



**Stanford School of Medicine
Master of Science Degree in Physician Assistant Studies**

MSPA Studies Program Handbook and Policy
Manual 2/15/2018

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1.0. INTRODUCTION

This PDF document is a summary of the current policies, standards and procedures contained in the online [MSPA Studies Program Handbook and Policy Manual for AY 2017-18](#). Students participating in Stanford University's MSPA Studies program are subject to, and are responsible to be aware of, the policies and standards established by both the School of Medicine, and by Stanford University; many of the Stanford University policies are found in the [Stanford Bulletin](#).

Stanford University and the School of Medicine reserve the right to make changes in the applicable regulations, procedures, policies, requirements, and other information contained on the websites at any time without notice. Please visit <http://med.stanford.edu/pa/handbook-policies> for changes and revisions that may occur throughout the academic year; it is the online version of the MSPA Studies Program Handbook and Policy Manual that governs.

2.0. GENERAL STANDARDS

2.1. COMPETENCIES AND OBJECTIVES FOR PA STUDENT EDUCATION

The Master of Science Degree in PA Studies curriculum follows competency guidelines established by the [National Commission on Certification of Physician Assistants](#) and adopted in 2012 by ARC-PA, NCCPA, and PAEA, and adopted in 2013 by AAPA. These guidelines define the specific knowledge, skills, attitudes, and educational experiences needed in order to train PAs who provide uniformly high-quality health care and demonstrate greater accountability in their profession. The competencies are as follows:

Medical Knowledge

Medical knowledge includes the synthesis of pathophysiology, patient presentation, differential diagnosis, patient management, surgical principles, health promotion, and disease prevention. Physician assistants must demonstrate core knowledge about established and evolving biomedical and clinical sciences and the application of this knowledge to patient care in their area of practice. In addition, physician assistants are expected to demonstrate an investigative and analytic thinking approach to clinical situations.

Physician assistants are expected to understand, evaluate, and apply the following to clinical scenarios:

1. Evidence-based medicine
2. Scientific principles related to patient care
3. Etiologies, risk factors, underlying pathologic process, and epidemiology for medical conditions
4. Signs and symptoms of medical and surgical conditions
5. Appropriate diagnostic studies
6. Management of general medical and surgical conditions, to include pharmacologic and other treatment modalities
7. Interventions for prevention of disease and health promotion/maintenance
8. Screening methods to detect conditions in an asymptomatic individual
9. History, physical findings, and diagnostic studies to formulate differential diagnoses

Interpersonal and Communication Skills

Interpersonal and communication skills encompass the verbal, nonverbal, written, and electronic exchange of information. Physician assistants must demonstrate interpersonal and communication skills that result in effective information exchange with patients, patients' families, physicians, professional associates, and other individuals within the health care system. Physician assistants are expected to:

1. Create and sustain a therapeutic and ethically sound relationship with patients
2. Use effective communication skills to elicit and provide information
3. Adapt communication style and messages to the context of the interaction
4. Work effectively with physicians and other health care professionals as a member or leader of a health care team or other professional group
5. Demonstrate emotional resilience and stability, adaptability, flexibility, and tolerance of ambiguity and anxiety

6. Accurately and adequately document information regarding care for medical, legal, quality, and financial purposes

Patient Care

Patient care includes patient- and setting-specific assessment, evaluation, and management. Physician assistants must demonstrate care that is effective, safe, high quality, and equitable. Physician assistants are expected to:

1. Work effectively with physicians and other health care professionals to provide patient-centered care
2. Demonstrate compassionate and respectful behaviors when interacting with patients and their families
3. Obtain essential and accurate information about their patients
4. Make decisions about diagnostic and therapeutic interventions based on patient information and preferences, current scientific evidence, and informed clinical judgment
5. Develop and implement patient management plans
6. Counsel and educate patients and their families
7. Perform medical and surgical procedures essential to their area of practice
8. Provide health care services and education aimed at disease prevention and health maintenance
9. Use information technology to support patient care decisions and patient education

Professionalism

Professionalism is the expression of positive values and ideals as care is delivered. Foremost, it involves prioritizing the interests of those being served above one's own. Physician assistants must acknowledge their professional and personal limitations. Professionalism also requires that PAs practice without impairment from substance abuse, cognitive deficiency or mental illness. Physician assistants must demonstrate a high level of responsibility, ethical practice, sensitivity to a diverse patient population, and adherence to legal and regulatory requirements. Physician assistants are expected to demonstrate:

1. Understanding of legal and regulatory requirements, as well as the appropriate role of the physician assistant
2. Professional relationships with physician supervisors and other health care providers
3. Respect, compassion, and integrity
4. Accountability to patients, society, and the profession
5. Commitment to excellence and ongoing professional development
6. Commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices
7. Sensitivity and responsiveness to patients' culture, age, gender, and abilities
8. Self-reflection, critical curiosity, and initiative
9. Healthy behaviors and life balance
10. Commitment to the education of students and other health care professionals

Practice-Based Learning and Improvement

Practice-based learning and improvement includes the processes through which physician assistants engage in critical analysis of their own practice experience, the medical literature, and other information resources for the purposes of self- and practice-improvement. Physician assistants must be able to assess, evaluate, and improve their patient care practices. Physician assistants are expected to:

1. Analyze practice experience and perform practice-based improvement activities using a systematic methodology in concert with other members of the health care delivery team
2. Locate, appraise, and integrate evidence from scientific studies related to their patients' health
3. Apply knowledge of study designs and statistical methods to the appraisal of clinical literature and other information on diagnostic and therapeutic effectiveness
4. Utilize information technology to manage information, access medical information, and support their own education
5. Recognize and appropriately address personal biases, gaps in medical knowledge, and physical limitations in themselves and others

Systems-Based Practice

Systems-based practice encompasses the societal, organizational, and economic environments in which health care is delivered. Physician assistants must demonstrate an awareness of and responsiveness to the larger system of health care to provide patient care that balances quality and cost, while maintaining the primacy of the individual patient. PAs should work to improve the health care system of which their practices are a part. Physician assistants are expected to:

1. Effectively interact with different types of medical practice and delivery systems
2. Understand the funding sources and payment systems that provide coverage for patient care and use the systems effectively
3. Practice cost-effective health care and resource allocation that does not compromise quality of care
4. Advocate for quality patient care and assist patients in dealing with system complexities
5. Partner with supervising physicians, health care managers, and other health care providers to assess, coordinate, and improve the delivery and effectiveness of health care and patient outcomes
6. Accept responsibility for promoting a safe environment for patient care and recognizing and correcting systems-based factors that negatively impact patient care
7. Apply medical information and clinical data systems to provide effective, efficient patient care
8. Recognize and appropriately address system biases that contribute to health care disparities
9. Apply the concepts of population health to patient care

2.2. SPECIFICATION OF REQUIREMENTS FOR GRADUATION

Graduation

The requirements for the MS degree in PA Studies are established by the Stanford University Committee on Graduate Studies and allow no exceptions. Those requirements are as follows:

1. Satisfaction of Academic Requirements: To graduate, students must satisfy all academic requirements
2. Satisfaction of Professionalism Requirements: To graduate, students must meet the standards of professionalism set forth in the *School of Medicine Professionalism Principles MSPA Studies Program Handbook and Policy Manual for AY 2017-18, Section 2.4.*
3. Satisfaction of Technical Standards: To graduate, students must meet the requirements set forth in the *School of Medicine Technical, Non-Academic Standards (MSPA Studies Program Handbook and Policy Manual for AY 2017-18, Section 2.3.)*.
4. Satisfaction of Application to Graduate Submission: To graduate, students must register for 9 quarters at full MSPA Studies program tuition. Candidates must be registered for the quarter during which the degree is conferred. Students must apply for conferral of a degree by filing an 'Application to Graduate' on Axess. Students may graduate in any quarter by completing their degree requirements and filing the 'Application to Graduate' by the deadline date for that quarter.
5. [Medical Health Requirements and Immunizations](#): MSPA Studies program students must be in compliance with Stanford School of Medicine medical health requirements at all times. Entering PA students must complete certain health-related forms, immunization, and tests before beginning studies at Stanford and, for some of these, annually thereafter.
6. Data Security and Privacy (HIPAA) Training: MSPA Studies program students must be in compliance with Stanford's HIPAA training and information security requirements (*MSPA Studies Program Handbook and Policy Manual for AY 2017-18, Section 3.3.*).
7. Safety Training: MSPA students must be in compliance with Bloodborne Pathogens, Hospital-Acquired Infections training, and Safety and Emergency Preparedness training requirements and N95 Respirator training and fitting (*MSPA Studies Program Handbook and Policy Manual for AY 2017-18, Section 3.13.*).
8. Ethical Conduct of Biomedical Research: MSPA Studies program students must be in compliance with the CITI training requirement (*MSPA Studies Program Handbook and Policy Manual for AY 2017-18, Section 3.6.*)

Note on licensure: Meeting the graduation requirements for the MSPA Studies degree at Stanford School of Medicine does not guarantee eligibility for state licensure. Some states have specialized curricular requirements for licensure, and students are advised to check with the Medical or PA Board in states of possible practice.

2.3. SCHOOL OF MEDICINE TECHNICAL, NON-ACADEMIC STANDARDS

Observation:

Candidates must be able to observe demonstrations and participate in experiments of science, including but not limited to such things as dissection of cadavers; examination of specimens in anatomy, pathology, and neuroanatomy laboratories; and microscopic study of microorganisms and tissues in normal and pathologic states. Candidates must be able to accurately observe patients and assess findings. They must be able to obtain a medical history and perform a complete physical examination in order to integrate findings based on these observations and to develop an appropriate diagnostic and treatment plan.

Communication:

Candidates must be able to communicate effectively and efficiently with patients, their families, and members of the health care team. They must be able to obtain a medical history in a timely fashion, interpret non-verbal aspects of communication, and establish therapeutic relationships with patients. Candidates must be able to record information accurately and clearly, and communicate effectively in English with other health care professionals in a variety of patient settings.

Motor Function:

Candidates must possess the capacity to perform physical examinations and diagnostic maneuvers. They must be able to respond to emergency situations in a timely manner and provide general and emergency care. They must adhere to universal precaution measures and meet safety standards applicable to inpatient and outpatient settings and other clinical activities.

Intellectual-Conceptual, Integrative, and Quantitative Abilities:

Candidates must have sufficient cognitive (mental) abilities and effective learning techniques to assimilate the detailed and complex information presented in the medical student curriculum. They must be able to learn through a variety of modalities including, but not limited to, classroom instruction; small group, team and collaborative activities; individual study; preparation and presentation of reports; and use of computer technology. Candidates must be able to memorize, measure, calculate, reason, analyze, synthesize, and transmit information across modalities. They must recognize and draw conclusions about three-dimensional spatial relationships and logical sequential relationships among events. They must be able to formulate and test hypotheses that enable effective and timely problem solving in diagnosis and treatment of patients in a variety of clinical modalities.

Behavioral and Social Attributes

Candidates must demonstrate the maturity and emotional stability required for full use of their intellectual abilities. They must accept responsibility for learning, exercising good judgment, and promptly completing all responsibilities attendant to the diagnosis and care of patients. They must understand the legal and ethical aspects of the practice of medicine and function within both the law and ethical standards of the medical profession. Candidates must be able to work effectively, respectfully and professionally as part of the healthcare team, and to interact with patients, their families, and health care personnel in a courteous, professional, and respectful manner. They must be able to tolerate physically taxing workloads and long work hours, to

function effectively under stress, and to display flexibility and adaptability to changing environments. They must be capable of regular, reliable and punctual attendance at classes and in regard to their clinical responsibilities. Candidates must be able to contribute to collaborative, constructive learning environments; accept constructive feedback from others; and take personal responsibility for making appropriate positive changes. It is expected that minimum accommodation will be requested with regards to this set of standards.

Ethical and Legal Standards

Candidates must meet the legal standards to be licensed to practice as a PA in the State of California. As such, candidates for admission must acknowledge and provide written explanation of any felony offense or disciplinary action taken against them prior to matriculation in the School of Medicine. In addition, should the student be convicted of any felony offense while in PA school, they agree to immediately notify the Associate Dean for PA Education as to the nature of the conviction. Failure to disclose prior or new offenses can lead to disciplinary action by the School of Medicine that may include dismissal.

Equal Access to the School of Medicine's Educational Program

The Stanford University School of Medicine intends for its students and graduates to become competent and compassionate clinicians who are capable of meeting all requirements for PA licensure.

The School of Medicine has an institutional commitment to provide equal educational opportunities for qualified students with disabilities who apply for admission to the MSPA Studies degree program or who are enrolled as PA students. The School of Medicine is a leader in student diversity and individual rights, with a strong commitment to full compliance with state and federal laws and regulations (including the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990 (as amended), and California law (Civil Code 51 and 54). A "qualified person with a disability" is an individual with a disability who meets the academic and technical standards requisite to admission or participation in the School of Medicine's educational programs, with or without accommodations. As previously noted, admitted candidates with disabilities are reviewed individually, on a case-by-case basis, with a complete and careful consideration of all the skills, attitudes and attributes of each candidate to determine whether there are any reasonable accommodations or available options that would permit the candidate to satisfy the standards. An accommodation is not reasonable if it poses a direct threat to the health or safety of self and/or others, if making it requires a substantial modification in an essential element of the curriculum, if it lowers academic standards, or if it poses an undue administrative or financial burden. Except in rare circumstances, the use by the candidate of a third party (e.g., an intermediary) to perform any of the functions described in the Technical Standards set forth above would constitute an unacceptable substantial modification.

Process

As stated above, admission and promotion at the School of Medicine is conditional on the candidate's having the willingness and ability to satisfy the technical standards, with or without reasonable accommodation.

Admitted candidates who have a disability and need accommodations should initiate discussions with the PA program Student Services Officer as the offer of admission is received and accepted. They are liaisons

with the University's Office of Accessible Education (OAE). It is the responsibility of a candidate with a disability to provide sufficiently current information documenting the general nature and extent of his/her disability, and the functional limitations proposed to be accommodated. Evaluating and facilitating accommodation requests is a collaborative effort between the candidate, the School of Medicine and the OAE. The School of Medicine reserves the right to request new or additional information.

Should a candidate have or develop a condition that would place patients, the candidate or others at risk or that may affect his/her need for accommodation, an evaluation with the School of Medicine and the OAE may be necessary. As in initial assessments, a complete and careful reconsideration of all the skills, attitudes and attributes of each candidate will be performed. This includes an assessment of his/her willingness, desire and ability to complete the MSPA Studies program curriculum and fulfill all requirements for PA licensure, and will be informed by the knowledge that students with varied types of disabilities have the ability to become successful medical professionals.

2.4. SCHOOL OF MEDICINE PROFESSIONALISM PRINCIPLES FOR PA STUDENTS

The following professionalism principles must be met in order for a student to qualify for conferral of the MS in PA Studies degree from the Stanford University School of Medicine.

Professionalism comprises those attributes and behaviors that serve to maintain patient interests above clinician self-interest. Professionalism extends beyond interactions with patients and their families, however. Professionalism also involves relationships and interactions between all those involved in medical education and the delivery of patient care including PAs, physicians, nurses, other allied health professionals, students, and administrators. It has implications for research activities and interactions with for-profit companies, governmental agencies, and other outside entities. Professionalism should pervade all of our activities in medicine and should include:

1. A commitment to the highest standards of excellence in the practice of medicine and in the generation and dissemination of knowledge.
2. A commitment to sustain the interests and welfare of patients.
3. A commitment to be responsive to the health needs of society.

The elements of professionalism include altruism, accountability, responsibility, excellence, duty, honesty, integrity, and respect for others. Physicians, physician assistants, students, and all staff participating in medical education and patient care at Stanford University School of Medicine are expected to aspire to these ideals, further defined as:

Altruism

Altruism is the unselfish regard for and devotion to the welfare of others and is a key element of professionalism. Self-interest or the interests of other parties should not interfere with the care of one's patients and their families.

Accountability and Responsibility

Accountability and responsibility are required at many levels – individual patients, society and the profession. First, there must be accountability to one's patients and to their families. There must also be accountability to society for addressing the health needs of the public and to ensure that the public's needs are addressed. One must also be accountable to the profession to ensure that the ethical precepts

of practice are upheld. Inherent in responsibility is reliability in completing assigned duties or fulfilling commitments. There must also be a willingness to accept responsibility for errors.

Objectives and Expectations

1. Adheres to Stanford School of Medicine and Stanford Hospital policies
2. Arrives on time and prepared for educational and patient expectations
3. Fulfills obligations and commitments in timely fashion
4. Respectfully and tactfully questions policies, procedures and practices perceived as unfair
5. Takes responsibility for shortcomings and areas for improvement
6. Recognizes errors and impairments in peers and reports these to appropriate entities
7. Maintains personal control amidst adverse or trying circumstances
8. Takes initiative, perseveres, and is able to prioritize and to manage time
9. Takes on appropriate share of team work
10. Reports accurately and fully on patient care activities
11. Always ensures transfer of responsibility for patient care
12. Informs supervisor/ team when mistakes occur or when faced with a conflict of interest

Excellence

Excellence entails a conscientious effort to exceed ordinary expectations and to make a commitment to life--long learning. Commitment to excellence is an acknowledged goal for all physicians, physician assistants and students of medicine. A key to excellence is the pursuit of and commitment to providing the highest quality of health care through lifelong learning, education, and reflection. One must seek to learn from errors and aspire to excellence through self-evaluation and acceptance of the critiques of others.

Objectives and Expectations

1. Demonstrates ability to practice awareness and self-reflection for lifelong personal and professional development
2. Balances availability to others with care for oneself
3. Recognizes the impact of personal biases on professional conduct
4. Actively solicits and incorporates feedback in a timely fashion
5. Demonstrates caring, compassion and commitment to the physical and emotional wellness of self
6. Addresses own gaps in knowledge and/or skills
7. Pursues and commits to providing the highest quality of health care through lifelong learning, education and reflection

Duty

Duty is the free acceptance of a commitment to service. This commitment entails being available and responsive when “on call,” accepting inconvenience to meet the need of one’s patients, enduring unavoidable risks to oneself when a patient’s welfare is at stake, advocating the best possible care regardless of ability to pay, seeking active roles in professional organizations, and volunteering one’s skills and expertise for the welfare of the community.

Objectives and Expectations

1. Demonstrates caring, compassion and commitment to the physical and emotional wellness of others

2. Constructively approaches conflict resolution
3. Provides constructive feedback to improve instruction
4. Actively participates in peer and faculty oral feedback sessions and written assessments
5. Shares responsibility for group learning, feedback, and discussions
6. Recognizes difficulties in peers and assists them in obtaining help or remediation
7. Intervenes on behalf of colleagues when others behave unprofessionally; addresses unprofessional behavior
8. Advocates on behalf of patients
9. Collaborates with communities to address the social determinants of health
10. Advocates for traditionally underserved populations
11. Identifies barriers to care and advocates to reduce those barriers

Honesty and integrity

Honesty and integrity are the consistent regard for the highest standards of behavior and the refusal to violate one's personal and professional codes. Honesty and integrity imply being fair, being truthful, keeping one's word, meeting commitments, and being forthright in interactions with patients, peers, and in all professional work, whether through documentation, personal communication, presentations, research, or other aspects of interaction. They require awareness of situations that may result in conflict of interest or that result in personal gain at the expense of the best interest of the patient.

Objectives and Expectations

1. Forthright in interactions with patients, peers and in all professional work
2. Summarizes material in one's own voice
3. Reports accurate data
4. Admits errors and omissions
5. Identifies situations where confidentiality is expected and important
6. Demonstrates ability to negotiate informed consent
7. Identifies components of patient competence as it relates to informed consent
8. Understands the role of proxies when patients are unable to provide consent
9. Demonstrates awareness of situations that may result in conflict of interest or that result in
10. Personal gain at the expense of the best interest of the patient or others

Respect for Others

Respect for others is the essence of humanism, and humanism is central to professionalism. This respect extends to all spheres of contact, including but not limited to patients, families and professional colleagues, including physicians, nurses, residents, fellows, and School of Medicine students. One must treat all persons with respect and regard for their individual worth and dignity. One must listen attentively and respond humanely to the concerns of patients and family members. Appropriate empathy for and relief of pain, discomfort, and anxiety should be part of the daily practice of medicine. One must be fair and nondiscriminatory and be aware of emotional, personal, family, and cultural influences on patient well-being and patients' rights and choices of medical care. It is also a professional obligation to respect appropriate patient confidentiality.

Objectives and Expectations

1. Appearance is appropriate to situations
2. Takes initiative and works collaboratively on a team

3. Speaks respectfully/ demonstrates respect for peers, all specialties, disciplines and professions
4. Actively inclusive of others to achieve common educational and patient goals
5. Exhibits sensitivity to cultural differences among peers
6. Any use of humor is appropriate to the situation and leaves no one uncomfortable
7. Maintains appropriate boundaries in work relationships
8. Recognizes that relationships between physician assistants and other healthcare workers are sometimes characterized by unequal power and these relationships should be treated responsibly
9. Clarifies expectations and clinical responsibilities, including the student's role on the team
10. Communicates with team regarding conflicting responsibilities
11. Demonstrates sensitivity to and actively addresses patients' needs
12. Demonstrates caring and rapport
13. Recognizes that relationships between clinicians, and patients and their families have unequal power and those relationships should be treated responsibly
14. Exhibits sensitivity to cultural differences among patients
15. Listens attentively and responds humanely to the concerns of patients and family members
16. Includes patients and families in decision making
17. Respects patients' dignity with form of address and attention to physical modesty
18. Maintains appropriate boundaries in dealing with patients and their families
19. Responds humanely to the concerns of patients and family members
20. Demonstrates empathy and compassion for others
21. Demonstrates appropriate empathy for and relief of pain, discomfort, and anxiety
22. Is fair and nondiscriminatory
23. Extends him/ herself to meet patient and family needs.
24. Takes time and effort to explain information to patients
25. Maintains decorum even when patients or others behave inappropriately
26. Shows sensitivity when discussing bad news, as appropriate
27. Maintains composure and seeks consultation as necessary when working with challenging patients
28. Maintaining respect for others on social media platforms and maintaining a professional virtual presence

3.0. MSPA STUDIES PROGRAM REQUIREMENTS AND PROCEDURES

3.1. ACADEMIC RECORDS AND PRIVACY OF STUDENT RECORD INFORMATION

Transcripts

The notations used on official University transcripts are pass (+), incomplete (I), continuing (N), exempt (EX) and grade not reported (GNR). In required clerkships, students will be evaluated using the Criterion Based Evaluation System (CBES) model and will be eligible for a Pass with Distinction (PWD). The PWD notation applies *only* to required clerkships; it does not apply to elective clerkships or pre-clerkship courses. Students may order transcripts through Axess.

Education Records

The university Registrar's Office establishes a file for each student. The file contains confidential

information, which is available to the following parties with legitimate educational interests without prior permission from the student:

1. Dean of the School of Medicine, Senior Associate Dean for Medical Student Education and or Associate Dean for PA Education;
2. The Office of PA Education and committees within;
3. Executive Committee of the Faculty Senate when asked by the Dean of the School of Medicine to review a case;
4. A duly appointed grievance or grievance appeal officer, or a duly appointed *ad hoc* committee on the Suitability for the Practice of Medicine;
5. Other university officials on a need-to-know basis; and
6. Others as permitted or required by law or by University policy.

Notification of Rights Under FERPA

The following is quoted from the [Stanford Bulletin](#) (8/21/2017):

The Family Educational Rights and Privacy Act of 1974 (FERPA) affords students certain rights with respect to their education records. They are:

1. **The right to inspect and review the student's education records within 45 days of the date the University receives a request for access.**
 - Current and former students who wish to make a FERPA-related request to view records should submit to the Office of the University Registrar an online request that identifies the record(s) the student wishes to inspect:
 - [Request for records by current student and former students who still have an active Stanford ID](#) (typically students who were enrolled within the last five years)
 - [Request for records by former students who do not have an active Stanford ID](#)
 - Students are advised to provide complete information in order to assist the University in following up on the request. Federal law requires that the University provide access to requested extant records within 45 days. A Registrar's Office official will make arrangements for access and notify the student of the time and place where the records may be inspected. If the records requested are not under the control of the Registrar's Office, the Registrar's Office will make arrangements for the relevant office to provide the records within the time frame established under the law.
2. **The right to request the amendment of the student's education records that the student believes are inaccurate, misleading, or otherwise in violation of the student's privacy rights under FERPA.**
 - a) A student may ask the University to amend the record that he or she believes is inaccurate or misleading. The student should write the University official responsible for the record (with a copy to the University Registrar), clearly identify the part of the records he or she wants changed, and specify why it should be changed.

- b) If the University decides not to amend the record as requested by the student, the University will notify the student of the decision and advise the student of his or her right to a hearing regarding the request for amendment.
- c) Additional information regarding the hearing procedures is provided to the student when notified of the right to a hearing.

3. The right to consent to disclosures of personally identifiable information contained in the student's education records, except to the extent that FERPA authorizes disclosure without consent.

- FERPA contains various exceptions to the general rule that the University should not disclose education records without seeking the prior written consent of the student. The following circumstances are representative of those in which education records (and information drawn from education records) may be disclosed without the student's prior written consent:
 - a) Upon request, the University may release Directory Information (see the "[Directory Information](#)" section of this bulletin).
 - b) School officials who have a legitimate educational interest in a student's education record may be permitted to review it. A school official is: a person employed by the University in an administrative, supervisory, academic or research, or support staff position (including law enforcement unit personnel and health staff); a person or company with whom the University has contracted (such as an attorney, auditor, or collection agent); a person serving on the Board of Trustees; or a student or volunteer serving on an official committee (or representing a recognized student group), such as a disciplinary or grievance committee, or assisting another school official in performing his or her tasks. A school official has a legitimate educational interest if the official needs to review an education record in order to fulfill his or her responsibility to Stanford or to the student.
 - c) The University discloses education records without consent to officials of another school, in which a student seeks or intends to enroll, upon request of officials at that other school.
 - d) The University may choose to disclose education records (and information drawn from education records) to either supporting parent(s) or guardian(s) where the student is claimed as a dependent under the Internal Revenue Code.
 - e) The University may inform persons including either parent(s) or guardian(s) when disclosure of the information is necessary to protect the health or safety of the student or other persons.
 - f) For students under the age of 21, the University may notify either parent(s) or guardian(s) of a violation of any law or policy relating to the use of alcohol or controlled substances.
 - g) The University must provide records in response to lawfully issued subpoenas, or as otherwise compelled by legal process.

4. The right to file a complaint with the U.S. Department of Education concerning alleged failures by the University to comply with the requirements of FERPA.

The name and address of the office that administers FERPA is: Family Policy Compliance Office, U.S. Department of Education, 400 Maryland Avenue, SW, Washington, DC 20202-4605.

Directory Information

The University regards the following items of information as "directory information," that is, information that the University may make available to any person upon specific request (and without student consent):

- Name*
- Date of birth
- Place of birth
- Directory addresses and telephone numbers
- E-mail addresses
- SUNet ID (as opposed to Stanford Student ID Number)*
- Mailing addresses
- Campus office address (for graduate students)
- Secondary or permanent mailing addresses
- Residence assignment and room or apartment number
- Specific quarters or semesters of registration at Stanford
- Stanford degree(s) awarded and date(s)
- Major(s), minor(s), and field(s)
- University degree honors
- Student theses and dissertations*
- Participation in officially recognized sports or activities*
- Weight and height of members of athletic teams*
- Institution attended immediately prior to Stanford
- ID card photographs

For more information, see Stanford's FERPA website at <https://registrar.stanford.edu/students/student-record-privacy>

Students may prohibit the release of many of the items listed above (except those with an ‘*’) by designating which items should not be released on the Privacy function of Axess. Students may prohibit the release all directory information listed above after an appointment with the Office of the University Registrar to discuss the ramifications of this action. Student theses and dissertations can be restricted through the publishing options and embargo settings students select during submission. Students, faculty, and others with questions regarding student records should contact the Office of the University Registrar.

Consent to Use of Photographic Images

Registration as a student and attendance at or participation in classes and other campus and University activities constitutes an agreement by the student to the University's use and distribution (both now and

in the future) of the student's image or voice in photographs, video or audio capture, or electronic reproductions of such classes and other campus and University activities.

If any student in a class where such photographing or recording is to take place does not wish to have his or her image or voice so used, the student should raise the matter in advance with the instructor.

3.2 REGISTRATION AND STUDY LISTS

The preliminary study list deadline is the first day of classes of each quarter during the academic year. As early as possible, but no later than this deadline, students must submit to the Office of the University Registrar via Axess, a study list to enroll officially in classes for the quarter. Students are expected to be enrolled “at status” by the preliminary study list deadline, meaning that students must be enrolled in sufficient units to meet requirements for their status. Students will be charged a \$200 late study list fee for submitting their study lists after the quarterly deadline.

Study List Changes

Students may add courses or units to their study lists through the end of the third week of classes. Individual faculty may choose to close their classes to new enrollments at an earlier date.

Courses or units may be added only if the revised program remains within the normal load limits. Courses or units may be dropped by students through the end of the third week of classes, without any record of the course remaining on the student’s transcript.

After the Final Study List deadline, appropriate course instructor approval must be obtained. Study List Changes approved after the deadline must be submitted to the School of Medicine Registrar’s Office.

If the instructor allows a student to take an ‘I’ (incomplete) in the course, the student must make the appropriate arrangements for that with the instructor by the last day of classes.

3.3. DATA SECURITY AND PRIVACY (HIPAA)

In compliance with the Privacy Rule of the Health Insurance Portability and Accountability Act (HIPAA), the Stanford University School of Medicine requires all students to complete Patient Privacy Regulation HIPAA Training before starting classes and ANNUALLY thereafter. Stanford’s HIPAA Training is a Web-based training that takes approximately one-and-a-half hours. The Office of PA Studies sends e-mail instructions to all PA students annually.

Pre-clerkship students will not receive credit for the Practice of Medicine course until they have completed this training. Clerkship students will be unable to enter their clerkships until they have completed this training.

To complete the web-based training go to: <https://el.lawroom.com/loginhipaa.asp>

Login ID and password will be sent automatically by the Lawroom system when the Office of PA Studies enters you into Lawroom. Please retain your Lawroom login and password.

Students must adhere to [Stanford Health Care HIPAA Security guidelines](#)

The Data Security Program at the School of Medicine oversees compliance with Stanford policy and federal law. To find out more about the Data Security Program, and to get your computers ready for encryption: med.stanford.edu/datasecurity. See sections 3.12 and 3.15 for additional information on data security and encryption

3.4. PA STUDENT PRACTICE ROLE

The PA Board of California (1399.536. Requirements for Preceptors) states that clerkships (“preceptorships) are supervised by a licensed physician preceptor. Other licensed health care providers approved by a program may serve as preceptors to supplement physician-supervised clinical practice experiences. Each preceptors participating in the preceptorship of an approved program shall:

- (1) Be a licensed health care provider who is engaged in the practice of the profession for which he or she is validly licensed and whose practice is sufficient to adequately expose preceptees to a full range of experience. The practice need not be restricted to an office setting but may take place in licensed facilities, such as hospitals, clinics, etc.
- (2) Not have had his or her professional license terminated, suspended, or otherwise restricted as a result of a final disciplinary action (excluding judicial review of that action) by any state healing arts licensing board or any agency of the federal government, including the military, within 5 years immediately preceding his or her participation in a preceptorship.
- (3) By reason of his or her professional education, specialty and nature of practice be sufficiently qualified to teach and supervise preceptees within the scope of his or her license.
- (4) Teach and supervise the preceptee in accordance with the provisions and limitations of sections 1399.540 and 1399.541.
- (5) Obtain the necessary patient consent as required in section 1399.538.
 - (a) It shall be the responsibility of the approved program to ensure that preceptors comply with the foregoing requirements.
 - (b) For the purposes of this section, "licensed health care provider" includes, but is not limited to, a physician and surgeon, a physician assistant, a registered nurse certified in advanced practices, a certified nurse midwife, a licensed clinical social worker, a marriage and family therapist, a licensed educational psychologist, and a licensed psychologist

During clerkships, PA students may write orders for medications, treatments, etc., provided that

- That any medically-related activity performed by students be under the direction of a [licensed health care provider](#) who has meet criteria as a preceptor as defined above.
- the students are assigned to or are consultants to the service on which the order pertains; and licensed health care provider countersigns all orders before the orders are executed.

The PA Board of California (Laws and Regulations Relating to the Practice of Physician Assistants, Section 3510) also requires that a trainee enrolled in an approved program for physician assistants shall at all times wear an identification badge on an outer garment and in plain view, which states the student's name and the title:

PHYSICIAN ASSISTANT STUDENT or PHYSICIAN ASSISTANT TRAINEE

PA students will identify their signatures with PA-S (PA Student), just as licensed PA identify their signatures with PA-C.

PA students are not to be involved in any portion of the medical care of other PA students.

3.5. DISABILITY ACCOMMODATIONS

Students with disabilities (including, but not limited to, temporary and permanent physical, psychological, or learning disabilities) who may need academic accommodations (including services and auxiliary aids), should register with the [Office of Accessible Education](#) for assessment and approval of such accommodations. Students with documented disabilities are responsible for notifying the PA Program Student Services Officer of their accommodation needs. Students should request accommodations well in advance of when needed. Prior to registration with the Office of Accessible Education, students should not request accommodations directly from faculty members or Clerkship Director.

3.6. ETHICAL CONDUCT OF BIOMEDICAL RESEARCH

As part of student training in the ethical conduct of biomedical research, all MSPA Studies Program students are required to complete the CITI Group 9 module.

The deadline for completion of this requirement for incoming first-year students is **December 1, 2017**.

To complete this training, students must:

- Visit the CITI website: <https://www.citiprogram.org/>
- Register for Group 9 and complete all sections

3.7. EVALUATION COMPLETION REQUIREMENTS

Receiving substantive, representative feedback from students about our required MSPA Studies program curriculum and instructors is crucial in helping the School of Medicine to understand program strengths and weaknesses and identify opportunities to improve the educational experience for future generations of students. In addition, learning to give and receive feedback is an integral part of developing professional skills students will need as future clinicians.

Professionalism Requirements for Completing Evaluations

1. Students must complete all evaluations assigned to them.
2. All evaluations must be completed within 3 weeks of being assigned. (Due dates will be included in the initial evaluation notice.)
3. Required evaluations include:
 - Entry survey as required for grant funding
 - Evaluations of all required pre-clerkship courses
 - Individual evaluations of pre-clerkship faculty lectures
 - Preceptor evaluations for Practice of Medicine (POM)
 - Small group evaluations for POM (peer and small group leader)
 - Evaluations of all required clerkships
 - Individual evaluations of clerkship instructors (complete all assigned evaluations).
 - Scholarly Concentrations evaluations
 - Graduation Questionnaire
4. For the pre-clerkship curriculum, completion rates on evaluations will be reviewed after each quarter has finished and the evaluation due-dates have passed. If a student has not completed at least 75% of the evaluations assigned during the quarter, their advisor will be alerted. The student will receive feedback about professionalism expectations from their faculty advisor.
5. Evaluation completion rates will continue to be checked for each subsequent quarter. If a student completes less than 75% of the evaluations assigned during a subsequent quarter, the advisor will be alerted that there has been a second lapse in professionalism with regard to evaluations. The student will receive additional feedback regarding professionalism expectations and a warning that any further lapse may result in a referral to the Student Progress Committee.
6. If a student completes less than 75% of evaluations in another quarter (third violation), the student will be referred to Student Progress Committee for a professionalism concern.
7. Failure to complete other required evaluations (clerkship, scholarly concentration, etc.) may also lead to advisor being notified. Repeated failure to complete these assigned evaluations may also result in a referral to Student Progress Committee.

Use of Professional Language in Evaluations

1. Comments provided in evaluations should be constructive, respectful and framed using language that the evaluator would want to hear used if he or she was being evaluated.
2. Written comments provided in student evaluations are anonymous (i.e., faculty cannot access information about the identity of an individual student who provides comments in an evaluation form). However, if a student submits a written comment in an evaluation form that violates either a) the Stanford Affirmation or b) the [Stanford University Code of Conduct](#) that comment may be subject to review by committee.
3. Any instructor, staff, or student may request that a comment be reviewed to determine whether it violates the Stanford Affirmation or the Stanford University Code of Conduct.
4. Comments in question will be brought before the MSPA Studies program leadership.
5. If the leadership review determines that the comment violates the Stanford Affirmation or the Stanford University Code of Conduct, a request may be made to try to determine the identity of the evaluation writer. In this case, the Associate Dean of PA Education will contact the vendor where the evaluation data is housed to request that their staff share with us the identity of the student who committed the violation in their evaluation.

6. The student who wrote the comment that is determined to have violated the Stanford Affirmation or the [University Code of Conduct](#) may be asked to revise the comment and/or submit an apology to the faculty member and/or the course or curriculum leader the comment targeted.
7. The student's advisor will be notified of the violation. The student will receive feedback about professionalism expectations and a warning that a second lapse will lead to a referral to Student Progress Committee.
8. If the student submits a second comment that is determined by the Student Progress Committee to have violated the Stanford Affirmation or the University Code of Conduct, the student will be referred to the Student Progress Committee for a professionalism concern.

3.8. INDUSTRY INTERACTIONS POLICY

As a MSPA Studies program student and member of the Stanford Medicine community, you are expected to adhere to the Stanford Industry Interactions Policy (SIIP). The purpose of this policy is to establish guidelines for interactions with Industry representatives throughout the Stanford University Medical Center (SUMC), which is composed of the Stanford School of Medicine, Stanford Health Care and the Lucile Packard Children's Hospital. Interactions with Industry occur in a variety of contexts, including marketing of new pharmaceutical products, medical devices, and hospital and research equipment and supplies on-site, on-site training of newly purchased devices, the development of new devices, educational support of medical students and trainees, and continuing medical education. Faculty and trainees also participate in interactions with Industry off campus and in scholarly publications in a variety of circumstances including consulting activities of various sorts. Many aspects of these interactions are very positive and important for promoting the educational, clinical and research missions of the Medical Center and for translating knowledge and expertise from the faculty to society. However, these interactions must be ethical and cannot create conflicts of interest (COI) that could endanger patient safety, data integrity, the integrity of our education and training programs, or the reputation of either the faculty member or the institution. Individuals must consciously and actively divorce clinical care decisions from any perceived or actual benefits expected from any company. It is unacceptable for patient care decisions to be influenced by the possibility of personal financial gain.

The full policy is available online at <http://med.stanford.edu/coi/siip/policy.html>.

3.9. LEAVES OF ABSENCE AND DISCONTINUATION AND REINSTATEMENT

The following is quoted from the [Stanford University Registrar's Office website](#) (8/21/2017):

A leave of absence is required by students who wish to withdraw from the current quarter, or who do not wish to attend a future quarter (*Excluding summer as the starting term). For students with multiple degree programs or majors, leaves of absence are only granted for all programs and majors. Leaves will not be granted for more than one year at a time. A leave of absence from your program may not exceed a cumulative total of two years. See the Stanford Bulletin for additional information.

- [Graduate Leaves of Absence and Reinstatement](#)

Students planning a leave of absence should download and fill in the [Leave of Absence Form \(pdf\)](#).

Students should review all possible ramifications of taking a leave of absence. Students are encouraged to check with all other appropriate University offices (e.g., Housing Assignments, Financial Aid, Student Financial Services, Bechtel International Center, Vaden Health Center) to determine how taking a leave of absence impacts their status with these offices. Students on leave of absence are not registered and, therefore, do not have the rights and privileges of registered students. They cannot fulfill any official department or University requirements during the leave period.

Graduate students are subject to special registration requirements; see the "[Leave of Absence](#)" section of the *Stanford Bulletin*.

Deadlines

Before a given quarter

The deadline to submit a Leave of Absence for a full refund is the **Preliminary Study List deadline**. To ensure a full refund, submit a fully completed and properly endorsed leave of absence by the Preliminary Study List deadline.

During a given quarter

The deadline to submit a Leave of Absence for a partial refund is the **Term Withdrawal deadline**.

Graduate students must submit a leave of absence form to the Student Services Center. All courses for that term are dropped if the last day of attendance is prior to the Final Study List deadline. Axxess does not allow students to drop all courses themselves. Submitting a Leave of Absence form after the Final Study List deadline results in 'W' notations on the transcript for all registered courses.

After the term withdrawal refund deadline (60% of the quarter), a leave of absence is granted only for approved health or emergency reasons with supporting documentation.

Refund Policy

Leaves of Absence Before the First Day of Classes

Students who take a leave from the University voluntarily on or before the first day of classes will receive a full tuition refund. Such students are not included in University records as registered for the term.

Leave of Absence After the First Day of Classes

An active student in good standing who voluntarily takes a leave from the University after the first day of instruction, but before the term withdrawal deadline, receives a pro rata refund. There is no refund after the Term Withdrawal deadline. Courses in which the student was enrolled after the Final Study List deadline appear on the student's record and show the grade of 'W' (withdrew).

Student Status While on Leave

Academic Status

Students on an approved leave of absence retain their admitted student status; however, they are not registered and therefore do not have the rights and privileges of registered students. Students on leave may complete course work for which an 'Incomplete' grade was reported in a prior term and are expected to comply with the one-year maximum time limit for resolving incompletes.

Graduate Students

Degree programs and candidacy must be valid in the term of reenrollment. Leaves do not delay candidacy or master's program expiration dates. Failure to return as scheduled or to secure an extension of a prior leave will result in cancelation of registration privileges and a substantial reinstatement fee. Official department or University requirements (e.g., qualification examinations) cannot be fulfilled during the leave period.

Submitting the Leave of Absence Form

Signatures

Students are required to sign the leave of absence request. Graduate students require a signature from one of their major department chair, director of graduate studies, or school dean. International students (F-1 & J-1 visa holders) need to obtain a signature from a Bechtel International Center adviser.

International Students

Nonimmigrant students and their dependents must maintain an appropriate visa status at all times. An absence from the U.S. of 5 or more months will result in termination of F-1 or J-1 status. If a student remains outside the U.S. for 5 or more months, a new I-20 or DS-2019 is necessary for re-entry. For further information contact the I-Center.

Submission of Form

Graduate students submit the form to the Student Services Center.

Financial Aid

Students should notify the Financial Aid Office of their intent to leave the University if they are receiving any type of aid, particularly to protect eligibility for certain programs and funds such as Cal Grants while on leave. A portion of any refund is returned to the sources of aid. Students should clear all outstanding bills with the Student Services Center before returning to campus. Graduate students may apply for loans four weeks before the first day of classes in the quarter in which they plan to return. See the [Financial Aid](#) website for detailed application requirements.

Loans

Students must notify all lenders of their intent to leave the University and request exit information before leaving campus (Stafford and private loans through the Financial Aid Office; Perkins and Institutional loans through Student Financial Services). Students are cautioned to consider carefully the effect of leaves on their loan status; lenders may count the leave period as part of the total grace period. Stanford will provide enrollment status to the National Student Loan Clearing House. Students who receive loan disbursements directly may be required to repay portions of their loans.

University Housing

University housing is generally not available to students on leave. Students with questions about room-and-board refunds should contact the Stanford Housing Assignment Services or the central office of the University Dining Services (for board refunds). Students with medical disabilities that require University medical services and students approved for the Childbirth Accommodation may petition to remain in campus housing for one term while on leave. Approval requires good academic standing, department recommendation, and no outstanding financial obligations to the University. Address questions to [Housing Assignment Services](#).

Health Insurance

Contact Vaden Health Center at 650-723-2135, or by email at healthinsurance@stanford.edu, for information regarding Cardinal Care coverage and/or Dependent Plan Insurance during a student leave of absence. Additional information can be found on the [Vaden website](#).

Library

Contact the Privileges Division, Green Library, to determine whether you may retain access and/or borrowing privileges while you are on leave.

Graduate Student Procedures

1. Obtain the [Leave of Absence Form \(pdf\)](#).
2. Discuss plans and obtain signature from major department chair, Director of Graduate Studies, or school dean.
3. International students must discuss plans and obtain a signature from the Bechtel International Center.
4. Submit completed and signed Leave of Absence form to the Student Services Center, Tresidder Memorial Union, 2nd Floor, Fax: (650) 721-1585, <http://helpsu.stanford.edu/?pcat=ssc>

Graduate students may not take a leave of absence during their first quarter of enrollment.

Extending a Leave or Returning from a Leave at a Different Time

- A Leave of Absence form must be completed (with the extension portion of the form filled out) by a student who wishes to extend an initial leave of absence.
- For graduate students, an [Application for Reinstatement in Graduate Study \(pdf\)](#) must be submitted by a student who did not submit a Leave of Absence form and was discontinued for no enrollment. Both an application fee and reinstatement fee apply.

3.10. MALPRACTICE LIABILITY FOR MSPA STUDIES PROGRAM STUDENTS

Stanford assumes the financial responsibility for medical malpractice liability incurred by registered MSPA Studies program students when participating in any clinical activities as part of their formal educational program at the Stanford University Medical Center, or at other Stanford---approved medical facilities. However, it is very important that Stanford MSPA Studies program students be certain they are protected when participating in clinical work in special situations. Therefore, students should consult the Director of Clerkship Education if they will be:

1. Taking a clinical clerkship at another hospital or PA school in the United States while not paying tuition and not registered as a PA student at Stanford.
2. Taking a clinical experience in a foreign country while not paying tuition and not registered at Stanford.
3. Participating in any volunteer clinical work away from Stanford.
4. Working in a private physician's office.
5. Participating in any clinical activities not at Stanford that are not covered in (1) through (4) above.

Stanford reserves the right without prior notice to modify its practices with regard to financial responsibility for medical malpractice liability.

3.11. MEDICAL HEALTH REQUIREMENTS AND IMMUNIZATIONS

All matriculated Stanford students must complete the [Entrance Medical Requirements](#) at their own expense. These requirements are established and monitored by [Vaden Student Health Center](#).
Annual Tests and Immunizations

The following immunizations are required of each MSPA Studies program student ANNUALLY

- Tuberculosis (TB): Student may choose to have either a PPD test (requires a return visit to have the test result read) or Quantiferon.
- Influenza: All MSPA Studies program students must be immunized against influenza.

Immunizations can be performed at the following location:

Vaden Student Health Center

866 Campus Drive
Stanford, CA 94305-8580
(650) 498-2336

Additional tests or immunizations required by specific clerkships require a note of explanation from the Director of Clerkship Education. The note should be presented to either Vaden or OHC before the test or immunization is received.

Annual immunizations required by the School of Medicine and its clerkships are performed at the School of Medicine's expense.

3.12. POLICIES AND RESOURCES FOR ENCRYPTION AND SECURING DEVICES

As all MSPA Studies program students will at some point in their training access Protected Health Information (PHI), they should consistently attest to storing restricted data on all devices, and have their devices appropriately encrypted and fully compliant with School of Medicine data security standards. This applies to all MSPA Studies program students, whether or not they are actively working with PHI (e.g., during parts of the MSPA Studies program curriculum that do not involve clinical work, when stepping out of the curriculum to obtain another degree, etc.).

Attestation and data security compliance are a professional expectation; failure to correctly attest and/or have all devices encrypted by stated deadlines will result at a minimum in a notification to a student's advisor. If attestation and encryption is still not completed following such a notification, the student may be referred to the Student Progress Committee.

Personal Responsibility

Legally, you are personally and fiscally responsible for any information disclosure from your computer or mobile devices, whether accidental or not. IRT Security is here to help you protect yourself: encryption is a one-time, necessary step you can take now to prevent problems in the future.

Data Classification: What Data Must Be Encrypted?

Stanford University has classified information assets into categories to determine which security precautions must be taken to protect it against unauthorized access. Data may be classified as High, Moderate or Low Risk. Common types of High Risk data include:

- Protected Health Information (PHI)
- Health insurance policy ID numbers
- Social security numbers
- Credit card numbers
- Financial account numbers
- Export controlled information under U.S. laws
- Driver's license numbers
- Passport and visa numbers
- Donor contact information and non-public gift information

For every School of Medicine affiliate who might use or store this type of data, **every** device used for Stanford work (even if only for email) must be verifiably encrypted. If you have a device that cannot meet the encryption requirements, it must not be used for Stanford work. This applies to both Stanford-owned as well as personally-owned devices.

For more information on the University risk classification standards, please visit <http://dataclass.stanford.edu>.

For more information on encryption requirements visit <http://med.stanford.edu/irt/security/encryption-main.html>

Because personal computing devices are becoming more and more portable-laptops, smart phones, USM thumb drives, etc.-securing the sensitive information stored on those devices is more important than ever. Based on government regulations, individuals may be held personally and fiscally liable in the event of information disclosure. Students are expected to review and follow the policies outlined below:

- [Mobile Device Management](#)
If you have an iOS or Android device that you use for Stanford work, there's an easy way to set up and maintain proper security practices on your device. Stanford uses the application AirWatch to provide [Mobile Device Management \(MDM\)](#). The application is free to install, and automatically configures your device to be optimized for the Stanford environment—from email settings to security settings. Visit the link provided above for more information about MDM at Stanford.
- [Stanford School of Medicine Course Content Access and Appropriate Use Policy](#)
Stanford students may only use Stanford University School of Medicine course materials as intended for curriculum and course-related purposes. These materials are copyrighted by the University or others. Access to this content is for personal academic study and review purposes

only. Unless otherwise stated in writing, students may not share, distribute, modify, transmit, reuse, sell, or disseminate any of this content.

- [High Risk Data and HIPAA Compliance](#)

Students must ensure all devices used for Stanford work fully comply with Stanford's security requirements and HIPAA guidelines. As medical students are expected to interact with High Risk data (such as PHI), all devices must be verifiably encrypted. The University's BigFix application is used to report the encryption status of laptops and desktops regularly. MDM (AirWatch) is used to report the encryption status of mobile devices. Additional requirements include ensuring a password is set and that all backups are encrypted.

- [Stanford University Computer and Network Usage Policy](#)

Students must respect copyrights and licenses, respect the integrity of computer-based information resources and refrain from seeking to gain unauthorized access, and respect the rights of other information resource users.

Policies and guidelines around appropriate use of iPads may vary among clerkships and hospital sites. Therefore, students must review and follow the policies and guidelines set by the Clerkship Director and by each hospital site. The privilege of using the iPad may be rescinded at any time. Students who do not follow policies and guidelines for appropriate iPad use may be asked to return the device prior to completing the clerkship rotation.

3.13. SAFETY TRAINING

Bloodborne Pathogens Training

The California OSHA Bloodborne Pathogens Standard requires that all individuals with occupational exposure to blood, blood products, or other potentially infectious materials complete a Bloodborne Pathogens training course ANNUALLY. This requirement applies to all MSPA Studies program students. Stanford University Bloodborne Pathogens Training is a Web-based training that takes approximately one-half hour. The Office PA Education sends e-mail instructions to all MSPA Studies program students annually.

Pre-clerkship students will not receive credit for POM until they have completed this training. Clinical students are not able to enter the Clerkship until they have completed this training.

To complete the web-based training, this course can be accessed through STARS in [AXESS](#) (log-in with your SUNet ID and password)

- Bloodborne Pathogen (EHS-1600)
- Recertification Bloodborne Pathogen (EHS-1601)

Safety and Emergency Preparedness Training

All MSPA Studies program students are required to complete the following three online courses:

- General Safety and Emergency Preparedness (EHS-4200)
- Biosafety (EHS-1500)
- Chemical Safety for Labs (EHS-1900)-required of all PA students in laboratories. *Compliance is monitored by the lab administrators*

These courses are accessed through STARS in AXESS. Pre-clerkship students will not receive credit for Practice of Medicine until they have completed this training.

3.14. STANFORD MEDICINE POLICY FOR THE REMOVAL AND TRANSPORT OF PHI

PURPOSE

The purpose of this policy is to set forth controls related to removal of Protected Health Information (PHI) or Personal Information (PI) from the medical center and transport of medical information within the medical center. This policy does not replace IT Security policies for protection of electronic patient information including requirements related to emailing patient information.

POLICY STATEMENT

Stanford Health Care (including all SHC-affiliated locations), Lucile Packard Children's Hospital (including all LPCH-affiliated locations), and the Stanford University School of Medicine (collectively, "Stanford Medicine") are committed to complying with state and federal requirements related to the privacy and security of patient information. Workforce Members at Stanford Medicine, as well as those with whom Stanford Medicine conducts its business, have a legal and ethical responsibility to maintain the confidentiality, privacy and security of all PHI/PI, to protect PHI/PI at all times and to guard against the loss of, or unauthorized access to, use or disclosure of, PHI/PI when removing it from the medical center up through its return, and when transporting it within the medical center. Such removal and transport of PHI/PI shall not occur in a manner inconsistent with this policy. Principles and procedures in this policy apply to PHI/PI in all media, including paper and electronic format. Consistent with other policies, PHI/PI that is removed from the premises should never be verbally discussed with any unauthorized person.

DEFINITIONS

Protected Health Information ("PHI") is defined as information that (i) is created or received by a health care provider, health plan, employer, or health care clearinghouse; (ii) relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present or future payment for the provision of health care to an individual; and (iii) that identifies the individual, or provides a reasonable basis to identify the individual. PHI does not include employment records held by Stanford Medicine in its capacity as an employer, or information that has been de-identified in accordance with the HIPAA Privacy Standards.

Personal Information (“PI”) is a person’s first name and last name, or first initial and last name, in combination with any one of the following data elements that relate to such person:

- Social Security Number (SSN);
- Driver’s license or state-issued identification card number; or
- Financial account number, credit or debit card number (e.g., health insurance policy number).

Personal information shall not include information that is lawfully obtained from publicly available information, or from federal, state or local government records lawfully made available to the general public.

De-identification is defined as the process by which PHI is stripped of specific data elements, as defined by HIPAA, in order to assure that personal identities cannot readily be identified from data sets.

Workforce Members are defined as faculty, employees (including temporary employees), researchers, volunteers, trainees, and other persons whose conduct, in the performance of work, is under the direct control of Stanford Medicine, whether or not they are paid by Stanford Medicine.

Supervisor: For the purposes of this policy, Supervisor is used in the context of approval for a Workforce Member to remove PHI/PI from the medical center or transport PHI/PI within the medical center. It is understood that from time-to-time the duties of senior operational leadership (Directors and above) and faculty will require them to conduct Stanford Medicine business for which this policy requires Supervisor approval. Such approval for senior operational leadership and faculty is self-granted, provided that they have ensured that all safeguards and other privacy and security controls are in place. For research activities, Supervisor means the Principal Investigator or Protocol Director.

Medical Center is any location owned, leased or operated by Stanford Medicine, wherever located.

PRINCIPLES

1. PHI/PI shall be treated as confidential and shall be safeguarded according to Stanford Medicine policies at all times.
2. Treatment, payment, healthcare operations, education, IRB-approved research and other Stanford Medicine business involving the permissible use or disclosure of PHI/PI should be conducted within the medical center whenever feasible. Removal of PHI/PI from the medical center by Workforce Members shall occur solely for job-related purposes and with the approval of the Workforce Member’s Supervisor. Removal of PHI/PI from the medical center should not be approved for reasons related to the convenience of the Workforce Member, but rather for instances where the work requiring the PHI cannot practically be conducted on-site in a timely manner, and only after due consideration of alternative ways to remotely perform the work, such as VPN access to PHI/PI or secure scanning of PHI/PI for access from the remote site.
3. The Workforce Member taking the PHI/PI off-site and the approving Supervisor are responsible for ensuring that only the minimum amount of PHI/PI necessary to perform the off-site work is approved and removed from the medical center. De-identified patient information or limited data sets shall be used whenever possible. The approving Supervisor and the Workforce Member removing the PHI/PI, or the Workforce Member transporting the information within the medical

center, should be able to account for every element of PHI/PI removed from or transported within the medical center, whether electronic or paper, and should be able to reconstruct the exact PHI/PI that was removed from or transported within the medical center.

4. Appropriate safeguards shall be diligently followed regarding secure transport of PHI/PI off-site and within the medical center. PHI/PI must be in the immediate personal possession of the workforce member at all times during transport, for example, from the time the PHI/PI is taken from the medical center to the time of arrival at the off-site location, or from location-to-location within the medical center.
5. Appropriate safeguards shall be diligently followed regarding securing PHI/PI at the off-site location. PHI must be secured in a manner so that it cannot be accessed by unauthorized individuals.
6. PHI that is lost, stolen, accessed viewed or reviewed by unauthorized individuals, or the confidentiality of which has been otherwise compromised, shall be reported immediately by the Workforce Member to the Privacy Office for their institution for appropriate investigation, including the filing of police reports when appropriate. Reports must be made immediately, including nights and weekends, to:

SHC/LPCH Privacy Office:

From off-campus phone: 650-723-8222; Pager 25584

From any Stanford Medicine phone: 38222; Pager 25584

privacyofficer@stanfordmed.org,

Privacy Officer (during regular business hours) at 650-724-2572

School of Medicine Privacy Office:

medprivacy@stanford.edu

650-725-1828

PROCEDURES

1. PHI should be saved or stored on secure medical center network servers whenever feasible. Saving or storing PHI/PI on computer or laptop hard drives, personal laptops or other personal devices, flash drives or USB drives, external drives, and other removable media is prohibited unless the device is encrypted to Stanford Medicine standards, password protected and meets other applicable Stanford Medicine security requirements.
2. Before the decision is made by the Workforce Member and the Workforce Member's supervisor to remove electronic PHI from the premises, IT Security must be contacted to determine whether a viable alternative is available to remotely access the PHI/PI needed to perform the job-related work.
3. PHI/PI should not be printed at off-site locations, for example, home or public printers, unless a Stanford Medicine business need exists to do so.

4. Safeguards must be in place to prevent unauthorized individuals, such as family members, conference attendees or the general public, from viewing or accessing PHI/PI at off-site locations.
5. PHI/PI must be safeguarded during transport and in the personal possession of the Workforce Member at all times. PHI shall not be left unattended in publicly-accessible locations.
6. PHI/PI transported for purposes such as off-site storage, office relocation and new location openings shall be safeguarded to prevent the loss of or unauthorized access to PHI/PI. Only medical center approved off-site storage locations may be used for storing records, documents and electronic media containing PHI/PI. Records and documents containing PHI must be inventoried before off-site storage. See Appendix B for securing documents and records containing PHI/PI for off-site storage or office/department relocation

COMPLIANCE

1. All Workforce Members are responsible for ensuring that individuals comply with those policy provisions that are applicable to their respective duties and responsibilities.
2. Workforce Member failure to protect the privacy, confidentiality, and security of patient information is detrimental to the mission, goals, and operations of Stanford Medicine. Serious consequences can result from failing to protect patient information, up to and including termination.

Violations of this policy will be reported to the Privacy Office and any other department as appropriate or in accordance with applicable Stanford Medicine policy. Violations will be investigated to determine the nature, extent, and potential risk to Stanford Medicine.

3.15. STANFORD UNIVERSITY SCHOOL OF MEDICINE EDUCATION RESEARCH INITIATIVE

All research involving PA students or the MSPA Studies program requires approval by the student's faculty advisory, the scholarly concentration lead and the Associate Dean for PA Education.

Proposals can be written at any time throughout the year and must be submitted to the faculty advisor and the Associate, scholarly concentration lead and the Dean of PA Education for review and approval.

Submissions should be **no more than 2 pages** (single-spaced) and must include the following information:

1. Title of project
2. Research question(s) and specific aims
3. Hypotheses (if applicable)
4. Background information and preliminary literature review (1-2 paragraphs, include references at the end)
5. Target population of the research activity
6. Research activity setting
7. Proposed methods (observation, intervention)
8. Intended data analysis plan (qualitative, quantitative, mixed methods)

9. Statement of protection of research subjects or proposed plan, including Stanford IRB review and approval if already obtained, or exemption statement if not considered human subjects research
10. Study personnel (including research mentor(s) if applicable)
11. Funding source (if applicable)

In addition, the requester should include a statement of support from the faculty course or clerkship/residency director of the study setting, if applicable. Ideally, you should make every effort to collaborate with those individuals.

Important: Straightforward evaluation of existing curriculum for the purpose of program improvement is generally not considered research and would not require review and prior approval. **In general, any data gathering and analysis with the intent to disseminate findings to a broader scientific community would be considered research and should be reviewed and approved by the Associate Dean of PA Education, in addition to review by the [Stanford Human Subjects Research and Institutional Review Board](#).**

3.16. SURGICAL PROCEDURES FOR MSPA STUDIES PROGRAM STUDENTS

A PA student must meet all of the following conditions and criteria in order to scrub and/or participate directly in a surgical procedure.

1. Each Stanford PA student must:
 - a. Complete the scrub training
 - i. Initial training: Full course with knowledge test and scrubbing/gowning checklist.
 1. Red sticker for pre-clerkship students. Initial training valid for one year from training date.
 2. Green sticker for clerkship students. Initial training valid for two years from training date.
 - ii. Clerkship students:
 1. If pre-clerkship trained (red sticker) students will be required to complete an online course with medical knowledge test and scrub/gowning verification to convert to clerkship (green) certification
 - iii. Students scrub training certification will require that this sticker be visible on their name badge.
2. The lists of names and documentation to attest meeting requirements to scrub received from each surgical division/department are kept with the OR education/administration office
3. Students may scrub and participate in surgical cases only if he/she has an OR-approved sticker affixed on the name badge as a proof that the student underwent appropriate training in aseptic techniques.
4. If a student's name is not present on the list submitted by his/her respective surgical division/department, he/she will be denied presence in the OR and be dismissed until credentials are verified.

3.17. UNIVERSAL PRECAUTIONS AND NEEDLESTICK PROTOCOL

If you are stuck by a needle or splashed with bloody fluid (on to your mucous membrane or wound), this is what you do immediately!

1. CLEANSE: Rinse copiously.
2. CALL: Call the needlestick hotline 24/7/365 from **all hospital sites**. Pager 1-STIX (1-7849). If in SHC/LPCH dial 222 then follow prompts to page. If in SCVMC, PAVA, Cardinal Free Clinics, dial 723-8222 and then follow the prompts to page.

A trained professional will call you back, decide if you need post-exposure prophylaxis and work with you to get medication expeditiously from a pharmacy nearest to you. Most students do **not** need to go to the Emergency Department or Occupational Health initially. There is **no charge if you use the 1-STIX hotline** for blood tests, medication or initial follow-up care.

Follow up appointment may be needed but this will be recommended by the 1-STIX professional staff person. This has been set up **specifically for Stanford MD AND PA students** and employees so that it is **QUICK, CONFIDENTIAL and with NO CHARGE**. Records are kept confidential in accordance with applicable laws so that it does **not** become a part of your health care record. This is a protection for you.

If you have any problems with the hotline, please call Dr. Rebecca Smith-Coggins immediately. Dr. Smith-Coggins can be reached through the hospital page system at 650-723-6661 at pager 13481.

If you choose to go to the Emergency Department, the hospital **will** charge you and it **will** go on your health care record. Please call the needlestick hotline first.

You should also notify the MSPA Studies program, Director of Clerkship Education within 1 business day.

Universal Precautions apply to the handling of all blood, body fluids, and human tissue. Body fluids, also known as other potentially infectious materials (OPIM), include: semen, vaginal secretions, cerebrospinal, synovial, pleural, peritoneal, pericardial, and amniotic fluids, feces, urine, sputum, nasal secretions, saliva, tears, vomitus or any other body fluid or tissue that is visibly contaminated with blood. Appropriate protection including gloves, mask and gown should be worn to protect oneself from exposure.

3.18 STANFORD HEALTH CARE/LUCILE PACKARD CHILDREN'S HOSPITAL COMPUTER ACCESS FOR PA STUDENTS (EPIC)

As a Stanford PA Student (registered in a clerkship for credit and/or doing a research project approved by your Advisor), you will/may need access to the Epic systems in order to access patient information at Stanford Health Care (SHC) and/or Stanford Children's Health (SCH).

Obtaining Access to EPIC

Am I Compliant?

1. You must be compliant with your Stanford University HIPAA/PHI training(s) in [LawRoom \(https://el.lawroom.com/loginhipaa.asp\)](https://el.lawroom.com/loginhipaa.asp).
2. You must be compliant with the [Data Security Program \(https://med.stanford.edu/datasecurity/\)](https://med.stanford.edu/datasecurity/)

Hospital Computer Access

1. Contact the Office of PA Education (OPAE) if you need hospital computer access:
 - a. You need access because you will be entering clinics for Practice of Medicine (POM).
 - b. You need access because you're doing a research project and your advisor said you would require access to Epic.
2. The Office of PA Education will submit your information to the Medical Staff Office (MSO) to start the process by credentialing you.
3. Once MSO notifies OMSA that your dictation number/MSO number has been enabled, it will take approximately 24 hours for your credentials to become active.
 - a. For SHC EPIC Access: You will receive an email from HealthStream (www.healthstream.com/hlc/stanford) with instructions to complete the EPIC training course "Basics 650_Medical Students". The module will take approximately 93 minutes to complete. Please complete the training at your earliest convenience.
 - i. OMSA will submit a request to the IT department (Access Control and EPIC Security) to assign you an SID and grant SHC EPIC access. It may take up to 72 hours for your SID to be assigned and up to an additional 72 hours for your EPIC access to be granted.
 - ii. Once you receive your access confirmation email, call the Stanford Digital Solutions Service Desk at (650) 723-3333 to receive a temporary password. This password will only be valid for 24 hours; if it expires, you will need to call again.
 - iii. If you are trying to initially access EPIC remotely through Citrix, when you call the Service Desk for your password let them know that you are remote so that they can create a "permanent" password. Temporary passwords will not work remotely.
 - iv. For SCH EPIC Access: You may call the Stanford Children's IR Service Desk at (650) 498-7500 after your dictation number is assigned to request your username and password. SCH EPIC utilizes different login credentials than SHC EPIC. If you already have SHC EPIC access, you can call the SCH Service Desk and request your username and password at any time. You should use specific language, such as, "I am a Stanford PA student who currently has EPIC access and I need my username and password." They will ask for an identifier, such as your SID or social security number.

If Your Account is Inactive

There are a few reasons that your EPIC account may be inactive:

- You have not completed the HealthStream EPIC training module. Please contact ITSEducation@StanfordHealthCare.org for assistance.
- You completed the module within the past 48 hours. It will take up to 48 hours for your access to be activated following completion of the training module. Contact the Service Desk at (650) 723-3333 if you have an urgent need to access EPIC.
- Your EPIC credentials have expired. If you do not log in for 90 days, your EPIC access will be deactivated. Please contact the OMSA to reactivate your access.

Who to Call?

Stanford Health Care Service Desk

Phone: (650) 723-3333

Email: Access-Control@stanfordmed.org

Stanford Children's Health Service Desk

Phone: (650) 498-7500

Email: DS-Security_LPCH@Dell.com

ITS Education - EPIC Training

Phone: (650) 723-6040

Email: ITSEducation@StanfordHealthCare.org

3.19. SCHOOL OF MEDICINE LEARNING SPACES

General Learning Spaces

All Learning Spaces (exceptions are the Goodman Immersive Learning Center [see below] and the Berg Conference Center) may be booked by students for study, seminar discussions, etc. These spaces include EdTech classrooms in: LKSC (floors 1-3), MSOB, Alway, CCSR and HRP.

Students are advised that after-hours activities that may require housekeeping will need to be planned in advance. Rooms must be returned to their original condition.

<http://med.stanford.edu/edtech/policies.html>

Goodman Immersive Learning Center (ILC)

The Goodman Immersive Learning Center in the LKSC may be scheduled only by course coordinators and/or faculty for guided learning exercises and activities. The hours of operation of the ILC are 8 am – 6 pm Monday – Friday.

<http://cisl.stanford.edu/learn-about-our-facilities.html>

Safety and Emergencies

In the case of an Emergency (fire, security, medical, chemical spill, etc.) call X-C286.

If evacuation is necessary, please move to designated evacuation-meeting locations outside of the buildings and look for the Building Response Team in the bright vests.

Cell phone reception may be limited in basement facilities.

TA Training: All TAs must adhere to TA lab training and safety policies that are referenced in the TA Handbook.

3.20. ABSENCE POLICY AND EXPECTATIONS

It is the student's professional responsibility to review the absence policy and specific attendance requirements for all courses, clerkships and curricular activities in which he/she is involved. Students should avoid scheduling or participating in activities that directly conflict with required courses or clerkships.

Required Courses

1. Students are expected to be present at ALL required-attendance sessions and final exams. It is the student's responsibility to be aware of the attendance expectations for each course.
2. If a student anticipates missing a required-attendance session, he/she must communicate and receive approval from the course director at a minimum of two-weeks in advance. In cases involving illness and unexpected emergencies, students should notify their course director as soon as possible submit a notification form (see below) thereafter.
 - a. All students are required to complete the [online notification form](#) regardless of whether the absence has been approved. If the student and course director are unable to agree on the appropriateness of an absence for a required session, they are encouraged to schedule a meeting with the course director and their faculty advisor to discuss the absence further.
 - b. Approval of all absences is at the discretion of the course director.
 - c. If an absence is not approved it is expected that the student will make the necessary arrangements to change his/her schedule to be present.
3. Students are responsible for the content and work associated with all missed sessions. Students are also expected to meet the participation requirement and contribute to their group's learning, even for sessions missed, and must work out an equitable solution that balances the individual student's needs with the needs of the group. Under no circumstances will an absence relieve a student of meeting all of the academic requirements of the course. If the absence request conflicts with a session or sessions that cannot be otherwise made up or completed, the student is advised that the absence may affect his or performance evaluation in the course.
4. The following are considered professionalism issues that may result in a referral to Student Progress Committee
 - i. Absence from a required session without obtaining advanced approval from the course director
 - ii. Failure to communicate with the course director
 - iii. Failure to complete the online absence notification
 - iv. Trend in number of absences across courses
 - v. Tardiness for required sessions without obtaining advanced approval from the course director.

Please note that each student is responsible for requesting approval for his or her own absence; no group approvals will be granted.

Required Clerkships

Students are expected to attend 100% of all scheduled clerkship activities.

Students who miss more than 10% of scheduled time - for any reason - will be required to make up missed time.

Students who miss more than 20% of the total duration of a clerkship – for any reason – will be asked to reschedule the clerkship.

Students must contact the Clerkship Director to obtain advance approval for any unavoidable absence from the clerkship. Unanticipated absences for illness or emergency must be communicated to the Clerkship Director as promptly as possible.

If a student is absent without obtaining advance approval from the Clerkship Director; the absence will be recorded and reported to the Student Progress Committee.

Approval of all absences is at the discretion of the Clerkship Director.

If an absence is not approved, it is expected that the student will make the necessary arrangements to change his/her schedule to be present.

Failure to communicate with the Clerkship Director about unavoidable absences is a potential reason for failing the clerkship.

Students are expected to seek necessary health care to maintain their physical and mental well-being. Examples of necessary health care include preventive health services, visits for acute illness, ongoing care for chronic illnesses, physical therapy, and counseling and psychological services. Consistent with their rights under University policies and the law, students have a right to privacy when seeking care.

For planned absences related to healthcare, students must contact the Clerkship Director, site director, and preceptor or patient care team in advance to coordinate time away from the clerkship. Students need not disclose the specific type of healthcare that is being sought. A student's decision to seek healthcare during a clerkship should have no impact on his or her performance evaluation.

3.21. N95 RESPIRATOR MASK FIT REQUIREMENTS FOR PA STUDENTS

All MSPA students participating in clinical activities are required to be fit for a N95 Respirator on an annual basis. N95 filtering face piece respirators are air-purifying respirators certified by the National Institute of Occupational Safety and Health (NIOSH) that protect against airborne contaminants (i.e., dusts, fumes, microbial agents such as tuberculosis bacteria & flu virus). As a PA student participating in clinical activities, you may be required to wear N95 for tasks such as entering isolation rooms and other activities involving close contact with potentially infected persons.

The Stanford University Department of Environmental Health & Safety oversees the mask fit process and per Cal/OSHA guidelines, PA students will be approved after successfully completing the following:

1. **Medical Evaluation/Clearance:** to determine if users are physically fit to wear a respirator.
2. **Training:** to ensure users are familiar with N95 Respirators, their proper use and protective limitations. Training consists of reviewing the guidelines and taking and successfully passing the training quiz and is required on an annual basis.
3. **Fit-testing:** to determine which respirator/model size provides the proper fit for the user. Such fit-test is required on an annual basis. For the fit-tests, students must be clean shaven-no mustaches, beards or stubble since this will interfere with the respirator seal. Students who are not clean shaven will not be fit tested. For those students that request an exemption to the clean shaven guidelines, they will need to complete a waiver form and additional online training. Please contact the Office of Medical Education for additional details.

The Office of PA Education will coordinate the process for scheduling students for their fit-testing which typically takes place in the Autumn Quarter annually. Students who do not successfully complete all steps of the fit test process may not be allowed to participate in clinical activities until this is completed.

3.22. SCHOOL OF MEDICINE DRESS CODE GUIDELINES FOR THE CLINICAL SETTING

Any time students see patients, they should adhere to the dress code described below. **Dress code guidelines must be followed at all encounters with patients, standardized or real.**

Students are expected to dress professionally and conservatively. Attire typically worn to class or lecture will in many cases not be appropriate. **Hospital scrubs are not considered professional attire for patient encounters.**

- **Always bring your white coat.** Your coat must be clean, pressed and worn at all times.
- Wear your name tag in an easily viewable location (collar of coat, top, or dress).
- Do not wear cologne or perfumes.
- Tattoos should be covered.
- Jewelry should be minimal and understated.
- Clothing should not have rips, tears or frayed edges.
- Do not expose your midriff.
- Clothing should allow for an appropriate range of movement, and should not be flashy or draw attention.
- Button-down shirts (with or without ties), professional tops, or blouses should be worn and should avoid low-cut necklines.
- Tank tops, T-shirts, and thin or “spaghetti-style” straps on tops are not appropriate.
- Pants, slacks, khakis, skirts, or dresses are appropriate. Legs should be covered to the knee.
- Do not wear jeans or shorts
- Dress shoes, low heels, or flats should be worn. Avoid open-toed shoes, flip-flops, tennis shoes, or porous shoes.

3.23. SCHOOL OF MEDICINE CRIMINAL BACKGROUND CHECK POLICY

The School of Medicine requires Criminal Background Checks for all PA students.

The following outlines the rationale for performing Criminal Background Checks:

To facilitate the placement of students into clinical training programs

To bolster the public's continuing trust in the medical profession.

To enhance the safety and well-being of patients.

To ascertain the ability of accepted applicants and enrolled PA students to eventually become licensed as PAs.

To minimize the potential liability of medical schools and their affiliated clinical facilities.

4.0. CURRICULUM

4.1. CURRICULUM SCHEMATIC

Autumn	Winter	Spring	Summer
Year 1			
Foundations of Clinical Medicine	Principles of Clinical Medicine I	Principles of Clinical Medicine II	
Clinical Anatomy	Clinical Therapeutics I	Clinical Therapeutics II	
Practice of Medicine I	Practice of Medicine II	Practice of Medicine III	
Cells to Tissues			
Embryology			
PAs in Health Care I: Introduction to the PA Profession			
Scholarly Concentrations			

Autumn	Winter	Spring	Summer
Year 2			
Principles of Clinical Medicine III	Principles of Clinical Medicine IV	Clinical Clerkships	
Practice of Medicine IV	Practice of Medicine V		
Clinical Therapeutics III	Clinical Therapeutics IV		
	Advanced Cardiac Life Support		
	PAs in Health Care II: Clinical Transitions		
Scholarly Concentrations			

Autumn	Winter	Spring	Summer
Year 3			
Clinical Clerkships			
	PAs in Health Care III: Advocacy and Leadership		
Scholarly Concentrations	CAPSTONE		

4.2. ACADEMIC CALENDAR

The School of Medicine's Academic Calendar combines dates relevant to all our matriculating programs: MD, PA, MS, and PhD. As a PA student, it is your responsibility to review the academic calendar and to be present and available for required PA program activities. Please visit the [School of Medicine's Academic Calendar website](#) for the up-to-date changes and note key administrative dates on your calendar.

4.3. ACADEMIC REQUIREMENTS FOR GRADUATION

Students Entering Academic Year 2017-2018

Academic Units

Satisfactory completion of a minimum total of 170 required academic units as specified in the table below- *Required Courses and Units for Students Matriculating Academic Year 2017-18.*

Students cannot graduate with any uncorrected failing grade in a pre-clerkship course or any uncorrected failing or marginal pass grade in clinical clerkships.

Additional requirements

Scholarly Concentration – Completion of 6 units of coursework and other requirements of a Scholarly Concentration including Capstone project and presentation, as outlined in section 4.4.

Required Courses and Units for Students Matriculating Academic Year 2017-18

Master of Science in PA Studies Curriculum	
Year 1	
Quarter 1A and 1 (Mini quarter and Autumn)	Units
Foundations of Clinical Medicine (PAS 201) <i>Biochemistry, Genetics, Immunology, microbiology</i> <i>MSPA students only</i>	4
Cells to Tissues (INDE 216) <i>MD and MSPA students</i>	2
Embryology (SURG 201) <i>MD and MSPA students</i>	1
Clinical Anatomy I (SURG 203) <i>MD and MSPA students</i>	15
Practice of Medicine I (INDE 201) <i>MD and MSPA students</i>	11
PAs in Health Care I: Introduction to the Profession (PAS 291) <i>MSPA students only</i>	1
<i>Total units per quarter</i>	34
Quarter 2 (Winter)	
Clinical Therapeutics I (PAS 222) <i>MSPA students only</i>	2
Practice of Medicine II (INDE 202) <i>MD and MSPA students</i>	8
Principles of Clinical Medicine I (PAS 212) <i>Dermatology, Musculoskeletal System, Neurology I and EENT</i> <i>MSPA students only</i>	10
<i>Total units per quarter</i>	20
Quarter 3	
Clinical Therapeutics II (PAS 223) <i>MSPA students only</i>	2
Practice of Medicine III (INDE 203) <i>MD and MSPA students</i>	8
Principles of Clinical Medicine II (PAS 213) <i>Cardiology and Pulmonology</i> <i>MSPA students only</i>	10
<i>Total units per quarter</i>	20

Master of Science in PA Studies Curriculum

Year 2

Quarter 4

Clinical Therapeutics III (PAS 224) MSPA students only	2
Practice of Medicine IV (INDE 204) <i>MD and MSPA students</i>	10
Principles of Clinical Medicine III (PAS 214) <i>Nephrology, Gastroenterology, Endocrinology, Reproductive Health, and Male Health</i> MSPA students only	10
<i>Total units per quarter</i>	22

Quarter 5

Clinical Therapeutics IV (PAS 225) MSPA students only	2
Practice of Medicine V (INDE 205) <i>MD and MSPA students</i>	8
Principles of Clinical Medicine IV (PAS 215) <i>Neurology II, Hematology/Oncology, Systemic Diseases</i> MSPA students only	10
PAs in Health Care II: Clinical Transitions (PAS 292) MSPA students only	2
Advanced Cardiac Life Support (PAS TBA) MSPA students only	2
<i>Total units per quarter</i>	24

Quarter 6

Clinical Clerkships MSPA students only	12
<i>Total units per quarter</i>	12

Quarter 7

Clinical Clerkships MSPA students only	12
<i>Total units per quarter</i>	12

Master of Science in PA Studies Curriculum

Year 3

Quarter 8

Clinical Clerkships <i>MSPA students only</i>	12
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<i>Total units per quarter</i>	12
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Quarter 9

Clinical Clerkships <i>MSPA students only</i>	12
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PAs in Health Care III: Advocacy and leadership (PAS 293) <i>MSPA students only</i>	2
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<i>Total units per quarter</i>	14
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Total Units	170
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4.4. SCHOLARLY CONCENTRATION REQUIREMENT

The Scholarly Concentration (SC) program provides MSPA students with faculty-mentored scholarly experiences in areas of individual interest combined with structured coursework to support this scholarship. This required component of the PA curriculum develops critical thinking, skills in evaluating new data, and hands-on experience with the methods by which new scholarly information is generated.

The MSPA Studies program offers the following 4 scholarly areas of study:

- Clinical Research
- Community Health
- Health Services and Policy Research
- Medical Education

Students are required to take a minimum of 6 units of coursework in their area of scholarly concentration.

During the “mini-quarter” (first four weeks of Q1) students are encouraged to explore and compare the different Scholarly Concentrations and their course and research opportunities by meeting with their faculty advisor and the Scholarly Concentration leads. Each student must declare a Scholarly Concentration by submitting their course plan, learning objectives, and general project description to their faculty advisor by the end of the mini quarter (mid-September).

In addition to the course unit requirements, students are required to submit a written report of their scholarly project and present their project at one of the Capstone presentation days. Presentation of scholarly work and submittal of written report must be completed by March 1st of the graduating year.

4.5. REQUIRED PRE-CLERKSHIP COURSES

Year 1, Q1: Autumn

Foundations of Clinical Medicine

Cells to Tissues

Embryology

Clinical Anatomy

Practice of Medicine I

PAs in Health Care I: Introduction to the profession

PAS 201: Foundations of Clinical Medicine

This course explores fundamental concepts of biochemistry, genetics, microbiology, and immunology as applied to clinical medicine in a mostly “flipped classroom” format. This course will help to establish a foundation for understanding the pathophysiology of disease and the targets for therapeutic interventions.

Discipline-specific topics include:

- * Biochemistry: thermodynamics, enzyme kinetics, vitamins and cofactors, metabolism of carbohydrates, lipids, amino acids and nucleotides, and the integration of metabolic pathways.
- * Genetics: basic principles of inheritance and risk assessment, illustrated with the use of clinical examples from many areas of medicine including prenatal, pediatric, adult, and cancer genetics.
- * Microbiology: Basic bacteriology, virology, mycology, and parasitology, including pathogenesis and clinical scenarios associated with infectious diseases.
- * Immunology: concepts and applications of adaptive and innate immunity and the role of the immune system in human disease.

INDE 216: Cells to Tissues

Focuses on the cell biology and structural organization of human tissues as self-renewing systems. Topics include identification and differentiation of stem cells, regulation of the cell cycle and apoptosis in normal and cancerous cells, cell adhesion and polarity in epithelial tissues, intracellular transport, and cell migration. Histology laboratory sessions examine normal and abnormal samples of blood, epithelia, connective tissue, muscle, bone and cartilage. Patient presentations and small group discussions of current medical literature illustrate how cell biology influences medical practice.

SURG 201: Embryology

The course focuses on the structural development of the human body from embryo to fetus to early post-natal life. Topics include formation of the cardiovascular, respiratory, musculoskeletal, gastrointestinal, reproductive, and renal systems, as well as common clinical conditions which arise from abnormalities of development.

SURG 203: Clinical Anatomy

Introduction to human structure and function presented from a clinical perspective. Includes clinical scenarios, frequently used medical imaging techniques, and interventional procedures to illustrate the

underlying anatomy. Students are required to attend lectures and engage in dissection of the human body in the anatomy laboratory.

INDE 201: Practice of Medicine I

Practice of Medicine is a five-quarter series extending throughout the first two years of the MD program, interweaving core skills training in medical interviewing and the physical examination with other major threads addressing the context of medical practice: information literacy, nutrition principles, clinical epidemiology and biostatistics, evidence-based practice, psychiatry, biomedical ethics, health policy, population health. Core clinical skills are acquired through hands-on practice, and evaluated through an extensive program of simulated medical encounters, in which students interview, examine, and manage patients in a mock clinic. The information literacy thread introduces students to informatics and knowledge management, biomedical informatics, and evidence-based medicine searching. Nutrition principles are acquired through interactive, web-based instruction, and reinforced through problem-based learning cases, which run in parallel to the basic science components over the first year. In epidemiology students learn the taxonomy of epidemiological studies, how to critically read a journal article, and how to recognize and understand the concepts behind different clinical study designs. Topics include bias, confounding, diagnostic testing and screening, and "how statistics can lie." Psychiatry introduces students to the unique role of medical students in talking with patients, the difference between process and content in patient communication, how to respond to breaks in the patient-physician relationship, and the relationship between the quality of the patient-physician interaction and health outcomes. Health care policy covers such topics as health insurance, physician payment, health care costs, access, measurement and improvement of quality, regulation and health care reform. Biomedical ethics includes important ethical issues in medical practice, such as confidentiality, privacy, and ethical issues relating to medical students. The population health curriculum exposes students to concepts of public health, community action, and advocacy, and includes a year-long, community-based project. At the end of this quarter students participate in a performance-based assessment of the medical interview skills.

PAS 291: PAs in Health Care I – Introduction to the Profession

This course provides an overview of the PA profession. The first portion of the course covers the history of the PA profession, the role of the PA within the health care team, and an overview of the laws, regulations and committees that provide oversight to the profession. The second portion of the course focuses on health disparities, social determinants of health and underserved communities, and the role of the PA in the care of these populations. It includes development of the awareness, knowledge, and skills needed in order to practice culturally competent and sensitive health care.

Year 1, Q2: Winter

Clinical Therapeutics I

Practice of Medicine II

Principles of Clinical Medicine I

PAS 222: Clinical Therapeutics I

This course will provide a foundation for learning pharmaceutical therapies related to subjects covered in the Principles of Clinical Medicine I course. In addition to general pharmacokinetic principles, the first segment of the course will cover the use of drugs applied to the skin and topical and systemically administered drugs for dermatologic diseases. Pharmacology of the autonomic nervous system, both

sympathetic and parasympathetic divisions, will be overviewed in addition to gaining an understanding of how drug manipulation on cholinergic and adrenergic receptors modulate nerve activity. The course will conclude with an examination of drugs acting on the allergenic and pathogenic pathways as they pertain to ENT conditions.

INDE 202: Practice of Medicine II

Medical interview and physical examination skills, information literacy, nutrition principles, evidence-based practice, health policy, and population health are covered. At the end of this quarter, students participate in a performance-based assessment of their medical interview and physical examination skills. See INDE 201 for a complete description of the Practice of Medicine course series.

MSPA 212: Principles of Clinical Medicine I

This is the first in a four-course sequence presenting organ-system based physiology, pathology, and pathophysiology. Each organ-specific block includes a review of the anatomy and related histology, normal function of that organ system, how the organ system is affected by and responds to disease, and how diseases of that organ system are treated. In MSPA 212, the focus is on the structure, function, disease, and corresponding therapeutics of several “primary care” topics, particularly the musculoskeletal and dermatologic systems. In addition, basic neurology, otorhinolaryngology, and ophthalmology will be covered.

Year 1, Q3: Spring

Clinical Therapeutics II

Practice of Medicine III

Principles of Clinical Medicine II

MSPA 223: Clinical Therapeutics II

This course will provide students a detailed comprehension of drug mechanisms and clinical drug therapies for cardiovascular and pulmonary diseases as covered in the Principles of Clinical Medicine II course. The course will examine anti-hypertensive agents, drugs used for cardiac arrhythmias, vasodilators and vasoconstrictors, treatment of angina pectoris, and other clinical cardiovascular therapies. Clinical treatment for common pulmonary diseases including emphysema and asthma, in addition to the pharmacology of medications including bronchodilators and anti-inflammatory drugs, will be discussed.

INDE 203: Practice of Medicine III

Medical interview and physical examination skills, biomedical literature retrieval and appraisal, nutrition principles, evidence-based practice, biomedical ethics, and population health are covered. Students begin clinical problem-solving sessions to learn the approach to common and important clinical problems. Cases integrate other course themes of population health, evidence-based practice, clinical ethics, nutrition, health policy, and behavioral medicine. Students begin transition from comprehensive to problem-focused patient encounters. Students also gain exposure to geriatrics, pediatrics, and interprofessional healthcare teams, and practice mental health interview skills. At the end of this quarter, students participate in a performance-based assessment of their medical interview and physical examination skills. See INDE 201 for a complete description of the Practice of Medicine course series.

MSPA 213: Principles of Clinical Medicine II

This is the second in a four-course sequence presenting organ-system based physiology, pathology, and pathophysiology. Each organ-specific block includes a review of the anatomy and related histology, normal function of that organ system, how the organ system is affected by and responds to disease, and how diseases of that organ system are treated. In MSPA 213, the focus is on the structure, function, disease, and corresponding therapeutics of the pulmonary and cardiovascular systems.

Year 2, Q4: Autumn

Clinical Therapeutics III

Practice of Medicine IV

Principles of Clinical Medicine III

PAS 224: Clinical Therapeutics III

This course overviews pharmacological treatments applied to renal, GI, endocrine and reproductive systems as covered in the Principles of Clinical Medicine III course. The course details clinical treatments used to treat common renal, gastrointestinal and hepatobiliary conditions, as well as special considerations for patients with chronic and end-stage renal and hepatic disorders. Hormone therapies for pituitary, thyroid, gonadal and pancreatic deficiencies and diseases including antidiabetic drugs and their pharmacology are discussed as well as hormonal replacement therapies and fertility drugs. Students will gain translational knowledge concerning the interconnectedness of the aforementioned systems and the subsequent challenges facing clinical pharmacological treatments.

INDE 204: Practice of Medicine IV

The second year of the Practice of Medicine series (INDE 204 and 205) emphasizes clinical reasoning, clinical practicum, and clinical procedures. Students continue clinical problem-solving sessions to learn the approach to common and important clinical problems. Cases integrate other course themes of population health, evidence-based practice, clinical ethics, nutrition, health policy, and behavioral medicine. Students spend one-half day per week in a clinical setting, practicing medical interview, physical examination skills, oral presentations, and clinical note-writing under the mentorship of a clinical tutor. In the practicum, students also gain experience with other practical aspects of patient care. The Clinical Procedures segment introduces common and important procedures in clinical practice, including phlebotomy, intravenous line insertion, and electrocardiography.

PAS 214: Principles of Clinical Medicine III

This is the third in a four-course sequence presenting organ-system based physiology, pathology, and pathophysiology. Each organ-specific block includes a review of the anatomy and related histology, normal function of that organ system, how the organ system is affected by and responds to disease, and how diseases of that organ system are treated. In MSPA 214, the focus is on the structure, function, disease, and corresponding therapeutics of the renal/genitourinary, gastrointestinal, endocrine, and both male and female reproductive systems, with additional attention paid to women's health.

Year 2, Q5: Winter

Clinical Therapeutics IV

Practice of Medicine V

Principles of Clinical Medicine IV

PAs in Health Care II: Clinical Transitions
Advanced Cardiac Life Support

PAS 225: Clinical Therapeutics IV

This course overviews pharmacological treatments applied to neurologic, psychiatric, hematologic, oncologic, and autoimmune conditions as covered in the Principles of Clinical Medicine IV course. An analysis of drugs acting on the central nervous system are reviewed, including sedative-hypnotics, seizure medications, general anesthetics, antipsychotics and antidepressant agents. This is followed by an investigation of pharmacologic management of autoimmune and other systemic diseases. Discussed during this course are hematological treatments for anemias and hematopoietic growth factors, pharmacology of the anticoagulant, fibrinolytic drugs and antiplatelet agents. A general overview of cancer drugs such as chemotherapies, antimetabolites, antitumor antibiotics, and other anticancer drugs are also considered.

INDE 205: Practice of Medicine V

Continued emphasis on clinical reasoning, clinical practicum, and clinical procedures. Students continue clinical problem-solving sessions to learn the approach to common and important clinical problems. Cases integrate other course themes of population health, evidence-based practice, clinical ethics, nutrition, health policy, and behavioral medicine. Students spend one-half day per week in a clinical setting, practicing medical interview, physical examination skills, oral presentations, and clinical note-writing under the mentorship of a clinical tutor. In the practicum, students also gain experience with other practical aspects of patient care. For the Clinical Procedures segment, students will have an opportunity in the Emergency Department to practice performing procedures learned in the previous quarter. At the end of this quarter, students participate in a comprehensive four-station objective structured clinical examination (OSCE) performance-based assessment of their medical interview, physical examination, and clinical problem-solving skills.

PAS 215: Principles of Clinical Medicine IV

This is the fourth in a four-course sequence presenting organ-system based physiology, pathology, and pathophysiology. Each organ-specific block includes a review of the anatomy and related histology, normal function of that organ system, how the organ system is affected by and responds to disease, and how diseases of that organ system are treated. In MSPA 215, the focus is on the structure, function, disease, and corresponding therapeutics of the neurologic and hematologic systems, as well as autoimmune/rheumatologic and other multi-organ system processes.

PAS 292: PAs in Health Care II – Clinical Transitions

This course provides the skills necessary for a smooth transition from didactic learning to clerkship experiences and begins to explore skills required for leadership. The first portion will focus on clerkship expectations, the PA student role as a member of the health care team, utilizing the electronic health record, working with interpreters, telemedicine, avoiding medical errors, and improving quality. The second portion of the course will introduce leadership skills such as giving and receiving constructive feedback, adjusting to change, and conflict resolution.

PAS TBA: Advanced Cardiac Life Support

This course builds on the foundation of Basic Life Support (BLS) and includes online learning as well as hands-on instruction and simulated cases designed to help in the recognize and treat cardiopulmonary arrest following acute arrhythmia, stroke, and acute coronary syndromes.

4.6. CALENDAR OF CLERKSHIP PERIODS

*These period timeframes and numbers are subject to change and will be confirmed as we get closer to clerkships

Spring

Period 1 April 1 – April 28, 2019
 Period 2 April 29- May 26, 2019
 Period 3 May 27 – June 23, 2019

Summer Break June 24- June 30, 2019

Summer

Period 4 July 1- July 28, 2019
 Period 5 July 29 - Aug 25, 2019
 Period 6 Aug 26 - Sept 22, 2019

Autumn

Period 7 Sept 23 – Oct 20, 2019
 Period 8 Oct 21 – Nov 17, 2019
 Period 9 Nov 18- Dec 15, 2019

Holiday Break- December 16- January 12, 2020

Winter

Period 10 January 13- Feb 9, 2020
 Period 11 Feb 10 – March 8, 2020
 Period 12 March 9 – April 3, 2020

4.7. CLERKSHIP REQUIREMENTS

Students must have successfully completed all pre-clerkship courses prior to beginning clerkships. A total of 48 units (12 months) in clerkship education are required for graduation.

Clerkship #	Title	Units
PAS	Ambulatory Medicine	8 (8 weeks)
PAS	Inpatient Medicine	8 (8 weeks)

PAS	Behavioral Medicine	4 (4 weeks)
PAS	Pediatrics	4 (4 weeks)
PAS	Women's Health	4 (4 weeks)
PAS	Emergency Medicine	4 (4 weeks)
PAS	Surgery	4 (4 weeks)
PAS	Selective	4 (4 weeks)
PAS	Elective I*	4 (4 weeks)
PAS	Elective II*	4 (4 weeks)

* Required clerkships must be completed before electives.

4.8. SELECTIVE AND ELECTIVE CLERKSHIPS

Students will complete a four-week Selective Clerkship and another two four-week Elective Clerkships. The Selective and Elective Clerkships are from a designated list. Qualifying clerkships are approved by the program leadership and may be removed from the list of approved clerkships at any time. Additions to the approved list of clerkships take effect immediately for all students; deletions from the lists take effect for the students who begin clerkships in the subsequent clerkship year.

5.0. ASSESSMENT OF STUDENT ACADEMIC PERFORMANCE

5.1. HEALTH PROVIDER INVOLVEMENT IN STUDENT ASSESSMENT

A student may not be formally evaluated by a health professional who has provided medical or mental health services to that student. This applies to one-time/episodic care as well as continuing care. A student may also not be evaluated by a family member. Per ARC-PA Standards, PA program faculty are not allowed to provide medical care to students unless it is an emergency.

5.2. EVALUATION OF PERFORMANCE IN COURSES

All pre-clerkship PA program courses are graded on a pass/fail basis. It is the prerogative of each course director to determine the best method for assessing student performance for his or her course. Learning activities such as quizzes, short papers, laboratory exercises, problem sets, presentations, and group discussions, may be offered on a graded or ungraded basis at the discretion of the course director. Attendance and participation is essential to mastery of material and is expected of all students. Course directors are expected to announce criteria for passing a course by the end of the second week of the quarter, with any subsequent modification only upon approval of a majority of students in the class.

Grading System

The following grading system is used to report on the official transcript the performance of students in all courses and clerkships taken while an MSPA Studies degree candidate:

Pass (+) indicates that a student has demonstrated to the satisfaction of the course director that he/she has mastered the material taught in the course. A marginal passing grade in pre-clerkship courses is internally reported by the faculty to the student and the School of Medicine Registrar's Office, but does not appear in the official transcript.

Incomplete (I) indicates that extenuating medical or personal circumstances beyond the student's control have prevented completion of course requirements. Following approval by the Faculty Advisor and Student Progress Committee (in light of the circumstances presented), the course director is notified prior to the final examination. An incomplete can be corrected in a manner specified by the course director and must be corrected within one year (unless the Student Progress Committee specifies an earlier date). When a student takes a final or makeup examination following an incomplete, it becomes a pass, marginal pass or fail. If the student does not attempt to correct the incomplete within the agreed-upon time, it becomes a fail.

Continuing (N) indicates that the course has not concluded and that the student is continuing the course or that a minor component of a course (as defined by the course director) is pending.

Exempt (EX) indicates that a course has been exempted by the course director. No units are granted. The student should register for "0" units so that the course appears on the transcript.

Grade Not Reported (GNR) indicates that a grade has not been reported by the instructor.

A student may not receive credit for repeating a course unless the content has changed significantly, as determined by the course director.

In addition to these transcript-related grades, additional designations are used internal to the School of Medicine to report on academic progress:

Marginal Pass (MP) indicates that a student has fallen short of meeting minimal performance standards for a pass but has done better than a fail at the end of the academic quarter, and that additional work or remediation is necessary to achieve a pass.

Fail (-) indicates that a student has not met the minimum performance standards for the course. A course in which a student has received a fail grade does not show up on the official transcript. A course in which a student has received a fail grade must be repeated, and the student must achieve a passing grade within one year of the failure or prior to beginning clerkships, whichever is sooner.

End-Quarter Policy Statement

The End-Quarter Period is a time of reduced social and extracurricular activity preceding final examinations. Its purpose is to permit students to concentrate on academic work and to prepare for final examinations. In Autumn, Winter, and Spring quarters, End-Quarter starts seven full days (to begin at 12:01 a.m.) prior to the first day of final exams. In Spring Quarter, final examinations begin on Friday; no classes are held on Thursday, the day before. In Summer Quarter, this period consists of the weekend and the four class days preceding the final examinations, which take place on Friday and Saturday of the eighth week. (See the *Time Schedule* for dates.)

During the End-Quarter Period, classes are regularly scheduled and assignments made; this regular class time is used by instructors in whatever way seems best suited to the completion and summation of course material. Instructors should neither make extraordinary assignments nor announce additional course meetings in order to “catch up” in course presentations that have fallen behind. They are free, however, and even encouraged to conduct optional review sessions and to suggest other activities that might seem appropriate for students preparing for final examinations.

No graded homework assignments, mandatory quizzes, or examinations should be given during the End-Quarter Period except:

1. In classes for which graded homework assignments or quizzes are routine parts of the instruction process.
2. In classes with laboratories where the final examination will not test the laboratory component. In such a case, the laboratory session(s) during the End-Quarter Period may be used to examine students on that aspect of the course.

Major papers or projects about which the student has had reasonable notice may be called due in the End-Quarter Period. Take-home final examinations, given in place of the officially scheduled in-class examination, may be distributed in the End-Quarter Period. Although the instructor may ask students to return take-home examinations early in the final examination period, the instructor may not call them due until the end of the regularly scheduled examination time for that course. Such a policy respects the principle that students’ final examinations are to be scheduled over a period of several days. End-quarter

examinations may not be held during this period. This policy preserves the instruction time for courses and protects the students' opportunities for extensive review and synthesis of their courses.

Final Examinations

Final examinations are scheduled by the Office of PA Education in collaboration with the Office of Medical Education when appropriate, which posts tentative dates and times by the end of the previous quarter and final schedules by the end of the second week of the quarter. Students anticipating conflicts in examination schedules should seek to resolve them with course instructors.

Final examinations are governed by the regulations below:

1. Students are expected to take the final examination unless at least 24 hours prior to the examination they have received formal written approval for obtaining an incomplete from a Faculty Advisor. Incompletes are given for significant personal or medical reasons beyond the student's control. If a student does not appear for the examination and has not been granted an incomplete, the student will receive a fail.
2. Students are expected to report for their examinations at the time and place designated by the Office of PA Education, the Office of Medical Education or the course director, unless the course director has made alternative arrangements. While examinations are not "proctored" as such, students must take the examination in the designated location within the prescribed examination time. Students are expected to adhere to the Honor Code at all times during examinations.
3. When the final examination or its appropriate substitute is not an in-class examination (e.g., when an instructor assigns a take-home examination, paper, or project in lieu of an in-class examination), the schedule and format of the final examination, or its substitute, will be determined no later than the end of the second week of the quarter and, if changed subsequently, may be only a modification approved by a majority of the students in the class.
4. Students with documented disabilities who have registered with and been determined by the [Office of Accessible Education \(OAE\)](#) to require special examination accommodations are responsible for notifying both the SOM Learning Strategies Education Specialist and their course directors at the beginning of the quarter or when their accommodation letter is given that they will need accommodations. Unless students receive accommodations mid-quarter, they must let the SoM Learning Strategies Education Specialist and their course directors know of their accommodations needs no later than the end of the second week of the quarter for which they are receiving accommodations. Reminder: students needing exam accommodations are to contact the OAE first, prior to notifying their course director(s).
5. Feedback on written examinations is to be as complete as practicable. Students have the right to see their final examination and discuss it with a faculty member.

Correction of Deficiencies in Pre-Clerkship Courses

Students receiving notification of a marginal pass should meet with the appropriate faculty and discuss the requirements for achieving an unqualified passing grade. Once a student achieves a "pass," the performance will no longer be recorded as "marginal" in the student's record. Students who receive a marginal pass in a course of eight or more units (i.e. PCM or POM) must correct the marginal pass within

12 months of receipt of the marginal pass and prior to beginning any clinical clerkship. No student having more than one marginal pass in courses of fewer than eight units may begin any clerkship. If two uncorrected marginal performance grades accumulate in pre-clerkship courses of fewer than eight units, the student is required to correct at least one of the within 12 months of receipt of the second marginal pass and prior to beginning clinical clerkships. Students with one or more marginal passes will be counseled by a Faculty Advisor and reviewed by the Student Progress Committee.

Students who fail a pre-clerkship course must achieve a passing grade within one year of the failure or prior to beginning clerkships, whichever is sooner. If this cannot be achieved through remediation (as determined by the Course Director) then the student must retake and pass the course when it is next offered. Only the Student Progress Committee has the power to change this requirement. The requirements for achieving a passing grade are determined by the responsible faculty. Students with a failing grade will be counseled by a Faculty Advisor and reviewed by Student Progress Committee.

Academic deficiencies in pre-clerkship courses must be rectified prior to the beginning of clerkships or by a date specified by the Student Progress Committee (which has the power in an appropriate case to modify any of the requirements in this subsection).

Course Directors are encouraged to provide educational assistance to students failing required courses on the first-year grid, preferably during the first summer quarter following receipt of a failing grade, and to reexamine such students prior to autumn quarter registration. Students failing courses on the autumn and winter quarter grids for the second year should, as a general proposition, be required to correct these deficiencies prior to beginning clerkships. Students who receive an incomplete grade because of extenuating medical or personal circumstances should, once again as a general rule, be given the opportunity to correct the incomplete grade within one (1) year or prior to entering clerkships, whichever comes first, in a manner specified by the Course Director. Courses such as those in the Practice of Medicine sequence, where hands-on activities and small group interactions constitute a significant portion of the course, may require retaking of the course the following year.

Evaluation of Performance in Practice of Medicine

Grading

Students receive a Pass (+), Continuing (N), Marginal Pass (MP), Fail (-), or Incomplete (I) grade after each quarter. The grade is based on completion of quarter course requirements, satisfactory performance on end-of-quarter assessments, and professional behavior. Following are the guidelines for each grade option in the course:

Pass (+): Students have completed all course requirements, performed satisfactorily on the final Standardized Patient assessment and each section of the written final examination, and exhibited professional behavior in the course.

Continuing (N): Students have not completed all course requirements and/or did not perform satisfactorily on any individual section of the written final examination.

Marginal Pass (MP): Students have not performed satisfactorily on the final Standardized Patient assessment and/or the overall written final examination; there may be some concern about the student's professional behavior in the course; and/or the student's performance in in-class activities has raised some concerns about knowledge and competence.

Fail (-): Students have performed poorly on the final Standardized Patient assessment and/or the overall written final examination (using the criteria above for N Grade or Marginal Pass); there may be serious concerns about the student's professional behavior in the course; and/or the student's performance in in-class activities has raised serious concerns about knowledge and competence.

Incomplete (I): Student has satisfactorily completed a substantial part (but not all) of the course work. Students must request an incomplete grade by the last class meeting. Incomplete grades must be made up within one (1) year, or prior to entering clerkships, whichever comes first.

A grade of Continuing (N), Marginal Pass (MP), or Fail (-) will require notification to the Student Progress Committee

Students who do not perform satisfactorily on either the final Standardized Patient assessment and/or the written final examination must complete a plan of remediation tailored to student needs and course resources. Students who do not satisfactorily complete this plan of remediation will earn a "Fail" grade for the course.

Policy for Missed Assessments

Every student is expected to be present for each final Standardized Patient assessment and each end-quarter integrated examination in the Practice of Medicine course.

A formal Course Director's excuse is required to make-up any missed course examination. It is recommended that students meet with their Faculty Advisors prior to submitting a formal request for any missed course examination.

A Course Director's excuse may be issued before a regularly scheduled assessment or examination to accommodate some essential extracurricular event or after an examination for illness.

A score of zero will be credited towards a student's final score if an assessment or examination is missed without a Faculty Advisor's excuse.

If a Course Director's excuse is issued before a regularly scheduled assessment or examination to accommodate some essential extracurricular event, the student will be expected to take the scheduled makeup examination or assessment at Stanford. If the Course Director's excuse extends beyond the second date because of some essential activity away from Stanford, then appropriate arrangements will be made within the resources of the course. Failure to make such an arrangement will result in a score of zero on that exam. A student who misses an assessment or examination with a Course Director's excuse for illness should contact the POM course coordinator and appropriate arrangements will be made.

Policy for Remediation of a Continuing, Marginal Pass, Fail Grade in POM

A student who receives a Continuing (N) in any quarter of the POM series (INDE 201-205) must complete outstanding course requirements to correct the grade to a Pass (+). The student will be allowed to

continue through the POM sequence. The Student Progress Committee will be notified. Students who do not satisfactorily complete this plan of remediation will earn a Marginal Pass (MP) grade for the course.

A student who receives a Marginal Pass (MP) in any quarter of the POM series (INDE 201-205) must successfully complete a course of remediation tailored to student needs and course resources to correct the grade to a Pass (+). The student will not be allowed to continue through the POM sequence, unless provided special permission from the course director. The Student Progress Committee will be notified. Students who do not satisfactorily complete this plan of remediation will not be allowed to continue to clerkships.

A student who receives a Fail in any quarter of the POM series (INDE 201-205) will be required to re-take that quarter the following year, including all required exercises and examinations. The student will not be allowed to continue through the POM sequence, unless provided special permission from the course director. The Student Progress Committee will be notified.

5.3. EXAM POLICY FOR REQUIRED PRE-CLERKSHIP COURSES

Per the Stanford University Honor Code, individual faculty members are not present to proctor exams; however, they can determine the best exam environment for their tests and make any requirements they see fit with regard to how students take the exam. The Honor Code states in part: “The faculty on its part manifests its confidence in the honor of its students by refraining from proctoring examinations and from taking unusual and unreasonable precautions to prevent the forms of dishonesty mentioned above. The faculty will also avoid, as far as practicable, academic procedures that create temptations to violate the Honor Code.” (add link- <https://communitystandards.stanford.edu/student-conduct-process/honor-code-and-fundamental-standard#honor-code>)

To uphold the spirit of the University’s Honor Code and to create consistency across courses in the pre-clerkship curriculum, the Office of PA Education and the Office of Medical Education provides the following guidelines for closed-book examination environments in our required courses:

- Students will complete exams in the rooms assigned by the course.
- Exams are non-collaborative and, unless otherwise noted by course faculty, closed book.
- Unless otherwise stipulated by the course director, use of any electronic device to access other resources, including (but not limited to) the internet, your notes, and your colleagues, is expressly forbidden and constitutes a violation of the Stanford Honor Code.
- The use of personal listening devices is expressly forbidden in the exam setting.
- Students with disabilities or other special needs for which they may need accommodations should notify the Dean of the Office of Medical Student Affairs and the Office of Accessible Education well in advance to receive appropriate accommodation for exams. Once students receive an official accommodations letter, they must let the PA program Student Service Officer and their course directors know of their accommodations request no later than the end of the second week of the quarter every quarter in which they are requesting accommodations.

5.4. EVALUATION OF PERFORMANCE IN CLINICAL CLERKSHIPS

Students on clerkship may earn a final grade of Pass, Marginal Pass, or Fail. Performance in Patient Care, Professionalism and Interpersonal Communication, and Knowledge, as measured by performance on End of Rotation Exams contribute to the final grade.

Clerkship Performance Evaluation Appeals

Students who have questions or concerns about a performance evaluation in a clinical clerkship should contact the Clerkship Director or their Faculty Advisor to request a review. If a student's disagreement remains unresolved, the student or his or her Faculty Advisor may request a review by the Student Progress Committee by contacting one of the Student Progress Committee chairs. A written request for a review must be received within *eight weeks* of the date that the final student performance evaluation was submitted.

Upon receiving a request for review, the Student Progress Committee will notify the clerkship team responsible for the performance evaluation and will gather data from the student and the clerkship team. The Student Progress Committee will review the final evaluation and all submitted data, gather additional information as needed, and will generally, though it is not required, reach a decision by consensus. The student and clerkship team will be notified in writing of the final decision. The Student Progress Committee will attempt to complete each appeal within 45 days of the request. The Student Progress Committee decision is considered final. Students with further concerns may choose to pursue the Stanford University student academic grievance procedure <http://www.stanford.edu/dept/registrar/bulletin/4988.htm>, though they should recognize the limited scope of review inherent in that procedure.

Correction of Deficiencies in Clerkships

During the course of a clerkship, when the Director of Clerkship Education becomes aware that a student's performance may warrant a marginal pass or failing grade, they must notify the student promptly that, in the absence of improvement, a non-passing grade is being considered. Once the director confirms the decision to assign a non-passing grade, the Director of Clerkship must immediately notify the student about the final grade to be assigned. The Director of Clerkship should also notify the student's Faculty Advisor, who will arrange a meeting with the student.

Requirements for correcting a marginal pass or failure will be determined by the Clerkship Director. Students who receive a marginal pass or failing grade are required to meet with the Clerkship Director to set timely requirements for achieving an unqualified passing grade. Non-passing grades in clerkships, including N or "continuing" grades for failed must be corrected within one year of completing the clerkship. Students failing to correct a non-passing grade within one year will be reviewed and discussed by the Student Progress Committee

Students cannot receive a Stanford MS in PA Studies degree with an uncorrected marginal pass or failure in a clerkship.

5.5. STANDARDIZED PATIENT TEACHING AND ASSESSMENT

The Standardized Patient (SP) Program offers clinical skills training for PA students throughout the three-year curriculum. Its activities are designed to provide a simulated setting for the instruction and assessment of the clinical, cross-cultural and interpersonal skills of PA students. Real patients or SPs are trained to consistently recreate the same clinical situation, findings, or problem with each student encounter. For more information about the Standardized Patient Program, go to: <http://cisl.stanford.edu/standardized-patient-program.html>

6.0. STUDENT PROGRESS COMMITTEE (SPC)

6.1. INTRODUCTION

The Student Progress Committee (SPC) is a standing committee of the Stanford University School of Medicine, Office of PA Education. The purpose of the Student Progress Committee is to provide all PA students with periodic and systematic reviews of their overall progress towards completion of the MS in PA Studies degree, as well as reviews on an as-needed basis. The committee will monitor student development and will provide guidance and recommendations as appropriate.

Stanford University School of Medicine has an obligation to evaluate the performance of each student on an ongoing basis from matriculation until graduation and to endorse each student as being suitable to meet the academic, professional, and technical standards for the practice of medicine. It is therefore the responsibility of the faculty – through this committee – to review any concerns regarding the ongoing satisfactory fulfillment of these standards.

A. Membership:

The Student Progress Committee is composed of MSPA Studies program faculty as well as E4C faculty members and Stanford community PAs. All Student Progress Committee members are voting members unless that faculty or E4C faculty member is the faculty advisor/mentor for the student under review. A total of three voting members is required for a quorum. A quorum of voting members of the Student Progress Committee is required to be in attendance (either physically or virtually) for decision-making activities. *Ex officio* non-voting committee members may include (but are not limited to) the Associate Dean for PA Education, program medical directors, and School of Medicine leadership.

B. General Operating Procedures:

1. The primary responsibility of the committee is to review the development and performance of each student on an ongoing basis in the areas of the fulfillment of academic, technical, and professional standards. This includes:
 - a. Evaluation of achievement of all requirements for promotion;
 - b. Identification of students not meeting requirements and/or expectations for academic, professionalism, or technical performance, and recommendation of individualized learning plans that support academic and professional development;
 - c. Evaluation of achievement of required remediation;

- d. Taking such action (including deceleration, dismissal from the Stanford School of Medicine MSPA Studies program) as the Student Progress Committee deems appropriate under the facts and circumstances.
2. The Student Progress Committee generally will meet once quarterly. The chair may call additional meetings if necessary.
3. Except for the Student Progress Committee chair, the Faculty Advisors, the Associate Dean for Medical Education, and the MSPA Studies program medical directors and members of the committee will not discuss decisions or pending actions with students and may not be approached by students with inquiries.
4. The Student Progress Committee may also consider student petitions on various matters, including for example:
 - a. An extension of PA education beyond three years;
 - b. Leaves of absence that either individually or cumulatively exceed a total of one year;
 - c. Reinstatement.
5. The Student Progress Committee is staffed by a representative from the Office of PA Education.

6.2. STANDARDS FOR PERFORMANCE AND SATISFACTORY PROGRESS

In order to make satisfactory progress towards the MSPA Studies degree, each student must satisfy academic, professional, and technical standards on an ongoing basis.

- A. Academic: Students are required to make satisfactory academic progress in terms of units taken and passed, courses and clerkships successfully completed, timely completion of other requirements, and correction of deficiencies.
 1. Units
 - a. Students must take and successfully complete a per-quarter number of units and are as follows:
 - (i) Quarter 1 (Autumn): 34 units
 - (ii) Quarter 2 (Winter): 20 units
 - (iii) Quarter 3 (Spring): 20 units
 - (iv) Quarter 4 (Autumn): 22 units
 - (v) Quarter 5 (Winter): 24 units
 - (vi) Quarter 6 (Spring): 12 units
 - (vii) Quarter 7 (Summer): 12 units
 - (viii) Quarter 8 (Autumn): 12 units
 - (ix) Quarter 9 (Autumn): 14 units

** Unit figures above are based on 2017-2018 matriculation.*

NOTE: *Unit requirements for financial aid eligibility are not necessarily the same as for satisfactory academic progress for graduation. Students should also refer to financial aid policy, and consult with the University Financial Aid Office.*

2. Number of Years

- a. If a student plans to take more than three years exclusive of time spent during an approved Leave of Absence, the student must petition for and receive approval by the Student Progress Committee. The student's petition must provide reasons for the requested extension and submit specific plans for completing the degree, which plans are subject to the review and approval by the student's academic advisor.
- b. The maximum time allowed does not include periods of approved Leave of Absence, but no combination of program extensions and approved Leaves of Absence shall exceed five years without prior Student Progress Committee review and approval.

3. Scholarly Concentration

Students must make satisfactory progress in meeting Scholarly Concentration requirements, as are outlined in Section 4.4 of this handbook.

4. Examinations

Students must make satisfactory progress in meeting examination requirements, including the clinical clerkship End of Rotation exams.

5. Academic Deficiencies

- a. All academic deficiencies must be corrected within one year (or otherwise within a time limit specifically set by the Student Progress Committee in the individual case).
- b. Note that some deficiencies may be considered to be unable to be remediated and may result in immediate dismissal. Such circumstances may include (but are not limited to) when one or more of the following conditions apply:
 - (i) failure of two clinical clerkships
 - (ii) three marginal passes in clinical clerkships
 - (iii) Failure of 3 or more pre-clerkship courses in any given academic year or over the course of the pre-clerkship curriculum (whether or not remediated)
 - (iv) Three marginal passes in courses of eight or more units (e.g., PCM or POM)
 - (v) Failures in 3 or more courses during the program (pre-clerkship, clerkship or a combination of both, whether or not remediated)
- c. A student's failure to attend required meetings, comply with Student Progress Committee directives for remediation, or meet Student Progress Committee deadlines may preclude remediation and result in immediate dismissal from the Stanford School of MSPA Studies program.

- B. Professionalism: Students are required on an ongoing basis to satisfy professionalism standards, as those standards are outlined in Section 2.4 of this handbook. A serious breach of professionalism may result in immediate dismissal from the Stanford School of MSPA Studies program.

- C. Technical Standards: Students are required on an ongoing basis to satisfy technical standards, as those standards are outlined in Section 2.3 of this handbook. Continued fulfillment of such standards is a requirement for ongoing registration in the Stanford University School of Medicine.

6.3. PROMOTION

The Student Progress Committee will conduct a systematic review at three intervals of all students' progress towards completion of the MSPA Studies degree. Those reviews will encompass all areas of academic performance, professionalism, and technical standards. Students for whom the Student Progress Committee determines have met these standards will be eligible for formal promotion as follows:

- A. Promotion to Clinical MSPA Studies Student: upon completion of pre-clerkship courses and other requirements, students will be reviewed for formal promotion. Criteria for promotion are:
1. Satisfactory completion of all required pre-clerkship courses with a passing grade by April 1 of the academic year. (*NOTE: A maximum of one grade of "marginal pass" in a pre-clerkship course will be permitted, but only in a course of fewer than 8 units.*) MSPA Studies students may be required to take an additional preparatory clinical course prior to entering clerkships.
 2. Satisfactory fulfillment of the standards for professionalism of the Stanford School of Medicine MSPA Studies program.
 3. Satisfactory fulfillment of the technical standards of the Stanford School of Medicine MSPA Studies program.
 4. Satisfactory progress in a Scholarly Concentration.

Students who are determined by the Student Progress Committee as not fulfilling the standards for Promotion to Clinical PA Student, or who do not satisfy the remediation measures required by the Student Progress Committee may be dismissed from the MSPA Studies program. Students who do not achieve successful promotion to Clinical PA Student cannot continue as MSPA Studies candidate at the Stanford School of Medicine.

- B. Promotion to Eligible for MSPA Studies Degree: In March of the anticipated year of graduation, the Student Progress Committee will review students' progress to determine their eligibility for promotion to "eligible for MSPA Studies degree." If promoted, a student will be included on the list to be transmitted to the Dean and Registrar of the University for Conferral of the Master of Science in Physician Assistant Studies degree. Criteria for promotion are:
1. Satisfactory completion of all degree requirements;
 2. Continued satisfactory fulfillment of the standards for professionalism of the Stanford School of Medicine MSPA Studies program;
 3. Continued satisfactory fulfillment of the technical standards of the Stanford School of Medicine MSPA Studies program;
 4. Completion of a Scholarly Concentration;
 5. No unresolved concerns regarding academic performance, professionalism or fulfillment of the technical standards.

6.4. PROCEDURES FOR ADDRESSING PERFORMANCE, PROFESSIONAL AND TECHNICAL STANDARDS CONCERNS

A. In general:

1. The Student Progress Committee will periodically review the record of all students; additionally, it can place any student on its agenda for discussion and action if there is a concern about his or her performance or progress in fulfilling academic, professionalism or technical standards.
2. The Student Progress Committee can take any action it deems appropriate in its discretion under the facts and circumstances presented to address any concerns about academic, professional or technical standards issues, including (but not limited to):
 - a. Requiring a student to correct a marginal pass or a failing grade in a specified manner and/or by a specified date;
 - b. Placing a student on academic probation with a prescribed and restricted curriculum (including the discontinuation of activities such as extracurricular activities, community service) for a time period specified by the Student Progress Committee;
 - c. Placing the student's enrollment on administrative hold for one or more quarters;
 - d. Requiring a remedial curriculum, or that the student be referred for an assessment;
 - e. Dismissing the student from Stanford School of Medicine MSPA Studies program under circumstances deemed by the Student Progress Committee to warrant such action.

NOTE: *See "6.5 Appendix: Chart of Student Progress Committee Responses to Student Actions" of this chapter for examples of some of the actions that may be taken by the Student Progress Committee to address certain academic deficiencies.*

B. Procedures regarding academic deficiencies:

1. As a general proposition, students will be notified in advance if they are to appear on the agenda of the Student Progress Committee.
2. Students who appear on the Student Progress Committee agenda in regard to an academic deficiency will be accorded the following rights:
 - a. To ask for and receive from a Faculty Advisor a written explanation as to why they are receiving attention by the Student Progress Committee.
 - b. To have an opportunity to discuss their academic progress and/or deficiencies with their Faculty Advisor and to participate in formulating for presentation to the Student Progress Committee a proposal for a remedial program (where appropriate).
 - c. To have an opportunity to submit a written statement to the Student Progress Committee.
 - d. In any case involving dismissal from Stanford School of Medicine MSPA Studies program, to be invited to appear in person at the scheduled Student Progress Committee meeting during the presentation of their case prior to the closed deliberation of the committee.

NOTE: *Students appearing before the Student Progress Committee may have a qualified advocate of their choice accompany them to the meeting; advocates may be either*

the student's Faculty Advisor, mentor, Stanford PA or another faculty member of Stanford School of Medicine. An attorney is not a qualified advocate.

- e. Under ordinary circumstances, to receive a written report within 10 working days after the Student Progress Committee meeting detailing the committee action taken. The time frame may be extended for good cause at the discretion of the Student Progress Committee chair.
- f. To have an opportunity to discuss the Student Progress Committee action and report with their Faculty Advisor and to submit a written request to the Student Progress Committee chair that the action be reconsidered. The request must be based on compelling new information not available at the time the action was taken, not on a complaint expressing dissatisfaction with the outcome or with an underlying University or Stanford School of Medicine policy of general application. Such a request should be submitted within 14 working days of receipt of the report, but the time frame may be extended for good cause at the discretion of the Student Progress Committee chair.
- g. To have the opportunity to file a formal grievance, as outlined in the Stanford University Bulletin (Student Academic Grievance Procedure). Grievances appealing a Student Progress Committee action are filed with the Dean of the School of Medicine.

C. Procedures regarding professionalism concerns:

1. In general:

- a. The faculty of Stanford School of Medicine endorses students as suitable to practice medicine based on maintenance of continuous satisfactory performance in the areas of meeting academic, professional, and technical standards.
- b. The Student Progress Committee may address minor professionalism concerns at its discretion and as it sees fit, such as by referral to a student's Faculty Advisor or completion of a program of remediation.
- c. As to serious professionalism concerns, such concerns will be addressed under a three-step process as presented below.

NOTE: *Alleged violations of Stanford's student conduct codes (including the Honor Code and the Fundamental Standard) are adjudicated by a different University process. That conduct, however, may also raise concerns regarding professionalism requiring review under this process.*

2. The Three-Step Process

a. Step 1: Personal Communication

- (i) A faculty member or any other individual should communicate a possible substantive deficiency in professionalism of a PA student to the Associate Dean for PA Education. The Associate Dean will then inform the Student Progress Committee. This should be done as soon as practicable after the professionalism deficiency is identified.
- (ii) The Associate Dean (or his or her delegate) should give the student a copy of these guidelines and arrange a meeting with the student and, as appropriate, the individual identifying the deficiency and the Faculty Advisor. If the alleged deficiency can be explained or corrected in a mutually satisfactory manner, the matter need go no further. The Associate Dean should then communicate his or her conclusions or actions to the Student Progress Committee.

- (iii) To facilitate identification of students who may have professionalism deficiencies, the PA program will maintain impermanent files separately from students' permanent files as a repository for such concerns. If a serious professionalism concern is communicated to a student, a memorandum regarding the conversation should be sent to the student and a copy placed in the student's impermanent file. By having a central repository for such information, students whose performance repeatedly provokes professionalism concerns can be identified. The impermanent file should also contain records on formal or informal hearings, and/or Student Progress Committee considerations of students regarding professionalism. Except as disclosure is necessary under this process, access to impermanent files will in general be restricted to those Stanford personnel with a need to know (such as the program leadership, faculty, student service officers and Student Progress Committee and the student. As a general proposition, the contents of any such impermanent file are to be destroyed within one year after the student graduates.
- b. Step 2: Informal Hearing
- (i) If the student, the identifier of the deficiency, the Student Progress Committee, or the Associate Dean is not satisfied with the result of the personal communication described above, the Student Progress Committee will hold an informal private hearing upon being notified of that dissatisfaction. The informal Student Progress Committee hearing will involve the student, a quorum of the Student Progress Committee, the student's Faculty Advisor, a student-chosen advocate (who must be a faculty member of Stanford School of Medicine or a clinically practicing Stanford PA), and any other individual (e.g., the faculty member identifying the deficiency) who the chair of the Student Progress Committee thinks pertinent to discuss the matter. The purpose of the informal private hearing will be to permit the student and any other involved individuals to present their versions of the alleged deficiency and work out, if possible, a mutually satisfactory remedy.
 - (ii) The chair of the Student Progress Committee will communicate, in writing, the results of the hearing to the student and the Associate Dean within ten working days of the meeting. At the discretion of the Associate Dean, the written communication or other summary of any mutually satisfactory remedy may also be placed in the student's permanent file. If there is no mutually satisfactory remedy, the written communication and any other records of the informal hearing will be placed in the student's impermanent file.
- c. Step 3: Formal Hearing
- (i) If the matter cannot be satisfactorily resolved at the Student Progress Committee informal hearing, if the student or the Associate Dean for PA Education is not satisfied with the outcome of the hearing, or if there is a breakdown of (or failure to timely complete or adhere to) the mutually agreed-upon remedy, the Student Progress Committee chair will call a formal hearing.
 - (ii) A formal hearing is intended to provide an opportunity for the parties to present their positions in a process with the authority to decide on a remedy and/or an outcome, including dismissal from the Stanford School of Medicine MSPA Studies program. The Associate Dean will compose an ad hoc Committee on PA Suitability to hear the matter. The committee will be composed of five SOM faculty and or clinically practicing PAs within the Stanford community. The Committee will hear the matter and make findings

and recommendations to the Associate Dean for PA Education. Decisions will be made by majority vote.

- (iii) The chair of the Committee on PA Suitability will conduct the formal hearing using the general procedural guidelines outlined below:
 - (a) The student will be informed in writing of the alleged deficiency to be considered, of the situation upon which the concern is based, and of the scheduled date of formal hearing (which shall be at least 10 days after the date of this written statement). The written statement will also include a copy of this process and any special rules and procedures to be followed in the hearing. The student may request a reasonable extension of the hearing if necessary to prepare his or her position.
 - (b) The student will be allowed to inspect his or her School of Medicine education record to which he or she would be entitled under Stanford's policy on the Privacy of Student Records, including material in such files concerning the alleged deficiency.
 - (c) No person who has first-hand information concerning this matter, who presents evidence at the hearing, or who otherwise is involved in this process may serve on the Committee on Suitability. A replacement, when necessary, will be appointed by the Associate Dean for PA Education
 - (d) The student will be permitted to have a qualified advocate accompany him or her at the hearing, but that advocate may not participate directly in the hearing. The advocate must be a member of the Stanford University School of Medicine faculty or a Stanford clinical PA; an attorney is not a qualified advocate. The student shall notify the chair of the Committee on Suitability at least five days prior to the hearing of the identity of any advocate.
 - (e) The student has a right to be present during the presentation of evidence supporting the alleged deficiency, to question any witness who presents evidence at the hearing, and to offer evidence or argument at the hearing to rebut that evidence. The student will be given a reasonable opportunity to present his or her version of the situation, and may present relevant evidence and witnesses on his or her behalf.
 - (f) The presentation of evidence and arguments will be recorded.
 - (g) Unless the student asks for an open hearing, the data and discussions of the hearing will be kept confidential, and no record will be placed in the student's permanent file unless the charge of deficiency is substantiated.
 - (h) The findings and recommendations resulting from the formal hearing should be based upon the evidence presented at the hearing and on the contents of any pertinent Stanford School of Medicine student records and files.
- (iv) After the hearing, the Committee on PA Suitability will convey its findings and recommendations in writing to the Associate Dean for PA Education in a timely manner. The Associate Dean for PA Education will consider the findings and recommendations and issue a final decision in writing to the student in a timely manner. The Associate Dean for PA Education will also inform the Student Progress Committee chair of the final decision.
- (v) The student may appeal the decision to the Dean of Stanford School of Medicine as a formal written grievance under (and within the time limits of) the Stanford University Student Academic Grievance Procedure.

D. Procedures regarding technical standards concerns: If concerns arise as to a PA student's continuing ability to fulfill the technical standards of Stanford School of Medicine, the Student Progress

Committee will appoint an ad hoc committee to review the matter and advise the Student Progress Committee.

6.5. APPENDIX: CHART OF STUDENT PROGRESS COMMITTEE RESPONSES TO STUDENT ISSUES

Based on Stanford School of Medicine academic policies, the following actions will or may be taken by the Student Progress Committee in the stated situations. The committee may, however, prescribe another course of action in its discretion, and depending upon the individual student circumstances.

Pre-Clerkship: Marginal Pass

Issue	Policy and/or Steps to Address Issue
One marginal pass in a course of eight or more units (e.g., PCM or POM)	Students must correct the marginal pass within 12 months of receipt of the marginal pass and prior to beginning any clinical clerkship. <i>NOTE: An unqualified pass is required to correct a marginal pass.</i>
Two uncorrected marginal passes in courses fewer than eight units each	No student having more than one marginal pass in courses of fewer than eight units may begin (defined as attend, enroll, or participate in) any clerkship. If two uncorrected marginal performances accumulate, the student is required to correct at least one of them within 12 months of receipt of the second marginal pass and prior to beginning clinical clerkships. <i>NOTE: An unqualified pass is required to correct a marginal pass.</i>
Three marginal passes in courses of eight or more units (e.g., PCM or POM)	Three marginal passes in any combination of courses of eight or more units may be considered grounds for dismissal from Stanford School of Medicine MSPA Studies program.

Pre-Clerkship: Failure

Issue	Policy and/or Steps to Address Issue
One failure in a pre-clerkship course	An unqualified pass is required to correct a failure in a pre-clerkship course. This unqualified pass may be attained through remediation (as determined by the course director), or by retaking and passing the course when it is next offered. If no remediation occurs prior to the next offering of the course, the student will be required to retake the course.

Failure of 2 pre-clerkship required courses in any given academic year or over the course of the pre-clerkship curriculum	Students will appear on the Student Progress Committee agenda for discussion and possible setting of a remediation curriculum.
Failure of 3 or more pre-clerkship courses in any given academic year or over the course of the pre-clerkship curriculum	These students may be considered for dismissal from Stanford School of Medicine MSPA Studies program.

Pre-Clerkship: Uncorrected Deficiency

Issue	Policy and/or Steps to Address Issue
Uncorrected deficiency beyond the prescribed period of remediation time	If a deficiency remains uncorrected for more than the prescribed period of time following its receipt, the student may be required to appear before the Student Progress Committee and could be considered for dismissal. An administrative hold may be placed until the deficiency has been corrected.

Clerkships: Clerkship Scheduling

Issue	Policy and/or Steps to Address Issue
Failure to get written approval from his/her Faculty Advisor to drop a clerkship during the four-week period prior to the commencement date of the clerkship	This student's professionalism issue may be reviewed and discussed by the Student Progress Committee.

Clerkships: N (Continuing) Grade

Issue	Policy and/or Steps to Address Issue
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<p>N (continuing) grade in any clerkship</p>	<p>Students with an N grade in any clerkship are required to contact the Clerkship Director to set a timeline for retaking the final exam and achieving an unqualified passing grade.</p> <p>Students may appear on the Student Progress Committee agenda for discussion and may be required to provide a written plan for correcting the N grade.</p> <p>Students with an N (continuing) grade in any clerkship must correct the N grade within 9 months of completing the clerkship. Students who receive an N grade within 9 months of graduation must correct the N grade by April 1 of the graduation year.</p> <p>Students cannot receive a Stanford Master of Science in PA Studies degree with an uncorrected N (continuing) grade in any clerkship.</p>
<p>N grade in more than one clerkship</p>	<p>A student who has an uncorrected N grade in more than one clerkship at any time will be placed on the Student Progress Committee agenda and required to provide a written plan for correcting the non-passing grades.</p> <p>A student with more than one uncorrected N grade may be restricted from enrolling in subsequent clerkships.</p>
<p>Uncorrected N grade beyond 9 months</p>	<p>A student who fails to correct a non-passing grade (e.g., continuing “N” grade, marginal pass, or failure) in a clerkship will be placed on the Student Progress Committee agenda and could be considered for dismissal.</p> <p>An administrative hold will be placed until the deficiency has been corrected.</p>

Clerkships: Marginal Pass

Issue	Policy and/or Steps to Address Issue
<p>One marginal pass in any clerkship</p>	<p>Students with a marginal pass in any clerkship are required to meet with the Clerkship Director to set timely requirements for achieving an unqualified passing grade.</p> <p>Students will appear on the Student Progress Committee agenda for discussion and possible setting of a remedial curriculum.</p> <p>Students cannot receive a Stanford School of Medicine Master of Science in PA Studies degree with an uncorrected marginal pass in a clerkship.</p>
<p>Two marginal passes in any clerkship.</p>	<p>If a student receives marginal passes in any two clerkships, students will appear on the Student Progress Committee agenda for discussion and possible setting of a remedial curriculum.</p>

	Students cannot receive a Stanford School of Medicine Master of Science in PA Studies degree with an uncorrected marginal pass in a clerkship.
Three marginal passes in any clerkship.	Three marginal passes in any combination of clerkships may be considered grounds for dismissal.

Clerkships: Failure

Issue	Policy and/or Steps to Address Issue
One failure in any clerkship	If a student fails a required clerkship, remediation requirements will be set by the Clerkship Director. Students will appear on the Student Progress Committee agenda for discussion and possible setting of a remedial curriculum. Students cannot receive a Stanford School of Medicine Master of Science in PA Studies degree with an uncorrected failure in a clerkship.
Two failures in any clerkships	Two failures in any clerkships – either failing one clerkship twice or failing two different clerkships – ordinarily will be considered grounds for dismissal from Stanford School of Medicine Master of Science in PA Studies program.

Clerkships: Uncorrected N, M+ or F

Issue	Policy and/or Steps to Address Issue
Failure to correct a non-passing grade within 9 months of completing the clerkship	A student who fails to correct a non-passing grade (e.g., continuing “N” grade, marginal pass, or failure) in a clerkship will be placed on the Student Progress Committee agenda and may be considered for dismissal. An administrative hold will be placed until the deficiency has been corrected.

Scholarly Concentration

Issue	Policy and/or Steps to Address Issue
Failure to declare a Scholarly Concentration by the stated deadline	Student may be reviewed and discussed by the Student Progress Committee
Failure to make annual satisfactory progress as determined by the SC director	Student may be reviewed and discussed by the Student Progress Committee.
Failure to satisfactorily complete the Scholarly Concentration commitment	<p>Students who do not receive preliminary approval of completion from their Scholarly Concentration director at least six months prior to expected graduation may appear on the agenda of the Student Progress Committee. In such cases, the Concentration director in collaboration with the student's faculty advisor will define a plan, tailored to the student's deficiencies, which must be completed in the six months between the Student Progress Committee review and expected graduation.</p> <p>An administrative hold may be placed until the deficiency has been corrected.</p> <p>The Stanford School of Medicine Master of Science in PA Studies degree will not be conferred without satisfactory completion of the Scholarly Concentration as certified by the Concentration director.</p>

7.0. TUITION AND FINANCIAL AID

7.1. TUITION STRUCTURE AND BUDGET

2017-2018 Budget assumptions

Student Expenses			
Tuition			
	Per Quarter	3 Quarters	4 Quarters
Full (A)	\$16,329	\$ 48,987	\$ 65,316
On-Campus Housing			
Living Expenses			
	Per Quarter	3 Quarters	4 Quarters
Rent	\$ 4,275	\$ 12,825	\$ 17,100
Food	\$ 1,960	\$ 5,880	\$ 7,840
Personal Expenses	\$ 1,340	\$ 4,020	\$ 5,360
Sub Total Living Expenses (B)	\$ 7,575	\$ 22,725	\$ 30,300
Other Expenses			
Transportation	\$ 420	\$ 1,260	\$ 1,680
Books & Supplies	\$ 510	\$ 1,530	\$ 2,040
Medical Insurance*	\$ 1,656	\$ 4,968	\$ 4,968
Campus Health Services Fee	\$ 210	\$ 630	\$ 840
Disability Insurance Fee**	\$ 41	\$ 41	\$ 41
Sub Total Other Expenses (C)	\$ 2,837	\$ 8,429	\$ 9,569
Non-Tuition Expenses (B + C)	\$ 10,412	\$ 31,154	\$ 39,869
Total On-Campus Budget (A + B + C)	\$ 26,741	\$ 80,141	\$ 105,185
Off-Campus Housing			
Living Expenses			
	Per Quarter	3 Quarters	4 Quarters
Rent	\$ 5,670	\$ 17,010	\$ 22,680
Food	\$ 1,960	\$ 5,880	\$ 7,840
Personal Expenses	\$ 1,340	\$ 4,020	\$ 5,360
Sub Total Living Expenses (D)	\$ 8,970	\$ 26,910	\$ 35,880
Other Expenses			
Transportation	\$ 735	\$ 2,205	\$ 2,940
Books & Supplies	\$ 510	\$ 1,530	\$ 2,040
Medical Insurance*	\$ 1,656	\$ 4,968	\$ 4,968
Campus Health Services Fee	\$ 210	\$ 630	\$ 840
Disability Insurance Fee**	\$ 41	\$ 41	\$ 41
Sub Total Other Expenses (E)	\$ 3,152	\$ 9,374	\$ 10,829
Non-Tuition Expenses (D+E)	\$ 12,122	\$ 36,284	\$ 46,709
Total Off-Campus Budget (A +D+ E)	\$ 28,451	\$ 85,271	\$ 112,025

* Health Insurance: No additional charge for summer quarter if autumn, winter and spring quarters paid.

** Disability Insurance: \$43 is a one-time fee assessed winter quarter only.

Students who enroll winter, spring and summer may have insurance assessed differently.

Document fee: A document fee of \$250 is assessed once upon first admission to Stanford as a graduate or undergraduate.

7.2. ADDITIONAL FEES

Additional fees on the University bill include health insurance premiums, campus health service fee, student activity fees, document fees, housing and dining fees. Fees for academic year 2017-2018 are available online, please visit <http://exploreddegrees.stanford.edu/tuitionfeesandhousing/#feestext> for additional information.

7.3. UNIVERSITY BILLING

Stanford University's policy is to furnish timely and accurate billing information as well as effective payment options to students and authorized payers. Billing and payment services are delivered electronically through Stanford's online billing and payment service, Stanford ePay.

Bill notification is sent to each student's @stanford.edu email address as recorded in Axess. All students with balances will receive a bill notification via Stanford ePay. For more information, visit <https://sfs.stanford.edu/student-accounts/pay-your-bill>

7.4. FINANCIAL AID

For detailed information regarding financial aid visit <http://financialaid.stanford.edu>

8.0. STANFORD UNIVERSITY POLICIES

8.1. STANFORD UNIVERSITY POLICIES

As students at Stanford University, PA students are governed by the applicable rules, regulations and policies of the University. Many of these are set forth in the Stanford Bulletin, available online at: <http://exploreddegrees.stanford.edu/#text>, and in the Administrative Guide, available at: <http://adminguide.stanford.edu>

A number of important policies are discussed below.

8.2. NONDISCRIMINATION POLICY

<http://exploreddegrees.stanford.edu/#text>

Stanford University admits qualified students of any race, color, national or ethnic origin, sex, age, disability, religion, sexual orientation, and gender identity to all the rights, privileges, programs, and activities generally accorded or made available to students at the University. Consistent with its obligations under the law, Stanford prohibits unlawful discrimination on the basis of race, color, national or ethnic origin, sex, age, disability, religion, sexual orientation, gender identity or expression, veteran status, or any other characteristic protected by applicable law in the administration of the University's programs and activities; Stanford also prohibits unlawful harassment including sexual harassment and sexual violence. The following person has been designated to handle inquiries regarding this nondiscrimination policy: Director of the Diversity and Access Office, Mariposa House, 585 Capistrano Way, Stanford University, Stanford, CA 94305-8230; (650) 723-0755 (voice), (650) 723-1791 (fax), equal.opportunity@stanford.edu (email). Stanford's Title IX Coordinator, Cathy Glaze, has been designated to handle inquiries regarding sexual harassment and sexual violence: Mariposa House (2nd floor), 585 Capistrano Way, Stanford, CA 94305, (650) 497-4955 (voice), (650) 497-9257 (fax), titleix@stanford.edu (email).

8.3. COMMUNITY STANDARDS

<http://web.stanford.edu/group/resed/resed/staffresources/RM/policies/fs.html>

The primary codes of conduct for students are the Fundamental Standard and Honor Code. The Student Judicial Charter of 1997 was approved by the Associated Students of Stanford University, the Senate of the Academic Council, and the President of the University during Spring Quarter 1996-97 and Autumn Quarter 1997-98, replacing the earlier charter and becoming effective in January 1998. Cases of alleged violations of the University's Honor Code, Fundamental Standard, and other student conduct policies now proceed through an established student judicial process based upon the Student Judicial Charter of 1997, which can be found in its entirety at the [University's Office of Community Standards Web site](#).

The web site also contains the policies, rules, and interpretations, as well as the University's Student Conduct Penalty Code, applicable to those students found responsible for violating the Honor Code, the Fundamental Standard, or other University policy or rule.

When a violation of the Fundamental Standard, Honor Code, or other University policy or rule governing student conduct is alleged, or whenever a member of the University community believes such a violation has occurred, he or she should contact the Office of Community Standards, at Tresidder Memorial Union, 2nd floor, (650) 725-2485 (phone), (650) 736-0247 (fax), or community_standards@stanford.edu (e-mail).

The Fundamental Standard

The Fundamental Standard has set the standard of conduct for students at Stanford since 1896. It states:

“Students at Stanford are expected to show both within and without the university such respect for order, morality, personal honor and the rights of others as is demanded of good citizens. Failure to do this will be sufficient cause for removal from the University.”

Over the years, the Fundamental Standard has been applied to a great variety of situations. Actions that have been found to be in violation of it include:

- Physical Assault
- Property damage; attempts to damage University property
- Theft, including theft of University property such as street signs, furniture, and library books
- Forgery, such as signing an instructor's signature to a grade change card
- Charging computer time or long distance telephone calls to unauthorized accounts
- Misrepresentation in seeking financial aid, University housing, discount computer purchases, or other University benefits
- Misuse of University computer equipment or e-mail
- Driving on campus while under the influence of alcohol or drugs
- Sending threatening and obscene messages to another student via e-mail, phone or voice-mail.

There is no standard penalty which applies to violations of the Fundamental Standard. Infractions have led to penalties ranging from formal warning and community service to expulsion. In each case, the nature and seriousness of the offense, the motivation underlying the offense and precedent in similar cases are considered.

With regard to allegations of sexual assault, sexual harassment, dating violence or stalking against School of Medicine students, the matter will be handled through the Student Title IX Process. More information about this process is available at:

<https://stanford.app.box.com/v/student-title-ix-process>

The Honor Code

The Honor Code is the University's statement on academic integrity written by students in 1921. It articulates University expectations of students and faculty in establishing and maintaining the highest standards in academic work:

- a. *“The Honor code is an undertaking of the student, individually and collectively:*
 1. *that they will not give or receive aid in examinations; that they will not give or receive unpermitted aid in class work, in the preparation of reports, or in any other work that is to be used by the instructors as the basis of grading.*
 2. *that they will do their share and take an active part in seeing to it that others as well as themselves uphold the spirit and the letter of the Honor Code.*
- b. *The faculty on its part manifests its confidence in the honor of its students by refraining from proctoring examinations and from taking unusual and unreasonable precautions to prevent the forms of dishonesty mentioned above. The faculty will also avoid, as far as practicable, academic procedures that create temptations to violate the Honor Code.*
- c. *While the faculty alone has the right and obligation to set academic requirements, the students and faculty will work together to establish optimal conditions for honorable academic work. “*

Examples of conduct that have been found to be in violation of the Honor Code include:

- Copying from another's examination paper or allowing another to copy from one's own paper
- Unpermitted collaboration
- Plagiarism
- Revising and resubmitting a quiz or exam for regrading without the instructor's knowledge and consent
- Representing as one's own work the work of another
- Giving or receiving aid on an academic assignment under circumstances in which a reasonable person should have known that such aid was not permitted

For more information, see the Interpretations and Applications of the Honor Code at: <https://communitystandards.stanford.edu/student-conduct-process/honor-code-and-fundamental-standard>

In recent years, most student disciplinary cases have involved Honor Code violations; of these, the most frequent arise when a student submits another's work as his or her own, or gives or receives unpermitted aid. The standard penalty for a first offense includes a one-quarter suspension from the University and 40 hours of community service. In addition, most faculty

members issue a "No Pass" or "No Credit" for the course in which the violation occurred. The standard penalty for multiple violations (e.g., cheating more than once in the same course) is a three-quarter suspension and 40 or more hours of community service.

8.4. PROHIBITED SEXUAL CONDUCT

<https://adminguide.stanford.edu/chapter-1/subchapter-7/policy-1-7-3>

Please visit the above link to review the full and most current version of the Admin Guide 1.7.3; only the first 12 sections are repeated here.

1. Policy Statement

Acts of Prohibited Sexual Conduct are not tolerated at Stanford University. The University investigates or responds to reports of Prohibited Sexual Conduct under circumstances in which the accused person(s) (Responding Party) is subject to this policy and (i) the individual(s) who believe he/she/they have experienced the Prohibited Sexual Conduct (Complainant) are students, faculty, staff members or program participants and there is a connection between the allegations and University programs or activities; or (ii) investigation and response are necessary for the proper functioning of the University, including the safety of the University community or preservation of a respectful and safe climate at the University. Students, faculty and staff found to be in violation of this policy will be subject to discipline up to and including termination, expulsion or other appropriate institutional sanctions; affiliates and program participants may be removed from University programs and/or prevented from returning to campus.

A comprehensive University web page dedicated to sexual violence awareness, prevention, response and support for those who have experienced sexual violence can be found at NotAlone.Stanford.edu. The web page contains a list of resources and describes reporting options. Resources are also provided at the end of this policy in Section 18 and at titleix.stanford.edu.

2. What is Prohibited Sexual Conduct?

Prohibited Sexual Conduct is the umbrella term that Stanford uses to collectively define different types of misconduct relating to assault, violence or exploitation of a sexual nature, or connected to an intimate relationship. Prohibited Sexual Conduct includes (a) Student-on-Student Sexual Harassment, (b) Sexual Misconduct, (c) Sexual Assault, (d) Stalking, (e) Relationship (dating or domestic) Violence, (f) Violation of University Directive or Court Order relating to Prohibited Sexual Conduct or allegations of Prohibited Sexual Conduct and (g) Retaliation relating to Prohibited Sexual Conduct or Allegations of Prohibited Sexual Conduct. Under federal law, Prohibited Sexual Conduct is a severe form of sexual harassment. (See [Administrative Guide Memo 1.7.1](#) for more information regarding Sexual Harassment in the workplace and [Administrative Guide Memo 1.7.2](#) for information about Consensual Sexual or Romantic Relationships in the Workplace and Educational Setting.)

3. What Is Student-on-Student Sexual Harassment?

Unwelcome sexual advances, requests for sexual favors, and other visual, verbal or physical conduct of a sexual nature constitute sexual harassment when the conduct has the purpose or effect of unreasonably interfering with an individual's academic performance or creating an intimidating or hostile academic or student living environment.

Determining what constitutes sexual harassment depends on the specific facts and context in which the conduct occurs. Sexual harassment may take many forms: subtle and indirect or blatant and overt. For example, it may:

- Be conduct toward an individual of the opposite sex or the same sex
- Occur between peers or between individuals in a hierarchical relationship
- Be aimed at coercing an individual to participate in an unwanted sexual relationship or have the effect of causing an individual to change behavior
- Consist of repeated actions or may even arise from a single incident if sufficiently egregious

Whether the unwanted sexual conduct rises to the level of creating an intimidating or hostile environment is determined using both a subjective standard and an objective standard.

4. What Are Sexual Misconduct and Sexual Assault?

a. What is Sexual Misconduct?

Sexual misconduct is the commission of a sexual act, whether by a stranger or nonstranger and regardless of the gender of any party, which occurs without indication of consent.

1. The following acts or attempted acts can be the subject of a Sexual Misconduct or Sexual Assault charge
 - a) vaginal or anal intercourse;
 - b) digital penetration;
 - c) oral copulation; or
 - d) penetration with a foreign object
2. Additional Acts of Sexual Misconduct
The following completed acts can be the subject of a Sexual Misconduct charge:
 - a) unwanted touching or kissing of an intimate body part (whether directly or through clothing); or
 - b) recording, photographing, transmitting, viewing or distributing intimate or sexual images without the knowledge and consent of all parties involved.

b. What is Sexual Assault?

Sexual Assault is an act described in Section 4.a.1 accomplished by use of (a) force, violence, duress or menace; or (b) inducement of incapacitation or knowingly taking advantage of an incapacitated person.

Definitions of force, violence, duress or menace

The following definitions (drawn from California law) inform whether an act was accomplished by force, violence, duress or menace:

- An act is *accomplished by force* if a person overcomes the other person's will by use of physical force or induces reasonable fear of immediate bodily injury.
- *Violence* means the use of physical force to cause harm or injury.
- *Duress* means a direct or implied threat of force, violence, danger, hardship, or retribution that is enough to cause a reasonable person of ordinary sensitivity to do or submit to something that he or she would not otherwise do or submit to. When deciding whether the act was accomplished by duress, all the circumstances, including the age of the impacted party and his or her relationship to the responding party, are relevant factors.
- *Menace* means a threat, statement, or act showing intent to injure someone.

c. What is Consent?

Consent is an affirmative nonverbal act or verbal statement expressing consent to sexual activity by a person that is informed, freely given and mutually understood. It is the responsibility of person(s) involved in sexual activity to ensure that he/she/they have the affirmative consent of the other or others to engage in the sexual activity. Affirmative consent must be ongoing throughout a sexual activity and can be revoked at any time. Lack of protest or resistance does not mean consent, nor does silence mean consent. Consent to one act by itself does not constitute consent to another act. The existence of a dating relationship between the persons involved, or the fact of past sexual relations, should never by itself be assumed to be an indicator of consent. Whether one has taken advantage of a position of influence over another may be a factor in determining consent.

d. What is Incapacitation?

Incapacitation means that a person lacks the ability to voluntarily agree to sexual activity because the person is asleep, unconscious, under the influence of an anesthetizing or intoxicating substance such that the person does not have control over his/her body, is otherwise unaware that sexual activity is occurring, or is unable to appreciate the nature and quality of the act. Incapacitation is not the same as legal intoxication.

A party who engages in sexual conduct with a person who is incapacitated under circumstances in which a reasonable sober person in similar circumstances would have known the person to be incapacitated is responsible for sexual misconduct. It is not a defense that the Responding Party's belief in affirmative consent arose from his or her intoxication.

e. Stranger Assault and Nonstranger Assault

For the purposes of this policy, a *nonstranger* is someone known to the Complainant, whether through a casual meeting or through a longstanding relationship, including a dating or domestic relationship. A *stranger* is someone unknown to the Complainant at the time of the assault.

California law requires universities to describe how a school will respond to instances of stranger and nonstranger assaults: Stanford applies the same policies for both stranger and nonstranger assaults.

5. What is Stalking?

Stalking is the repeated following, watching or harassing of a specific person that would cause a reasonable person to (a) fear for his or her safety or the safety of others, or (b) suffer substantial emotional distress.

6. What is Relationship Violence?

Violence is Stanford's umbrella term that includes dating and domestic violence. Relationship violence is physical violence relating to a current or former romantic or intimate relationship regardless of the length of the relationship or gender/gender identity of the individuals in the relationship, including conduct that would cause a reasonable person to be fearful for his or her safety.

7. What is a Violation of a University Directive or Court Order?

A violation of a University Directive is the failure to comply with a directive issued by the University that restricts the activities of an individual in connection with an allegation or finding of Prohibited Sexual Conduct. A violation of a court order is the failure to comply with any formal order issued by a state or federal court or authorized police officer that restricts a student's access to another Stanford community member, such as an emergency, temporary or permanent restraining order.

8. What is Retaliation?

It is a violation of this policy to retaliate against any person making a complaint of Prohibited Sexual Conduct or against any person participating in the investigation of (including testifying as a witness to) any such allegation of Prohibited Sexual Conduct. Retaliation should be reported promptly to the Title IX Coordinator. Individuals engaging in retaliation are subject to discipline (for students and faculty), employment action (for employees) and/or removal from responsibilities or campus. Retaliation includes direct or indirect intimidation, threats, coercion, harassment or other forms of discrimination against any individual who has brought forward a concern or participated in the University's Title IX process. Both parties are prohibited from engaging in intimidating actions directly or through support persons that reasonably could deter either a party or a witness from participating in a Title IX investigation or hearing.

9. Getting Immediate Help

If you or someone you know has experienced Prohibited Sexual Conduct, here are some steps to consider:

- a. If you are in immediate danger, or if you believe there could be an ongoing threat to you or the community, please call 911 or 9-911 from a campus phone.

- b. Get to a safe place and speak to a confidential resource. Confidential resources have special legal protection and will not share your name or personal information with

anyone. They are able to provide for your immediate mental well-being and to discuss your options with you. A list of confidential resources is provided in Section 18.

1. For students, the Stanford University Confidential Support Team is available 24 hours a day. Office: (650) 736-6933. After Hours Hotline: (650) 725-9955.
2. Counseling and Psychological Services (CAPS) at (650) 723-3785.
3. For all University community members, the YWCA Rape Crisis Hotline is available 24 hours a day at (650) 493-7273 or (408) 287-3000.

c. You are encouraged to seek medical attention and a medical-legal examination for evidence collection purposes. Please see Section 13 for information about medical resources.

d. You are encouraged to contact the police, although you are not required to make a report to the police. Stanford has its own Department of Public Safety, which you can reach at (650) 723-9633, for assistance and support. University officials also will assist you in contacting local law enforcement authorities, if you request assistance. If you believe that there is an ongoing threat to your safety from a particular individual, you may request an Emergency Protective Restraining Order from a California police officer. Please see Section 15 for more information about restraining order options.

e. If you are able, you are encouraged to write down what you remember about the incident. (You might also ask a friend to help you.) If possible, record information in a chronological order including details, such as names of the accused and witnesses, time-estimates and locations. This record will assist you in recalling the event later and might assist you in any further process, such as speaking to the police, doctors or University staff.

f. Students in need of immediate University assistance or interim accommodations should contact the resources listed here; Stanford provides 24-hour assistance. Please note that requesting interim safety measures or accommodations (e.g., housing or academic) will result in a formal notification to the University. For an immediate No Contact Order, a temporary housing accommodation or similar urgent assistance, contact:

During business hours:

Catherine Glaze, Title IX Coordinator, 2nd Floor, Mariposa House, 585 Capistrano Way, Stanford, (650) 497-4955, titleix@stanford.edu. The Title IX Coordinator will coordinate with appropriate staff. After hours: graduate students should call a Graduate Life Office Dean (see below).

Graduate students during regular business hours call:

(650) 736-7078, for a Graduate Life Office Dean. If there is no answer or if you have an urgent, after-hours issue, call the 24-hour pager: (650) 723-8222, pager ID 25085.

g. Employees in need of University assistance relating to employment responsibilities or interim accommodations should contact the Sexual Harassment Policy Office at (650) 724-2120, harass@stanford.edu, a Human Resources Representative or a Sexual Harassment Adviser at atharass.stanford.edu/help/advisers. Please note that requesting interim measures or accommodations will result in a formal notification to the University.

10. Reporting Acts of Prohibited Sexual Conduct to the University

a. Where to Report

Reports of Prohibited Sexual Conduct relating to students, either as the Complainant or as the Responding Party, should be reported to:

Catherine Glaze, Title IX Coordinator, titleix@stanford.edu, (650) 497-4955

All other reports should be made to the Sexual Harassment Policy Office:

Sexual Harassment Policy Office, harass@stanford.edu, (650) 724-2120

b. What to Report

For University staff members who are required to report Prohibited Sexual Conduct, the following information (if known) should be provided:

- Name of person who may have experienced Prohibited Sexual Conduct
- Name of Responding Party (accused party) (if known)
- Date of the incident
- Date of report
- To whom report was made
- Location of the incident (be specific: not "Responding Party's room" but "RP's room in Stern Hall" or "off-campus in downtown Palo Alto")
- Time of the incident
- Nature of the conduct (be as specific as possible, identify the category(ies) of Prohibited Sexual Conduct—sexual misconduct, sexual assault, stalking, relationship violence; and also specific allegations: e.g., sexual misconduct, IP awoke to RP touching her breasts without permission.)

c. Who Must Report

Except for University-recognized confidential resources, the following University staff members (including student staff members) with knowledge of unreported concerns relating to Prohibited Sexual Conduct are required to report such allegations to the Title IX Coordinator (for students) or the Sexual Harassment Policy Office (for all other reports): (i) supervisors; (ii) staff within: (a) Residential Education; (b) Vice Provost for Student Affairs; (c) Vice Provost for Undergraduate Education; and (d) Vice Provost for Graduate Education; and (iii) faculty and staff who have responsibility for working with students in the following capacities: teaching; advising; coaching or mentoring. Reporting by these individuals is required regardless of whether the subject of the Prohibited Sexual Conduct has or has not indicated they will contact the appropriate office.

The University urges individuals who have been subjected to Prohibited Sexual Conduct to make an official report, whether or not they intend at that time to seek criminal or civil redress or pursue internal disciplinary measures. A report of the matter will be dealt with promptly and equitably. The University will not discipline reporting parties or witnesses for drug and alcohol violations (relating to voluntary ingestion) or similar Fundamental Standard (not Honor Code) offenses related to the reported incident that do not place the health or safety of any other person at risk.

11. University Response to Allegations of Prohibited Sexual Conduct

a. Immediate Response

Upon notice of any concern regarding Prohibited Sexual Conduct, the University will promptly assess the situation and respond, including instituting any immediate safety measures or accommodations necessary to ensure the safety of the Complainant and the Stanford Community.

b. Investigation Process for Matters involving a Student as the Alleged Wrongdoer

For matters in which a concern has been brought against a student in a degree-granting program as the alleged wrongdoer, the University will follow the Student, which is managed by the Title IX Coordinator.

c. Investigation Process for Matters involving Faculty or Staff as the Alleged Wrongdoer

The University will first assess whether an investigation will be conducted; that is, whether the allegation(s), if true, would rise to the level of Prohibited Sexual Conduct and, if so, whether a formal investigation is appropriate under the circumstances, taking into account the Complainant's request for confidentiality. The decision-makers to assess whether to move forward to an investigation are: for all matters in which a student is a Complainant, the Title IX Coordinator; for matters in which no student is involved and the respondent is faculty, the cognizant dean or program director; for matters in which no student is involved and the respondent is staff, Human Resources; faculty and staff decision-makers should confer with the Sexual Harassment Policy Office.

In instances in which the University decides to move forward to an investigation, each party will have the same opportunities within the process including: written notice of the concern, an opportunity to respond and be interviewed, and an opportunity to identify relevant witnesses and evidence. Investigations of Prohibited Sexual Conduct will be timely and equitable. The University will review relevant information. While corroborating evidence of accounts is helpful, it is not always available and the credible account of one party can be sufficient to establish a fact. The University makes good faith efforts to complete investigations under Title IX in a 60 day timeframe, although extensions may be appropriate in some matters. Investigations of allegations of Prohibited Sexual Conduct may be conducted by the Title IX Coordinator or her trained designee, by a Human Resources or trained Sexual Harassment Adviser in consultation with the Sexual Harassment Policy Office and the Title IX Office, or by outside resources, depending upon who the parties are and the nature of the conduct alleged. All cases involving

students will be investigated in consultation with the Title IX Office. The standard of proof for all determinations of Prohibited Sexual Conduct during an administrative review process is preponderance of the evidence, that is, the conduct more likely than not occurred. Appeal rights are as provided in specifically applicable policies:

- Staff Investigations. Following an investigation, a staff member may file a grievance under [Guide Memo 2.1.11: Grievance Policy](#).
- Senior Staff. Following an investigation, a staff member may seek administrative review as provided in [Guide Memo 2.1.14: Senior Staff](#).
- Employees covered by collective bargaining agreements. Please refer to Labor Relations & Collective Bargaining.
- Trial period, casual or temporary employees. Following an investigation, an employee may seek administrative review under [Guide Memo 2.1.19: Administrative Review Policy](#).
- Academic Staff—Librarians and Academic Staff—Research Associates. Following an investigation, please refer to the Research Policy Handbook at [Grievance](#).
- Faculty. Please refer to the [Faculty Handbook](#).

d. Support Resources, Interim Measures & Remedies:

The University will take steps to prevent the recurrence of Prohibited Sexual Conduct through safety measures and will redress its effects through appropriate accommodations. The University in implementing such measures and accommodations will seek to minimize the impact and burden on the involved parties consistent with protecting the well-being of the involved parties and the community. To the extent reasonable and feasible, the University will consult with the Complainant and the Responding Party in determining accommodations and safety measures. (Students are directed to Appendix C of the [Student Title IX Process](#) for additional information.) Appropriate support resources, interim measures and remedies may include:

- Housing accommodations
- Counseling services
- Academic accommodations
- No contact directives, stay-away letters, or campus bans
- Escorts
- Limitation on extracurricular or athletic activities
- Removal from University community
- Referral to University disciplinary process
- Review or revision of University policies or practices
- Training
- Climate surveys

1. Obtaining Interim Measures

When the University has notice of an allegation of Prohibited Sexual Conduct, involving a student, the Title IX Coordinator is authorized to implement interim measures as

appropriate, which will generally remain in effect throughout the duration of the University investigation. When the University has notice of an allegation of Prohibited Sexual Conduct that does not involve a student, the Sexual Harassment Policy Office is authorized to implement interim measures as appropriate, which will generally remain in effect throughout the duration of the University investigation. Interim Measures may include the same safety measures or accommodations provided above.

2. Potential Accommodations in the Event of No Investigation

Even if the University decides not to confront the Responding Party because of the Complainant's request for confidentiality, the University may pursue other reasonable steps to limit the effects of the Prohibited Sexual Conduct as feasible and reasonable in light of the Complainant's request for confidentiality. The University's response may be limited, however, by a request for confidentiality.

e. Disciplinary & Corrective Action Processes

The University has processes that focus on the imposition of discipline (students and faculty) or corrective action (staff) for individuals found responsible for violating the Fundamental Standard or a University Policy.

1. Student Discipline

Student discipline is implemented through the [Student Title IX Process](#).

The Title IX Office investigates all formal disciplinary complaints of Prohibited Sexual Conduct, and files formal charges if the evidence supports the allegation. Specially trained panelists consider allegations of Prohibited Sexual Conduct after the matter has been investigated and charged. Parties to the process are invited to work with support persons. Sanctions for students found responsible for such a violation range from a formal written warning to suspension for a period of time or expulsion from the University. Expulsion is the expected sanction following a finding of sexual assault and expulsion must be considered for all findings of Prohibited Sexual Conduct. Mediation between parties is not available for cases of sexual assault or misconduct.

2. Faculty & Staff Discipline/Corrective Action

For faculty and staff, violations of this policy are addressed according to applicable faculty and staff personnel policies. Employees in a collective bargaining unit are covered by policies in the applicable agreement. When violations are found, possible sanctions range from censure to dismissal from the University. For more specific information, please see the following resources:

- [Administrative Guide 2.1.16: Addressing Conduct and Performance Issues \(staff\)](#), and the policies described above in [Section 11.c.above](#).
- [Faculty Handbook: Statement on Faculty Discipline \(faculty\)](#).

12. Confidentiality of Information

The University will make reasonable and appropriate efforts to preserve an individual's privacy and to protect the confidentiality of information. However, because of laws relating to

reporting and other state and federal laws, the University cannot guarantee confidentiality relating to incidents of Prohibited Sexual Conduct except where those reports are privileged communications to Confidential Resources. (See below.) Exceptions to maintaining confidentiality are set by law; for example, physicians and nurses who treat any physical injury sustained during a sexual assault are required to report it to law enforcement. Also, physicians, nurses, psychologists, psychiatrists, teachers and social workers must report a sexual assault committed against a person under age 18.

Except for Confidential Resources, information shared with other individuals is not legally protected from being disclosed. If the individual requests confidentiality or requests that there be no investigation, the University's ability to respond may be limited, including pursuing discipline or administrative remedies against the accused, although, where feasible, the University will take reasonable steps to prevent Prohibited Sexual Conduct and limit its effects. It is not always possible to provide confidentiality depending on the seriousness of the allegation and other factors, which will be weighed by the Title IX Coordinator in conjunction with an individual's request for confidentiality or a request not to pursue an investigation. These factors include circumstances that suggest an increased risk of the accused committing additional acts of Prohibited Sexual Conduct or other violence, whether the Prohibited Sexual Conduct was perpetrated with a weapon, the age of the student, and the ability of the University to obtain evidence by other means. The University takes requests for confidentiality seriously while at the same time considering its responsibility to provide a safe and nondiscriminatory environment for all students and the University community. The University in such circumstances will make sure the Complainant is aware he/she/they are protected from retaliation.

As required by the Clery Act, all disclosures to any University employee of an on-campus or "non-campus property" sexual assault must be reported for statistical purposes only (without personal identifiers) to the Stanford University Department of Public Safety, which has the responsibility for tabulating and annually publishing sexual assault and other crime statistics. Such reports are for statistical purposes and do not include individual identities or other personally identifiable information.

In California, a police officer is required to ask a victim of sexual assault and domestic violence (specifically section 273.5 Penal Code) if he or she wants his or her name to remain confidential (Penal Code 293(a)). If a victim elects to have his or her name remain confidential, the police will not list the victim's name in a crime log or release it to university officials without permission (Penal Code 293(d)). If the District Attorney elects to prosecute a sexual assault, the name of an adult victim may be subject to disclosure.

If a formal complaint against a student is filed with the Title IX Coordinator then the process provided for in the Student Title IX Process will be followed.

8.5. CONSENSUAL SEXUAL OR ROMANTIC RELATIONSHIP IN THE WORKPLACE AND EDUCATIONAL SETTING

Read the policy: <https://adminguide.stanford.edu/chapter-1/subchapter-7/policy-1-7-2>

This policy highlights the risks in sexual or romantic relationships at Stanford between individuals in inherently unequal positions. In the School of Medicine context, such unequal positions might include between students (on the one hand) and professors, preceptors and or others with supervisory or evaluative roles vis a vis the students (on the other hand). The policy prohibits certain relationships between teachers and students; in other relationships: requires notification and recusal from supervision and evaluation. Specific sections of the policy cover in detail relationships with students, between students, and in other contexts.

Read a synopsis of the policy's important points: <https://harass.stanford.edu/be-informed/guidelines-consensual-relationships>

8.6. STUDENT ACADEMIC GRIEVANCE PROCEDURE

<http://exploreddegrees.stanford.edu/academicpoliciesandstatements/#studentacademicgrievanceproceduretext>

The following policy is subject to periodic review and modification.

1. Coverage

- a. Any Stanford undergraduate or graduate student who believes that he or she has been subjected to an improper decision on an academic matter is entitled to file a grievance to obtain an independent review of the allegedly improper decision, followed by corrective action if appropriate. A grievance is a complaint in writing made to an administrative officer of the University concerning an academic decision, made by a person or group of persons acting in an official University capacity, that directly and adversely affects the student as an individual in his or her academic capacity.
- b. This grievance procedure applies only in those cases involving a perceived academic impropriety arising from a decision taken by: (1) an individual instructor or researcher; (2) a school, department, or program; (3) a committee charged to administer academic policies of a particular school, department, or program; or (4) the University Registrar, the Vice Provost for Undergraduate Education, the C-USP Subcommittee on Academic Progress, or a Senate committee or subcommittee charged to administer academic policies of the Senate of the Academic Council. This procedure does not apply to: (1) complaints expressing dissatisfaction with a University policy of general application challenged on the grounds that the policy is unfair or inadvisable; (2) individual school, department, or program academic policies, as long as those policies

are not inconsistent with general University policy; (3) matters proceeding or addressed through the Office of Community Standards; or (4) involuntary leave decisions.

- c. Individuals should be aware that the University Ombuds Office is available to all Stanford students, faculty, and staff to discuss and advise on any matter of University concern and frequently helps expedite resolution of such matters. Although it has no decision-making authority, the University Ombuds Office has wide powers of inquiry, including into student complaints against instructors.

2. Grievance and Appeal Procedures

- a. **Informal Attempts at Resolution:** the student first should discuss the matter, orally or in writing, with the individual(s) most directly responsible. If no resolution results, the student should then consult with the individual at the next administrative level, for example, the chair or director of the relevant department or program, or, for those cases in which there is none, with the school dean. At this stage, the department chair or program director, if any, may inform the dean that the consultation is taking place and may solicit his or her advice on how to ensure that adequate steps are taken to achieve a fair result. Efforts should be made to resolve the issues at an informal level without the complaint escalating to the status of a formal grievance.
- b. **The Filing of the Grievance:**
 - i. If informal means of resolution prove unsatisfactory, the student should set forth in writing a statement of the decision that constitutes the subject matter of the dispute, the grounds on which it is being challenged, and the reasons why the grievant believes that the decision was improperly taken. The statement should also include a description of the remedy sought and the informal efforts taken to date to resolve the matter. It is at this point that the complaint becomes a formal grievance. The written grievance should specifically address the matters set forth in the Standards for Review, as stated in Section 4 below. The grievance should include an allegation of any adverse effects on the grievant, known to the grievant at the time of filing.
 - ii. The grievance document should be submitted to the dean of the school in which the grievance arose; for a grievance concerning a decision of the University Registrar, the Vice Provost for Undergraduate Education, or of a Senate committee or subcommittee, the procedures set forth herein for grievances and appeals shall be modified as stated in Section 3 below. A grievance must be filed in a timely fashion, that is, no later than 30 days after the end of the academic quarter in which the adverse decision occurred or should reasonably have been discovered. Except in extraordinary circumstances, delay in filing a grievance will constitute grounds for rejection of the grievance.
- c. **The Response to the Grievance:**

- i. The relevant dean will consider the grievance. The dean may attempt to resolve the matter informally or make whatever disposition of the grievance that he or she deems appropriate. The dean may, in appropriate cases, remand the grievance to a lower administrative level (including to the level at which the grievance arose) for further consideration.
 - ii. The dean may also refer the grievance, or any issue therein, to any person (the "grievance officer") who will consider the matter and report to the dean as the latter directs. The dean will inform the grievant (and the party against whose decision the grievance has been filed) in writing of any referral of the matter and will specify the matters referred, the directions to the person or persons to whom the referral is made (including the time frame within which the person is to report back to the dean), and the name of that person.
 - iii. In undertaking the review, the dean or the grievance officer may request a response to the issues raised in the grievance from any individuals believed to have information considered relevant, including faculty, staff, and students.
 - iv. Should attempts to resolve the matter informally not be successful, the dean will decide the grievance, and will notify the grievant (and the party against whose decision the grievance has been filed) in writing of the disposition made of the grievance and the grounds for the disposition at the earliest practicable date after his or her receipt of the grievance.
 - v. Normally, no more than 60 days should elapse between the filing of a grievance and the disposition by the dean. If, because of absence of key persons from the campus or other circumstances or exigencies (including those due to breaks in the academic calendar), the dean decides that disposition on that schedule is not possible, he or she shall inform the grievant (and the party against whose decision the grievance has been filed) of that in writing, giving the grounds therefore and an estimate of when a disposition can be expected. During summers and the winter closure, this time frame will nearly always be extended.
- d. The Filing of an Appeal:
- i. If the grievant is dissatisfied with the disposition of the grievance at the decanal level, either on substantive or on procedural grounds, he or she may appeal in writing to the Provost.
 - ii. The appeal must specify the particular substantive or procedural bases of the appeal (that is, the appeal must be made on grounds other than general dissatisfaction with the disposition) and must be directed only to issues raised in the grievance as filed or to procedural errors in the grievance process itself, and not to new issues. The appeal must contain the following:
 - i. A copy of the original grievance and any other documents submitted by the grievant in connection therewith.

- ii. A copy of the determination made by the dean on that grievance.
 - iii. A statement of why the reasons for the determination of the dean are not satisfactory to the grievant. This statement should specifically address the matters set forth in the Standards for Review in Section 4 below.
- iii. The grievant will file his or her appeal at the earliest practicable date after the grievant's receipt of the determination by the dean. Normally, no more than 30 days should elapse between the transmittal of the dean's decision on the grievance and the filing of the appeal. Except in extraordinary circumstances, delay in filing an appeal will constitute grounds for rejection of the appeal.
- e. The Response to the Appeal:
 - i. The Provost may attempt to resolve the matter informally, or refer the appeal, or any issue thereof, to any person (the "grievance appeal officer") who shall consider the matter and report to the Provost as the latter directs. The Provost may also, in appropriate cases, remand the matter to a lower administrative level (including to the level at which the grievance arose) for further consideration.
 - ii. The Provost will inform the grievant (and the party against whose decision the grievance has been filed) in writing of any referral of the matter and will specify the matters referred, the directions to the person to whom the referral is made (including the time frame within which the person is to report back to the Provost), and the name of that person.
 - iii. Should attempts be made to resolve the matter informally not be successful, the Provost will decide the appeal, and will notify the grievant (and the party against whose decision the grievance has been filed) in writing of the disposition made of the grievance and the grounds for the disposition at the earliest practicable date after his or her receipt of the appeal. The decision of the Provost shall be final, unless the grievant requests a further appeal to the President pursuant to subsection 2f below, and the President agrees to entertain this further appeal.
 - iv. Normally no more than 45 days should elapse between the filing of the appeal and the disposition by the Provost. If, because of absence of key persons from the campus or other circumstances or exigencies (including those due to breaks in the academic calendar), the Provost judges that disposition on that schedule is not possible, he or she will inform the grievant (and the party against whose decision the grievance has been filed) of the fact in writing, giving the grounds therefore and an estimate of when a disposition can be expected. During summers and the winter closure, this time frame will nearly always be extended.
- f. The Request to the President: if the student is dissatisfied with the disposition of the appeal by the Provost, he or she may write to the President of the University giving reasons why he or she believes the grievance result to be wrong (following the general format set forth in subsection 2d.2 above). No more than 30 days should elapse between the transmittal of the Provost's disposition and the written statement to the

President urging further appeal. In any case, the President may agree or decline to entertain this further appeal. If the President declines to entertain the further appeal, the decision of the Provost is final. If the President decides to entertain the further appeal, he or she will follow the general procedures set forth in Section 2e above, and the decision of the President will be final.

3. Grievances Concerning Decisions of the University Registrar, the Vice Provost for Undergraduate Education, or of a Senate Committee or Subcommittee
 - a. For a grievance concerning a decision of the University Registrar, the Vice Provost for Undergraduate Education, the C-USP Subcommittee on Academic Progress, or of a Senate committee or subcommittee, the grievant will file his or her grievance with the Provost, rather than with the dean, and the Provost will handle that grievance in accordance with the procedures set forth in Section 2c above.
 - b. There is no appeal of the Provost's disposition of that grievance, except as may be available under Section 2f above.
4. Standards for Review and Procedural Matters
 - a. The review of grievances or appeals will usually be limited to the following considerations:
 - i. Were the proper facts and criteria brought to bear on the decision? Were improper or extraneous facts or criteria brought to bear that substantially affected the decision to the detriment of the grievant?
 - ii. Were there any procedural irregularities that substantially affected the outcome of the matter to the detriment of the grievant?
 - iii. Given the proper facts, criteria, and procedures, was the decision one which a person in the position of the decision maker might reasonably have made?
 - b. The time frames set forth herein are guidelines. They may be extended by the relevant administrative officer in his or her discretion for good cause.
 - c. Questions concerning the filing and appeal of grievances should be directed to the Office of the Provost.

8.7. CHILDBIRTH ACCOMMODATION POLICY FOR WOMEN GRADUATE STUDENTS AT STANFORD UNIVERSITY

<http://gap.stanford.edu/5-9.html>

The following may be found in Section 5.9.1 of the Graduate Academic Policies and Procedures Handbook (the GAP handbook), available online at <http://gap.stanford.edu/5-9.html>.

Summary

Defines an Academic Accommodation Period for registered and matriculated women graduate students anticipating or experiencing a birth. Provides guidance for students who wish to take a leave of absence for pregnancy, adoption or childbirth-related reasons. Complies with the requirements of California Education Code 66281.7.

Rationale

Stanford University recognizes the importance of balancing the family and academic needs of new parents, and provides support for graduate students who are anticipating the birth or adoption of a child. Stanford extends this support to parents expecting a baby, to parents who are adopting a child, and to parents through surrogacy.

Nothing in this policy replaces the communication and cooperation between students and their advisors and departments, and the good-faith efforts of both to accommodate the birth or adoption of a child. It is the intention of this policy to reinforce the importance of that cooperation, and to provide support where needed to make that accommodation possible.

Policy

Stanford University prohibits discrimination on the basis of any characteristic protected by applicable law, including discrimination on the basis of pregnancy, in the administration of its programs and activities. Stanford will neither require nor prohibit leaves of absence for reason of pregnancy or childbirth-related concerns. In addition, Stanford will reasonably accommodate its graduate students, including pregnant students, so that they may continue to make progress toward the completion of their degree. The nature of this accommodation is defined in this policy.

Any student who believes that he or she has not been treated equitably under the provisions of this policy may file a grievance with the Diversity and Access Office Title IX Administrator, through the Student Non-Academic Grievance Procedure.

8.8. OWNERSHIP AND USE OF STANFORD NAMES AND TRADEMARKS

<http://exploreddegrees.stanford.edu/nonacademicregulations/#text>

Stanford registered marks, as well as other names, seals, logos, and other symbols and marks that are representative of Stanford, may be used solely with permission of Stanford.

Merchandise bearing Stanford's names and marks, such as t-shirts, glassware, and notebooks, must be licensed. For complete text of the currently applicable policy, including the University officers authorized to grant permission to use the Stanford name and marks, see Administrative Guide 1.5.4, Ownership and Use of Stanford Name and Trademarks at <https://adminguide.stanford.edu/chapter-1/subchapter-5/policy-1-5-4>.

8.9. COMPUTER AND NETWORK USAGE POLICY

<http://exploreddegrees.stanford.edu/nonacademicregulations/#text-compnetusag>

For a complete text of the currently applicable version of this policy, see Administrative Guide 6.2.1, Computer and Network Usage Policy, available at

<https://adminguide.stanford.edu/chapter-6/subchapter-2/policy-6-2-1>.

Users of Stanford network and computer resources have a responsibility not to abuse the network and resources. This policy provides guidelines for the appropriate and inappropriate use of information technologies.

Summary

The following summarizes the policy on Computer and Network Usage:

In particular, the policy provides that users of University information resources must respect software copyrights and licenses, respect the integrity of computer-based information resources, refrain from seeking to gain or permitting others to gain unauthorized access, including by sharing passwords, and respect the rights of other computer users.

This policy covers appropriate use of computers, networks, and information contained therein. As to political, personal and commercial use, the University is a non-profit, tax-exempt organization and, as such, is subject to specific federal, state, and local laws regarding sources of income, political activities, use of property, and similar matters. It also is a contractor with government and other entities, and thus must assure proper use of property under its control and allocation of overhead and similar costs. For these reasons, University information resources must not be used for partisan political activities where prohibited by federal, state, or other applicable laws, and may be used for other political activities only when in compliance with federal, state, and other laws, and in compliance with applicable University policies. Similarly, University information resources should not be used for personal activities not related to appropriate University functions, except in a purely incidental manner. In addition, University information resources should not be used for commercial purposes, except in a purely incidental manner or except as permitted under other written policies of the University or with the written approval of a University officer having the authority to give such approval. Any such commercial use should be properly related to University activities, take into account proper cost allocations for government and other overhead determinations, and provide for appropriate reimbursement to the University for taxes and other costs the University may incur by reason of the commercial use. Users also are reminded that the .edu domain on the Internet has rules restricting or prohibiting commercial use, and thus activities not appropriately within the .edu domain and which otherwise are permissible within the University computing resources should use one or more other domains, as appropriate.

The University's Information Security Officer is authorized in appropriate circumstances to inspect or monitor private data (including e-mail), such as when there is a reasonable cause to suspect improper use of computer or network resources.

8.10. COPYRIGHT

<http://exploreddegrees.stanford.edu/nonacademicregulations/#text-copyright>

Copyright laws protect original works of authorship and give the owners of copyrights the exclusive right to do and to authorize others to do certain things in regard to a copyrighted work, including: make copies, distribute the work, display or perform the work publicly, and create derivative works. Copyright laws apply to nearly all forms of captured content, including traditional works like books, photographs, music, drama and sculpture. The laws also adapt to changes in technologies, and include in their scope modern forms of works like motion pictures, Web sites, electronic media, software, multimedia works and some databases. Registration is not required to obtain a copyright, so if in doubt, assume a copyright applies.

Unless an exception to the copyright owner's exclusive rights applies, you must obtain permission from the copyright owner to copy, distribute, display or perform a copyrighted work in any medium for any purpose. Be especially mindful of copyright principles when using the Internet. Just because a work is posted on the Internet does not mean that the owner of the copyright has given you permission to use it. And, you should not be posting material onto the Internet without copyright clearance.

Stanford University Libraries have licenses with many publishers, which permit copying of materials in accordance with the educational, research or administrative functions of the University. In addition, there are four major exceptions to the copyright owner's exclusive rights, which (if applicable) permit limited use without permission. These are: the fair use exception, the library exception, the face-to-face teaching exception, and the distance-learning exception. For a more detailed explanation of these exceptions, the copyright laws and Stanford's copyright policies, please review the University's Copyright Reminder at http://www-sul.stanford.edu/libraries_collections/copyright_reminders/.

It is each person's responsibility to be aware of and abide by copyright law; violation may result in civil or criminal liability, and constitutes grounds for University discipline, up to and including discharge, dismissal and expulsion.

8.11. SMOKE-FREE ENVIRONMENT

The general policy for the University can be found at:

<http://exploreddegrees.stanford.edu/nonacademicregulations/#text-smokenvi>

The School of Medicine Specific Tobacco-free Environment

<http://med.stanford.edu/school/campus/tobacco-free-campus-policy/policy.html>

8.12. CAMPUS SAFETY AND CRIMINAL STATISTICS

<http://exploreddegrees.stanford.edu/nonacademicregulations/#text-campsafecrimstat>

Stanford University complies with the Jeanne Clery Disclosure of Campus Security Policy and Crime Statistics Act. A copy of Stanford's policies and statistics under this act are posted on the Department of Public Safety web site at <http://stanford.edu/group/SUDPS/safety-report.shtml>. A paper copy can be obtained by calling the Stanford Department of Public Safety at (650) 723-9633.

8.13. CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS COMPLAINT PROCEDURE

<http://exploreddegrees.stanford.edu/nonacademicregulations/#text-grievances-caldeconaffcompro>

An individual may contact the Bureau for Private Postsecondary Education for review of a complaint. The bureau may be contacted online at <http://www.bppe.ca.gov> or at 2535 Capitol Oaks Drive, Suite 400, Sacramento, CA 95833; phone: (916) 431-6924; fax: (916) 263-1897.

8.14. CONTROLLED SUBSTANCES AND ALCOHOL

<https://adminguide.stanford.edu/chapter-2/subchapter-2/policy-2-2-8>

It is the policy of Stanford University to maintain a drug-free workplace and campus. The unlawful manufacture, distribution, dispensation, possession and/or use of controlled substances or the unlawful possession, use or distribution of alcohol is prohibited on the Stanford campus, in the workplace or as part of any of the University's activities. (For clarification of what activities related to controlled substances and alcohol are unlawful, see the Appendix at the end of this Guide Memo.) The workplace and campus include all Stanford premises where the activities of the University are conducted. Moreover, employees are prohibited from being under the influence of controlled substances or alcohol while at work. Violation of this policy may result in disciplinary sanctions up to and including termination of employment or expulsion. Violations may also be referred to the appropriate authorities for prosecution.

8.15. STANFORD UNIVERSITY MARIJUANA POLICY STATEMENT

https://alcohol.stanford.edu/sites/default/files/stanford_university_marijuana_policy_statement_november_2016.pdf

On November 8, 2016, California passed [Proposition 64 the California Marijuana Legalization Initiative](#) (also referred to as the Adult Use of Marijuana Act) legalizing recreational marijuana for persons aged 21 years or older under state law and establishing certain sales and cultivation taxes.

Under this law, Californians can process, transport and grow limited amounts of marijuana for personal use as regulated under local municipal regulations.

Marijuana is still illegal under federal law and categorized as an illicit substance ([Drug Enforcement Agency Schedule I, https://www.dea.gov/druginfo/ds.shtml](#)) under the Drug-Free Workplace Act of 1988 and the Drug-Free Schools and Communities Amendments of 1989.

Stanford University receives federal funding for various uses, including research and student financial aid. As such, Stanford must comply with federal law, including all current federal drug laws. Therefore, even though California has legalized marijuana for recreational use for some individuals, the possession, use, storage and cultivation of marijuana (as defined below) is prohibited on Stanford University property for all faculty, staff and students under the university [Controlled Substances and Alcohol Policy, https://adminguide.stanford.edu/chapter-2/subchapter-2/policy-2-2-8](#). This includes off-campus housing that is operated under university oversight and policies.

For purposes of this policy marijuana (cannabis) is defined here and includes the following non-exhaustive prohibited products.

Marijuana or cannabis refers to the dried leaves, flowers, stems, resin and seeds from the hemp plant, *Cannabis sativa*. The plant contains the mind-altering chemical delta-9-tetrahydrocannabinol (THC) and other related compounds. Extracts with high amounts of THC can also be made from the cannabis plant. Cannabis can be manufactured into edible forms such as chocolate, cookies, candies, etc. Compounds can be smoked, vaporized and used as topical products such as creams or oils.

Frequently Asked Questions

Now that California voters approved [Proposition 64 the California Marijuana Legalization Initiative \(http://vig.cdn.sos.ca.gov/2016/general/en/pdf/text-proposed-laws.pdf#prop64\)](#) legalizing recreational marijuana for persons aged 21 years or older under state law don't I have a legal right to use and possess marijuana anywhere I want, including on campus?

No. Although the new law permits the use and possession of recreational marijuana for persons aged 21 years or older under California law, it does not affect Stanford University's ability to set the policies for student conduct. As a higher-education institution, private-property owner, and employer, Stanford University has the right to define what conduct is permissible and expected within its community and on its campus.

What is the relationship between federal laws that prohibit marijuana use and Proposition 64 the California Marijuana Legalization Initiative?

Federal laws prohibiting marijuana use supersede state laws, including Proposition 64, that attempt to permit its use. Accordingly, if you use or possess marijuana, you are subject to prosecution under federal law, regardless of what Proposition 64 permits. See <https://www.justice.gov/opa/pr/justice-department-announces-update-marijuana-enforcement-policy>. Importantly, a conviction for drug-use under federal law may cause you to become ineligible for federal financial aid.

Does Stanford University's policy prohibiting marijuana use apply to faculty, staff, guests, and visitors to campus for special events?

Yes. The Stanford University [Controlled Substances and Alcohol Policy](https://adminguide.stanford.edu/chapter-2/subchapter-2/policy-2-2-8) (<https://adminguide.stanford.edu/chapter-2/subchapter-2/policy-2-2-8>) prohibits faculty, staff, guests, and visitors from using, possessing, or being under the influence of controlled substances including marijuana while on campus or during university activities.

Where can I find more information on marijuana (cannabis)?

<https://alcohol.stanford.edu/alcohol-drug-info/staying-safe/resources>
<https://www.drugabuse.gov/publications/drugfacts/marijuana>
<https://medlineplus.gov/marijuana.html>

Where can I find more information on Prop 64?

<http://vig.cdn.sos.ca.gov/2016/general/en/pdf/prop64-title-sum-analysis.pdf>