## FLORIDA ATLANTIC UNIVERSITY\*

### Graduate Programs—COURSE CHANGE REQUEST<sup>1</sup>

UGPC APPROVAL_	
UFS APPROVAL	
SCNS SUBMITTAL_	
CONFIRMED	
BANNER POSTED	
CATALOG	

syllabus.2011.pdf

if necessary)

2. Review Provost Memorandum:

www.fau.edu/provost/files/Definition Cre

3. Consent from affected departments (attach

Definition of a Credit Hour

dit Hour Memo 2012.pdf

DEPARTMENT:	COLLEGE: COLLEGE OF MEDICINE
Course Prefix and Number: BCC 7110	CURRENT COURSE TITLE: INTEGRATED MEDICINE CLERKSHIP
Change(s) are to be effective (LIST TERM): Summer 2013	TERMINATE COURSE (LIST FINAL ACTIVE TERM):
CHANGE TITLE TO: INTERNAL MEDICINE CLERKSHIP	CHANGE PREREQUISITES/MINIMUM GRADES TO*:
CHANGE PREFIX FROM: TO:	
CHANGE COURSE No. FROM: TO:	CHANGE COREQUISITES TO*:
CHANGE CREDITS <sup>2</sup> FROM: 12 TO: 20	
CHANGE GRADING FROM: TO:  CHANGE DESCRIPTION TO:	CHANGE REGISTRATION CONTROLS TO:
	*Please list both existing and new pre/corequisites, specify AND or OR, and include minimum passing grade.
Aftach syllabus for <b>ANY</b> ch	anges to current course information.
Should the requested change(s) cause this course to overlap any other FAU courses, please list them here.	Please consult and list departments that might be affected by the change(s) and attach comments.
Faculty contact, email and complete phone number: Barry Linger, Ed.D., 297-0913, blinger@fau.edu	
Approved by:  Department Chair: Sunday dena	Date:  3 19 13  1. Syllabus must be attached; see guidelines for requirements: www.fau.edu/provost/files/course

Email this form and syllabus to <u>UGPC@fau.edu</u> one week before the University Graduate Programs Committee meeting so that materials may be viewed on the UGPC website prior to the meeting.

College Curriculum Chair:

UGPC Chair: Maura

Graduate College Dean:

College Dean: C

UFS President:

Provost:

# FLORIDA ATLANTIC UNIVERSITY CHARLES E. SCHMIDT COLLEGE OF MEDICINE COURSE SYLLABUS

#### **GENERAL INFORMATION**

Course Number:

BCC 7110

**Credit Hours:** 

20

Prerequisites:

Enrolled in 3<sup>rd</sup> Year of MD program

Online:

Blackboard Learning System

Term:

All

Course Title:

Internal Medicine Clerkship

**Course Director:** 

Basil Chie-For, M.D.

Office:

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Office Hours:

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#### **COURSE DESCRIPTION**

The overall goal of the Medicine Clerkship is to have all students develop a comprehensive approach to the evaluation and care of the adult medical patient. During the clerkship, students will continue to improve their ability to obtain, record, analyze and communicate clinical information. During the clerkship each student will gain an awareness of the knowledge, skills, values and attitudes that internists strive to acquire and maintain throughout their professional lives. Students will have supervised responsibility for patient care, learning to integrate clinical knowledge with practical experience.

#### **COURSE OBJECTIVES**

#### Clerkship Goals:

It is expected that all students, by the end of the Clerkship will be able:

- to obtain an accurate, comprehensive history from the patient
- to perform a rational, thorough physical examination
- to, when appropriate, focus the history and physical examination to the patient's active issues
- to order basic laboratory and radiologic studies as appropriate and to know how to interpret the results of these studies
- to use information from the history, physical examination and initial laboratory data to create a problem list
- to recognize and prioritize the issues in the problem list that need attention and to generate a differential diagnosis for each active problem

- to use information in the history, physical examination and initial laboratory data, along with the problem list and differential diagnoses, to generate a patient-oriented assessment that includes a diagnostic and therapeutic plan for each of the patient's active problems
- to record in writing, and present orally, the results of the complete history and physical examination (including assessment and plan) in a systematic, concise and coherent manner
- to use the medical literature to understand the natural history of diseases and to help plan therapy that addresses the pathophysiology of these diseases
- to integrate clinical reasoning skills with an ever-increasing knowledge base
- to continue to develop and use the skills of self-directed learning

#### **Clerkship Objectives:**

#### Medical Knowledge and Research Skills

- Acquire a basic knowledge of internal medicine, and a greater knowledge of those areas relevant to patients assigned to the individual student.
- Demonstrate knowledge of the basic sciences and the patho-physiologic priniciples behind the manifestations of the disease conditions.
- Integrate the knowledge of bio-medical, ethical, and epi-social-behavioral sciences with the clinical presentation of the disease in his/her patient.
- Demonstrate knowledge of the indications, contraindications and benefits of the common procedures such as: arterial blood gas, thoracentesis, paracentesis, lumbar puncture, and joint aspiration.
- Demonstrate understanding of the clinical presentation, basic physiology, key physical findings, evaluation and management of diseases frequently encountered:
  - Acute coronary syndromes
  - Congestive heart failure
  - Hypertension
  - Pneumonia/Pleural effusions/Asthma/COPD
  - Pulmonary embolism
  - Acute kidney injury/Chronic kidney disease
  - Acid base disturbance/Fluid and electrolyte imbalance
  - Ascites
  - Gastrointestinal bleeding/Hepatobiliary disease
  - Anemia/Cancer
  - Back pain/Rheumatologic Disorders
  - Syncope
  - HIV/Fever
  - Acute mental status change/delirium
  - Diabetes/Hypoglycemia/Hyperglycemia/Dyslipidemia
  - Abdominal pain
  - UTI
  - Skin lesions and rashes

#### Patient Care

- Obtain an accurate, pertinent history from all appropriate available sources and record it in a complete and concise manner.
- Perform and record a thorough physical examination, and review the physical findings with the faculty.
- Develop an appropriate differential diagnosis based on history and physical examination findings, laboratory and diagnostic test results.
- Develop a prioritized and detailed problem list for each patient
- Utilize clinical reasoning and form hypotheses to assess the patient's presenting problems based on gathering information

• Formulate a diagnostic and therapeutic plan for his/her patient based on gathered clinical information and laboratory data.

#### Interpersonal and Communication Skills

- Demonstrate knowledge about the impact of cultural beliefs and practices on health, disease and treatment
- Demonstrate knowledge about the impact of socioeconomic factors on health, disease and treatment
- Demonstrate knowledge about impact of gender, sexuality, religion and spirituality, ethnicity and race on health, disease and treatment
- Provide treatment that incorporates and respects the patient's personal values, preferences and expressed needs
- Conduct a culturally-competent clinical encounter, including the use of interpreters.

#### Systems of Health Care Practice

- Recognize the importance of and demonstrate commitment to the utilization of other healthcare professionals in diagnostic decision making
- Participate, whenever possible, in coordination of care and in the provision of continuity of care
- Demonstrate an understanding of the basic principles of healthcare organization and finance
- Demonstrate an understanding of the structure and function of a variety of health care delivery systems
- Complete tasks in a timely fashion

#### **EVALUATION**

#### **Grading Policy for M3**

#### Grades in the third year clerkships

Student will receive grades in the following Clerkships based on an Honors, High Satisfactory, Satisfactory, Unsatisfactory scale:

Medicine

Surgery

Geriatrics

**Pediatrics** 

Obstetrics and Gynecology

**Psychiatry** 

Community and Preventive Medicine/Longitudinal Preceptorship

Students will receive a Satisfactory/Unsatisfactory grade for each Longitudinal Integrated Clerkship.

A target will be set for a maximum of 25% Honors for each graded clerkship. This will be decided by the members of each discipline specific Clerkship Grading Committee.

#### Grading requirements

Performance in all aspects of the clerkship will be monitored. Students are required to pass all components stipulated in the clerkship syllabus in order to pass the clerkship. The clerkship grade will be determined by components that will assess medical knowledge, clinical skills, professionalism, and discipline-specific skills.

Clinical Performance Evaluation by Faculty Preceptor (Clinical skills)

NBME Subject Examination (Medical Knowledge)

Professionalism (attendance, patient logs, participation, communication skills)

Presentations, Oral Exams, OSCEs and Projects (Clerkship dependent)

Performance in a clerkship that is below expectations or unsatisfactory in any of the components of the clerkship, as defined in the discipline handbook, will result in grade of "Unsatisfactory".

#### Expectations for the assignments and projects

Clerkship Directors will determine the specific formative and summative requirements for their clerkship including write-ups, OSCE's, presentations, assignments, oral examinations etc. Determinates of the final grade in all clerkships will be clearly stated in the handbook for that discipline. Students should review the handbook for each clerkship so they understand the ways in which they will be assessed and how the final grade will be determined.

#### Clinical Performance Evaluations

Evaluation forms will be completed by clinical attendings and/or faculty preceptors.

Clinical Evaluations will assess students based on the following categories:

- (1) History Taking
- (2) Physical Examination
- (3) Record Keeping
- (4) Oral Presentation
- (5) Clinical Problem Solving
- (6) Fund of Knowledge
- (7) Professional Attributes and Responsibility
- (8) Self-Improvement
- (9) Interpersonal Communication Skills (Patients and Families)
- (10) Interpersonal Communication Skills (Relations with Health Care Team)
- (11) Narrative Assessment

The achievement of educational objectives in these areas defines the successful development of the physician-in-training and occurs during the course of a student's progress in medical school and beyond.

The Clerkship Evaluation Form is located in handbook.

#### **Determining Final Core Clerkship Grades**

All final core clerkship grades will be determined by the Grading Committee for that discipline. Further details on how grades are determined in each clerkship will be defined in that discipline's handbook. Grading Committees for each discipline will consist of the Clerkship Directors, Site Directors, and/or faculty members in that discipline. The final grade will reflect the totality of the experiences with that student. The Clerkship Directors have the authority to disregard an individual assessment based on judgment of the preponderance of the evidence. All grades for a given LIC will be reported to students no greater than six weeks after the completion of that LIC.

An **Honors** grade will be given to students for superior or outstanding achievement in all of their components for that clerkship, as determined by the Discipline Grading Committee. Ordinarily, Honors grades will be given to no more than 25% of a class.

A **High Satisfactory** grade will be given to students with superior achievement in several, but not all components of the clerkship.

A **Satisfactory** grade will be given to students who demonstrate satisfactory achievement in all components of the clerkship.

A grade of **Unsatisfactory** will be given to students whose performance is unsatisfactory or because of important deficiencies in some or all aspects of their clerkship performance.

#### Grading Description

The qualitative descriptors below will be used for grade determination by the Internal Medicine Clerkship Grading Committee:

#### Unsatisfactory:

This student has shown significant deficits in any one of the major areas of assessment including history taking, physical examination, clinical problem solving, record keeping, presentation skills, fund of knowledge, professional attributes and responsibility, self-improvement, interpersonal skills, communication skills with patients, families, and the health care team. The student did not complete patient logs, assigned SIMPLE Cases, or required Clinical Skills Assessments in a satisfactory manner. The student failed to pass the Internal Medicine NBME Shelf Exam (< 5th percentile). The deficit(s) observed cause serious concern about the student's ability to deliver appropriate care to patients and/or to conduct themselves with the professionalism expected of third year medical students as determined by the Internal Medicine Clerkship Grading Committee.

#### Satisfactory:

This student has generally demonstrated proficiency with the basic material and skills expected of a student at this level of training but has shown limited motivation to learn during the rotation and has demonstrated one or two areas which though not frankly deficient would benefit from continued improvement. Examples include occasionally superficial or disorganized write-ups or presentations, occasional notable omissions or errors in a history, some gaps in knowledge of basic pathophysiology or therapeutics, occasional difficulty in interactions with patients, family or staff. This student met expectations for their exams, assignments, and patient logs. Any significant deficits that raise serious concern about the student's ability to function appropriately in a clinical setting warrant a grade of Unsatisfactory rather than Satisfactory.

#### **High Satisfactory:**

This student's work consistently exceeds expectations in all respects; in at least several areas, the student's work has been very good to outstanding. Although not truly exceptional, the student is consistently motivated, reliable, and organized, and works well with patients, staff and faculty. By the end of the rotation, he/she can be trusted to perform and present a thorough, reasonably efficient evaluation on a complex patient and generate an appropriate differential diagnosis and treatment plan. He/she has completed all expected tasks during the rotation and has sometimes sought out additional opportunities for learning and contributing during the rotation. This student performed adequately to extremely well on their Internal Medicine NBME shelf exam, and completed all assignments and patient logs in a timely manner. This student demonstrates strong professionalism skills.

#### Honors:

This student has consistently performed at levels that far exceed the expected level for their level of training. He/she has consistently demonstrated excellent to outstanding clinical skills, presentations, write-ups and fund of knowledge, is highly motivated, reliable and well attuned to patients, families and staff, reads widely, and shows a consistent interest in seeking out and incorporating feedback, extending skills and knowledge, and contributing to the team. This student completed all assignments and patient logs in an exemplary manner. This student has impeccable professionalism. High scores (particularly above 50th percentile) on the Shelf Exam, while not required, are a plus that may be considered when other areas of performance are in the range between Honors and High Honors. The student has demonstrated performance that would typically merit enthusiastic recommendation to a leading residency training program.

#### Passing/Failing/Remediation policies

Students are expected to pass all of the components of the clerkship including clerkship evaluations, NBME subject exam, professionalism, and other assignments in order to pass the clerkship:

Expectations for the NBME Subject Examination in each discipline: Failure on the NBME shelf exam will result in a grade of "I" providing that performance in all other components of the clerkship is judged satisfactorily. Passing a re-examination will enable the "I" to be converted to a "P." No more than two such "I's" will be allowed during an academic year.

Students are expected to prepare independently. All examinations will be administered at FAU at the dates and times assigned in your clerkship schedule. A student must sit for all examinations as scheduled. A student must obtain permission for an excused absence from the clerkship director and notify the Dean for Student Affairs prior to the time for sitting for a scheduled examination. In the event of a personal emergency, the course clerkship director and the Dean for Student Affairs must be notified of the absence as soon as possible. A missed examination will be rescheduled at the discretion of the clerkship director, at a time that does not interfere with other clinical work. Unexcused absences will result in a grade of zero (0) for the missed examination.

#### Criteria and Policies Regarding Failing the NBME

To pass the clerkship you must "pass" the NBME, defined as scoring at or above the 5th percentile nationally compared to first takers at a similar period of the academic year. If you fail to do so, you will receive an incomplete grade for the clerkship. You will be required to re-take the exam during one of the preferred NBME Remediation Dates, unless approved by the Clerkship Director to take it later at another time. If you fail to score at or above the 5th percentile on your second attempt, you will receive a failing grade and remediation (which may include repeating the entire clerkship) will be determined by the Clerkship Discipline Coordinator in conjunction with the Clinical Promotions Committee.

#### Preferred Shelf Exam Remediation Dates

Upon notification of failing the NBME, the student must contact the LIC Director/or the Clerkship Director to set a date to retake the exam. To avoid having to study for and take the makeup exam while actively in another clerkship, the following dates have been set as preferred Shelf Exam Remediation Dates:

- The 1<sup>st</sup> Monday afternoon upon return from Winter Break
- The 1<sup>st</sup> Monday afternoon after return from Summer Break
- Two weeks after the completion of M3, prior to start of 4<sup>th</sup> year.

Ideally, the earliest one of these dates should be chosen. However, the student should have enough time to study for the exam, preferably spending one-to-two weeks of unscheduled time to do so. The date is to be determined by the Clerkship Director, after consultation with the student, and if necessary, with the M3/M4 Committee.

#### Remediation of a Failing grade

If a student fails a clerkship, remediation will be determined by the Clerkship Director in conjunction with discipline specific Clerkship Grading Committee. If remediation includes additional time in clinical experiences, the scheduling of this time will be set by the LIC Directors, after consultation with the student, the Clerkship Directors, and the student's Learning Community Advisor. Exceptions will be at the discretion of the Clerkship Director and the discipline specific Clerkship Grading Committee. If a student fails 2 clerkships within a given LIC, the student will be required to re-take the LIC in the next calendar year.

#### **Professionalism**

Students whose professionalism prompts concerns will see that reflected in their grade for the clerkship. Major professionalism issues may result in a Fail for the clerkship regardless of clinical grades or final exam performance.

The following is a list of some of the reasons for which the clerkship director will bring student up for discussion at the Clerkship Directors meeting and the students' grade may be impacted.

• Any unexcused absences to <u>didactic sessions</u> or <u>clinical duties</u>

- Any excused or unexcused absences to orientation
- Any excused or unexcused absences to exams (including exams rescheduled for valid reasons)
- Any excused or unexcused absences to simulation exercises
- Any comment of unprofessional behavior on evaluations or otherwise reported to the clerkship director
- Late, incomplete, or unsatisfactory submission of electronic patient log reports
- Recurrent tardiness
- Any late or incomplete assignments

#### Attendance Policy

Student attendance and participation in all scheduled learning sessions are important to students' academic and professional progress and ultimate success as physicians. **Attendance at all activities is mandatory**.

For an absence to be excused, a request must be made to the Clerkship Directors. Only a Clerkship Director can excuse an absence. No missed work associated with a specific session can be made up without loss of credit for satisfactory completion unless an excused absence has been granted.

Unexpected absences: If a student is absent unexpectedly from the scheduled daily activities of the rotation, the clerkship director and the supervising attending should be notified by phone as early as possible. If the clerkship director is unavailable, the LIC Director should be called. Failure to notify the appropriate individual will result in the absence being unexcused.

All absences will be recorded and reviewed at the monthly Clerkship Director meeting. Repeated absences from required curricular activities may result in disciplinary action, up to and including dismissal from the CESCOM.

#### Monitoring Student progress/performance:

Weekly informal discussions on student progress between clerkship directors, site directors, and clinical faculty. These discussions will occur at the various clinical sites and also from 1 to 1:30 on Tuesdays at FAU prior to start of didactic afternoons.

Every two weeks the students' discipline specific patient log lists will be sent to each clerkship directors for review.

Monthly in person, email or phone communication will occur between clerkship directors/site directors and the clinical faculty and preceptors to hear how students are performing, and assure that they are meeting expectations.

Monthly clerkship directors meeting at FAU on Tuesday from 12 to 1 to officially review each student's progress and discuss curricular issues. Final monthly meeting of each LIC will be used as the grading committee meetings to discuss LIC grades for each student. The final meeting of each 6 months will be for discipline specific grading committee meetings and will be used to determine Honors/High Satisfactory/Satisfactory/Unsatisfactory grades for each clerkship.

Every 2 months an on-line evaluation form will be filled out by all clinical faculty/preceptors that will be sent to clerkship directors/LIC Directors for review. First 2 bimonthly on-line evaluations in LIC will be formative, final evaluation will be used for grading/narrative purposes.

#### Feedback to students:

Students will receive daily/weekly informal feedback from the clinical attendings and preceptors they are working with. Faculty development sessions will be used to educate faculty on how to give feedback to students in their offices and in the hospitals.

LIC Directors, Clerkship Directors, and /or designated Site Directors will meet individually every 2 months with students to give them formal feedback on their performance during the LICs. All attending evaluations, patient logs, assignments/projects, and participation in didactic sessions will be reviewed, as well as a student's own self-assessment. These meetings will occur after the on-line evaluations are received from the clinical faculty, so that this information can be reported to students and any plans for improvement/remediation can be implemented.

Students who have concerns or questions about their progress can at any time contact their clerkship director/LIC director individually to set up a meeting.

#### Student Appeal of a Grade

Students who do not feel that their summary evaluation or grade accurately reflected their performance should follow the policies defined in the FAU student handbook.

#### **COURSE INFORMATION**

#### Clinical experiences:

**Medicine Clerkship Overview:** The Medicine Clerkship will be divided into four components within the six month Medical and Surgical Sciences (MSS) Integrated Clerkship. The experiences will be a 4 week inpatient medicine experience, a one week critical care experience, medical subspecialty exposures, and ER shifts with a focus on internal medicine cases.

Inpatient Medicine Rotation: Each third year student will spend 4 weeks assigned to a medicine ward. The four medicine inpatient sites are Bethesda Memorial Hospital, Boca Regional Hospital, Memorial Healthcare System, and Cleveland Clinic Florida. Medicine is primarily a hospital based rotation where each student will spend their time with medicine attendings and or residents making rounds, delivering patient care, and evaluating patients in the ED. This is expected to be a hands-on patient care experience focused on evaluating and managing adult medical patients in an acute care setting. The inpatient medicine rotation will begin each morning with pre-rounds on patients at approximately 7a.m., followed by work rounds and attendings rounds or morning report. In the afternoons, students will go as assigned to either their longitudinal preceptor's office, didactics at FAU (on Tuesdays), or they will have "white space" time to see their patients, read, or complete assignments.

**Critical Care Rotation**: Each student will spend one week on a Critical Care rotation. This experience will be in the ICU working with attendings and/or residents as they evaluate and manage critically ill patients.

**Emergency Room Experience**: Each student will be assigned 10 ER shifts throughout the Medical and Surgical Sciences Integrated Clerkship. During the medicine portion of the clerkship, the students will be expected to focus on and admit internal medicine cases in the ER.

**Medical Subspecialty Exposures**; Each student will be assigned to 4 or 5 medical subspecialty exposures throughout their 6 month integrated Medical and Surgical Sciences clerkship. These experiences are meant to expose the students to the transitions of care that take place when patients are referred for procedures such as colonoscopy or cardiac catheterization, or referred to subspecialty clinics for their care.

#### Assignments:

Patient Logs: All patients seen must be logged and submitted in a timely manner.

**SIMPLE Cases**: Computer based Medicine Cases will be available as a resource for supplemental learning. Cases may be formally assigned for students needing to remediate a case write-up or to supplement specific diagnoses where clinical exposure is lacking.

**Medicine Write-ups:** Each student will submit two internal medicine patient write-ups and one critical care patient write-up.

**Direct observation of Clinical Skills ("DOCS" cards):** All students are required to be observed interviewing and/or examining patients by their supervising attendings. Students are responsible to hand in their assigned Direct Observation of Clinical Skills cards to the clerkship director before the end of the clerkship.

**Student Report**: All the students will present a case based teaching presentation during the Tuesday didactic afternoons at FAU. The topic will be a case from one of the MSS disciplines: Medicine, Surgery, or Geriatrics. Appropriate current references and journals must be utilized.

#### Didactics:

Formal mandatory teaching sessions will be held at FAU on Tuesday afternoons. All the topics within Medical and Surgical Sciences will be integrated over the 6 month clerkship. The internal medicine topics will be:

- Hypertension: Dr. Chie For
- Pneumonia: Dr.Palumbo
- Chest Pain/CAD: Dr. M. Rubenstein
- CHF: Dr. S. Servoss
- EKG Workshop: Drs. Servoss and Rubenstein
- Diabetes/Hyperlipidemia: Dr. Vilnik/Rodriguez
- Osteoporosis/Arthritis/Low Back Pain: Dr. Baca
- Inflammatory Bowel Disease and PUD: Dr. Sonderling
- Anemia/Common Cancers: Dr. Reddy
- Common Skin Conditions: Dr. Moum
- Liver Disease; Dr. J. Servoss
- Thyroid Disease: Dr.Vilnik/Rodriguez
- Introduction to Critical Care: Dr. Luck
- Acid-base & Electrolyte/Kidney failure: Dr. Panos
- Health Promotion & Disease Prevention: Dr. Drowos
- Rural Health Lecture: Dr. Gervasi
- Adult immunizations: Dr. Drowos
- HIV and Immunocompromised Host- Dr. Heiman
- Stroke- tbd
- Blood Smears Dr. Robinson
- Cytology- Dr. Robinson
- Intro to the care of the patient in the ED- Dr. Cohen
- Common Adult Emergencies- Dr. Cohen
- Orthopedic Emergencies- Dr.Cohen
- Toxicology- Dr.Cohen

#### Medicine References and resources:

Required Texts:

The Washington Manual of Medical Therapeutics Harrison's Principles of Internal Medicine Vol 1&2 Goldman's Cecil Medicine Vol 1&2 Expert Consult Premium Edition

#### Religious Observance (Adapted from the FAU Policy)

The College of Medicine recognizes that students, faculty and staff observe a variety of religious faiths and practices. Although many religious holidays are observed with time off, a few of the religious days of observance may be part of the academic calendar. The College respects the religious beliefs and practices of its students and seeks to accommodate them within the requirements of the academic schedule. As a result, a student who must be absent from a class requirement will not be penalized. Students who anticipate absence should notify the OSA and the supervising faculty in advance. The instructor will provide a reasonable opportunity to make up such excused absences. Any student who feels aggrieved regarding religious accommodations may present a grievance to the Director of Equal Opportunity Programs. Any such grievances will follow Florida Atlantic University's established grievance procedure regarding alleged discrimination. The College will follow the established FAU policy regarding absences due to personal observances of religious holidays.

To review the policy, access the Leave of Absence Policy: <a href="http://www.fau.edu/policies/files/PM76\_OCR.pdf">http://www.fau.edu/policies/files/PM76\_OCR.pdf</a>

#### **Disability Support Services**

In compliance with the Americans with Disabilities Act (ADA), students who require special accommodations due to a disability to properly execute coursework must register with the Office for Students with Disabilities (OSD) located in Boca Raton – SU133 (561-297-3880 and follow all OSD procedures.

#### Code of Academic Integrity

Students at Florida Atlantic University are expected to maintain the highest ethical standards. Academic dishonesty, including cheating and plagiarism, is considered a serious breach of these ethical standards, because it interferes with the University mission to provide a high quality education in which no student enjoys an unfair advantage over any other. Academic dishonesty is also destructive of the University community, which is grounded in a system of mutual trust and places high value on personal integrity and individual responsibility. Harsh penalties are associated with academic dishonesty. For more information, see:

- 1. The Policy on Academic, Professional and Behavioral Requirements and Standards governing the College of Medicine
- 2. Oath of Academic and Professional Conduct for Students in the College of Medicine
- 3. University Regulation 4.001