the designated timeframe and forwarded to the proper individual to assist students with this process and avoid conflicting information from multiple parties.<sub>3,5</sub>Within this policy, the term "grade" refers to both the letter grade and narrative assessment. Students must submit a written appeal using the standard Appeal Form available in One45/Altus. Appeals made via email or any other form of communication will not be accepted.

The appeal form will be made available in One45/Altus following the grade release and must be submitted within fourteen calendar days. Specific appeal window dates will be communicated to the students as needed.

The OME will ensure all information required on the appeal form has been completed, and they will forward the appeal to the appropriate individual for a decision. If there is a potential conflict of interest arising from the student working with a clerkship director or campus dean as their preceptor, the appeal will be forwarded to another advisor in the respective discipline or another campus dean. Clerkship directors and campus deans or other designees will review and discuss all grade appeals and make a decision regarding the requested change. After a grade appeal decision has been made, the student will be notified in writing of a decision regarding their appeal and appropriate grade change documentation will be completed by the Office of Medical Education.

#### **Appeal Process**

**Step 1**: Clerkship director if the student is appealing a clerkship/discipline-specific grade.

- Campus dean if the student is appealing a clinical competency grade.
- The appropriate course director for Clinical Ethics, Radiology, Friday Academy, or Cultural Immersion.
- It is recommended the appeal decisions be made within 4 weeks of when the appeal was received. However, due to extenuating circumstances, an extended time may be needed.

**Step 2**: (Appeal must be completed within 14 days of 1st appeal decision).

- If there is an appeal of the original appeal, an ad-hoc committee of 3 clerkship directors not involved in the original appeal will review the appeal. This committee should convene within two weeks of the notification from OME.
- Campus dean from another campus for clinical competency grades.
- It is recommended the appeal decisions be made within 4 weeks of when the appeal was received/reviewed, however, due to extenuating circumstances, an extended time may be needed.

**Step 3**: (Appeal must be completed within 14 days of 2<sup>nd</sup> appeal decision).

- Appeal to Dean of SSOM
- It is recommended the appeal decisions be made within 4 weeks of when the appeal was received, however, due to extenuating circumstances, an extended time may be needed.

If a student's appeal for a competency grade is deemed by the campus dean to involve the component of the grade derived from the OSCE, Palliative Care, or HQIP, the following procedures should be followed:

- The campus dean should contact the individual charged with that graded component via email with the specific concern. These individuals may include the OSCE director, Palliative Care instructor, or Pillar 2 director.
- The appropriate individual would then investigate the concern by reviewing the applicable materials from which the grade or comment was derived. This step may include others involved in the grade assignment or comments.
- This individual would report back to the campus dean with the findings regarding the merits of the appeal.
- The campus dean would then be invited to also review the materials. Based on the findings, the campus dean alone would make the final decision on adjusting the grade or comments.

#### **Student Progress and Possible Actions**

- The competency committee reviews each student's progress during Pillar 3.
- If additional action is needed, the student would next meet with the Campus Dean then, if not resolved, the Dean of Student Affairs. At any point in this process, a referral can be made to the Student Progress and Conduct Committee (SPCC) if student is failing, at risk of failing, or in any case of unprofessional conduct.
- If a student wishes to appeal their assigned grade for any course within Pillar 3, they should consult the *Medical School Grievance Procedures* section of the Medical Student Affairs handbook.

#### **Student Concerns, Mistreatment, Duty Hours**

- For students wishing to report a Pillar 3 concern, mistreatment, duty hour violations please refer to your To Do's in One45. Concern, Mistreatment and Duty Hour concerns are reviewed by the OME Dean and Student Affairs Dean.
- The Chief Wellbeing Officer is the only reviewer of Wellbeing Concern form.

## **Policies**

#### **Artificial Intelligence:**

#### <u>Intent</u>

The Medical Education Committee at The University of South Dakota Sanford School of Medicine (USD SSOM) has been asked to address the professionalism implications of generative AI tools such as Chat GPT, Bard, DALL-E, etc. These are novel tools, and it is understood that students and instructors are experimenting with their use in academic settings.

While these tools have applications that foster student learning and understanding, these tools can also be used in ways that bypass key learning objectives of the program.

To give sufficient space for students and instructors to explore uses of generative AI tools in their courses and work, and to set clear guidelines to students about what uses are and are not consistent with professional behavior, the Medical Education Committee has set forth the following policy guidance regarding generative AI in the context of coursework and within the curriculum.

#### **Student Expectations:**

Absent a clear statement from a course instructor, use of or consultation with generative AI shall be treated analogously to assistance from another person. In particular, using generative AI tools to substantially complete an assignment or exam is not permitted.

Students are expected to provide credit to <u>any outside</u> resource used, including AI tools. Not doing so is considered academic dishonesty and will be seen as unprofessional academic behavior.

This may include examples of idea formation, text, or illustrations along with a description in their methods of how the AI tool was used to develop the end scholarly product. A student should default to disclosing such assistance when in doubt.

If you are in doubt about whether a generative AI source (or any source) is permitted aid in the context of a particular assignment, please review with the instructor.

When AI tools are used, they should be cited, such as in this format:

Tool Name. (Year, Month Date of Query). "Text of Query." Generated using Tool Name. Link to Tool Name

Students are also responsible for misinformation, disinformation, and bias in the use and/or submission of AI if it is used in the creation of a scholarly product.

#### Faculty Expectations:

SSOM faculty should be encouraged to learn more about AI and to also encourage students to explore, when appropriate, generative artificial intelligence, using these new concepts and ideas that inspire them to generate their own academic work.

This policy also leaves faculty and instructors to set their own course policies regarding student use of generative AI.

Faculty assessment of a student lacking proper acknowledgement of AI and its use, is assumed to impact student grading negatively.

Faculty who identify student use of AI tools need to consider the usage, student originality, critical thinking, and the correction of incorrect interpretations students provide from using AI tools.

#### Liability Coverage for USD SSOM Medical Students

Medical students of SSOM who are in good standing and full-time students are allowed to participate in medical transports with faculty within the health system they are on rotation with (i.e., Monument Health, Avera Health, Sanford Health). Medical transports may include modes such as ambulance, helicopter, fixed wing, etc. SSOM medical students have full insurance coverage through the health system and the transportation company for such transports.

#### **Medical Student Duty Hours**

• The following policy for SSOM Medical Student Duty Hours is based upon the ACGME duty hour requirements for residents:

Duty hours are defined as all clinical and academic activities related to the medical education program; i.e., patient care (both inpatient and outpatient), administrative duties relative to patient care, the provision for transfer of patient care, time spentin- house during call activities, and scheduled activities such as conferences. Duty hours do *not* include reading and preparation time spent away from the duty site.

 It is both the responsibility of the supervising faculty and each medical student to ensure compliance with the restrictions below, so a student does not violate the medical student duty hours as defined by this policy.

- If a student chooses to disregard faculty recommendations regarding this policy or willingly chooses to not follow the duty hours policy as outlined, their actions may be reflected in their professionalism grade assigned to them by their respective LIC Campus Coordinating Committee.
   Restrictions:
- Clinical and educational work hours must <u>be limited to 80 hours</u> per week, averaged over a four-week period, inclusive of all in-house clinical and educational activities.
- Clinical and educational work periods <u>must not exceed 24 hours of continuous</u> scheduled assignments. <u>Up to four hours of additional time</u> may be used for activities related to patient safety, such as providing effective transitions of care, and for student education. However, additional patient care responsibilities must not be assigned to the student during this time.
- Students must be provided with <u>one day in seven free</u> from all educational and clinical responsibilities, averaged over a four-week period, inclusive of at-home call. One day is defined as one continuous 24-hour period free from all clinical and educational duties.
- Adequate time for rest and personal activities must be provided. This should consist of an <u>eight-hour break provided between all work shifts.</u>
- All students must have <u>at least 14 hours free of clinical work after 24 hours of clinical</u> <u>assignments</u>.
- Students must be scheduled for <u>in-house call no more frequently than every third</u> night (averaged over a four-week period). *In-house call* is defined as those duty hours beyond the normal work day, when students are required to be immediately available in the assigned institution.
- Time spent on patient care activities by students on at-home call must count toward the 80-hour and one-day-off-in-seven requirements. *At-home call* (or *pager call*) is defined as a call taken from outside the assigned institution. The frequency of at-home call is not subject to the every- third-night limitation. At-home call, however, must not be so frequent as to preclude rest and reasonable personal time for each student. Students taking at-home call must be provided with 1 day in 7 completely free from all educational and clinical responsibilities, averaged over a 4- week period.
- When students are called into the hospital from home, the hours students spend inhouse are counted toward the 80-hour limit. The course or clerkship director and the faculty must monitor the demands of at-home call in their programs, and make necessary scheduling adjustments as necessary to mitigate excessive service demands and/or fatigue.

#### **Duty Hours & On-Call Activities**

- In-house call is defined as those duty hours beyond the normal work day, when students are
  required to be immediately available in the assigned institution. In-house call must occur no
  more frequently than every third night, averaged over a 4-week period. Continuous on-site duty,
  including in-house call, must not exceed 24 consecutive hours. Students may remain on duty for
  up to 4 additional hours to participate in didactic activities, transfer care of patients, conduct
  outpatient clinics, and maintain continuity of medical and surgical care. No new patients may be
  accepted after 24 hours of continuous duty.
- At-home call (or pager call) is defined as a call taken from outside the assigned institution. The frequency of at-home call is not subject to the every-third-night limitation. At-home call, however, must not be so frequent as to preclude rest and reasonable personal time for each student. Students taking at-home call must be provided with 1 day in 7 completely free from all

educational and clinical responsibilities, averaged over a 4-week period.

• When students are called into the hospital from home, the hours students spend in-house are counted toward the 80-hour limit. The course or clerkship director and the faculty must monitor the demands of at-home call in their programs, and make scheduling adjustments as necessary to mitigate excessive service demands and/or fatigue.

#### **Attendance and Leave Policy**

- Attendance is mandatory for all Pillar 3 rotations.
- Unexcused absences will be reported to the Campus Dean's office and may necessitate review by the Student Progress and Conduct Committee (SPCC). Punctuality is essential, expected, and part of the professionalism competency.

#### **Holidays**

- There are no designated holidays for students in Pillar 3.
- Holidays listed below represent when the SSOM offices are closed. Pillar 3 students are required to complete clinical activities on these holidays.
  - New Year's Day
  - Martin Luther King Day
  - President's Day
  - Columbus/Native American Day
  - Veteran's Day
  - Memorial Day
  - o Fourth of July
  - o Labor Day
  - Thanksgiving Day
  - o Christmas Day
  - Not limited to these holidays

#### Vacation/Flexible Weeks

 Students may take up to 14 weeks of vacation/flexible time. <u>The actual number may depend</u> on the students start date in Pillar 3. Any vacation or flexed time must be scheduled in oneweek blocks.

#### **Residency Interview Leave Policy**

- Attendance will be mandatory for all Pillar 3 rotations
- Students will need to use vacation/flex time when absent for 50% or more of a week for interviewing
- Students are responsible for notifying their department assistant and Preceptor for all interviews.
  - Notifications less than 3 business days will be accepted only at the discretion of the preceptor/department.
- 1 day per week average during a rotation will be allowed for Residency Interviews
- If extra time is required:
  - If 2 days are required within a week it must be approved by the preceptor/department and makeup will be determined by preceptor
  - If the leave is greater than or equal to 3 days in a single week or 4 days average across 2 weeks, then a Pillar 3 Absence Request Form needs to be completed and the week of

rotation needs to be repeated. This will need to be approved by the preceptor, Pillar 3 director and Dean of Student Affairs

- The Pillar 3 Absence Request Form can be found under the Handbook, Scheduling, Forms & Resource Links module
- Unexcused Absences will be reported to the Campus Dean's office and may necessitate review by the Student Progress and Conduct Committee (SPCC)

#### **Sick or Other Absences Policy**

- If a student is quarantined due to COVID-19 exposure or isolated due to mild illness, the student may choose to take an online elective if one is available or use personal/vacation time. Please contact the Registrar and Pillar 3 Director to coordinate schedule changes.
- Students are responsible for notifying their preceptors and department assistant of any absences during a rotation.
- The Pillar 3 Absence Request Form can be found under the Handbook, Scheduling, Forms & Resource Links module and must be completed prior to the absence dates, or upon returnfrom emergencies/unplanned events.
  - 0 2 days/week requires make-up activity designated by preceptor.
  - 3 + days/week requires the rotation week to be repeated.
- Students who are seeking an absence for personal/private matters may call Student Affairs at 605-658-6300. Student Affairs will work with all appropriate faculty to make the necessary arrangements.

#### **Student Affairs Policies**

• The following policies can be found in the D2L Student affairs sandbox.

Mid-Course and Mid-Clerkship Feedback Policy Narrative Assessment Policy Clinical Supervision Policy Student Mistreatment Policy Procedure for Reporting Student Mistreatment Teacher/Learner Responsibilities & Mistreatment Confidentiality Policy (excerpts from Confidentiality Policy signed by students) Non-Involvement of Providers of Student Health Services in Student Assessment Policy Accommodations for students infected or disabled during medical school

#### **SSOM Student Inclement Weather Policy**

- The weather in South Dakota can vary greatly from location to location. Thus, the inclement weather policy of the USD Sanford School of Medicine will also vary from campus to campus.
  - USD SSOM clinical campuses rarely close due to weather, and administrative offices will remain open when possible.
    - Sioux Falls: If travel is hazardous, the Campus Dean, Dean of Medical Student Education and Dean of Medical Student Affairs will decide if classes should be canceled. This decision will be announced by the Office of Medical Student Affairs via email using the appropriate medical student listserv.
    - Yankton & Rapid City: If travel is hazardous, the Campus Dean and Dean of Medical Student Affairs will decide if classes should be canceled. This decision

will be announced by the Office of Medical Student Affairs via email using the appropriate medical student listserv.

- **FARM:** Students should follow their respective FARM site policy.
- If an emergency closing is declared on a clinical campus, students who are on clinical rotations and call are expected to attend. If a student is unable to reach the clinical site, or feels it is unsafe to travel, they must contact their clinical attending/faculty and follow the absence policy.

#### **Accessibility Statement**

• The University of South Dakota strives to ensure that physical resources, as well as information and communication technologies, are accessible to users in order to provide equal access to all. If students encounter any accessibility issues, they are encouraged to immediately contact the instructor of the course and the Office of Disability Services, which will work to resolve the issue as quickly as possible.

#### **Required Language for All Syllabi**

#### • Academic Integrity

- No credit can be given for a dishonest assignment. A student found to have engaged in any form of academic dishonesty may, at the discretion of the instructor, be:
  - Given a zero for that assignment.
  - Allowed to rewrite and resubmit the assignment for credit.
  - Assigned a reduced grade for the course.
  - Dropped from the course.
  - Failed in the course.

#### • Freedom in Learning

 Under Board of Regents and University policy, student academic performance may be evaluated solely on an academic basis, not on opinions or conduct in matters unrelated to academic standards. Students should be free to take reasoned exception to the data or views offered in any course of study and to reserve judgment about matters of opinion, but they are responsible for learning the content of any course of study for which they are enrolled. Students who believe that an academic evaluation reflects prejudiced or capricious consideration of student opinions or conduct unrelated to academic standards should contact the dean of the college or school that offers the class to initiate a review of the evaluation.

#### • Disability Accommodation

- The University of South Dakota strives to ensure that physical resources, as well as information and communication technologies, are reasonably accessible to users in order to provide equal access to all. Any student who feels s/he may need academic accommodations or access accommodations based on the impact of a documented disability should contact and register with Disability Services during the first week of class or as soon as possible after the diagnosis of a disability. Disability Services is the official office to assist students through the process of disability verification and coordination of appropriate and reasonable accommodations. Students currently registered with Disability Services must obtain a new accommodation memo each semester.
- Please note: if your home institution is not the University of South Dakota but one of the

other South Dakota Board of Regents institutions (e.g., SDSU, SDSMT, BHSU, NSU, DSU), you should work with the disability services coordinator at your home institution.

- Disability Services, The Commons Room 116
- (605) 658-3745
- Web Site: <u>https://www.usd.edu/disabilityservices</u>
- Email: disabilityservices@usd.edu
- Diversity and Inclusive Excellence
  - The University of South Dakota strives to foster a globally inclusive learning environment where opportunities are provided for diversity to be recognized and respected. To learn more about USD's diversity and inclusiveness initiatives, pleasevisit the website for the Office of Diversity.

#### **Required COVID-19 Language for All Syllabi**

- COVID-19 Statement
  - Mitigating the spread of COVID-19 is everyone's responsibility. In order to ensure the 0 health and safety of each individual student and our overall campus community, we ask you to monitor your health daily and abide by the following protocols: If you are exposed to COVID-19, develop COVID-19 symptoms, or anticipate being absent for more than two weeks due to COVID-19, you are expected to immediately communicate this to covid19@usd.edu. You may also report to the Dean of Students at deanofstudents@usd.edu. In either case, the Dean of Students office will communicate with all instructors and provide appropriate University communication to impacted parties while also preserving student privacy about any medical condition. If you miss class due to medical reasons, please also inform your instructor in a timely fashion. Students who have been asked to guarantine cannot attend classes in person and should ask instructors if there is an option to participate remotely. Instructors will work with students to determine whether remote participation, an incomplete grade, or withdrawal is most appropriate. Thank you for following these important measures to keep our community healthy and safe.
- COVID-19 Face Covering Policy
  - Per the <u>Board of Regents News Release of March 15, 2021</u> and the <u>Board of Regents News</u> <u>Release of May 4, 2021</u>, face coverings are optional on campus. However, face coverings will still be required in the Parry Center and Lee Medicine exam rooms to continue to simulate the clinical work environment. This Sanford School of Medicine policy will be in effect if our clinical training affiliates are requiring mask use in clinical spaces, regardless of vaccination status.
  - The CDC has also recommended that for any individual who has had a higher-risk exposure to COVID-19, the individual should follow all recommended infection prevention and control practices<sup>1</sup>, <u>including wearing well-fitting source control</u>.

#### • Statement on Recording of Lectures by Students

 Lectures, presentations, and other course materials are protected intellectual property under South Dakota Board of Regents Policy. Accordingly, recording and disseminating lectures, presentations or course materials is strictly prohibited without the express permission of the faculty member. Violation of this prohibition may result in the student being subject to Student Conduct proceedings under SDBOR Policy 3:4.

## **Health Affairs Policies**

• The following policies can be found in the Health Affairs Infection Control Manual provided by the Division of Health Affairs:<u>https://www.usd.edu/-/media/Project/USD/shared/Med\_SHS\_HA-Shared-Docs/USD-HA-Infection-Control-Manual</u>

General Student Safety Guideline (Infection Control/Student Safety) Standard Precautions Transmission Based Precautions Occupational Exposure to Infectious and Environmental Hazards Educational Accommodations Related to an Exposure Entering and Visiting Student Immunization Policy Immunization Compliance Policy Annually Required Immunizations Students Infected with Bloodborne Pathogens (HIV, HBV, HCV) Other Special Considerations: The Pregnant Student Health Insurance Required Vaccine Declination