



STUDENT HANDBOOK

2023-2024



**ALABAMA COLLEGE OF
OSTEOPATHIC MEDICINE**

Alabama College of Osteopathic Medicine

**445 Health Sciences Blvd., Dothan, AL 36303 Phone: 334-699-
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The Alabama College of Osteopathic Medicine is a tobacco-free campus.



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1 INTRODUCTION

College Contact Information

Academic Calendar

Holidays

History of ACOM

Campus Facilities

COLLEGE CONTACT INFORMATION

GENERAL INFORMATION

Alabama College of Osteopathic Medicine
445 Health Sciences Boulevard
Dothan, AL 36303

Toll-Free: (855) 364-ACOM (2266)

Phone: (334) 699-2266

Fax: (334) 699-2268

Email: info@acom.edu

Website: www.acom.edu

ADMISSIONS

Director of Admissions

Phone: (334) 699-2266

Email: admissions@acom.edu

STUDENT RECORDS

Registrar & Director of Student Tracking

Phone: (334) 699-2266

Email: registrar@acom.edu

FINANCIAL AID

Director of Financial Aid

Phone: (334) 699-2266

Email: financialaid@acom.edu

STUDENT ACCOUNTS

Bursar

Phone: (334) 699-2266

Email: studentaccounts@acom.edu

COMPLIANCE HOTLINE and MAXIENT REPORTS

PHONE: (833) 490-0007

HOTLINE WEBSITE: www.lighthouse-services.com/acom

MAXIENT WEBSITE: www.acom.edu/report

ACADEMIC CALENDAR 2023-2024	
2023 Fall Term: July 3, 2023 – December 31, 2023	
Clerkship Rotations Begin	July 3, 2023
Independence Day*	July 4, 2023
OMS-I Orientation	July 24-26, 2023
OMS-I Classes Begin	July 27, 2023
OMS-II Classes Begin	July 31, 2023
Labor Day*	September 4, 2023
Constitution Day	September 18, 2023 (Observed)
Veteran's Day*	November 10, 2023
Thanksgiving Break*	November 22-24, 2023
Classes End	December 14, 2023
Clerkship Rotations End	December 31, 2023
2024 Spring Term: January 1, 2024 – June 30, 2024	
Clerkship Rotations Begin	January 1, 2024
OMS I & II Classes Begin	January 8, 2024
Martin Luther King, Jr. Day*	January 15, 2024
President's Day*	February 19, 2024
Spring Break*	March 11-15, 2024
Memorial Day*	May 27, 2024
Classes End	May 31, 2024
Juneteenth*	June 19, 2024
Clerkship Rotations End	June 30, 2024
<p><i>*No pre-clinical classes in session</i></p> <p><i>Dates are subject to change. Clerkship rotations may be scheduled during breaks with prior approval from the Associate Dean of Clinical Sciences. Each clerkship rotation must begin and end within a single term.</i></p>	

HOLIDAYS

In addition to the mid-year break, which varies from year to year, the ACOM campus is closed on the following designated holidays: Labor Day, Veteran's Day, Thanksgiving Day and the following Friday, Christmas Day, New Year's Day, Martin Luther King Day, President's Day, Memorial Day, Juneteenth, Fourth of July, and all related shutdowns as approved by the Dean. Students in clerkship training must follow their supervising preceptor's schedule regardless of ACOM posted holidays.

HISTORY OF ACOM

In the early 1990s, leaders in Alabama identified the need for more primary care physicians in the state, and in 2005, after years of coordinating activities to accomplish this goal, formed the Alabama Medical Education Consortium (AMEC), an IRC Section 501(c) organization to help increase the production of these physicians across the state through the osteopathic medical education system. AMEC conducted a feasibility study which demonstrated that more than 60 percent of osteopathic medical students chose primary care careers as compared to 20 percent of allopathic medical students.

Over the next five years, AMEC built an extensive osteopathic teaching network in Alabama to provide third- and fourth- year training to medical students and created a physician pipeline to recruit Alabama students for enrollment in out-of- state osteopathic colleges. This required developing partnerships with ten out-of-state colleges of osteopathic medicine, 26 state colleges and all state community colleges. In partnership with out-of-state colleges of osteopathic medicine, AMEC established an educational infrastructure that represented substantial clinical resources to provide clerkship rotations for Alabama students as well as students from other states enrolled in their programs.

After careful research and examination, AMEC and the Houston County Health Care Authority, the operator of Southeast Health, then Southeast Alabama Medical Center, determined that it would be feasible for the state to develop its own college of osteopathic medicine to address the shortage of primary care physicians in the state. Thus, the Alabama College of Osteopathic Medicine (ACOM), a non-profit, private institution, was established in May 2010.

ACOM received its Private School licensure in 2011, and subsequently its provisional accreditation with the ability to recruit students from the Commission on Osteopathic College Accreditation on July 1, 2012. ACOM was built as a free-standing facility in Dothan, Alabama. Construction of the 110,000-square-foot facility began in February 2012 and was completed in May 2013. The college was dedicated on July 29, 2013, at the historic Grand Opening and community open house. The inaugural class of 162 students began classes in August 2013.

Upon graduation of its first class in 2017, ACOM was granted seven-year accreditation. The college continues to provide increased educational, clinical and research opportunities through the development of Centers for Excellence in Research, Team-Based Learning and Clinical Simulation. These centers enhance student and faculty endeavors for years to come. ACOM was granted a class size expansion in 2018 to accommodate up to 210 students per class. The college opened a rural primary care clinic a short distance from the campus to provide additional training opportunities for medical students and constructed a new, larger simulation center that opened in 2022.

CAMPUS FACILITIES

The ACOM campus is designed to provide the full student experience. The 110,000-square-foot facility is equipped with the latest technology creating a productive learning environment for students. The auditoriums and laboratories are designed to provide increased visibility for each student during lectures and sessions. The college features a primarily electronic library, and the Clinical Competency Center resembles the testing environment students will encounter during the National Board of Osteopathic Medical Examiners (NBOME) exam, helping to ensure that students are prepared and comfortable at the Board exam. Faculty offices are conveniently located on the second floor, close to student classrooms, ensuring that students have the opportunity to interact with professors as needed.

ANATOMY LAB

This anatomy lab is equipped with numerous dissection tables, tv monitors, computer stations and a handheld examination camera used to project images to the monitors. The lab includes onsite cold storage for anatomical donations with an additional freestanding morgue located on campus.

OPP LAB

The 5,000-square-foot osteopathic principles and practice (OPP) laboratory is equipped with numerous height-adjustable tables and an overhead projection system that displays to tv monitors located around the room. The lab is spacious and open without obstructive structural columns to increase visibility during curricular activities.

PERFORMANCE EXAM SUITE

The performance exam suite (PES) features 16 fully equipped examination rooms, patient and student waiting rooms, and a central control room. Exam rooms include microphones and two cameras to capture the full patient encounter, as well as an associated grading station behind two-way mirrored glass.

SIMULATION CENTER

The state-of-the-art center for excellence in simulation is complete with four simulation bays and high-fidelity manikins providing a high-risk medical encounter in a safe environment. ACOM fully integrates simulation into the systems-based curriculum, giving each student a weekly experience.

TEAM-BASED LEARNING CENTER

The 6,100-square-foot team-based learning (TBL) center allows a single instructor to conduct multiple small groups simultaneously in the same classroom. The TBL is equipped with a digital video wall, drop-down projector screens and wireless microphones for each table. This space is utilized for curricular activities and other campus events.

AUDITORIA

The two large auditoria each have seating for up to 216 students. Each auditorium has tiered seating for optimal viewing and is equipped with ergonomic rolling chairs and push-to-talk microphones throughout the room.

STUDY SPACES

There are numerous study spaces located throughout the facility, including an 18-room small group education suite. Each room is equipped with a whiteboard and an interactive monitor for digital display. These rooms are often used for group curricular activities. Additional study spaces are available in the Learning Resource Center/Library and Simulation Center.

RESEARCH LAB

The nearly 4,000-square-foot center for research, located on the third floor, features multiple workstations for bench research and dedicated rooms and core equipment for microscopy, tissue culture and histology.

LEARNING RESOURCE CENTER/LIBRARY

The Library & Learning Resource Center includes four study rooms, study carrels, a nursing room, and an Oasis room for meditation, art, yoga, and prayer. Also located in the Library & Learning Resource Center are two printers/copiers, a ScannX station, and comfortable seating. The library provides access to a comprehensive electronic collection of resources and a print collection that includes textbooks, the SGA lending library, and a small historical collection.

STUDENT LOUNGE

The student lounge is equipped with audio/visual and recreational equipment for student use 24/7. Vending and food services are available.

BISTRO AND GIFT SHOP

A gift shop is located near the main entrance of the ACOM facility showcasing merchandise bearing the ACOM logo and name for students and visitors, general educational supplies for students, and a bistro serving breakfast and lunch.



2 MISSION, VISION, CORE VALUES, ACCREDITATION, LICENSURE

Mission

Vision

Core Values

Philosophy of Osteopathic Medicine

Osteopathic Pledge of Commitment

Osteopathic Physician's Oath

Accreditation

Licensure

MISSION

The Alabama College of Osteopathic Medicine will provide quality, learner-centered osteopathic education, research and service, while promoting graduate medical education, with emphasis on patient-centered, team-based primary care to serve the medically underserved areas of Alabama, the Tri-State area and the nation.

VISION

The Alabama College of Osteopathic Medicine will be regionally and nationally recognized for significantly impacting the physician workforce needs and access to quality medical services.

CORE VALUES

The Alabama College of Osteopathic Medicine expects all members of our academic community, including faculty, staff, students, and administrators, to reflect the core values of ACOM in carrying out our mission through teaching, learning, research, interacting with colleagues, and caring for patients. Our core values and their associated behaviors emerged from a collaborative effort by our academic community, and they apply to us all.

Our core values which describe how we aspire to conduct ourselves in all matters related to and representing ACOM are:

InSPIRED

**Integrity, Service, Passion, Innovation, Respect,
Excellence, Diversity**

PHILOSOPHY OF OSTEOPATHIC MEDICINE

Osteopathic medicine stresses a comprehensive approach to the maintenance of health. The roots of osteopathic medical education lie in the emphasis it places on the musculoskeletal system. The interrelationship between this and other body systems is basic to health maintenance and the prevention of disease. Founded by Andrew Taylor Still, M.D. (1828-1917), osteopathic medicine utilizes four fundamental principles which enable the osteopathic physician to look at health and disease in a unique manner:

1. The body is a unit; the person is a unity of body, mind, and spirit.

2. The body is capable of self-regulation, self-healing, and health maintenance.
3. Structure and function are reciprocally interrelated.
4. Rational treatment is based on the above three principles.

OSTEOPATHIC PLEDGE OF COMMITMENT

I pledge to:

1. Provide compassionate, quality care to my patients;
2. Partner with them to promote health;
3. Display integrity and professionalism throughout my career;
4. Advance the philosophy, practice, and science of osteopathic medicine;
5. Continue life-long learning;
6. Support my profession with loyalty in action, word and deed; and
7. Live each day as an example of what an osteopathic physician should be.

OSTEOPATHIC PHYSICIAN'S OATH

I do hereby affirm my loyalty to the profession I am about to enter. I will be mindful always of my great responsibility to preserve the health and the life of my patients, to retain their confidence and respect both as a physician and a friend who will guard their secrets with scrupulous honor and fidelity, to perform faithfully my professional duties, to employ only those recognized methods of treatment consistent with good judgment and with my skill and ability, keeping in mind always nature's laws and the body's inherent capacity for recovery.

I will be ever vigilant in aiding the general welfare of the community, sustaining its laws and institutions, not engaging in those practices which will in any way bring shame or discredit upon myself or my profession. I will give no drugs for deadly purposes to any person, though it be asked of me.

I will endeavor to work in accord with my colleagues in a spirit of progressive cooperation, and never by word or by act cast imputations upon them or their rightful practices.

I will look with respect and esteem upon all those who have taught me my art. To my college, I will be loyal and strive always for its best interests and for the interests of the students who will come after me. I will be ever alert to further the application of basic biologic truths to the healing arts and to develop the principles of osteopathy which were first enunciated by Andrew Taylor Still.

ACCREDITATION

The Alabama College of Osteopathic Medicine (ACOM) is incorporated under the laws of the state of Alabama as a nonprofit, IRC Section 501(c)(3) corporation. The governing body is the Board of Directors, which holds title to the properties of the College and establishes bylaws for its operation. Responsibility for administration and day-to-day operations is delegated to the President and through the President to the Dean/Senior Vice President of ACOM as the Chief Academic Officer.

ACOM was granted full accreditation status as of April 24, 2017, by the Commission on Osteopathic College Accreditation (COCA) of the American Osteopathic Association (AOA). Enrolled or prospective students wishing to review the documents describing ACOM's accreditation should submit their requests in writing to the Vice President of Institutional Effectiveness. "The COCA serves the public by establishing, maintaining and applying accreditation standards and procedures to ensure that academic quality and continuous quality improvement delivered by the [colleges of osteopathic medicine] (COMs reflect the evolving practice of osteopathic medicine. The scope of the COCA encompasses the accreditation of the COMs." (Commission on Osteopathic College Accreditation Handbook (effective August 11, 2020), page 3.) The accreditation standards are available at <https://osteopathic.org/accreditation/standards/> or by using the following contact information:

Email: predoc@osteopathic.org
Address: 142 East Ontario Street
Chicago, IL 60611

LICENSURE

The Alabama College of Osteopathic Medicine (ACOM) is an incorporated, non-profit, private institution under the authority of the Houston County Health Care Authority and The Private School Licensure Division of the Alabama Community College System, the licensing agency for private, higher education programs in the state. ACOM awards the Doctor of Osteopathic Medicine degree by virtue of satisfying accreditation requirements by the Commission on Osteopathic College Accreditation and licensure obligations by the State of Alabama to operate a private institution of higher education. Enrolled or prospective students wishing to review the documents describing ACOM's licensure should submit their requests in writing to the Vice President of Institutional Effectiveness.



3 DIVERSITY, EQUITY, AND INCLUSION

3.1 Equal Opportunity, Claims of Illegal Discrimination Policy

3.2 Diversity, Equity, and Inclusion Policy

3.3 Title IX Policy

Equal Opportunity, Claims of Illegal Discrimination

PURPOSE

The purpose of this policy is to ensure that the Alabama College of Osteopathic Medicine (ACOM) is an equal opportunity employer. Additionally, it is and shall continue to be ACOM's policy to provide promotion and advancement opportunities and conduct ACOM activities and operations in a non-discriminatory fashion.

SCOPE

This policy applies in the recruitment and admissions of ACOM students, employment of ACOM faculty, staff and administration, and in the operation of all scholarship and loan programs. This policy also applies to the operation of all other programs, activities and services of ACOM.

POLICY & ENFORCEMENT

The Alabama College of Osteopathic Medicine (ACOM) does not discriminate on the basis of age, race, color, gender, gender identity, sex, sexual orientation, religion or creed, national or ethnic origin, or disability in its programs, activities, hiring, admission of students or equal educational opportunity as required by state and federal law.

ACOM subscribes to the principles and adheres to the requirements of state and federal law pertaining to civil rights and equal opportunity, in accordance with the requirements of Title VI of the Civil Rights Act of 1964, as amended; Title IX of the Education Amendments of 1972, as amended; Section 504 of the Rehabilitation Act of 1973, as amended; and the Age Discrimination Act of 1975, as amended.

EQUAL EMPLOYMENT OPPORTUNITY

In compliance with the provisions of all applicable state and federal civil rights laws, every effort will be made to employ individuals whose qualifications best meet the needs of open positions, without regard to the above factors. Additionally, it is and shall continue to be ACOM's policy to provide promotion and advancement opportunities in a non-discriminatory fashion. Faculty and staff complaints and inquiries regarding discrimination should be directed to the ACOM Director of Human Resources.

EQUAL EDUCATION OPPORTUNITY

In compliance with the provisions of all applicable state and federal civil rights laws, every effort will be made to admit student applicants whose qualifications best meet the admissions requirements of ACOM without regard to the above factors. Additionally, it is ACOM's policy

to provide an equal education opportunity in a non-discriminatory fashion. Complaints and inquiries regarding sex discrimination should be directed to the ACOM Title IX coordinator. Specific Title IX Coordinator contact information will be published in all appropriate handbooks and catalogs and on the ACOM website. The Title IX coordinator may also be contacted via the following email: titleIXcoordinator@acom.edu

Complaints and inquiries regarding compliance with the sex discrimination provisions of Title IX may also be directed to the Assistant Secretary for Civil Rights, Department of Education, Washington, D.C.

Evidence of practices inconsistent with other elements of this policy should be reported to the Associate Dean of Student Services.

CLAIMS OF ILLEGAL DISCRIMINATION

For purposes of this policy, a “complaint” is a formal written notification of the belief that prohibited discrimination has occurred. Prior to filing a formal complaint, an individual is strongly encouraged to resolve a discrimination allegation through an informal process.

Before filing a formal complaint of alleged discrimination, the relevant parties are encouraged to informal means of resolution, such as mediation. If one chooses to proceed with a complaint, the complaint may be submitted in writing to one of the following as appropriate:

Students

- Associate Dean of Student Services
- Title IX Coordinator (sex discrimination)

Faculty and Staff

- Director of Human Resources

If a faculty member’s discrimination grievance arises from a claim of an adverse action affecting his/her term of appointment, promotion, or conditions of employment and is (a) arbitrary and capricious; (b) discriminatory or otherwise in violation of the law; or (c) not in compliance with the Bylaws of the Faculty Handbook, the faculty member should refer to the policy “Due Process and Grievance Policy for Faculty” for the process and procedures of filing a grievance.

To the extent possible, all complaints will be handled confidentially. All complaints will be addressed in accordance with ACOM policy. Complaints will be referred to the appropriate area for review, and investigations will be conducted in a timely manner. Also, any inquiries or complaints concerning the application of the Americans with Disabilities Act (ADA); Title VII of the Civil Rights Act of 1964; Executive Order 11246, as amended; Title IX of the Education Amendments of 1972, as amended; the Rehabilitation Act of 1973; or other legislation and its

implementing regulations as they relate to ACOM should be directed to one of the officials listed above. The ACOM Human Resources department, together with the Student Services division, is responsible for the enforcement of this policy.

Diversity, Equity and Inclusion Policy

PURPOSE

The Alabama College of Osteopathic Medicine (ACOM) recognizes, values, and affirms that diversity of students, faculty, staff, and administration enriches the overall ACOM experience, enhances the quality of education, and substantially impacts the ACOM culture. As a reflection of its importance to the ACOM community, diversity is a core value, and it is our goal to embed this value in all ACOM activities. By embracing diversity and educating our community on its importance, it is our hope that ACOM-trained physicians will themselves render compassionate, inclusive care for all people and that, as physicians, they will be drivers of change who eliminate barriers within our healthcare system, so that all people may achieve health and wellness.

SCOPE

This policy applies in recruitment and admission of students, employment and retention of faculty, staff, and administration, in student educational and social programming, in ACOM-sponsored community programs and services, and in all scholarship and loan programs. More broadly, however, diversity is a core value of ACOM. It is expected that all ACOM activities honor this core value, and that all members of the ACOM community join in this commitment.

POLICY & ENFORCEMENT

ACOM is committed to providing a safe, welcoming, and inclusive academic and employment environment in which everyone is welcome, where our differences are valued and celebrated for the richness that they contribute to the community, and where all people are invited to join together in the learning experience. As part of our social compact at ACOM, we expect that all people in the community will treat one another with courtesy, respect, and dignity.

We are committed to having a community that actively seeks to incorporate different perspectives, backgrounds, cultures, and life experiences into the unifying fabric of the ACOM experience. The richness of these backgrounds, perspectives and experiences bring a unique lens through which to view not only future patients, but the healthcare system as a whole. We celebrate the contributions to the community and the learning experiences that come from our diversity, and we honor and celebrate the individuals whose unique stories and perspectives add to the richness of this experience.

By continually investing in an educational environment that is welcoming and respectful of diverse ideas, cultures, and people, we hope to enhance the cultural competency of all, including the future physicians educated at ACOM and all of those touched by the ACOM community. Over time, we believe that these efforts will translate into improved quality of care for our most underserved and vulnerable populations, as well as the elimination of barriers that prevent access

to health and wellness. With these efforts, we hope to inspire, equip, and empower future generations of physicians to continually improve upon these efforts in order to make health and wellness available to all.

To achieve this goal, we have three primary pillars:

- Infuse diversity of backgrounds, perspectives, and life experiences into the entire curriculum, so that all ACOM-trained physicians are well-versed in providing culturally sensitive, inclusive, patient-centered healthcare;
- Recruit students, faculty, staff, and administrative team members whose individual experiences contribute to the richness of the fabric of the ACOM community and reflect the communities we aspire to serve; and
- Actively work to retain and nurture the diversity within the ACOM community, including celebrating both our uniqueness and our inclusiveness.

These pillars represent the three-pronged approach to diversity at ACOM. Specific strategies and tactics for achieving our diversity pillars are set forth in the Diversity Strategic Plan.

Overall Diversity Initiatives and Priorities

ACOM's Institutional Diversity Council is the key operational driver of diversity initiatives at ACOM. This Council, which is composed of faculty, staff and students who are nominated by their peers, endeavors to support and enhance the ACOM academic community to create an environment where human differences are respected by valuing minority voices, championing awareness, and addressing disparities. This Council routinely advises Dean's Cabinet on initiatives and priorities that assist ACOM in increasing diversity and inclusion within the community. Historically, these include initiatives related to expanded recruitment strategies, the development of pipeline programs, curricular recommendations and suggestions, and other overall programming recommendations. In these areas, the Council works collaboratively with Student Life, Admissions, Human Resources, and others in the community to create a framework for ACOM's overall diversity efforts. Community diversity and inclusion programming and other initiatives, designed to promote cultural awareness and competency of the ACOM community, are led primarily by the Council. This programming, centered on supporting our "One Table" initiative, focuses on celebrating the unique qualities, differences in cultures, and different experiences that our students, faculty, staff and administration bring to ACOM—all the while emphasizing our unity of purpose.

Finally, to ensure that our diversity initiatives have demonstrable impact, the Institutional Effectiveness division coordinates the ongoing evaluation and assessment of these programs and other ACOM diversity initiatives to confirm that ACOM's commitment to diversity is measurable and reflected in outcomes and progress towards institutional objectives and the ACOM Strategic Plan.

ACOM Students: Initiatives for Recruitment, Admissions, and Retention

A less visible but equally important ACOM diversity initiative is ACOM's approach to the admission of students. In the admissions process, ACOM employs a standardized, data-driven process, designed to enhance diversity from underrepresented minorities, which include Blacks/ African Americans, Hispanic/ Latino, Native Indian/ Alaskan Native and Native Hawaiian/ Pacific Islanders. With respect to Black and African Americans, which represent the largest underrepresented minority group in Alabama, ACOM undertakes additional efforts to recruit these students, including targeted recruitment efforts at HBCUs. Active efforts are also made to recruit students from varying geographic areas, sizes and types of undergraduate institutions. However, because we believe that applicants are more than a sum of their numbers, ACOM applicants are evaluated holistically, with the Admissions Committee giving consideration to the experiences and potential contributions of the whole person to the ACOM community. Those unique qualities and diverse range of experiences all serve to enrich the academic environment and thus are considered in the selection process.

Retention activities directed towards retaining and supporting our student population include strong academic support programs and a series of early intervention initiatives, all designed to provide support for students who may not enter medical school with the academic habits necessary to be successful. These activities, coupled with a continued focus on developing the whole student, are complemented by career development activities and services intended to support those students in becoming physician professionals.

ACOM Faculty, Staff, and Administration: Initiatives in Recruitment and Retention

Similarly, in recruitment and retention efforts, ACOM's Department of Human Resources prioritizes systematic training of search committees, provides oversight of all recruitments, and (together with Southeast Health) employs system-wide marketing and recruitment strategies to increase pools of diverse administrative, faculty and staff applicants.

In the clinical arena, Clinical Resources and its Associate Dean actively work to recruit medical education directors, core sites, and preceptors from a wide variety of backgrounds, specialties, experiences, and patient populations so that ACOM students in their third and fourth years, through this exposure, can further hone their cultural competency skills in the clinical setting.

Back at ACOM, professional education activities directed towards increasing the cultural awareness and understanding of ACOM's faculty, staff, and administrative team members are primarily coordinated by the Assistant Dean for Faculty Development. Topics and activities are selected in collaboration with Human Resources and the Institutional Diversity Council.

We believe that these collaborative strategies—starting with the admissions process, but including recruitment, retention, clinical experiences, professional development, and continual

attention to and assessment of diversity efforts across ACOM—will assist ACOM in achieving measurable, mission-appropriate diversity outcomes.

COCA Accreditation Standard: Element 5.2 Diversity

AACOM Diversity Statement: AACOM strives to create and maintain a climate that recognizes differences and commonalities, while understanding, and engaging in intentional experiences that nurture acceptance of diverse ideological viewpoints, socio-economic status, racial/ethnic makeup, religious beliefs and sexual orientation. We are committed to educating and training more osteopathic physicians who embody the fabric of our nation, not only to address disparities in healthcare, but also, to improve the overall health of all people. At AACOM, we have an ongoing commitment to increase faculty and staff awareness and understanding of issues of diversity and inclusion through professional development programs.

(<https://www.aacom.org/diversity-in-OME>; retrieved 6.15.2022).

Title IX Policy

PURPOSE

ACOM is committed to maintaining a safe and healthy educational and work environment free from discriminatory harassment based on age, race, color, sex, gender, gender identity, sexual orientation, religion or creed, national or ethnic origin, or disability. Sexual or other discriminatory harassment of ACOM students is prohibited; likewise, students are prohibited from engaging in harassing behavior directed at ACOM's employees, visitors, vendors, and contractors.

This policy is designed to ensure a safe and non-discriminatory educational and work environment and to meet legal requirements, including Title IX of the Education Amendments of 1972 and its implementing regulations. All students and employees are expected to comply with this policy and take appropriate measures to create an atmosphere free of harassment and discrimination.

SCOPE

This policy applies to conduct or allegations of conduct that involve one or more ACOM students. To be covered by this policy, the conduct or alleged conduct must have occurred on campus or in an ACOM-controlled program or activity, whether the program or activity is on-campus or off-campus. This policy also applies to conduct in any building owned or controlled by ACOM or by a student organization that is officially recognized by ACOM. This policy applies to online or electronic conduct. However, this policy applies only to conduct occurring against a person who is in the United States.

For allegations that fall outside of the scope of this policy, ACOM may address allegations of misconduct as potential violations of the ACOM Honor Code, the Professionalism Policy, or under the Human Resources policies.

POLICY & ENFORCEMENT

I. Notice

ACOM will respond to notice of sexual harassment or allegations of sexual harassment that are received either by ACOM's Title IX Coordinator or by any ACOM official who has the authority to institute corrective measures on behalf of ACOM. These officials include the Dean, any Associate Dean or Assistant Dean, the Director of Campus Safety, or the Compliance Officer.

II. Sexual Harassment Defined

This policy applies to reports and allegations of sexual harassment involving one or more ACOM students. For purposes of this Title IX Policy, sexual harassment is defined broadly to include any of three types of misconduct on the basis of sex:

- 1) any instance of quid pro quo harassment by an employee, i.e., where the employee conditions the provision of an aid, benefit, or service of ACOM on an individual's participation in unwelcome sexual conduct;
- 2) any unwelcome conduct that a reasonable person would find so severe, pervasive, and objectively offensive that it denies a person equal educational access; or
- 3) any instance of sexual assault (as defined in the Clery Act), dating violence, domestic violence, or stalking as defined in the Violence Against Women Act (VAWA).

III. Accessible Reporting to the Title IX Coordinator

ACOM is committed to providing clear, accessible channels for reporting to the Title IX Coordinator. Any person may report sexual harassment and initiate ACOM's response, regardless whether the person reporting is the person alleged to be the victim. There is no need to schedule an in-person appointment with the Title IX Coordinator or an ACOM official. Any person may report sexual harassment at any time, including during non-business hours, by using the telephone number or e-mail address of either ACOM's Title IX Coordinator, through the Maxient form or the Compliance Hotline (or by mail to the office address):

Title IX Coordinator
445 Health Sciences Blvd.
Dothan, AL 36303
Tel: (334) 944-4006
Cell: (334) 596-5360
Email: titleIXcoordinator@acom.edu

Maxient Reporting:
www.acom.edu/report

Compliance Hotline:
Tel: (833) 490-0007
www.lighthouse-services.com/acom

IV. Supportive Measures

Upon receiving a report of sexual harassment, ACOM will offer supportive measures to the person alleged to be the victim (referred to as the “complainant”). The Title IX Coordinator will promptly contact the complainant confidentially to discuss the availability of supportive measures, consider the complainant's wishes with respect to supportive measures, inform the complainant of the availability of supportive measures with or without the filing of a formal complaint, and explain to the complainant the process for filing a formal complaint.

Supportive measures will include individualized services reasonably available that are nonpunitive, non-disciplinary, and not unreasonably burdensome to the other party while designed to ensure equal educational access, protect safety, or deter sexual harassment. Supportive measures may, among other things, include:

- Academic support services and accommodations, including the ability to reschedule exams and assignments, transfer course sections, or withdraw from courses without penalty;
- Assistance in connecting to community-based counseling services;
- Assistance in connecting to community-based medical services;
- Assistance with obtaining personal protective orders;
- Mutual restrictions on communication or contact between the parties; or
- A combination of any of these measures.

A complainant may, but is not required to, file a formal complaint to initiate ACOM’s complaint resolution process, including an investigation. The complainant’s wishes will be respected regarding whether ACOM investigates, unless the Title IX Coordinator determines that signing a formal complaint to initiate an investigation over the wishes of the complainant is not clearly unreasonable in light of the known circumstances.

Unless the formal complaint resolution process results in a determination that a respondent was responsible, ACOM will not impose disciplinary actions or take any other actions under this policy that are not supportive measures. ACOM will not restrict the rights of any person, including the subject of a report filed with the Title IX Coordinator, where those rights are protected under the U.S. Constitution, including the First Amendment, Fifth Amendment, and Fourteenth Amendment.

V. Complaint Resolution Process

ACOM is committed to a consistent, transparent complaint resolution process for resolving formal complaints of sexual harassment. At all stages of the complaint resolution process – investigation, hearing, and appeal if applicable – ACOM and its representatives:

- 1) will require objective evaluation of all relevant evidence, inculpatory and exculpatory;
- 2) will avoid credibility determinations based on a person's status as a complainant, respondent, or witness;
- 3) will require Title IX personnel (Title IX Coordinators, investigators, decision-makers) to be free from conflicts of interest or bias for or against complainants or respondents;
- 4) will train all Title IX personnel on issues of relevance, including how to apply the rape shield protections provided only for complainants;
- 5) will utilize training materials that do not rely on sex stereotypes and which promote impartial investigations and adjudications of formal complaints of sexual harassment;
- 6) will not use, rely on, or seek disclosure of information protected under a legally recognized privilege, unless the person holding the privilege has waived the privilege;
- 7) will not access or use any party's medical, psychological, and similar treatment records unless ACOM first obtains the party's voluntary, written consent to do so;
- 8) will not restrict the ability of the parties to discuss the allegations or gather evidence (e.g., no "gag orders"); and
- 9) will keep confidential the identity of complainants, respondents, and witnesses, except as may be permitted by FERPA, as required by law, or as necessary to carry out a Title IX proceeding.

VI. Retaliation Prohibited

Retaliation against any person who files a complaint, participates in an investigation, or opposes a discriminatory employment or educational practice or policy is prohibited. This policy prohibits any form of retaliation, including intimidation, threats, harassment, and other adverse action taken or threatened against any person reporting or filing a complaint or any person cooperating in the investigation under this policy. Action is deemed adverse if it would deter a reasonable person in the same circumstances from opposing practices prohibited by this policy.

Charging an individual with ACOM Honor Code or Professionalism violation that does not involve sexual harassment, but arises out of the same facts or circumstances as a report or formal complaint of sexual harassment (for the purpose of interfering with any right or privilege secured by Title IX) constitutes retaliation.

Charging an individual with an ACOM Honor Code or Professionalism violation for making a materially false statement in bad faith in the course of a Title IX complaint resolution proceeding does not constitute retaliation; however, a determination regarding

responsibility, alone, is not sufficient to conclude that any party made a bad faith materially false statement.

The exercise of rights protected under the First Amendment does not constitute retaliation.

A person who believes retaliation has occurred should notify the Title IX Coordinator. The Title IX Coordinator will take prompt corrective action if the complainant or the alleged victim (if not the complainant) experiences retaliation or is subjected to further violation of this policy.

Retaliation may result in disciplinary or other action independent of the sanctions or remedies imposed in response to the underlying allegations of sexual harassment.

VII. Questions

ACOM's Title IX Policy and Title IX Complaint Procedure state how ACOM will proceed once it is made aware of possible harassment or discrimination. Inquiries regarding ACOM's Title IX policy and procedures may be directed to:

Title IX
Coordinator
445 Health Sciences Blvd.
Dothan, AL 36303
Tel: (334) 944-4006
Cell: (334) 596-5360
Email: titleIXcoordinator@acom.edu

VIII. Records Retention

ACOM shall retain for a period of seven years:

- 1) records relating to any reports of sexual harassment. The records will include actions taken by ACOM, including any supportive measures taken in response to the report. If supportive measures were not provided, ACOM will document the reasons for this response.
- 2) Records relating to any formal complaints, including the investigation, informal resolution process (if applicable), hearing, written determination, and (if applicable) the appeal and result.
- 3) All materials used to train Title IX Coordinators, investigators, decision-makers, and any person who facilitates an informal resolution process.

DEFINITIONS

The following definitions apply under this policy:

A “**complainant**” is an individual who is alleged to be the victim of conduct that could constitute sexual harassment.

A “**respondent**” as an individual who has been reported to be the perpetrator of conduct that could constitute sexual harassment.

A “**report of sexual harassment**” is a complaint reported to the Title IX Coordinator, or to an ACOM official who then gives notice as required to the Title IX Coordinator. A report may be oral and informal. Upon receiving a report of sexual harassment, ACOM will offer supportive measures to the complainant as described in Part IV of this policy. The complainant may file a formal complaint at the same time as making a report or may later proceed to file a formal complaint.

A “**formal complaint**” is a document filed by a complainant or signed by the Title IX Coordinator alleging sexual harassment against a respondent and requesting that ACOM investigate the allegation of sexual harassment. The filing of a formal complaint triggers ACOM’s complaint resolution process described in Part V of this policy.

Title IX Complaint Procedure

Implements: Title IX Policy

PROCEDURE & PROCESS

I. Formal Complaints

A formal complaint filed and signed by a complainant initiates ACOM's formal complaint resolution process. At the time of filing a formal complaint, a complainant must be participating in or attempting to participate in the education program or activity of ACOM. A formal complaint may be filed with the Title IX Coordinator in person, by mail, or by electronic mail, by using the contact information listed below for the Title IX Coordinator.

A formal complaint must include the complainant's physical or digital signature or otherwise indicate that the complainant is the person filing the formal complaint. Where the Title IX Coordinator signs a formal complaint, the Title IX Coordinator is not a complainant or a party during a complaint resolution process, and the Title IX Coordinator must comply with requirements for Title IX personnel to be free from conflicts and bias.

Upon receipt of a formal complaint, the Title IX Coordinator will promptly provide written notifications to all known parties. This notification will include the following information:

1. Notice of the allegations constituting potential sexual harassment, including all relevant details known at the time. These details will include, at a minimum, the identities of the parties involved in the incident(s), if known, the alleged conduct that could constitute sexual harassment, and the date and location of the alleged incident(s), if known.
2. A statement that the respondent is presumed not responsible for the alleged conduct unless a determination regarding responsibility is made at the conclusion of the complaint resolution process.
3. A description of ACOM's complaint resolution process, including the rights and responsibilities of the parties during the investigation, hearing, and appeal process, which may be satisfied by delivering a copy of this procedure.

It is a violation of ACOM's professionalism standards to knowingly make false statements or knowingly submit false information during the grievance process.

ACOM may, at its discretion, consolidate formal complaints where the allegations arise out of the same facts.

If the allegations in a formal complaint are not within the scope of this Policy because they do not meet the Title IX definition of sexual harassment, or because they did not occur in ACOM's education program or activity against a person in the United States, then ACOM must dismiss the allegations for purposes of Title IX. However, ACOM may address the allegations as potential violations of the ACOM Honor Code and/or Professionalism

Policy. ACOM will promptly send written notice of a dismissal and reason(s) simultaneously to both parties.

II. Investigations

ACOM will investigate the allegations in any formal complaint that is within the scope of this Policy. ACOM's Compliance Officer may serve as Title IX Investigator to conduct the investigation or, at the Compliance Officer's discretion, may appoint an appropriate individual to serve as the Title IX Investigator.

The Title IX Investigator will begin an investigation as soon as practicable, and generally not later than 10 business days after the written notice of the formal complaint was delivered to all parties. However, the Investigator will ascertain that the respondent receives sufficient time to prepare a response prior to any initial interview.

Advisors: During the investigation process, each party will have the same opportunity to select an advisor of the party's choice who may be, but need not be, an attorney. The advisor may assist with all written submissions made by a complainant or a respondent, may assist with preparing questions or other information for the complainant or the respondent to be used at the hearing, and may facilitate scheduling and other processes. During any meeting or proceeding, the advisor may be present to observe and provide support and counsel to the participant. The advisor may not present evidence on a party's behalf, present argument, examine witnesses, testify, disrupt, or otherwise obstruct meetings or proceedings.

Burden of Proof and Evidence: The Title IX Investigator will review the statements and evidence presented and may, depending on the circumstances, interview others with relevant knowledge, review documentary materials, and take any other appropriate action to gather information relevant to the complaint. The Investigator will provide equal opportunity for the parties to present fact and expert witnesses and other inculpatory and exculpatory evidence. The burden of gathering evidence sufficient to reach a determination regarding responsibility rests with ACOM and the Title IX Investigator, and not on the parties. The Title IX Investigator cannot access, consider, disclose, or otherwise use a party's records that are made or maintained by a physician, psychiatrist, psychologist, or other recognized professional or paraprofessional, and which are made and maintained in connection with the provision of treatment to the party, unless the Title IX Investigator obtains that party's voluntary, written consent to do so for a grievance process.

If, in the course of an investigation, the Title IX Investigator decides to investigate allegations about the complainant or respondent that are not included in the initial complaint, the Title IX Investigator will provide written notice of the additional allegations to the parties whose identities are known. The Investigator will send written notice specifying the date, time, location, participants, and purpose of any and all investigative interviews, meetings, or hearings to the parties and their advisors, allowing each party adequate time to prepare in advance.

ACOM will complete the investigation as quickly as possible, generally within 60 days. The investigative process may be delayed or extended at the Investigator's discretion for good cause, such as the absence of parties or witnesses, concurrent law enforcement activity, or the accommodation of disabilities.

Honor Code and Professionalism: The complainant, respondent, witnesses, and others sharing information with the Investigator are expected to provide all relevant and truthful information and to do so at their earliest opportunity to facilitate a prompt resolution. ACOM students remain subject to both the Honor Code and the Professionalism Policy during investigations, and they may be subject to discipline for making false statements or knowingly submitting false information during the investigation.

Coordination with Law Enforcement: If ACOM is made aware that there is a concurrent criminal investigation, the Title IX Investigator will inform any law enforcement agency that is conducting its own investigation that an ACOM investigation is also in progress; ascertain the status of the criminal investigation; and determine the extent to which any evidence collected by law enforcement may be available to ACOM in its investigation.

At the request of law enforcement, ACOM may agree to temporarily defer part or all of its own investigation/hearing until after the initial evidence-gathering phase of the law enforcement investigation is complete. The ACOM Title IX Investigator will communicate with the parties, consistent with the law enforcement request and ACOM's obligations, regarding procedural options, anticipated timing, and the implementation of any necessary interim measures.

Preliminary Report: When the investigation is complete, the Title IX Investigator will provide the parties with a preliminary report, which will include, as applicable, the complainant's statement, the respondent's statement, each witness statement, and either a copy or written summary of any other information the Investigator deems relevant. The preliminary report will be provided in an electronic format that restricts the parties from downloading or copying the evidence. Each party will have 10 business days to review the preliminary report and to provide written feedback. The parties' written feedback will be attached to the final investigative report.

Final Investigative Report: After consideration of the parties' final responses to the preliminary report, or after 10 business days have elapsed without comment, the Investigator will prepare and send to the parties, and to their advisors, a final investigative report that fairly summarizes relevant evidence and that includes the parties' written feedback, if any. The report will be in electronic format or hard copy. The parties will have at least 10 business days for preparation, from the time of receipt of the final investigative report to the time of the scheduled live hearing.

III. Informal Resolution

At any time after a formal complaint has been filed, if the Title IX Coordinator believes that the complaint may be amenable to informal resolution, the Title IX Coordinator will give notice to the parties of their ability to choose an informal resolution option. However, an informal resolution process may not be used to resolve allegations that an employee sexually harassed a student. Further, an informal resolution process may not be offered unless a formal complaint is filed.

The notice of the informal resolution option will include a statement of the allegations, a description of the informal resolution process, and a statement that at any time prior to the finalization of an informal resolution decision, any party has the right to withdraw from the informal resolution process and resume the formal resolution process with respect to the formal complaint.

Each party has five business days to indicate in writing to the Title IX Coordinator if the party wishes to pursue the informal resolution option. If both parties give written voluntary, informed consent to the information resolution option within five business days, ACOM will begin the informal resolution process.

Participation in the informal resolution process is completely voluntary. ACOM does not require any party to participate in the informal resolution process. Each party has an unconditional right to withdraw from the informal resolution process and resume the formal resolution process.

IV. Informal Resolution Process

The Title IX Coordinator will submit the final investigative report to the Informal Process Adjudicator. If an investigation was not completed prior to the parties choosing the informal resolution option, the Title IX Coordinator will give to the Informal Process Adjudicator any available investigation information.

The Informal Process Adjudicator is the Associate Dean of Student Services or the Associate Dean's designee. The Informal Process Adjudicator may, in the Adjudicator's discretion, meet with either or both of the parties individually prior to reaching a decision. The Adjudicator will issue an informal resolution decision simultaneously to all parties, which includes:

1. the information from the formal complaint;
2. any information gathered during a previous investigation;
3. any new information the Informal Process Adjudicator gathered from the parties;
4. a preliminary analysis and finding of whether or not there was a violation of the ACOM Honor Code, Professionalism Policy, and/or the ACOM Title IX Policy; and
5. if appropriate, sanction(s) with rationale(s) based on the severity of the case and any past related incidents.

The parties have five business days to respond to the informal resolution decision. If neither party disagrees with the decision within five business days, the decision is finalized and the matter is considered resolved and closed through this informal resolution process. The Title IX Coordinator will send the parties a letter to inform them the matter has been resolved and the case is closed with regards to the ACOM resolution process.

If either party disagrees with Adjudicator's decision, the party may inform the Title IX Coordinator and have the matter resolved through a formal hearing. The unsatisfied party should notify the Title IX Coordinator in writing within five business days of receiving the Informal Process Adjudicator's decision.

If any of the following occur:

1. If either party declines the initial offer of an informal resolution option;
2. If five business days pass from the initial notice of the informal resolution option with no response from a party;
3. If any party gives written notice of withdrawal from the informal resolution process; or
4. If any party gives written notice of disagreement within five business days of the Informal
5. Process Adjudicator's decision;

Then, the Title IX Coordinator will notify the parties and their advisors of the need to convene a formal hearing. If an investigation was suspended previously when the parties chose the informal resolution process, the Title IX Investigator will complete the investigation and the parties will have 10 business days for preparation, from the time of receipt of the final investigative report to the time of the scheduled formal hearing. If the investigation was previously completed and the parties previously received the final investigative report, then from the time of the current formal hearing notice, the parties will have at least 10 business days for preparation prior to the time of the scheduled formal hearing.

V. Formal Hearing

When a complaint is not resolved informally, ACOM's Title IX Coordinator will notify the parties and help to make any needed accommodations for the formal hearing. At any time prior to a final determination at the end of the formal hearing, the complainant and respondent can choose to accept an informal resolution decision previously offered. Each party must give written, voluntary agreement to the previously offered informal resolution decision, after which the decision is finalized and the hearing is curtailed.

The Compliance Officer may preside over the hearing and serve as a decision-maker or, at the Compliance Officer's discretion, appoint a panel of faculty members, College administrators, or other appropriate individuals to conduct the hearing and serve as

decision-makers. Decisionmaker(s) in the hearing must be free from bias or conflict of interest, and they may not include ACOM's Title IX Coordinator or any person who served as Title IX Investigator.

Live hearings may be conducted with all parties physically present in the same geographic location or, at ACOM's discretion, any or all parties, witnesses, and other participants may appear at the live hearing virtually. At the request of either party, ACOM will provide for the entire live hearing (including cross-examination) to occur with the parties located in separate rooms with technology enabling the parties to see and hear each other. In advance of the live hearing, the decisionmaker(s) will receive training on any technology to be used at the hearing.

Documents prepared in anticipation of the hearing (including the final investigative report, the parties' respective responses to the final investigative report (if any), documents, testimony, or other information introduced at the hearing, and any recording or transcripts of the hearing) may not be disclosed outside of the hearing procedures, except as may be required or authorized by law.

Advisors: Hearings are closed to the public. Parties may be accompanied at the hearing by one advisor who may be, but need not be, an attorney. If a party does not have an advisor to be present at the hearing, then ACOM will provide, without fee or charge to that party, an advisor of ACOM's choice (who may be, but is not required to be, an attorney) to conduct cross-examination on behalf of that party.

Cross-examination: At the hearing, ACOM will permit each party's advisor to ask the other party and any witnesses all relevant questions and follow-up questions, including those challenging credibility. This cross-examination at the live hearing will be conducted directly, orally, and in real time by the party's advisor of choice and never by a party personally.

Only relevant cross-examination and other questions may be asked of a party or witness. Before a complainant, respondent, or witness answers a cross-examination or other question, the person presiding over the hearing and/or the decision-maker(s) will first determine whether the question is relevant and explain to the party's advisor asking cross-examination questions any decision to exclude a question as not relevant. The decision-maker(s) will exclude as irrelevant any evidence regarding the complainant's prior sexual behavior unless this evidence is offered to prove that someone other than the respondent committed the alleged misconduct or offered to prove consent.

Standard of Evidence: The standard of evidence to determine responsibility in hearings under ACOM's Title IX Policy is the preponderance of the evidence standard. ACOM will apply this same standard of evidence to all formal complaints of sexual harassment, regardless whether a student or ACOM employee (including faculty) is the respondent. ACOM will apply the same standard of evidence for formal complaints against students as for formal complaints against employees, including faculty. If this standard is not met,

the respondent is presumed not responsible for the alleged conduct. Under the preponderance of the evidence standard, it is possible for an investigation, hearing and/or appeal to reach an inconclusive determination.

Record of Hearing: ACOM will create an audio or audiovisual recording, or transcript, of any live hearing, allowing access to either party for inspection and review, and will retain this record for seven years after the hearing. No camera, TV, or other equipment, including cellphones, will be permitted in the hearing room except as arranged by ACOM.

VI. Written Determinations

Following the hearing, the decision-maker(s) will consider all of the evidence and make a determination, based on the preponderance of the evidence, whether the respondent is responsible for the alleged conduct. The decision-maker(s) will issue a written determination to the parties simultaneously regarding responsibility. The written determination will include:

1. Identification of the allegations potentially constituting sexual harassment;
2. A description of the procedural steps taken from the receipt of the formal complaint through the determination, including any notifications to the parties, interviews with parties and witnesses, site visits, methods used to gather other evidence, and hearings held;
3. Findings of fact supporting the determination;
4. Conclusions regarding the application of ACOM's Code of Conduct Honor Code and/or Title IX Policy to the facts;
5. A statement of, and rationale for, the result as to each allegation, including a determination regarding responsibility, any disciplinary sanctions/remedies to be imposed, and whether remedies designed to restore or preserve equal access to ACOM's education program or activity will be provided by ACOM to the complainant; and
6. ACOM's procedures and permissible bases for the complainant and respondent to appeal.

The decision-maker(s) will strive to issue the written determination regarding responsibility within 14 days after the hearing. Either party may appeal the determination by filing a written appeal, as described below, within 10 business days of the delivery of the determination regarding responsibility. If no appeal is filed, the determination regarding responsibility becomes final 10 business days from the date of delivery of the written determination regarding responsibility.

VII. Post-Determination Actions, Dismissals and Appeals

The Title IX Coordinator is responsible for effective implementation of any sanctions or remedies. The list of potential sanctions or remedies includes one or more of the following:

For Students:

- Warning
- No-contact orders
- Removal from specific courses or activities
- Disciplinary probation
- Suspension
- Expulsion
- Transcript notation

For Employees:

- Warning
- Performance improvement plan
- Required training or education
- Loss of annual pay increase
- Suspension with or without pay
- Termination

Dismissals

ACOM may dismiss the formal complaint or any allegations in the formal complaint, if at any time during the investigation or hearing:

1. The complainant notifies the Title IX Coordinator in writing that the complainant would like to withdraw the formal complaint or any specific allegations in the formal complaint;
2. The respondent is no longer enrolled or employed by ACOM; or
3. Specific circumstances prevent ACOM from gathering evidence sufficient to reach a determination as to the formal complaint or allegations in the formal complaint.

ACOM will promptly send written notice of a dismissal and reason(s) simultaneously to the parties.

Appeals

Either party may appeal from a determination regarding responsibility, or from ACOM's dismissal of a formal complaint or any allegations, on the following bases:

1. Procedural irregularity that affected the outcome of the matter;
2. Newly discovered evidence that could affect the outcome of the matter;

3. Title IX personnel had a conflict of interest or bias, that affected the outcome of the matter;
4. The decision was contrary to the substantial weight of evidence; and/or
5. The sanctions/remedies imposed are substantially disproportionate to the severity of the violation.

A notice of appeal must be in writing and must be filed with the Title IX Coordinator within 10 business days of the delivery of the decision to be appealed. The notice of appeal must include the name of the complainant, name of the respondent, the decision or action being appealed, and an explanation of the grounds for appeal

Upon receiving a notice of appeal, ACOM will provide formal notice to the parties of the appeal. Each party will be given a minimum of 10 business days to provide a written statement supporting or challenging the appealed action.

ACOM's Compliance Officer may serve as decision-maker for the appeal (if the Compliance Officer was not the Investigator) or, at the Compliance Officer's discretion, may appoint a decision-maker for the appeal. The appeal decision-maker must be free from bias or conflict of interest, and they must not be the same person as the decision-maker(s) that reached the determination regarding responsibility or dismissal, the investigator(s), or the Title IX Coordinator.

As soon as is reasonably practicable, and generally within 10 business days after receipt of the parties' written statements, the appeal decision-maker will issue a written decision regarding the appeal simultaneously to both parties. The decision will describe the result of the appeal and the rationale for the decision. The decision of the appeal decision-maker is final.

VIII. Contact Information

The Title IX Coordinator may be reached as follows:

Title IX Coordinator
445 Health Sciences Blvd.
Dothan, AL 36303
Tel: (334) 944-4006
Cell: (334) 596-5360
Email: titleIXcoordinator@acom.edu

Maxient Reporting: www.acom.edu/report

Compliance Hotline: (833) 490-0007; www.lighthouse-services.com/acom



4 PROFESSIONALISM STANDARDS

Guidelines for Ethics and Professional Conduct

Sanctions for Policy Violations

4.1 Student Professionalism Policy – Code of Conduct

4.2 ACOM HONOR Code Policy

4.3 Code of Ethics Policy

4.4 Professional Appearance- Student Dress Code Policy

4.5 Reporting Arrests and Illegal Behavior Policy

4.6 Professionalism and Ethics Committee Charter

GUIDELINES FOR ETHICS AND PROFESSIONAL CONDUCT

ACOM takes allegations of unethical behavior and unprofessional conduct very seriously. ACOM students are required to uphold the highest professional standards that are expected of physicians, and ACOM will not tolerate behavior or conduct that fails to meet these standards or that could damage the reputation of ACOM, its students, or its faculty and staff.

ACOM's foundational expectations regarding behavior and professional conduct are outlined in the ACOM Code of Conduct, the ACOM Code of Ethics, the AOA Code of Ethics, and the ACOM Honor Code. ACOM also expects students to observe fundamental standards of decency and good citizenship. All incidents and grievances alleging violations of ACOM's expectations for ethical behavior and professional conduct will be investigated by the Associate Dean of Student Services in conjunction with the Office of Compliance.

SANCTIONS FOR POLICY VIOLATIONS

A prospective or current student determined to be in violation of ACOM's professionalism standards, conduct policies, or any other policies included in this document may be subject to rescission of admissions offers or disciplinary actions, up to and including dismissal from ACOM. See Academic Progress and Standing section.

Student Professionalism Policy

PURPOSE

The Alabama College of Osteopathic Medicine (ACOM) is dedicated to ensuring the learning environment of its osteopathic medical education program is conducive to the ongoing development of professional behaviors in its osteopathic medical students, faculty, and staff. ACOM is also committed to maintaining an environment in which all individuals are treated with respect. As such, all members of the ACOM community are expected to demonstrate the highest standards of integrity and honesty in their interactions with patients, fellow students, faculty, staff, and administration. ACOM professional standards include but are not limited to, patient safety, respect, integrity, cultural competence, and interprofessional collaborative practice.

SCOPE

This policy applies to all students at the Alabama College of Osteopathic Medicine.

POLICY & ENFORCEMENT

The Alabama College of Osteopathic Medicine (ACOM) ensures that professionalism and ethics policies and procedures are in place for all members of the ACOM community. Policies relating to professionalism are reviewed and updated annually with committee oversight. All faculty, staff, administrators, and students are expected to uphold fundamental principles of individual accountability, equity, and professional responsibility.

ACOM students are expected to meet standards of conduct that fall within set guidelines for professional behavior, as set forth in the ACOM Student Code of Conduct. Students are required to maintain the highest standards of integrity with regards to personal and professional conduct throughout their medical education. Other policies and procedures related to student conduct and professionalism are located in the ACOM Student Handbook and the ACOM Clerkship Manual.

ACOM holds students to a reasonable professional standard, meaning that if any action or inaction is determined to be displaying poor judgment, inappropriate behavior, or other unethical conduct by a medical student, they may be charged with a breach of the professionalism standard and brought forward for review before the Professionalism and Ethics Committee.

Unprofessional conduct may include, but is not limited to, violations of dress code, tardiness, unapproved recording of learning activities, inappropriate interactions via email, social media, or other electronic communication, crude/inappropriate, culturally insensitive or intentionally disrespectful language, gestures, or comments. Unprofessional conduct may also include any conduct that does not align with ACOM's core values.

If an alleged breach of professionalism is related to Title IX and/or violations of the ACOM Title IX Policy, it will be referred to the college's Title IX Coordinator. Allegations of sexual misconduct falling within the college's Title IX jurisdiction will take precedence over ACOM professionalism policies. Any actions under the professionalism policies will be delayed pending outcome of the Title IX process.

ACOM Honor Code Policy

PURPOSE

Alabama College of Osteopathic Medicine (ACOM) ensures that the learning environment of its osteopathic medical education program is conducive to the ongoing development of professional behaviors in its osteopathic medical students, faculty, and staff at all locations and is one in which all individuals are treated with respect.

SCOPE

This policy applies to all ACOM students.

POLICY & ENFORCEMENT

Students are required to sign upon matriculation and abide by the following statements throughout their education at the Alabama College of Osteopathic Medicine.

As a student of the Alabama College of Osteopathic Medicine, I accept the responsibility for my conduct and expect the highest standards of myself. I will also support others in upholding these standards. This Code is actively applied at all times while I am a student at ACOM, including all interactions in the communities that I serve and/or live.

I commit to the following:

I. Honesty and Integrity

- I will demonstrate truthfulness in administrative, academic, and clinical activities, including, but not limited to, examinations, evaluations, and any other representation of my work.
- I will be truthful in all interactions with patients, peers, faculty, staff, and administration.
- I will always be honest in the collection, interpretation, and reporting of data pertinent to academic work and patient care.
- I will be honest, accurate, and accountable in all documentation in the academic and clinical setting.

II. Respect for others

- I will demonstrate the highest standards of ethical and professional behavior in the academic setting.
- I will not discriminate on the basis of age, race, color, sex, gender, gender identity, sexual orientation, religion or creed, national or ethnic origin, or disability.

- I will display and expect non-discriminatory behavior toward and from my supervisors, my peers, and staff with whom I work.
- I will protect patient confidentiality and uphold the dignity of all.
- I will never talk about patients outside of the confidential medical setting verbally or through social media, even if I do not use names, knowing that I represent ACOM and all medical students by such actions.
- I will demonstrate respect for patients through appropriate language and behavior, including that which is non-threatening and non-judgmental.

III. Reliability and Responsibility

- I will acknowledge my strengths as well as my limitations, offering assistance when I am able and seeking assistance when necessary.
- I will not be under the influence of alcohol or other drugs while performing academic or clinical responsibilities.
- I will not exhibit alcohol-related misconduct, including addiction.
- I will not use illicit drugs or misuse prescription drugs.

IV. Commitment to Self-Improvement

- I will continue to strive for knowledge, skills and competence.
- I will assess my own progress and identify areas for improvement and issues for continued learning.
- I will demonstrate a willingness to share in the learning process with peers, faculty, and staff to promote the student-teacher relationship.
- I will seek assistance from colleagues or professionals for any problems that adversely affect my education.

V. Representation of the Alabama College of Osteopathic Medicine

- I will adhere to all local, county, state and federal laws.
- I will represent myself with dignity through my word and deed in all interactions in the academic and clinical settings as well as in the communities that I serve.
- I will positively represent myself and ACOM to the best of my abilities in any public forum, including social media.
- I will not represent myself as an ACOM student or display the ACOM brand at events where my affiliation with the College could be misunderstood or that could expose the College to controversy, including such events as clinical observations outside of ACOM curriculum, political venues and rallies, health fairs, volunteer activities, and mission trips.
- I will promptly and truthfully disclose any arrests, whether guilty or not, or disciplinary action taken against me during my training at ACOM.

I, _____, choosing to enter the Doctor of Osteopathic Medicine degree program at the Alabama College of Osteopathic Medicine, commit myself to the ACOM Code of Conduct and ACOM Honor Code described above, in preparation for a future in medicine. I understand that violations of this honor code will result in disciplinary action, up to and including dismissal.

Adherence to the ACOM COVID-19 guidelines is expected of all ACOM faculty, staff, and students and is an extension of the expectations set forth in the ACOM Code of Conduct and Student Honor Code.

Code of Ethics Policy

PURPOSE

The purpose of this policy is to advise the ACOM community of the minimum standards of ethical conduct and ACOM's expectation that all community members will adhere to the highest ethical standards while representing ACOM in any capacity.

SCOPE

This policy applies to all ACOM community members, including administration, faculty, staff and students.

POLICY & ENFORCEMENT

To align with and promote our core values of integrity, respect and excellence, it is the policy of ACOM that all members of administration, faculty, staff and students adhere to and exhibit the highest ethical standards while working for or representing the Alabama College of Osteopathic Medicine (ACOM). It is ACOM's expectation that all ACOM community members will exhibit high ethical standards at all times—not only in the academic environment, but also in the community at large.

The following list contains a non-exclusive set of reminders, to aid members of the ACOM community in understanding the ethical conduct that is expected. Anyone with questions about how standards of ethical conduct relate to their role or position within ACOM are advised to consult their supervisor.

1. All community members have a duty to adhere to the policies and procedures of ACOM, as well as to the spirit of such standards. Everyone is expected to understand where to locate policies, to become familiar with ACOM's specific policies and procedures, and to adhere to them.
2. All faculty should be aware of and adhere to acceptable conduct and ethical standards defining the faculty/ student relationship and appropriate interactions with students. Faculty are expected to model professional behavior, both in and out of the classroom, with students, staff, administration, and with fellow faculty; faculty are expected to exhibit personal integrity, fairness, respect, and professionalism.
3. Clinical faculty should likewise be mindful of and respect ethical and professional boundaries related to the treatment of patients versus the supervision and mentorship of students and recuse themselves as necessary, either from the treatment of the student or from the supervision and grading of the student. The conduct of ACOM clinical faculty,

in particular, serves as a touchstone and standard for ACOM students; as such, it should reflect the highest standards of professionalism and ethics in the practice of medicine, both as those standards relate to relationships with patients and patient care, and to interdisciplinary relationships with other members of the care team. Respect, empathy, and compassion are hallmarks of those relationships.

4. All faculty, staff, and administration members are expected to exhibit the highest ethical standards of discretion and respect for our students by maintaining the confidentiality of student information (including academic or health records), by observing confidentiality of student interactions (except when required to do otherwise, and then by observing high standards of discretion), and by responsibly handling confidential information in a manner that preserves, honors, and respects student privacy.
5. Everyone is expected to maintain a respectful and collegial work and learning environment, free of harassment, free of bullying, and free of intimidation, threats, or retaliation of any type, on any basis.
6. Everyone is expected to exhibit personal integrity and honesty, as well as intellectual honesty. Intellectual honesty includes, but is not limited to, strict adherence to copyright and intellectual property law, avoidance of plagiarism, avoidance of cheating, honest representation of all facts and circumstances when questioned, and adherence to accurate reporting of research results.
7. All faculty, staff, and members of administration are required to disclose any financial conflicts of interest and conflicts of commitment annually.
8. All clinical faculty are expected to adopt and adhere to the Code of Ethics established by the AOA. See Exhibit A attached.

EXHIBIT A- AOA CODE OF ETHICS

The American Osteopathic Association (AOA) Code of Ethics is a document that applies to all physicians who practice osteopathically throughout the continuum of their careers, from enrollment in osteopathic medical college/school through post graduate training and the practice of osteopathic medicine. It embodies principles that serve as a guide to the prudent physician. It seeks to transcend the economic, political, and religious biases, when dealing with patients, fellow physicians, and society. It is flexible in nature in order to permit the AOA to consider all circumstances, both anticipated and unanticipated. The physician/patient relationship and the professionalism of the physician are the basis for this document.

The AOA has formulated this Code to guide its member physicians in their professional lives. The standards presented are designed to address the osteopathic and allopathic physician's ethical and professional responsibilities to patients, to society, to the AOA, to others involved in health care and to self.

Further, the AOA has adopted the position that physicians should play a major role in the development and instruction of medical ethics.

Section 1. The physician shall keep in confidence whatever she/he may learn about a patient in the discharge of professional duties. Information shall be divulged by the physician when required by law or when authorized by the patient.

Section 2. The physician shall give a candid account of the patient's condition to the patient or to those responsible for the patient's care.

Section 3. A physician-patient relationship must be founded on mutual trust, cooperation, and respect. The patient, therefore, must have complete freedom to choose her/his physician. The physician must have complete freedom to choose patients whom she/he will serve. However, the physician should not refuse to accept

patients for reasons of discrimination, including, but not limited to, the patient's race, creed, color, sex, national origin, sexual orientation, gender identity, or disability. In emergencies, a physician should make her/his services available.

Section 4. A physician is never justified in abandoning a patient. The physician shall give due notice to a patient or to those responsible for the patient's care when she/he withdraws from the case so that another physician may be engaged.

Section 5. A physician should make a reasonable effort to partner with patients to promote their health and shall practice in accordance with the body of systematized and scientific knowledge related to the healing arts. A physician shall maintain competence in such systematized and scientific knowledge through study and clinical applications.

Section 6. The osteopathic medical profession has an obligation to society to maintain its high standards and, therefore, to continuously regulate itself. A substantial part of such regulation is due to the efforts and influence of the recognized local, state and national associations representing the osteopathic medical profession. A physician should maintain membership in and actively support such associations and abide by their rules and regulations.

Section 7. Under the law a physician may advertise, but no physician shall advertise or solicit patients directly or indirectly through the use of matters or activities which are false or misleading.

Section 8. A physician shall not hold forth or indicate possession of any degree recognized as the basis for licensure to practice the healing arts unless she/he is actually licensed on the basis of that degree in the state or other jurisdiction in which she/he practices. A physician shall designate her/his osteopathic or allopathic credentials in all professional uses of her/his name. Indications of specialty practice, membership in professional societies, and related matters shall be governed by rules promulgated by the American Osteopathic Association.

Section 9. A physician should not hesitate to seek consultation whenever she/he believes it is in the best interest of the patient.

Section 10. In any dispute between or among physicians involving ethical or organizational matters, the matter in controversy should first be referred to the appropriate arbitrating bodies of the profession.

Section 11. In any dispute between or among physicians regarding the diagnosis and treatment of a patient, the attending physician has the responsibility for final decisions, consistent with any applicable hospital rules or regulations.

Section 12. Any fee charged by a physician shall compensate the physician for services actually rendered. There shall be no division of professional fees for referrals of patients.

Section 13. A physician shall respect the law. When necessary, a physician shall attempt to help to formulate the law by all proper means in order to improve patient care and public health.

Section 14. In addition to adhering to the foregoing ethical standards, a physician shall recognize a responsibility to participate in community activities and services.

Section 15. It is considered sexual misconduct for a physician to have sexual contact with any patient with whom a physician-patient relationship currently exists.

Section 16. Sexual harassment by a physician is considered unethical. Sexual harassment is defined as physical or verbal intimation of a sexual nature involving a colleague or subordinate in the workplace or academic setting, when such conduct creates an unreasonable, intimidating, hostile or offensive workplace or academic setting.

Section 17. From time to time, industry may provide some AOA members with gifts as an inducement to use their products or services. Members who use these products and services as a result of these gifts, rather than simply for the betterment of their patients and the improvement of the care rendered in their practices, shall be considered to have acted in an unethical manner.

SECTION 18. A physician shall not intentionally misrepresent himself/herself or his/her research work in any way.

SECTION 19. When participating in research, a physician shall follow the current laws, regulations and standards of the United States or, if the research is conducted outside the United States, the laws, regulations and standards applicable to research in the nation where the research is conducted. This standard shall apply for physician involvement in research at any level and degree of responsibility, including, but not limited to, research, design, funding, participation either as examining and/or treating provider, supervision of other staff in their research, analysis of data and publication of results in any form for any purpose.

This document was last updated July 24, 2016.

Professional Appearance-Student Dress Code Policy

PURPOSE

To establish basic guidelines for appropriate dress that promotes a positive image of the Alabama College of Osteopathic Medicine (ACOM) while also allowing maximum flexibility to maintain good morale; respect individual religious, racial, gender-specific, and ethnic attire; and give due consideration to safety and sound business practice.

SCOPE

This policy applies to all ACOM students while on-campus or off-campus at an ACOM event, as well as when conducting business on behalf of ACOM or representing ACOM.

POLICY & ENFORCEMENT

Student appearance contributes to ACOM's culture and reputation. All ACOM students are expected to present themselves in a professional manner. There are important visitors to ACOM on a daily basis whose impressions will be formed, in part, by the appearance of those they encounter.

Appropriate dress does not include clothing that is too tight, too low-cut, or revealing; clothing with rips, tears, or frays; clothing that exposes undergarments, or any extreme style or fashion in dress, footwear, accessories, fragrances or hair.

No one policy can establish an absolute dress and appearance code. Particularly at ACOM, different settings and activities (e.g., office, lecture, labs, outdoor athletic and recreational activities/events) may require different dress, taking into consideration the safety, infection control, and business (or leisure) functions of the area.

In lab areas, where safety and infection control requirements may vary significantly from the office setting, Division leaders are specifically empowered to establish and enforce a dress code that complies with current safety and infection control requirements and is appropriate for the faculty, any staff in that area, and for students.

In the office, study and lecture setting, ACOM will apply a reasonable and professional standard, centered around the business casual dress code concepts outlined below, with heightened expectations for professional dress in lectures and similar situations where ACOM is publicly represented. An student who is unsure of what is appropriate should check with the supervising faculty of the event or the Associate Dean of Student Services.

At the discretion of the Dean, casual days may be permitted, in which case a designated t-shirt may be worn. Jeans are not permitted on casual days unless specifically authorized by the Dean.

Unless there is an exception from the Dean, business casual dress is the minimal standard required of all ACOM students in the ACOM facilities during regular business hours (Monday through Friday, 8:00 a.m. to 4:30 p.m.). The Dean also has the discretion to relax additional portions of this dress code policy during extreme weather conditions.

Business casual dress is generally defined as follows:

- **Casual shirts:** all shirts with collars, business casual crewneck or V-neck shirts, blouses, golf and polo shirts, tops (not t-shirts) with ACOM logo. Examples of inappropriate shirts include t-shirts, shirts with slogans, tank tops, muscle shirts, camouflage, crop tops, tops that expose the midriff, back, or excessive cleavage.
- **Coats, jackets and sweaters:** Sport coats (with or without a tie), blazers, sweaters, pullovers (e.g., $\frac{1}{4}$ zip, not sweatshirts) worn over collared shirts, cardigans, jackets.
- **Pants:** Casual slacks (at least $\frac{3}{4}$ length), trousers, khakis. Solid-colored leggings may be worn only under dresses or under fingertip-length tunics/dressy tops. Examples of inappropriate pants include shorts, cropped pants, camouflage, athletic pants, yoga pants, pants worn below the waist or hip line, denim, and jeans.
- **Skirts and dresses:** Skirts or professional-appearing dresses not more than 3 inches above the knee. Examples of inappropriate dresses include beach attire, dresses with cut outs, spaghetti straps, or with an exposed back.
- **Footwear:** Casual slip-on or tie shoes, boots, oxfords, loafers, pumps/heels, dress flats, clean athletic shoes, or other footwear that primarily covers the foot. Examples of inappropriate footwear include flip-flops, Birkenstocks, Tevas, sandals, sandals with straps between the toe, construction or hunting boots.
- **Scrubs:** Scrubs may be worn in labs or classroom settings. Scrubs should not be paired with T-shirts or sweatshirts.

Professional Events. All students are expected to exhibit a heightened level of professionalism and project a professional appearance during certain events. As such, employee attire during these events should be more professional in appearance.

Examples of events requiring more professional attire include, but not limited to: guest lectures, patient/standardized patient/SIM encounters, participating in ACOM special events, representing ACOM at a conference or public forum and other events upon notification. This is not an all-inclusive list, and students are expected to use good judgment in determining which additional events may fall into this category.

Professional Attire Defined:

- Men: Dress shirt, dress pants, tie, closed-toe dress shoes and dress socks (calf length or higher).
- Women: Dress or skirt not more than 3 inches above the knee, or dress pants paired with a conservative (no visible cleavage) dress blouse or shirt, closed-toe shoes.
- No cloth shoes or athletic shoes.
- A clean, pressed, white coat must be worn during patient encounters, SIM, FOSCE, OSCE, and when hosting guest lectures.

OPP/OMM and PCS Laboratory Dress Code

The dress requirement in OPP and PCS skills training sessions is designed to promote learning by providing optimal access to diagnostic observation and palpatory experience. Wearing inappropriate clothing interferes with a partner's experience of learning and demonstrating the various skills taught. Laboratory dress code is for labs only. Additional events on lab days require the appropriate dress for the respective events.

Appropriate attire must be clean and includes:

- Any ACOM T-shirt with long or short sleeves and designated ACOM exercise shorts available for purchase in the ACOM Bistro. Compression shorts must be worn under the ACOM exercise shorts by both males and females. Sweats and other outerwear (including clean scrubs) are acceptable to be worn over required T-shirt and shorts but must be removed or adjusted when the covered part of the body is being examined.
- Sports bras (not wide T-back styles) are to be worn under T-shirts by female students. Tank tops are allowed under the T-Shirt as long as exposure to necessary areas are visible. These should allow adequate exposure of the spine and ribs when the T-shirt is removed or adjusted while maintaining modest breast coverage.
- T-shirts - both sexes will be asked to remove or adjust T-shirts while acting as patients when examining shoulder, thoracic and lumbar spine, ribs and abdomen.
- Each student is expected to remove her/his shoes during labs.
- Hats or head coverings (other than for religious purposes) are not permitted in lab.
- Religious head coverings must be modified when necessary to allow palpation when they would obscure the immediate area to be examined or treated (e.g., head, neck, upper back). Modifications can include adjustment of the covering permitting unobstructed palpation beneath the covering; or substitution of a thinner material that allows for adequate evaluation and treatment.
- Any requests for individual considerations should be discussed in advance with all course directors for the course that is affected.
- Each student must be appropriately attired before class begins. Students who do not wear the required clothing will be asked to leave the lab and return when they are appropriately clothed. The time between leaving lab and changing into appropriate clothing will be

counted as an absence from class and students will be penalized as if they had been tardy for lab.

- Those skill sessions requiring professional dress will be identified and communicated with the student body. Professional attire should accommodate positional changes to include demonstration and performance of osteopathic manipulation techniques, specifically be aware of neckline and hemline.

CLINICAL DRESS CODE

School officials, hospital administrators, and preceptors are the final arbiters of appropriate student appearance. If a student's appearance is not appropriate, the student may be immediately removed from clinical duties and asked to correct the problem before continuing with clinical duties.

The following rules apply at all times while the student is participating in clerkship rotation activities:

- Professional attire is required.
- A clean, pressed, white coat displaying the ACOM patch and an ACOM name badge is required at all times by all students when in a clinical environment.
- Any visible tattoo must be reviewed by a preceptor or Medical Education Director for approval. Any tattoo that is not approved must be covered during clinical activities.
- Some facilities may require students to wear or display their site-specific name badge or ID in addition to that required by the school.
- For activities where an institution requires scrubs or other alternative or protective attire, the alternative attire will be provided by the institution, remain the institution's property, and remain at the institution at all times. Scrubs are not to be worn away from or traveling to and from the clinical training site and are to be returned to the training site upon completion of the clerkship rotation.
- The above requirements apply during all clinical activities unless the preceptor specifically requests deviation from the above.
- If an affiliated hospital or clinical site has a dress code that differs from ACOM's standards, the student will follow the dress code of the training facility.

Additional General Standards for ALL Settings:

- Be judicious in one's use of perfume, cologne or scented body sprays that may be offensive or allergenic to others.
- Maintain neatly groomed hairstyles in natural hair color(s) that reflect a professional appearance.
- Ensure that makeup and jewelry reflect a professional appearance.

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- Students must conduct appropriate personal hygiene activities prior to the start of each day.
 - Nails should be short and manicured. No modifications to nails such as acrylic or gel, and no nail decorations are permitted.
 - Select clothing to cover, to the greatest extent possible, tattoos and other body art.
 - Wear an ACOM identification badge on a lanyard or at the shoulder at all times.

Reporting Arrests and Illegal Behavior Policy

PURPOSE

The Purpose of the Reporting Arrests and Illegal Behavior Policy is to promote a safe, healthy, and productive learning and working environment to ensure the safety and welfare of students, faculty, and patients cared for by ACOM representatives.

SCOPE

The Scope of the Reporting Arrests and Illegal Behavior Policy is for all prospective students and enrolled students at ACOM.

POLICY & ENFORCEMENT

During the admissions process, all prospective students are required to disclose convictions of any criminal offense in any city, state, or country, other than minor traffic offenses. Prospective students are required to disclose any time they have entered a plea of guilty or nolo contendere (no contest) to a criminal offense; had adjudication of guilt withheld for a criminal offense; participated in a first-offender or pretrial diversion program, or its equivalent; or committed any offense where the records have been sealed or expunged, including criminal offenses committed as a juvenile. Driving under the influence is not a minor traffic offense for purposes of this policy.

Prospective students also are required to disclose any pending criminal charges filed against them.

While enrolled at ACOM, students have a continuing duty to disclose all of the above, along with any arrests or pending criminal charges, to the Associate Dean of Student Services within 48 hours from the time of the incident. Such reports will be reviewed by the Associate Dean of Student Services, the Director of Campus Safety, and/or the Office of Compliance.

Students who violate any provision of the Reporting Arrests and Illegal Behavior Policy will be held accountable for their behavior and will be subject to appropriate disciplinary action, consistent with local, state, and federal law, and the provisions of the Code of Conduct and Honor Code found in the Student Handbook. Such action may include mandatory counseling, a reprimand and warning, loss of privileges, disciplinary probation, community service, restitution, attendance at alcohol and substance abuse classes, suspension, expulsion, and/or referral to the proper law enforcement authorities for prosecution.

**PROFESSIONALISM AND ETHICS COMMITTEE
CHARTER****A. Membership**

The committee shall consist of a chair appointed by the Dean.

- HR Director
- Compliance Representative
- One Faculty Representative
- One Staff Representative
- Associate Dean of Student Services

B. Membership Terms

The faculty and staff representatives will serve a three-year term. There is no limit to the number of terms served. All other members will serve indefinitely by virtue of their position.

C. Purpose

Alabama College of Osteopathic Medicine (ACOM) is committed to ensuring that its educational program occurs in professional, respectful, non-discriminatory, and intellectually stimulating academic and clinical environments. ACOM also promotes students' attainment of the osteopathic core competencies required of future osteopathic physicians. The purpose of the Professionalism and Ethics Committee is to ensure that the learning environment of ACOM's osteopathic medical education program is conducive to the ongoing development of professional behaviors in its osteopathic medical students, faculty, and staff at all locations and is one in which all individuals are treated with respect. This includes exposure to aspects of patient safety, cultural competence, and interprofessional collaborative practice.

D. Responsibilities

- a. The Professionalism and Ethics Committee (PEC) will review annually all policies regarding professionalism and ethics for ACOM students, faculty, staff, and administration. The PEC will make recommendations for policy changes through ACOM's policy and procedure process.
- b. The PEC will provide due process to any student violation of professionalism or ethics according to ACOM policy. The PEC will investigate and resolve such allegations using ACOM's policies and procedures and/or other College, Educational, or Community standards to adjudicate each allegation in a timely and fair manner.
- c. The following grievances are in the purview of this Committee:
 - i. ACOM Code of Conduct
 - ii. ACOM Student Honor Code
 - iii. Other Professionalism and Ethics Standards
 - iv. Discrimination

- v. *Title IX will not be considered by this Committee
- d. The PEC shall recommend to Dean's Cabinet professional conduct that can be trained and practiced by all members of the College community.
 - i. The PEC shall identify opportunities and methods for providing training in professional conduct in compliance with accreditation standards. The PEC shall recommend procedures that govern this training and the subsequent assessment of professional behaviors.
 - ii. The recommendations of the PEC for professional conduct training shall be submitted to Dean's Cabinet for final approval.
 - iii. All employees and enrolled students at the college must complete annual training in professional conduct standards prescribed by the PEC and approved by Dean's Cabinet. Such training shall include diverse topics that address respectful interactions in the workplace, educational, and clinical environments.
- e. Professional behaviors shall be included in the assessment of students where pertinent and in the annual evaluations of faculty and staff.
- f. The PEC shall prepare an annual report to Institutional Effectiveness in advancing standards of professional conduct.

E. Procedures for Student Professionalism and Ethics Violations

- a. Potential Professionalism and Ethics violations should be filed through Maxient, a web-based software for managing behavior records.
- b. An investigation will occur.
- c. Associate Dean of Student Services will assemble the PEC to discuss the allegation.
- d. A hearing will be called to allow the student to hear the allegation and provide a statement, call witnesses, and discuss and ask questions about policies and procedures regarding the alleged violation.
- e. The PEC will deliberately provide a resolution or action to be delivered to the student.
- f. An appeal of the decision can be made to Dean's Cabinet.
 - i. The written notice of appeal must be filed no later than ten (10) days following the student receipt of the resolution or action.
 - ii. The notice of appeal should specify the actions or decisions being appealed, provide a detailed explanation of the basis for the appeal, summarize and include any documentation or evidence supporting the appeal, and describe the relief sought by the student on appeal.
 - iii. Dean's Cabinet will conduct an Appeal Hearing to receive and decide the student appeal of the actions or decisions outlined in the notice of appeal. Dean's Cabinet will fulfill its responsibilities fairly and objectively, without bias for or against the appealing student.

F. Governance

PEC meetings will be held as needed and will require a quorum.

- a. A quorum is defined as at least 51% of voting membership in attendance.
- b. PEC minutes will require at least 51% of voting membership review and approval to be accepted.
- c. PEC motions will require support from at least 51% of the voting membership to move forward as a recommendation.



5 DRUG-FREE CAMPUS AND WORKPLACE

5.1 Drug-Free Campus and Workplace Policy

5.2 Student Drug and Alcohol Testing Policy

5.3 Tobacco-Free Campus Policy

Drug-Free Campus and Workplace Policy

PURPOSE

The Purpose of the Drug-Free Campus and Workplace Policy is to inform the academic community of their rights to pursue their individual and collective goals in a healthy work and educational environment, one that is free of the effects of alcohol and substance abuse.

SCOPE

The Scope of the Drug-Free Campus and Workplace Policy is for all faculty, staff, and students at ACOM.

POLICY & ENFORCEMENT

Overview of Policy Elements

All members of the ACOM community — including faculty, staff, and students — have the right to pursue their individual and collective goals in a healthy work and educational environment, one that is free of the effects of alcohol and substance abuse. Such abuse adversely affects the College's achievement of its mission and is not condoned. Responsibility for problems of substance abuse resides with each member of the College community.

The College's principal approach to issues of alcohol and substance abuse entails a wide range of education, prevention, and assistance activities conducted within its academic curricula; educational programs to inform individuals of the effects and consequence of using alcohol or other substances; and comprehensive counseling programs for faculty, staff, and students. The College recognizes that alcohol and substance abuse are illnesses that are not resolved easily by personal effort but may require professional assistance and treatment. Faculty, staff, and students are encouraged to take advantage of the preventive, diagnostic, referral, and counseling services available.

All members of the College community have a personal responsibility to adhere to all applicable laws, policies, and regulations concerning the use of alcohol or other drugs. These include federal and state laws, city ordinances, the Student Code of Ethics and Honor, the faculty standards of conduct, and other College policy statements. The Drug-Free Campus and Workplace Policy applies to all members of the College community, including all full-time and part-time students; all full-time and part-time permanent and temporary employees, including faculty, administration, and all exempt and non-exempt staff; and all student employees and interns. It applies to behavior that occurs on the College campus, on property owned or controlled by the College, or at College-sponsored or supervised activities. The College is committed to cooperating with the local school systems and area colleges, as well as other local,

state, regional, and federal agencies, in addressing problems of substance abuse in its community. Standards of Conduct Employees Unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance by any employee of the Alabama College of Osteopathic Medicine while he or she is at work for the College or at another site where the employee is carrying out assigned duties, is prohibited. The term "controlled substance" refers to any chemical substance whose distribution and/or use is controlled or prohibited by some law or statute, or whose distribution and/or use is permitted by a prescription issued by a licensed practitioner.

To ensure that all employees are working in a safe, productive environment, the possession, distribution, or consumption of alcoholic beverages is not permitted on the work site or on other College property, unless such occurs in the course of an authorized business or special College function which includes alcoholic beverages or where consumption was otherwise approved by the College. By extension, no employee may report to work while under the influence of alcohol. Consistent with the Drug-Free Campus and Workplace Policy, and as required by the Drug-Free Work Place Act of 1988, faculty and staff will, as a condition of employment, abide by the Drug-Free Campus and Workplace Policy and notify their supervisor within five days if they are convicted of violating any criminal drug statute as a result of any activity occurring at the Alabama College of Osteopathic Medicine work place or while engaged in work activities of the College. The term conviction means a finding of guilt (including a plea of nolo contendere) or the imposition of a sentence, or both, by any judicial body charged with the responsibility to determine violations of federal or state criminal drug statutes. When the Department of Human Resources receives notice of such a conviction, it will coordinate efforts to comply with the reporting requirements of the Drug-Free Workplace Act of 1988. Violation of the Drug-Free Campus and Workplace Policy shall result in the prompt imposition of sanctions. These sanctions may range from a reprimand, to required satisfactory participation in counseling or rehabilitation programs, to termination of employment. Any necessary sanctions taken against faculty, administrators, or staff will be carried out in accordance with policies and procedures published in appropriate College personnel handbooks.

Students

Unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance by any student of the Alabama College of Osteopathic Medicine while he or she is on College property or involved in College activities, is prohibited. The College will take disciplinary action against a student, group of students, or student organization for any violation of this policy. A student or student organization may also be disciplined for and is deemed in violation of the Code of Ethics and Honor for, the unlawful possession or consumption on campus of alcoholic beverages, public drunkenness, or violation of state or local laws regarding alcohol use, possession or sale. Any disciplinary actions to be taken and the disciplinary procedures to be applied for the fair adjudication of the alleged violations will be in accordance with policies and procedures published in the Student Handbook.

Applicable Local, State, and Federal Laws Concerning the Unlawful Possession or Distribution of Illicit Drugs and Alcohol

The following is a brief overview of local, state, and federal laws governing the possession, use, and distribution of controlled substances and alcohol. It is not intended to be an exhaustive or definitive statement of various laws, but rather is designed to indicate the types of conduct that are against the law and the range of legal sanctions that can be imposed. Local, state, and federal laws regarding underage drinking and the possession, use, and sale of illegal drugs and alcohol and are strictly enforced by the College.

Federal Drug Offenses and Penalties Title 21, USC § 841 et. Seq.

- § 841(b)(1)(A) Distribution of 1 kilogram or more of a mixture or substance containing a detectable amount of heroin; 5 kilograms or more containing coca or cocaine; 100 grams or more of PCP; 10 grams or more of LSD; 1,000 kilograms of marijuana; or 50 grams or more of methamphetamine is a federal crime punishable by not less than 10 years or more than life in prison; and if death or serious bodily injury results, not less than 20 years or more than life, and not more than a \$10 million fine.
- § 841(b)(1)(B) In the case of distribution of 100 kilograms or more of marijuana; or 100 or more plants of marijuana; one is guilty of a felony and if convicted may be sentenced to not less than 5 years in prison and fined not more than \$5 million.
- § 841(b)(1)(D) If one is found with a quantity of marijuana less than 50 kilograms, 10 kilograms of hashish, or one kilogram of hashish oil; one is guilty of a felony and sentenced to not more than 5 years and fined not to exceed \$250,000.
- § 844 It is unlawful for any person to knowingly or intentionally possess a controlled substance unless such substance was obtained directly, or pursuant to a valid prescription. If convicted of possession, one may be sentenced to not more than 1 year and not less than a \$1,000.
- § 859 & 860 Distribution of controlled substances to persons under 21 years of age may be punishable by twice the above sentences, as may distribution within 1,000 feet of a school, college, or university.
- § 848(b) If one is the head of a “drug ring” of 5 or more persons engaged in a criminal enterprise involving the manufacture, acquisition, transportation, distribution, or sale of illegal substances, one may be sentenced to life in prison.
- § 853 All of the above include the possibility of forfeiture of property derived from or used in the distribution of illegal drugs or used in the manufacture of such drugs.

State of Alabama Offenses and Penalties- Code of Alabama 2021

- § 13A-12-202 Criminal solicitation to commit a controlled substance crime shall be punished the same as the controlled substance crime solicited.
- § 13A-12-203 An attempt to commit a controlled substance crime shall be punished the same as the controlled substance crime attempted.
- § 13A-12-204 A criminal conspiracy to commit a controlled substance crime shall be punished the same as the controlled substance crime that is the object of the conspiracy.

- § 13A-12-211 A person commits the crime of unlawful distribution of controlled substances if, except as otherwise authorized, he or she sells, furnishes, gives away, delivers, or distributes a controlled substance. Unlawful distribution of controlled substances is a Class B felony.
- § 13A-12-212 The unlawful possession of controlled substances is a Class D felony.
- § 13A-12-213 Unlawful possession of marijuana in the first-degree results where one possesses marijuana for other than personal use or has been previously convicted of marijuana possession in the second degree and is a Class D felony.
- § 13A-12-214 Unlawful possession of marijuana in the second-degree results where one possesses marijuana for personal use only and is punishable as a Class A misdemeanor.
- § 13A-12-215 The sale of controlled substances by one over 18 years of age to one under 18 years of age is a Class A felony with no eligibility of suspended sentence or probation.
- § 13A-12-231 One who knowingly sells, manufactures, delivers, or brings into this state cannabis (in any of its forms), cocaine, morphine, opium, methaqualone, hydromorphone, amphetamine, phencyclidine, lysergic acid diethylamide, methamphetamine, or Fentanyl shall be guilty of a felony, may be fined up to \$750,000, and sentenced for up to life in prison without parole.
- § 13A-12-233 One who engages in a criminal enterprise, in connection with 5 or more persons, to traffic in illegal drugs shall be sentenced to no less than 25 years and no more than life, without eligibility for parole, and fined up to \$500,000. For a second such conviction, a mandatory life imprisonment is required with a fine of not less than \$150,000 or more than \$1 million.
- § 13A-12-250 An additional penalty of 5 years imprisonment is added on for the above violation which occurs within a 3-mile radius of a school, college, or university campus (or housing project; see § 13A-12-270).
- § 13A-12-260 Use, possession, delivery, or sale of drug paraphernalia is a crime punishable as a Class A misdemeanor for possession, a Class C felony for sale, and a Class B felony for sale to one under 18 years of age by one over 18 years of age.

Sentences of Imprisonment in the State of Alabama

- § 13A-5-6 Sentences for felonies shall be for a definite term of imprisonment, which includes hard labor, within the following limitations:
 - For a Class A felony, for life or not more than 99 years or less than 10 years.
 - For a Class B felony, not more than 20 years or less than 2 years.
 - For a Class C felony, not more than 10 years or less than 1 year and a day.
- § 13A-5-7 Sentences for misdemeanors shall be a definite term of imprisonment in the county jail or to hard labor for the county, within the following limitations:
 - For a Class A misdemeanor, not more than 1 year.
 - For a Class B misdemeanor, not more than 6 months.
 - For a Class C misdemeanor, not more than 3 months.

A Summary of State and Local Alcoholic Beverage Laws Drinking Age

28-1-5 The legal age in Alabama for consumption or purchase of alcoholic beverages is twenty-one (21) years.

Minors Purchasing

§ 28-3A-25(18) Minors purchasing or attempting to purchase alcoholic beverages are subject to a fine of not less than \$50 and not more than \$500, and, at the discretion of the judge, up to three (3) months at hard labor or imprisonment.

Civil Liability

§ 6-5-71 An individual may be liable for damages under civil law for selling alcohol, giving alcohol, or otherwise causing someone to become intoxicated, who later is injured or causes another to be injured.

Driving Under the Influence (DUI)

§ 32-5A-191(a) A person shall not drive or be in actual physical control of any vehicle while: there is 0.08 percent or more by weight of alcohol in his or her blood, or under the influence of alcohol, or under the influence of any controlled substance or any other substance which impairs his ability to drive safely, or under the combined influence of alcohol and a controlled substance to a degree which renders him or her incapable of safely driving, or under the influence of any substance which impairs the mental or physical faculties of such person to a degree which renders him or her incapable of safely driving.

§ 32-5A-191(b) A person under 21 years of age shall not drive or be in actual control of a vehicle if there is 0.02 percentage or more by weight of alcohol in his or her blood. Many are under the impression that a person may be arrested only for having over 0.08 percent blood alcohol content, but the fact is that one may be arrested for substantially less content. Boating while under the influence is also illegal.

See § 32-5-192 An individual must submit to a blood alcohol test or his license will be suspended.

See § 32-5A-191 When convicted of DUI, a person may be jailed for not more than 1 year and fined not less than \$600 or more than \$2,100 for a first conviction. On a second conviction, a person may be fined up to \$5,100 and jailed for up to 1 year with a mandatory 5 day sentence. On a third conviction, a person will serve at least a mandatory 60-day sentence, and will be fined at least \$2,100 with a 10,100 maximum fine.

Public Intoxication

§ 13A-11-10 A person commits the violation of public intoxication if he appears in a public place under the influence of alcohol, narcotics or other drug to the degree that he endangers himself or another person or property, or by boisterous and offensive conduct annoys another person in his vicinity.

Health Risks Associated with Use of Controlled Substances and Abuse of Alcohol

Substance abuse and drug dependency are problems of staggering proportions in our society today. They are the leading causes of preventable illness, disability, and death in the U.S. and are

estimated to afflict 20.3 million Americans. This number increases dramatically when one considers the harm done to the families of substance abusers as well as to those injured or killed by intoxicated drivers or in drug related work accidents. Alcoholism may develop in anyone. It tends to appear first between the ages of 20 and 40 and also to be more prevalent in persons with a family history of alcoholism.

Alcohol

Alcoholism is a disorder that has profound psychological, biological, and societal effects. Directly, it affects over 18 million people; indirectly, it affects another 56 million. It is usually characterized by one of three different patterns:

- Regular daily intoxication
- Drinking large amounts of alcohol at specific times
- Periods of sobriety interspersed with periods of heavy daily drinking

The disorder is usually progressive, and physical dependence can develop; if this happens, serious, sometimes life-threatening symptoms can develop when alcohol is withdrawn. Short term effects of alcohol use can include depression, gastritis, liver disease, automobile accidents, and domestic violence. Chronic alcohol abuse can produce irreversible health changes, including dementia, sexual impotence, cirrhosis of the liver, and heart disease. Death can occur either as a complication of one of these chronic problems, or acutely, secondary to alcohol intoxication by poisoning or to aspiration of vomitus, or as the result of any automobile accident while driving intoxicated.

Marijuana (Cannabis)

Marijuana is the most used illegal drug in the United States. Though physiological consequences do depend on frequency, duration, and quantity of use, marijuana use has been linked to impairment of short-term memory, concentration, judgment, perception, and fine motor skills. Thus, the use of this drug increases the risk of machinery or motor vehicle accident and injury, for four to six hours after ingestion. Impairment of memory may last for three to six months, even if use of the drug is discontinued completely. The active chemical in marijuana (THC) remains stored in body fat cells long after ingestion. Marijuana use is associated with chronic anxiety, depression, and paranoid feelings. It can exacerbate or increase significantly underlying emotional problems. Frequent and/or ongoing use by children and adolescents may have long term developmental consequences resulting in lack of motivation, apathy, and difficulty managing current stresses and responsibilities, as well as making appropriate plans for the future. Pregnant women who use marijuana may be at a higher risk for giving birth to children with developmental or birth defects.

Hallucinogens

This category includes drugs such as lysergic, acid diethylamine (LSD, also known as “acid”), mescaline, and peyote. These drugs cause delusions, hallucinations, and impaired perception of time and space. Phencyclidine (PCP or “angel dust”) and amphetamine variants known as “ecstasy” are included in this category, though they rarely cause hallucinations in the true sense.

They are, however, potent drugs that have mind-altering effects and impair perception and cognition. Hallucinogens can produce a “bad trip” with anxiety, agitation, hallucinations, and paranoia leading to impulsive behavior. After a “bad trip” the person can be subject to “flashbacks,” which are recurrences of the experiences of the “bad trip” without taking any more of the drug. Psychosis and impaired thinking may result after long-term use.

Cocaine

The use of cocaine, an illegal stimulant drug, has risen dramatically in the United States. Other names for this drug are code, C., lady, and snow. Cocaine is a white powder that is snorted, injected into veins, or smoked freebase or as “crack.” Crack is a crystalline form of cocaine that is also known as “rock,” from its small, white rock-like appearance. (“Speed balls” are cocaine mixed with heroin, which is a particularly dangerous combination.) Crack produces the most intense cocaine high; addiction can occur after using it only once or twice. Cocaine highs are characterized by feelings of extreme happiness and a sense of limitless power and energy. However, the physical effects include high blood pressure and heart palpitations. A cocaine “crash” follows the high and includes symptoms of depression, dullness, great irritability, and paranoia. Serious medical complications occur with cocaine use, such as heart attacks (even in young people), seizures, and strokes due to high blood pressure. The psychological effects of cocaine use include violence, paranoia, and personality changes as well as symptoms such as depression, anxiety, and confusion. Pregnant women using cocaine have increased risk of miscarriages and still-births. Newborns addicted to cocaine are irritable, unresponsive, prone to have malformed kidneys and genitals, and to have heart attacks and strokes. Addiction to cocaine controls aspects of the user’s life, impinges on the lives of those closest to the user, and occurs in people of all ages, classes, and educational levels.

Amphetamines and Other Stimulants

In addition to cocaine, several other drugs stimulate the nervous system and are very addictive. Most of them belong to the amphetamine family of drugs. Dexedrine (present in “diet” pills) may at times be prescribed by a physician, but its use as a legitimate medication is now infrequent. Street drugs of the amphetamine group include “ecstasy” and “ice.” Ice is a smokable amphetamine compound that is very potent, and the effects are long-lasting and devastating. The health risks of these and other stimulants are similar to those of cocaine use.

Narcotics, Including Heroin

Various medications are taken to relieve pain. Most non-prescription pain relievers, (such as aspirin, Tylenol, Motrin, and Nuprin) are not considered addictive. However, there is a class of stronger pain relievers, available by prescription only, which are referred to as narcotics and most of which are opiates. Examples of these drugs include morphine, codeine, Tylenol No.3, Darvon, Darvocet, Percocet, Percodan, Demerol, and certain prescription cough medicines. These drugs differ from non-prescription pain relievers in their potential for abuse and dependence. With close medical supervision, these drugs may be safely used in specific medical circumstances for a limited time. However, addiction may occur, and the person may not want to stop the drug even when the pain has stopped. Tolerance to the drug is shown by an increase in

the amount of drug necessary to relieve pain. This becomes progressive and leads to the craving or need for larger and larger doses, without which the person becomes extremely uncomfortable and physically ill. The time may come when the person “needs” such a large dose of the drug that is poisonous or lethal. Under these circumstances, coma, suffocation, and death may ensue. The malignant course of this problem is similar to that of addiction to heroin. Although heroin is not available by prescription, it is a narcotic which belongs to the same chemical family as the above drugs. The use of heroin is mainly by injection into a vein, which carries the additional medical dangers of contracting AIDS and hepatitis from unclean needles and syringes.

Sedatives and Tranquilizers

The barbiturates and the benzodiazepines are two of the most commonly used classes of sedatives. The barbiturates (such Phenobarbital, Seconal, and Amytal) are highly addictive and can be fatal if taken in excess. Although they still have medical uses, they have largely been replaced by the benzodiazepines, used for relief of anxiety and to promote sleep. The benzodiazepines include such drugs as Valium, Librium, Ativan, Xanax, Dalmane, Halcion, and Restoril. While safe and effective at moderate doses for short periods of time (weeks), all the benzodiazepines have a potential for physical and psychological dependence if used at higher doses for longer periods of time. Frequently the benzodiazepines are abused by adults who become dependent on them because of their anti-anxiety effects.

Other tranquilizers which may be abused include methaqualone (Quaaludes), Doriden, and Equanil. Intoxication may result from benzodiazepine use and resembles alcoholic drunkenness. Drowsiness, slurred speech, unsteady gait, and lack of coordination are common signs. The effects of the benzodiazepines (and the barbiturates and other sedatives) add to those of alcohol; taken together, they can lead to coma and even death. Withdrawal from benzodiazepines resembles alcohol withdrawal and is most apparent if the drugs are stopped abruptly. Withdrawal takes place within hours to days of stopping the drug. Once a person is addicted to benzodiazepines, a physician should supervise the plan for gradually stopping them, to minimize the serious effects of withdrawal.

Drug or Alcohol Counseling, Treatment, and Rehabilitation Programs Available to Students and Employees

Employee and Student Assistance Programs

Employees utilize HR-based recommendations for Alcohol Counseling, Treatment, and Rehabilitation Programs. Employees have the option to choose employee-based health care insurance that also provides a wide array of counseling and treatment services available from in-network providers in our area.

All ACOM students, regardless of whether they utilize in-house health insurance, have access to two mental and physical health care services that provide either telemedicine or in-person services.

ACADEMIC LIVE CARE and ACADEMIC STUDENT ASSISTANCE PROGRAM (ASAP) described below:

Academic Live Care (<https://www.acom.edu/mental-health-resources/>)

Academic Live Care is a physical and mental telehealth care service available to ALL ACOM students.

Whether or not a student is residing on-campus, they will have access to unlimited services all with a \$0 copay by using our [coupon code](#).



24/7 Urgent Care



Psychiatry
Appointments



Therapy
Appointments



Nutrition
Counseling



On-Demand
Crisis
Counseling



RX Discount
Program



Financial
Wellness Tools



Online Health &
Wellness
Resources

Academic Student Assistance Program (ASAP) [<https://www.acom.edu/mental-health-resources/>]

The Academic Student Assistance Program (ASAP) is a second resource available to ALL ACOM students through our partnership with [Academic Health Programs](#). This resource provides on-demand, unlimited 24/7 access to support from a Care Center staffed by qualified and experienced professionals. Free and confidential services are accessible via phone, video, private chat, text, or email with online and mobile tools available. In addition, [their website](#) has multiple life and wellbeing resources that support student's personal, health, legal, financial (including identity theft), and crisis management protection. Referrals to providers in the student's current location are available.

Counseling is confidential between the student and counselor, except for specific circumstances that indicate the student is a danger to himself or others or in the case of child or elder abuse. If counseling is mandated by the Student Progress Committee or other authorized faculty, the

counselor may confirm (with the appropriate information release) the student's attendance at counseling sessions.

Helplines and Other Drug and Alcohol Abuse Prevention Resources

Free information and confidential support are available from many organizations. Some provide counseling, referrals to local treatment facilities, support groups, and community-based organizations, and free publications and other information in print on substance abuse and mental health issues.

SAMHSA National Helpline	(800) 662-HELP (4357)	https://www.samhsa.gov/
Suicide Prevention Lifeline	(800) 273-TALK (8255)	https://suicidepreventionlifeline.org/
Alabama Dept. of Mental Health	(800) 367-0955	https://mh.alabama.gov/
Alcoholics Anonymous		https://www.aa.org/
Narcotics Anonymous		https://www.na.org/
College Drinking: Changing the Culture		https://www.collegedrinkinglearning.org/
Partnership for a Drug-Free Community	(256) 539-7339	http://www.partnershipforadrugfreecommunity.org/

Local Treatment Centers

Alabama Professionals Health Program
Medical Association of the State of Alabama
19 S Jackson Street
Montgomery, AL 36104
Phone: 334 954-2596
Toll Free 800-239-6272
Fax 334 954-2593
staff@alabamaphp.org

Southeast Outpatient Addiction Recovery
Addiction treatment center
321 Westgate Pkwy #4, Dothan, AL 36303
(334) 677-7627

Altacare of Dothan
Addiction treatment center
1450 Ross Clark Cir #400
Dothan, AL 36301
(334) 794-4582

Southeast Intervention Group
Alcoholism treatment program
1077 W Main St
Dothan, AL 36301
(334) 316-6827

Substance Abuse Partnership
Addiction treatment center
812 S Appletree St
Dothan, AL 36301
(334) 699-2813

Spectracare Substance Abuse
Addiction treatment center
2694 S Park Ave
Dothan, AL 36301
(334) 712-2720

Spectra Care
Addiction treatment center

1672 Columbia Hwy
Dothan, AL 36303
(334) 339-9077

Breakthrough Wellness, LLC
Addiction treatment center
2543 Ross Clark Cir Suite I
Dothan, AL 36301
(334) 446-0211

Wiregrass Club
Alcoholism treatment program
112 N Herring St
(334) 648-4711

College Disciplinary Sanctions for Controlled Substance Users and Alcohol Abusers

Various disciplinary procedures are applicable to faculty, staff, and students. Violations of the standard of conduct will be dealt with on a case-by-case basis, with the imposition of discipline appropriate to the severity of the violation. For each group in the College community, there are certain common sanctions that can be applied in an appropriate case. These common sanctions include letters of reprimand, probation, and severance of ties with the College through expulsion or termination. Normally, opportunity for referral to an appropriate rehabilitation program occurs, if the violation is a first offense. Referral for prosecution normally occurs only for the most serious violations.

Students who violate any provision of the College's Drug- Free Campus and Workplace Policy will be held accountable for their behavior and will be subject to appropriate disciplinary action, consistent with local, state, and federal law, and the provisions of the Professionalism Policies and Honor Code found in the Student Handbook. Such action may include mandatory counseling, a reprimand and warning, loss of privileges, disciplinary probation, community service, restitution, attendance at alcohol and substance abuse classes, suspension, expulsion, and/or referral to the proper law enforcement authorities for prosecution.

Employees who violate this policy will be held accountable for their behavior and will be subject to appropriate disciplinary action, consistent with policies and procedures published in appropriate College personnel handbooks and with local, state and federal law. Such action may include mandatory counseling, mandatory participation in an appropriate rehabilitation program, a warning, a reprimand, strict probation, unpaid suspension from employment, termination of employment, and/or referral to the proper law enforcement authorities for prosecution. All disciplinary procedures and appeals currently applicable to students and all categories of employees will continue to be available for violations of this policy.

Evaluation

The College must conduct a biennial review of the Drug-Free Campus and Workplace Policy to determine its effectiveness, identify and implement necessary changes, and ensure that sanctions

developed are enforced consistently. During each review, the following factors, at a minimum, must be examined:

- a) the number of drug and alcohol-related violations
- b) the number of drug and alcohol-related fatalities
- c) the number of incidents of violence
- d) the number and type of sanctions imposed by the College
- e) the number of students involved in classes and counseling sessions
- f) the outcomes of treatment, assessed at pre-scribed follow-up intervals

Distribution

Annually, the Department of Human Resources and/or the Director of Campus Safety will distribute the Drug Free Campus and Workplace policy and other drug and alcohol abuse prevention materials to all students and employees of the Alabama College of Osteopathic Medicine.

Student Drug and Alcohol Testing Policy

PURPOSE

The Purpose of the Student Drug and Alcohol Testing Policy is to promote a safe, healthy, and productive learning and working environment free from the influences of drugs and alcohol and to ensure the safety and welfare of students, faculty, and patients cared for by ACOM representatives.

SCOPE

The Scope of the Student Drug and Alcohol Testing Policy is for all ACOM students.

POLICY & ENFORCEMENT

ACOM promotes a safe, healthy, and productive learning and working environment free from the influences of drugs and alcohol and to ensure the safety and welfare of students, faculty, and patients cared for by ACOM representatives. ACOM policy requires students to be free from illicit drug use and free from addiction.

This policy, while in place to ensure safety of students, faculty, and patients, does not preclude criminal action by means of other institutional policies and/or state and federal law.

The College recognizes that substance abuse is a career and life-threatening problem and encourages students to seek help in overcoming addiction. Students are encouraged to reach out to the Office of Student Services for help in seeking services for drug and alcohol counseling or contact any of the Behavioral Health resources listed in the Student Handbook.

Drug screening is performed on one or two occasions during enrollment as part of the credentialing process at ACOM and may also be done by order without notice from any member of ACOM administration.

Any student may be required to submit to drug and/or alcohol testing based upon what the faculty and administration consider to be reasonable suspicion, including, but not limited to:

- Direct observation of drug or alcohol use or possession;
- Physical symptoms related to the influence of drugs or alcohol;
- Abnormal or erratic behavior that is disruptive or a risk to others;
- Arrest or conviction of a drug or alcohol related offense on- or off-campus;
- Documented information from a credible source submitting a complaint;
- Evidence that a previous drug or alcohol test was tampered with; or
- Possession of drug paraphernalia.

Testing will be done by order of any member of ACOM administration and will be performed at a qualified designated laboratory site identified by the College.

Positive Drug Screen or Arrests for Illegal Drug Usage or Sales

Students who:

1. test positive on a drug screen,
2. refuse to test,
3. demonstrate illegal or disruptive actions related to drug or alcohol use,
4. demonstrate abnormal or erratic behavior that is disruptive or a risk to others and who test positive for drugs or alcohol
5. have an arrest for drug paraphernalia or other illegal possession/use of drugs,
6. have a demonstrated dependence to alcohol

will be considered in violation of the ACOM Honor Code. All testing results will be held in confidence except for designated administration, the Director of Campus Safety, the Professionalism and Ethics Committee, the Alabama Professionals Health Program, and the State Medical Board, if appropriate.

Self-Identification for Drug or Alcohol Dependence

Self-identification as a substance abuser will result in the student being assisted in obtaining an approved treatment program. The cost of treatment is the responsibility of the student. Monitoring of successful completion will be the responsibility of the Associate Dean for Student Services and/or designee. The student treatment records will be held in confidence except where required by the State Board of Medicine or under subpoena. Please refer to the ACOM Security and Fire Safety Report for additional information. The report is available from the Student Services Office or online at <https://www.acom.edu/consumer-information/>.

Alabama Professionals Health Program

ACOM reserves the right to refer a student to the Alabama Professionals Health Program for evaluation and treatment before returning to the academic or clinical setting. Failure to meet all the requirements of this program may subject the student to Disciplinary Dismissal. All costs associated with this program are the responsibility of the student.

Alabama Professionals Health Program
Medical Association of the State of Alabama
19 S Jackson Street
Montgomery, AL 36104
Phone: 334 954-2596
Toll Free 800-239-6272
Fax 334 954-2593
staff@alabamaphp.org

Tobacco Free Campus Policy

PURPOSE

The Purpose of the Tobacco Free Campus Policy is to promote a safe, healthy, and productive learning and working environment.

SCOPE

The Scope of the Tobacco Free Campus Policy is for all faculty, staff, and students at ACOM.

POLICY & ENFORCEMENT

Smoking and tobacco use are prohibited with no exceptions in all ACOM facilities and on all College property and other properties owned or leased by the College. This includes, but is not limited to, all indoor and outdoor areas and properties. Indoor areas and properties include, but are not limited to, all common work areas, elevators, hallways, College-owned or leased vehicles, garages, restrooms, dining areas, employee lounges, conference and meeting rooms, and all other enclosed areas in the workplace. Outdoor areas include, but are not limited to, parking lots, grounds, rooftops, plazas, courtyards, entrance and exit ways, and any other areas of the College campus.

For purposes of this policy, "smoking" is defined as inhaling, exhaling, burning, carrying, or possessing any lighted tobacco product, including cigarettes, cigars, pipe tobacco, and any other lit tobacco products.

For the purposes of this policy, "tobacco use" is defined as the personal use of any tobacco product, whether intended to be lit or not, which shall include smoking as defined above, as well as the use of an electronic cigarette or any other device intended to simulate smoking and the use of smokeless tobacco, including snuff; chewing tobacco; smokeless pouches; any other form of loose-leaf, smokeless tobacco; as well as the use of unlit cigarettes, cigars, and pipe tobacco.



6 SAFETY AND SECURITY

Security Services Department

Interagency Cooperation

Jurisdiction

Physical Security and Access to Facilities

6.1 Identification (ID) Badge Policy

6.2 Emergency and Disaster Preparedness Policy

6.3 Firearms and Potentially Dangerous Items Policy

6.4 Laboratory Safety Policy

6.4.1 Laboratory Safety Procedures

SECURITY SERVICES DEPARTMENT

The ACOM Security Services Division is committed to the safety and well-being of the campus community. The Division is staffed and operated 24 hours a day, seven days a week. Through the office on the first floor of the ACOM building, the Division coordinates campus patrols, monitors security cameras, arranges escort services to and from parking or housing areas, and addresses calls for assistance. The Division works closely with the Dothan Police Department, the Houston County Sheriff's Department, and other neighborhood partners to safeguard the campus.

The Division is staffed by full-and part-time security representatives and one security supervisor who are hired and provided with professional training by Southeast Health's Security Services Department and other agencies as needed. These representatives are not certified and do not have arrest authority. Their primary responsibilities include but are not limited to:

- providing general security services;
- maintaining crime and fire logs;
- conducting crime awareness and prevention programs;
- reporting and investigating alleged criminal incidents;
- monitoring security cameras;
- controlling access to the ACOM building;
- providing escort services to and from parking or housing areas;
- assisting with special events;
- responding to emergencies or requests for assistance;
- serving as a liaison to local law enforcement officials and other first responders; and
- assisting students, employees, and visitors as needed.

INTERAGENCY COOPERATION

ACOM's Security Services Division coordinates campus safety planning, training, and operations with state and local law enforcement and five agencies. This network of cooperation ensures that the campus is prepared to prevent and respond to potential threats to the safety of the campus community. In the event of an emergency or other situation requiring the assistance of law enforcement officials, the Division will contact the Dothan Police Department and/or the Houston County Sheriff's Department. There is no written memorandum of understanding between the Department and any outside law enforcement agency.

JURISDICTION

The Security Services Division's area of jurisdiction is limited to the property owned and operated by the Alabama College of Osteopathic Medicine. ACOM neither owns nor operates any off-campus student housing or off-campus student organization facilities. ACOM's security personnel have no responsibility for the security policies, procedures, or safety of off-campus locations.

Summerfield Square, the on-campus student housing community, is owned and operated by Strategic Facility Partners, LLC, and Corvias Group, LLC, and does not fall under the jurisdiction of ACOM's security personnel.

Corvias Group, LLC, is responsible for the operation, physical security, access control, and maintenance of the facility. However, under a cooperation agreement between ACOM and Corvias, the Security Services Division conducts certain basic security activities at Summerfield Square. These activities are limited to:

- conducting random drive-through patrols of the parking areas adjacent to the apartment buildings;
- providing, upon request, security escort service between ACOM and the apartment buildings; and
- monitoring outdoor security call boxes (Blue Light Phones).

Therefore, in case of a criminal, fire, or medical emergency at Summerfield Square, a person should request immediate assistance by dialing 911.

PHYSICAL SECURITY AND ACCESS TO FACILITIES

Security representatives occupy campus posts 24 hours a day, 7 days a week. Designated buildings require a valid ACOM ID for entry. Card readers, alarm monitoring systems, emergency call boxes (Blue Light Phones), and 24-hour recorded video cameras support these efforts by providing direct feeds to security officials.

The campus is closed to the public. However, visitors are welcome and, as with all students and employees, are expected to obey all laws and institutional policies and procedures related to the use of ACOM facilities. All campus guests are required to sign in and obtain a visitor's badge at the ACOM security desk and must be escorted while on campus.

ACOM is committed to providing a safe and secure campus through the maintenance of facilities in mitigating unsafe physical conditions. These departments also work to ensure that safety and security are accounted for during project planning and implementation. Security and Facilities Division personnel regularly patrol the campus and report malfunctioning lights, locks, call boxes, or other unsafe physical conditions to the appropriate parties for remediation. All members of the ACOM community are encouraged to report any malfunction or unsafe facilities condition to the Security or Facilities Divisions.

The College has instituted safety and security procedures and services, but the personal safety of everyone who enters the campus is his or her responsibility.

Failure to take precautions or maintain an awareness of the environment and surroundings may result in increased risk. ACOM will continue to develop and implement security measures, but these measures can succeed only with the support of faculty, staff, students, and visitors.

For more information on ACOM campus safety and security, please review the ACOM Security and Fire Safety Report. The report is available in the Security Services Office and online at <https://www.acom.edu/consumer-information/>.

Identification (ID) Badges Policy

PURPOSE

The Alabama College of Osteopathic Medicine (ACOM) is committed to providing a campus that is safe and conducive to the goals of education and research.

Standardized identification of members of the ACOM community is an essential step in the process of securing our campus. Students, staff, and security officers should be able to tell with a glance if a person is authorized to be in certain areas.

SCOPE

This policy applies to all ACOM faculty, staff, students, and visitors while on the ACOM campus.

POLICY & ENFORCEMENT

ACOM will work to maintain a safe and secure environment for faculty, staff, students, and visitors to the campus. As part of this plan, ACOM utilizes Identification Badges.

Issuance and Visibility: Identification (ID) badges will be issued to all ACOM faculty, staff, and students. The ID badge should be always worn at the collar or on a lanyard and visible while on campus. Division leaders are responsible for enforcing this requirement; repeated violations should be addressed through the employee discipline process.

ACOM Property: ID badges remain the property of ACOM and must be returned upon permanent withdrawal, dismissal, or end of employment from the College. Alterations to an ID badge, including stickers or pins, are prohibited. Loaning or duplicating an ID badge is also prohibited.

Replacement IDs: ID badges will be replaced free of charge for changes in name, or damage from normal wear and tear.

Lost or Stolen IDs: Lost or stolen ID badges are to be reported immediately to Information Systems and to Security. Replacement of IDs that are lost or misplaced will be made by ACOM Information Systems, and a fee will be charged for a replacement badge. ID badges that are stolen will be replaced free of charge if the individual provides a police report or a Campus Security report.

Visitor IDs: Visitors to campus are also required to wear a unique ID badge that identifies them as a visitor. These visitors include prospective students, vendors, consultants, and contractors. ACOM Security is responsible for providing the appropriate visitor's badge.

This policy is enforced by the Director of Campus Safety.

Emergency and Disaster Preparedness Policy

PURPOSE

The Alabama College of Osteopathic Medicine (ACOM) is committed to providing a campus that is safe and conducive to the goals of education and research.

SCOPE

This policy applies to all ACOM operations.

POLICY & ENFORCEMENT

ACOM will work with appropriate emergency response agencies to maintain a safe and secure environment for faculty, staff, students, and visitors to the campus which includes emergency and disaster preparedness.

RELATED PROCEDURES

- ACOM will maintain physical access control for the campus, in accordance with ACOM's Building Access Policy and ACOM ID Badges Policy.
- ACOM will maintain plans for emergency and disaster preparedness. These plans include fire prevention, emergency action plan, and weather emergencies. All students, faculty and staff receive periodic training or orientation to the campus emergency preparedness plan as appropriate for their responsibilities.
- ACOM will provide timely warnings and notifications regarding threats to the health or safety of faculty, staff, and students.
- ACOM will provide an Annual Safety and Security report to comply with Clery Act requirements.

Firearms and Potentially Dangerous Items Policy

PURPOSE

The Alabama College of Osteopathic Medicine (ACOM) is committed to providing a campus that is safe and conducive to the goals of education and research.

SCOPE

This policy applies to all ACOM faculty, staff, students, and visitors.

POLICY & ENFORCEMENT

Except as otherwise stated in this policy or required by law, ACOM prohibits the possession and use of firearms and other potentially dangerous items inside any ACOM building that is utilized for the purpose of providing lectures, academic training sessions, clerkship rotations or other events associated with ACOM or its affiliates.

Prohibited items include the following:

- Pistols, revolvers, and other types of handguns
- Rifles, shotguns, and other types of firearms designed to be shouldered
- Machine guns
- Explosive devices including fireworks
- Non-culinary knives with blades more than four inches in length
- Stun gun, taser or instrument of like kind or description
- Machetes
- Air guns
- Slingshots
- Swords
- Crossbows, bows, and other archery equipment
- Metallic or composite knuckles
- Other instruments or devices that are designed to be used as a weapon to injure or threaten another person
- Potentially dangerous and unauthorized recreational equipment (e.g., paintball guns)

Firearms permitted by law must be properly maintained in a personal vehicle in a manner consistent with Alabama law.

This policy does not apply to duly designated law enforcement officers while in the discharge of their lawful duties or to the Security Division.

Enforcement of this policy rests with the Director of Campus Safety. Additional exceptions may be granted in writing by the Director of Campus Safety.

Laboratory Safety Policy

PURPOSE

The Alabama College of Osteopathic Medicine (ACOM) is committed to providing a campus that is safe and conducive to the goals of teaching, research, and service.

SCOPE

This Policy applies to all ACOM faculty, staff, and students utilizing any ACOM-managed research or anatomy laboratories.

POLICY & ENFORCEMENT

ACOM is committed to ensuring the safety of its students, faculty, staff, and visitors; and for complying with industry best practices in laboratory safety.

Laboratory Safety Procedures

Implements: Laboratory Safety Policy

PROCEDURE & PROCESS

- Food and drinks **ARE NOT** permitted in the anatomy laboratory or in research laboratory work areas.
- Appropriate clothing must always be worn. Long pants and closed-toe footwear are required. Loose clothing and long hair must be secured to avoid accidents.
- Personal protective equipment (PPE) must be worn when working with chemicals or biological materials.
- Proper labeling and storage of all hazardous materials are required.
- Faculty members, principal investigators, laboratory personnel, or designated responsible authorities must ensure that all individuals working in the labs have been trained in safety and proper research/laboratory procedures.
- Safety Data Sheets (SDS) of all laboratory chemicals must be maintained in the laboratory or online.
- The entrance to each laboratory in which hazardous materials are used or stored will have posted the name and phone number of the designated person who can be contacted in an emergency.
- Eye wash stations must remain clear of all storage or obstructions.
- Prompt reporting of spills to laboratory personnel is required.
- Any concerns regarding the safety or security of the laboratories should be brought to the attention of the Laboratory Coordinator and the Director of Campus Safety.
- Labs are part of the facility safety review inspection that occurs bi-annually.
- All accidents or injuries are to be reported to the Laboratory Coordinator and the Director of Campus Safety.

PROCEDURE MANAGEMENT

The Director of Campus Safety is responsible for the development of laboratory safety procedures. The laboratory safety procedures are reviewed annually and will be housed in the electronic policy management system.

Questions related to this policy should be directed to the Director of Campus Safety or the Coordinator of Anatomy & Research Laboratories.



7 INFORMATION SYSTEMS

7.1 Information Technology Acceptable Usage Policy

7.2 Social Media Policy

7.3 Copyright Infringement Policy

Information Technology Acceptable Usage Policy

PURPOSE

This document constitutes a college-wide policy for the appropriate use of all ACOM computing and network resources. It is intended to provide effective protection of individual users, equitable access, and proper management of those resources. These guidelines are intended to supplement, not replace, all existing laws, regulations, agreements, and contracts which currently apply to those resources.

Access to ACOM networks and computer systems is granted subject to college policies and local, state, and federal laws. Appropriate use should always be legal and ethical, reflect academic honesty and community standards, and show restraint in the consumption of shared resources. It should demonstrate respect for intellectual property; ownership of data; system security mechanisms; and individuals' rights to privacy, freedom of speech, and freedom from intimidation, harassment, and unwarranted annoyance.

The College is not responsible for unacceptable or unethical use of the information technology environment including computer and computer networks or electronic communication system.

SCOPE

This policy applies to all students, faculty, staff, sub-contractors, medical education directors, core site coordinators, preceptors and other individuals using ACOM information technology resources or data.

POLICY & ENFORCEMENT

"Respect for intellectual labor and creativity is vital to academic discourse and enterprise. This principle applies to works of all authors and publishers in all media. It encompasses respect for the right to acknowledgment, the right to privacy, and the right to determine the form, manner, and terms of publication and distribution. Because electronic information is volatile and easily reproduced, respect for the work and personal expression of others is especially critical in computer environments. Violations of authorial integrity, including plagiarism, invasion of privacy, unauthorized access, and trade secret and copyright violations, may be grounds for sanctions against members of the academic community." The EDUCOM Code.

Social Media Policy

PURPOSE

The purpose of this policy is to address acceptable uses regarding access and use of social media for Alabama College of Osteopathic Medicine (ACOM)-affiliated communications. It also includes professionalism requirements for ACOM's medical students who, as medical professionals in training, must uphold the highest standards of the medical profession and protect the privacy and confidentiality of patients.

SCOPE

The Scope of the Social Media Policy is for all prospective students and enrolled students at ACOM.

POLICY & ENFORCEMENT

The Alabama College of Osteopathic Medicine (ACOM), henceforth known as ACOM or the College, expects that its medical students will access and use social media in a manner that:

- a. Does not compromise the confidentiality, integrity, or accessibility of those assets; and
- b. Complies with all applicable ACOM policies, procedures, and guidelines and is in accordance with all applicable federal, state, and local laws and regulations governing the use of computers and the Internet; and
- c. Protects ACOM's reputation and promotes its educational mission; and
- d. Recognizes the rights of the members of the ACOM community guaranteed by the Constitution of the United States and the State of Alabama, including but not limited to freedom of speech, inquiry, and expression; and
- e. Complies with all terms set forth by each respective social media network.

These obligations apply regardless of where access and use originate.

The content contained herein is not intended to be comprehensive, as the evolution of technology precludes ACOM from anticipating all potential means of storing, capturing and transmitting information. This policy will be monitored and revised as deemed necessary.

Requirements

- a. Personal Use of Social Media
 - i. Students may not use ACOM's name, email addresses or logos/trademarks on social media to post information in a manner that may be interpreted as

representing an official position of the College, or which may misrepresent the College's viewpoint. All accounts and posts in which a user identifies oneself as a member of the ACOM community should clearly communicate: "The views and opinions expressed are strictly those of the author. The contents have not been reviewed or approved by the Alabama College of Osteopathic Medicine" or "Views/opinions are my own."

- ii. The ACOM name and College email addresses may not be used on social media sites and online forums for personal communication.
 - iii. Students may be held legally liable for what they post on their personal social media site(s) and should therefore refrain from any communications considered punishable under state or federal law.
 - iv. Individual students and student organizations are expected to abide by the Student Code of Conduct. Students may be accountable to ACOM for acts on personal social media site(s) that violate the Student Code of Conduct.
 - v. Any attempt by a student to obscure their identity as a means to circumvent the prohibitions listed herein by representing oneself as another person, real or fictitious, is strictly prohibited.
- b. All ACOM-affiliated social media may not be used for any commercial business, financial transactions, or interactions that would otherwise be considered irrelevant.
 - c. Rights and permissions must be secured before posting, sharing or distributing copyrighted materials, including but not limited to music, art, photographs, texts, portions of video, or information considered proprietary by a College partner, vendor, affiliate or contractor.
 - d. Social media tools may not be used to communicate or store information classified as confidential or private or otherwise considered privileged or sensitive by ACOM; which compromises the privacy of a member of the ACOM community or its clients; or is considered confidential under applicable federal and state laws, including the Health Insurance Portability and Accountability Act (HIPAA) and the Family Educational Rights and Privacy Act (FERPA).

Additional Requirements for Medical School Communities

- a. Misrepresentation in any social media by any student, regarding the status of his/her credentials as a medical student or medical professional, is strictly prohibited.
- b. Specific Restrictions under HIPAA and FERPA for Medical Students
 - i. Posting Protected Health Information (PHI) on social media by any individual within the ACOM community, including students, is strictly prohibited under the HIPAA regulations, which apply to any information related to patients.
 - 1. Never post a photograph or image of a patient to any electronic media, other than the patient's electronic medical record. The use of personal

cameras or cell phone cameras in patient care settings is discouraged. Any photographs taken in the patient care setting should be taken using a facility-approved device with secure file storage and must be posted to the patient's electronic medical record.

2. Removal of an individual's name does not constitute proper de-identification of PHI. Inclusion of data such as age, gender, race, diagnosis, date of evaluation, type of treatment, or the use of a highly specific medical photograph (such as a before/after photograph of a patient having surgery or a photograph of a patient from medical outreach trips) may still allow the reader to recognize the identity of a specific individual.
 3. Never post derogatory or defamatory remarks about any patient (either current or past) to any social media, including any social media deemed to be "private."
- ii. Posting of any student records on social media by any individual within the ACOM community, including students, is strictly prohibited under the FERPA regulations.
 1. FERPA-protected academic information of another medical student or trainee might include, but is not limited to, course or clerkship grades, narrative evaluations, examination scores, or adverse academic actions.
 - iii. All individuals within the ACOM community, including students, must take steps to ensure compliance with all federal and state laws and regulations, including HIPAA and FERPA, by ensuring that their social media has the appropriate privacy settings to avoid the inadvertent dissemination of confidential information, with the understanding that even if they limit the number of people who can see their personal information, others who have access to this information may share it more broadly.
 - iv. It is strongly discouraged for an ACOM medical student to "friend" patients on social media websites. Those serving in patient care roles generally should not initiate or accept friend requests except in unusual circumstances, such as the situation where an in-person friendship pre-dates the treatment relationship.
 - v. The public disclosure of negative information about ACOM or affiliated clinical rotation sites on social media increases the risk of liability to the College and is clearly unprofessional. There are legitimate and confidential mechanisms for improving quality at a medical facility.
 - vi. The specific sanctions to be imposed for non-compliance with HIPAA or FERPA laws and regulations, illegal activities, or violation of ACOM policies and procedures, will depend upon the severity and legal implications of the activity under review. Action will be initiated as appropriate in accordance with the classification of an individual (i.e., faculty, staff, medical student, etc.) and, if necessary, the requirements of the individual's licensing boards,

as set forth in the applicable disciplinary procedures within the medical school's student handbooks. Discipline may range from simple counseling/guidance up to the risk of civil and/or criminal liability under applicable federal and state laws and regulations.

vii. Non-Compliance and Sanctions

1. Violations of this policy may result in the revocation of social media contact and account privileges for ACOM-affiliated accounts.
2. A disciplinary or other review may be initiated if any student's social media activity violates law or ACOM policy or otherwise subjects the College to potential liability for such acts.
3. The purpose of this section is not intended to provide for the investigation of, or disciplinary action against, members of the ACOM community, including students, for the legal exercise of their First Amendment rights.

Copyright Infringement Policy

PURPOSE

To establish definitions, actions, and guidelines regarding unauthorized use or distribution of copyrighted materials.

SCOPE

This policy applies to all ACOM faculty, staff, and students.

POLICY & ENFORCEMENT

All ACOM faculty, staff, and students must respect and comply with the rules on copyright. Unauthorized use or distribution of copyrighted materials, including, but not limited to, peer-to-peer file sharing (transmitting copyrighted materials, such as music, movies, compilations, to friends for their use), is a violation of federal law that can subject students to fines, imprisonment, or both.

Copyright infringement is the act of exercising, without permission or legal authority, one or more of the exclusive rights granted to the copyright owner under section 106 of the Copyright Act (Title 17 of the U.S. Code). These rights include the right to reproduce or distribute a copyrighted work. In the file-sharing context, downloading or uploading substantial parts of a copyrighted work without authority constitutes an infringement.

Penalties for copyright infringement include civil and criminal penalties. In general, anyone found liable for civil copyright infringement may be ordered to pay either actual damages or “statutory” damages affixed at not less than \$750 and not more than \$30,000 per work infringed. For “willful” infringement, a court may award up to \$150,000 per work infringed. A court can, in its discretion, also assess costs and attorneys’ fees. For details, see Title 17, United States Code, Sections 504, 505.

Willful copyright infringement can also result in criminal penalties, including imprisonment of up to five years and fines of up to \$250,000 per offense. For more information, please see the website of the U.S. Copyright Office at www.copyright.gov.

Students who engage in unauthorized peer-to-peer file sharing, illegal downloading, or other unauthorized distribution of copyrighted materials using ACOM’s information technology systems are in violation of the ACOM Honor Code and may be subject to College-imposed sanctions for misconduct, including expulsion.

In compliance with the requirement to publicize legal alternatives to illegal downloading or otherwise acquiring copyrighted material under 34 CFR 668.14(b)(30), ACOM directs network users to a website maintained by Educause (<https://www.educause.edu/focus-areas-and-initiatives/policy-and-security/educause-policy/legal-sourcesonline>) for a comprehensive list of legal downloading resources. Although these sites are deemed legal alternatives for acquiring copyrighted material, ACOM does not guarantee access to these sites using College resources.



8 HEALTH AND WELLNESS

8.1 Health and Technical Standards Policy

8.2 Accommodations and Temporary Assistance in Education Programming Policy

8.3 Service Animal as a Disability Accommodation Policy

8.4 Immunization Policy

8.5 Student Insurance Policy

8.6 Student Mental Health Services Policy

8.7 Student Physical Health Services Policy

8.8 Health Professionals Recusal Policy

8.9 Student Fatigue Mitigation Policy

8.10 Psychiatric Consultation or Medical Evaluation Policy

Health and Technical Standards Policy

PURPOSE

ACOM has an established and publicly available policy regarding technical standards admissions requirements for potential applicants to the osteopathic medical education program.

The Alabama College of Osteopathic Medicine (ACOM) is committed to equal access for all qualified applicants and students; however, a Doctor of Osteopathic Medicine (DO) must have the knowledge and skills required to perform in a broad variety of clinical situations. Therefore, students must be capable of consistently meeting certain health and technical standards. This policy sets forth the guidelines for health and technical standards required for potential students of ACOM.

SCOPE

This ACOM Policy applies to all ACOM students.

POLICY & ENFORCEMENT

ACOM seeks candidates who will be able to serve the needs of society and strives to graduate skilled and effective osteopathic physicians. To achieve this goal, the following principles and technical standards will be applied to candidates for admission and continuing students:

Principles:

1. Technical Standards refer to criteria that go beyond academic requirements for admission but are essential to meeting the academic requirements of the program. Matriculation and continuation in the college requires a certain level of cognitive and technical skill.
2. All students applying to and continuing in ACOM will be expected to meet the same requirements.
3. Medical students with disabilities will be held to the same fundamental standards as their non-disabled peers. Although not all students should be expected to gain the same level of proficiency with all technical skills, some skills are so essential that mastery must be achieved.
4. Every reasonable attempt will be made to facilitate the progress of students where it does not compromise ACOM standards or interfere with the rights of other students and patients.

Applicants for admission to ACOM and continuing students must possess the capability to complete the entire medical curriculum and achieve the degree. All courses in the curriculum must be completed successfully. In order to acquire the knowledge and skills to function in a broad variety of clinical situations and to render a wide spectrum of patient care, candidates for the DO degree must meet requirements in six areas, including the following:

Observation; Communication; Motor; Intellectual, Conceptual, Integrative and Quantitative Abilities; Behavioral and Social Attributes; and General Health.

Entering and continuing students in the College are held to the following technical standards:

- **OBSERVATION:** Students must have the functional ability to observe demonstrations and experiments in the basic and clinical sciences and must have sufficient use of the senses necessary to accurately observe and react to a patient at a distance and close at hand.
- **COMMUNICATION:** Students must be able to reasonably relate to patients and establish sensitive, professional verbal relationships with patients, colleagues, and staff. They are expected to personally communicate the results of the history and examination to the patient and to their colleagues with accuracy, clarity, and efficiency and to communicate effectively in oral and written form as well as nonverbal cues.
- **MOTOR:** Students are expected to participate in basic diagnostic and therapeutic maneuvers and procedures, including, but not limited to the following: performing a complete physical examination including Objective Structural Clinical Examination (OSCE); providing osteopathic manipulation; providing cardio-pulmonary resuscitation; applying pressure to stop bleeding; and performing simple general surgical procedures.
- **INTELLECTUAL, CONCEPTUAL, INTEGRATIVE and QUANTITATIVE ABILITIES:** Students must be able to learn to analyze, synthesize, solve problems, and reach reasonable diagnostic and therapeutic judgments. Students are expected to be able to display good judgment in the assessment and treatment of patients. They must be able to learn to respond with prompt and appropriate action in emergency situations.
- **BEHAVIORAL AND SOCIAL ATTRIBUTES:** Students are expected to be able to accept criticism and respond with appropriate modification of their behavior. Students also are expected to possess the perseverance, diligence, and consistency necessary to complete the medical school curriculum and enter the independent practice of medicine within a reasonable time frame. They must demonstrate professional and ethical demeanor and exhibit interpersonal skills and exemplary behavior in all dealings with peers, faculty, staff, and patients. Compassion, integrity, concern for others, honesty, and law-abiding ethical behavior are essential for the successful functioning physician.
- **GENERAL HEALTH:** The candidate must have sufficient physical stamina to perform strenuous workloads for long periods. They should be free of chronic or reoccurring debilitating diseases that would interfere with or preclude successful completion of the

curriculum. The candidate must be free of communicable infectious disease which could be transmitted to patients in the healthcare setting.

ACOM will assess the participation or continued participation in the program by candidates or students with currently contagious diseases or infections which could constitute a direct threat to the health or safety of others on a case-by-case basis, taking into account such factors as the nature and duration of the risk posed by the disease, the severity of the risk to others, the likelihood that the disease or infection is transmittable to others, and whether reasonable accommodations can mitigate the risk.

Technological compensation may be made at the discretion of ACOM for some disabilities in certain of these areas, but a candidate or continuing student must meet the essential technical standards in such a way that he or she will be able to perform in a reasonably independent manner. The use of a trained intermediary is not acceptable in many clinical situations as it implies that a candidate's judgment must be mediated by someone else's power of selection and observation. See Students with Disabilities, located in the Student Handbook, for more information.

The Admissions Committee will evaluate candidates according to the requirements of the Health and Technical Standards through a review of records, written statements, and interviews. Candidates will be provided a copy of the Standards as part of the admission materials. Accepted students will be required to sign a statement acknowledging receipt of the Standards. During study at ACOM, students who are not meeting the technical standards described may be asked to have a clinical provider designated or approved by ACOM to evaluate the physical or mental status of a student. This evaluation will help to determine if the student has met the technical standards through the recovery or treatment process. The student may withdraw or be placed on an administrative leave of absence until such documentation is provided.

Participation in Osteopathic Principles and Practices (OPP)

Participation in OPP is a requirement for College admissions consideration and graduation. One important distinction between the training in osteopathic and non-osteopathic medical schools is the time spent developing the palpatory skills used for diagnosis and treatment. Osteopathic physicians understand that palpation means examination with the hands and fingers, touching, feeling, or perceiving by the sense of touch. In other words, palpation is the use of touch to examine the body.

Student doctors are required to fully participate in OPP labs, which include examination and technique demonstration by randomly selected lab partners, which may change multiple times during a lab session. This observation, evaluation, and technique demonstration will involve all external body surfaces except the genitalia, breasts, and rectum. Students are expected to allow the body regions under study to be accessible for observation and palpation and the learning of

osteopathic techniques. The body region(s) being examined and/or treated will need to be adequately exposed for observation, palpation, and treatment.

The development of osteopathic manipulative palpatory skills occurs in all four years of ACOM's educational experience. Palpatory skills are used in all areas of medical practice and are especially important in the evaluation and treatment of the musculoskeletal system. Development of palpatory skills takes place in the first- and second- year Osteopathic Principles and Practice (OPP) courses. This requires active participation in all laboratory sessions. During the first two years, each student will palpate a variety of people, representing both genders and different body types. This simulates the variety of patients seen in practice. Equally important is the experience of being palpated by other students. The experience of being palpated helps the student to understand how palpation feels from the patient's perspective. It also enables students to give important feedback to their lab partners to help them develop their palpatory skills. Special instruction is given on patient consent, professional touch, and respect for privacy. Without physical contact and direct palpation, skills cannot be developed to the degree necessary to graduate and be successful in practice.

Besides developing palpatory skills, each student will learn the art and skill of osteopathic manipulative treatment. Again, active participation is required. Each student will participate in a demonstration of osteopathic techniques by a variety of students of both genders and different body types over the two years. Only by this experience will the student be prepared to treat the variety of patients seen in practice. The osteopathic profession uses a variety of treatment models, and each student is required to actively participate in skills development with each model. This involves demonstration as both doctor and patient. Any requests for individual considerations should be discussed in advance with all course directors for the course that is affected. All requests for accommodations must be addressed to the Associate Dean of Student Services.

Practice is necessary for the development of psychomotor skills. Reading and observation, although helpful, cannot develop the skills required to do palpatory diagnosis and manipulative treatment.

Professional conduct is expected at all times. There is no tolerance for inappropriate attitudes, comments, touch, or clothing.

OPP Dress Code

The OPP dress code is addressed in the "Professional Appearance" section of the student handbook. Please refer to this section for specific dress code requirements in the labs.

Participation in Gross Anatomy Laboratory Training Sessions

ACOM utilizes cadavers in the gross anatomy laboratory. As such, ACOM students must be able to tolerate working with and touching cadavers.

Participation in Gross Anatomy Laboratory Training Sessions

Simulation activities and labs include simulated clinical scenarios, simulated task training, standardized patient scenarios/cases, debriefings, and/or discussions. Simulation mannequins are to be used with respect and be treated as if they were live patients. Any participants in simulation activities and labs at ACOM are expected to maintain confidentiality and may be required to sign a confidentiality agreement. Participants are obligated to report any violations of confidentiality to the ACOM Simulation Center faculty and/or staff.

Limitation/Exclusion from Participation in OPP or PCS Lab for Medical Reasons

Occasionally a student may have an acute or pre-existing health problem (disability), such as a previous surgery, which may affect participation and contraindicate examination and demonstration of a technique of a specific anatomic location. Any student who feels their acute or pre-existing health problem could affect their participation is required to follow the steps outlined in the Students with Disabilities section.

Special Environments

Medical and pharmaceutical education occurs in a special environment in which all students must participate in order to satisfactorily complete the course of instruction. Classrooms, laboratories, and clinical facilities require physical, chemical, social, and interpersonal environments in which each student must participate in order to accomplish the educational requirements established for all courses. Failure to participate in required academic classes will result in consideration for dismissal from ACOM.

It is recognized, however, that circumstances may arise concerning chemical exposures that require the student involved to make an informed decision concerning continued participation in the environment in question. These special cases include students who believe they are allergic or sensitive to certain chemicals used in some of the teaching environments, and pregnant students.

Students Who Believe They are Sensitive to Chemicals

It is recognized that hypersensitivity to chemicals in the teaching environment will be a rare event. However, it is also recognized that students may believe that they are allergic or sensitive to certain chemicals. When students indicate to a professor that they are allergic or sensitive to certain chemicals in the teaching environment, the following actions will be taken:

1. The student will be directed to the Associate Dean of Student Services who will inform the student of the following options:
 - The student may wish, at the student's expense, to be medically evaluated. The Division of Student Services will assist in identifying a board-certified Allergist and may, upon request from the student, assist the student in obtaining an appointment at the earliest possible opportunity.

- If the student wishes to reduce exposure to the chemicals in question, this may be accomplished by wearing extra clothing and gloves. Students should also consider wearing an appropriate mask.
- 2. The student, after being evaluated, will be given three (3) working days in which to make a decision. During this period, if the student decides not to attend the class in question, the absences will not be counted. The student will, however, be held responsible for the material covered during the absences. After three (3) working days, if the student has not made a decision in writing to the Associate Dean of Student Services, any further absence from courses will be counted against his/her attendance record, which could result in consideration for dismissal from ACOM.

Pregnant Students

It is recognized that students may become pregnant prior to or during their course of study at ACOM. This raises special concerns regarding exposure to chemical agents in the teaching environment as possible effects of many agents on fetal development are unknown. ACOM does not know and cannot determine the potential risk of the teaching environment to the developing fetus. If the student wishes to continue in the course in question, she does so of her own volition knowing that the following options exist. If a student advises the professor that she is (or may be) pregnant, the student will be directed to the Division of Student Services for information to enable her to make an informed decision regarding the following options:

1. Obtain, at her own expense, appropriate clothing to reduce her exposure to the potentially harmful chemicals or an appropriate filter mask; or
2. Take a Leave of Absence from school and resume coursework the following year after the birth of the baby.

Accommodations and Temporary Assistance in Education Programming Policy and Procedure

PURPOSE

The Alabama College of Osteopathic Medicine (ACOM) is committed to an environment in which all individuals are treated with respect and dignity. Consistent with ACOM's broader nondiscrimination policy, ACOM does not discriminate based on disability.

SCOPE

This policy applies to all students and accepted candidates planning to matriculate in educational programs at ACOM. Failure to follow the procedures set forth in this policy may result in the denial or delay of requested accommodations or temporary medical assistance.

POLICY & ENFORCEMENT

ACOM provides reasonable access to learning opportunities for students with disabilities (e.g., mental health, attentional, learning, chronic health, sensory, or physical) who meet the program's technical standards with or without reasonable accommodations. If you are a student with a disability who may require accommodations during your educational career with ACOM, you will be asked to identify reasonable accommodations when addressing the ability to meet technical standards, with or without reasonable accommodations. The student is responsible for requesting reasonable accommodations through the Disability Services Coordinator in person, by phone (334) 944-4004 or by e-mail accommodations@acom.edu. The Disability Services Coordinator/Associate Dean of Student Services reviews all requests for accommodations through an individualized, interactive process.

The use of an intermediary may be permissible while performing some non-essential physical maneuvers or non-technical data gathering. However, in almost all cases, an intermediary cannot substitute for the student's interpretation and judgment. It is seldom a reasonable accommodation for intermediaries to either perform essential skills on behalf of a student or to replace technical skills related to selection and observation.

ACOM may provide reasonable assistance to learning opportunities required for degree completion to students with temporary medical conditions who meet the program's technical standards with or without temporary medical assistance. The student is responsible for requesting necessary temporary medical assistance through the Disability Services Coordinator. The

Disability Services Coordinator reviews all requests for temporary medical assistance through an individualized, interactive process.

For information relating to Service Animals, please see the Service Animals on Campus policy.

Students who fail in the curriculum or who are suspended or dismissed may not claim failure due to disability if they have not previously identified the disability and requested reasonable accommodations in advance of the curricular failure.

RELATED PROCEDURES

1. Complete the Student Request for Accommodations Form
2. Send the form and all supporting documentation to accommodations@acom.edu or to the address below:

Alabama College of Osteopathic
Medicine Attn: Disability Services
Coordinator 445 Health Sciences Blvd.
Dothan, AL 36303
3. Documentation: Diagnosis of a mental or physical impairment is necessary for conducting the interactive process to determine reasonable accommodations. Accommodations are intended to reduce the impact of limitations for students with impairments; how a mental or physical impairment impacts a particular student is unique to that student. Therefore, evidence of a specific limitation(s) is necessary as part of the interactive process to determine reasonable accommodations on a case-by-case basis.
4. Reasonable accommodations will be determined and the appropriate course directors and/or curriculum managers will be notified.
5. The student is responsible for discussing implementation of accommodations with faculty or curriculum managers. Conflicts or disagreements should be referred to the Disability Services Coordinator/Associate Dean of Students Services.
6. The Disability Services Coordinator/Associate Dean of Students Services will ensure and maintain confidentiality of all student disability-related records and services as required by federal and state law.

Service Animal as a Disability Accommodation Policy

PURPOSE

The Alabama College of Osteopathic Medicine (“ACOM”) permits the use of a service animal by students, employees and visitors with disabilities, all in accordance with Section 504 of the Rehabilitation Act (20 U.S.C. § 794), its implementing regulations (34 C.F.R. Part 104), and the U.S. Department of Education guidance.

SCOPE

This policy applies in all ACOM-owned property, facilities, divisions and departments. It applies to ACOM faculty, staff, visitors and students.

POLICY & ENFORCEMENT

“Service Animal” means any dog that is individually trained to do work or perform tasks for the benefit of an individual with a disability, including a physical, sensory, psychiatric, intellectual or other mental disability. Other species of animals, whether wild or domestic, trained, or untrained, are not service animals for the purposes of this definition.

The work or tasks performed by a service animal must be directly related to the individual’s disability. Examples of work or tasks include, but are not limited to:

Assisting individuals who are blind or have low vision with navigation and other tasks, alerting individuals who are deaf or hard of hearing to the presence of people or sounds, providing non-violent protection or rescue work, pulling a wheelchair, assisting an individual during a seizure, alerting individuals to the presence of allergens, retrieving items such as medicine or the telephone, providing physical support and assistance with balance and stability to individuals with mobility disabilities, and helping persons with psychiatric and neurological disabilities by preventing or interrupting impulsive or destructive behaviors.

The crime deterrent effects of an animal’s presence and the provision of emotional support, well-being, comfort or companionship do not constitute work or tasks for the purposes of this definition.

A service animal is not a pet.

“Service Animal in Training” means an animal brought onto campus by a trainer for the purpose of training the animal to become a service animal for the individual with a disability.

REGISTRATION OF SERVICE ANIMAL

An individual bringing a service animal into the College facilities or other locations associated with the College learning and teaching function is encouraged, but not required, to contact the Americans with Disabilities Act (ADA) Officer (Associate Dean of Student Services) or the Corporate Compliance Officer. The ADA Officer (Associate Dean of Student Services) or the Corporate Compliance Officer will provide access to disability-related resources, information, and support.

ACCESS TO AREAS

An individual with a disability shall generally be permitted to be accompanied by their service animal in all areas of ACOM where students, faculty, staff, members of the public, participants in services, programs or activities, or invitees, as relevant, are allowed to go. However, there may be certain areas of ACOM's learning environment that may expose service animals to harmful chemicals or dangerous situations or where a service animal could fundamentally alter the nature of ACOM's medical learning and teaching environment.

During first- and second-year training on campus, it would be inappropriate to exclude a service animal from Auditoriums, the Team-Based Learning Center, student study areas and rooms, or the Learning Resource Center. However, it may be appropriate to exclude a service animal from the Anatomy Lab, Research Lab, Osteopathic Principles & Practice (OPP) Lab, Simulation Lab, Performance Exam Suite (PES), or other similar areas.

During third- and fourth-year clinical rotations, in a hospital it usually, but not always, would be inappropriate to exclude a service animal from areas such as patient rooms, clinics, cafeterias, or examination rooms. However, it may be appropriate to exclude a service animal from areas such as operating rooms, certain areas of the emergency room area, the intensive care unit, or burn units where the animal's presence may compromise a sterile environment. A student with a service animal will be required to abide by guidelines and policies set forth by all affiliated clinical training sites.

INQUIRIES

When it is not obvious what service an animal provides, ACOM may ask:

1. If the dog is a service animal required because of a disability, and
2. What work or task has the dog been trained to perform.

ACOM staff cannot ask about the person's disability, require medical documentation, require a special identification card or training documentation for the dog, or ask that the dog demonstrate its ability to perform the work or task.

REQUIREMENTS FOR SERVICE ANIMALS

An individual who brings a service animal on campus is responsible for complying with the ACOM's policies. ACOM is not responsible for the care or supervision of a service animal.

A. Control Over the Animal

1. A service animal shall be under the control of its handler at all times.
2. A service animal shall have a harness, leash, or other tether, unless either the handler is unable because of a disability to use a harness, leash or other tether, or if the use of a harness, leash or other tether would interfere with the service animal's safe, effective performance of work or tasks, in which case the service animal must be otherwise under the handler's control (e.g., voice control, signals or other effective means).

B. Responsibility for the Service Animal

1. The owner/handler is fully responsible for:
 - i. The care of the service animal (including toileting, feeding, grooming, veterinary care and cleaning up after the service animal, including any associated costs for cleaning);
 - ii. The well-being of the service animal; and
 - iii. Any damage caused by the service animal.
2. Evidence of mistreatment or abuse of the service animal may result in the immediate removal of the service animal and reporting to the appropriate local agency.

REMOVAL OF SERVICE ANIMAL FROM CAMPUS

ACOM may ask an individual with a disability to remove a service animal from the premises if:

- A. The service animal is out of control and the handler does not take effective action to control it;
- B. The service animal is not housebroken; or
- C. The service animal poses a direct threat to the health and safety of others (allergies and fear of animals by others, generally, are not valid reasons for denying the right to have a service animal on ACOM's premises). A direct threat to the health and safety of others may be the basis for reasonable time, place, and manner restrictions.

If ACOM properly excludes a service animal under this Policy, it shall give the individual with a disability the opportunity to obtain goods, services and accommodations without having the service animal on the premises.

PROHIBITION OF SURCHARGES

ACOM shall not ask or require an individual with a disability to pay a surcharge even if people accompanied by pets are required to pay fees, or to comply with other requirements generally applicable to people with pets. If ACOM normally charges individuals for the damage they cause, an individual with a disability may be charged for damage caused by the individual's animal.

RESIDENCE APARTMENTS

A student with a service animal has the obligation to ensure that an apartment on ACOM's property is maintained in the same condition as when it was first occupied by the student. If the apartment has carpeting, this also includes regular vacuuming and spot cleaning. Damages and extraordinary cleaning caused by the service animal are the responsibility of the student. Replacement or repair of damaged items will be the financial responsibility of the student and assessed by ACOM.

CONFLICTS

Students who encounter a service animal on campus regularly and who experience reactions to the service animal—for example, allergies or a fear of dogs—should contact the ADA Officer or the Corporate Compliance Officer.

Employees who encounter a service animal on campus regularly and who experience reactions to the animal—for example, allergies or a fear of dogs—should contact the Director of Human Resources.

Concerns about the behavior, toileting, health, or handling of the service animal should be addressed to the service animal's handler and to the ADA Officer or the Corporate Compliance Officer.

COMPLAINTS/GRIEVANCES

Complaints alleging any violation of this Policy or noncompliance with its provisions will be governed by the ADA Officer and the Corporate Compliance Officer.

Student Immunization Policy

PURPOSE

The Student Immunization Policy is to provide the required health documentation for matriculation into ACOM and participation in patient-care training.

SCOPE

The Scope of the Student Immunization Policy is for all prospective students and enrolled students at ACOM.

POLICY & ENFORCEMENT

Matriculating students must submit documentation of the required immunizations before beginning their training at ACOM. This documentation will be collected prior to or shortly after orientation for OMS I students. In addition, immunizations will be verified again before entering clerkship training for OMS III students. The following documentation is required:

- ___ Hepatitis B Vaccine series
- ___ Positive Hepatitis B Surface Antibody **Quantitative** Titer
- ___ Measles, Mumps, and Rubella Vaccine series (MMR)
- ___ Positive Measles, Mumps, and Rubella **Quantitative** Titer
- ___ Varicella (Chickenpox) Vaccine Series
 - If history of Chickenpox disease, vaccine series will not be needed.
- ___ Positive Varicella **Quantitative** Titer
- ___ Tetanus/Diphtheria/Pertussis (Tdap) Vaccine
 - Must be given within the last 10 years. Td is not accepted.
- ___ Influenza Vaccine (seasonal)
 - Students will be responsible for getting this during the fall season. Deadline will be November 1st every year.
- ___ 2 Step Tuberculosis Skin test
 - The two negative tests must be given 1-3 weeks apart and completed within 6 months of arriving to ACOM.
 - QuantiFERON Gold/ T-SPOT tests will **only** be accepted if positive skin test documentation is provided.
 - If there is a positive result from either test, documentation of a negative Chest Xray **and** history of latent TB treatment must be provided.
- ___ (Optional) Covid-19 Vaccine series
 - ACOM does not currently require this vaccine, however Third- and Fourth- year students attending clinical rotations will have to defer to the clinic/ hospital policies.

***Exemption Forms accepted by ACOM may not be accepted by clinical sites. ACOM will defer to clinical sites' policies and procedures for health documentation.**

***If any titer is negative, students are to consult their healthcare provider for recommendations to obtain immunity. If immunity cannot be met, a letter from a physician must be obtained.**

***All titers must be quantitative (show numerical value) and include reference ranges.**

Student Insurance Policy

PURPOSE

ACOM is committed to developing and implementing policies and procedures as well as provide the human and physical resources required to support and promote health and wellness in order to meet and advance the physical, emotional, mental, career, academic and professional needs of its students, faculty, and staff. All osteopathic medical students of ACOM have the same rights to and receive comparable services.

The purpose of the Student Insurance Policy is to communicate the Alabama College of Osteopathic Medicine (ACOM) requirements for all students regarding active health insurance coverage and medical liability insurance.

SCOPE

This policy applies to all ACOM students.

POLICY & ENFORCEMENT

I. Health Insurance

Each student is required to maintain personal health insurance coverage for the duration of his or her enrollment at ACOM. Verification of basic health insurance coverage is required for all enrolled or registered students in order to avert financial hardship due to hospital admissions, emergency department care, subspecialty care, or other necessary medical services.

At the beginning of each academic year, the College will verify that each new and returning student has current health insurance coverage under one of the two following options:

1. The student can opt in to the ACOM insurance plan at the beginning of each academic year to ensure full coverage for the year. The student also can join the ACOM insurance plan at any time during the year due to a qualifying event or the student's loss of other coverage. ACOM will place a charge for the insurance premium on the student's account once in the Fall semester and once in the Spring semester. The student will be responsible for paying the premium to ACOM. Insurance premiums will not be automatically deducted from financial aid disbursement. A student's failure to make the required payments will be reported to the Associate Dean of Student Services. A student who enrolls in the ACOM insurance plan will be responsible for payment for the full academic year unless the student can provide proof of Medicaid coverage. A student who joins the ACOM insurance plan after the initial enrollment period will be charged a pro-rated premium for that semester paid directly to the insurance company.

2. If the student does not choose to purchase the ACOM insurance plan, they must provide documentation of current health insurance coverage through the online waiver system provided to the student at the beginning of each semester.
3. For more information about ACOM's student health insurance plan, please visit the website at <http://acom.myahpcare.com>

II. Medical Liability Insurance

The College provides medical liability insurance coverage only for students on approved clerkship rotations for which they are officially registered and while they are under the direct supervision of the assigned preceptor or designee. Students participating in any other types of clinical activities are ineligible for coverage under the College's liability insurance plan.

Student Mental Health Services Policy

PURPOSE

Alabama College of Osteopathic Medicine (ACOM) is committed to providing the human and physical resources required to support and promote health and wellness in order to meet and advance the physical, emotional, mental, career, academic and professional needs of its students. All osteopathic medical students of ACOM have the right to receive comparable services, regardless of location or program level.

The purpose of this policy is to provide ACOM students at all locations with confidential access to an effective system of counseling and mental healthcare from a mental health care provider. A mental health care provider is accessible 24 hours a day, 365 days a year. This policy also provides ACOM students with information regarding access to diagnostic, preventive, and therapeutic health services. These services are accessible in all locations where students receive education from ACOM.

SCOPE

This ACOM Policy applies to all ACOM students.

POLICY & ENFORCEMENT

I. Mental Health Resources

ACOM students at all locations are provided confidential access to an effective system of counseling and mental healthcare from a mental health care provider. A mental health care provider is accessible 24 hours a day, 365 days a year, from all locations where students receive education from ACOM. The ACOM Division of Student Services, along with the Center for Medical Student Success, work closely with faculty advisors to recognize individual student health and wellness issues. ACOM has the following resources available for students for confidential mental health and personal support.

A. Find a Provider

ACOM's commitment to student health and wellbeing is evident in its association with Blue Cross Blue Shield, which provides the current student insurance plan through Academic Health Programs (AHP). Students can find mental healthcare providers anywhere in our teaching network by searching the "Find a Provider" function on the dedicated webpage: <https://acom.mycare26.com/>.

B. Academic Student Assistance Program (ASAP)

The Academic Student Assistance Program (ASAP) is a resource available to ALL ACOM students through our partnership with [Academic Health Programs](#). This resource provides on-demand, unlimited 24/7 access to support from a Care Center staffed by qualified and experienced professionals. Free and confidential services are accessible via phone, video, private chat, text, or email with online and mobile tools available. In addition, [their website](#) has multiple life and wellbeing resources that support student's personal, health, legal, financial (including identity theft), and crisis management protection. Referrals to providers in the student's current location are available.

C. AcademicLiveCare

Academic Live Care is a physical and mental telehealth care service available to ALL ACOM students. Whether or not a student is residing on-campus, they will have access to unlimited services all with a \$0 copay by using ACOM's coupon code.

- 24/7 Urgent Care
- Psychiatry Appointments
- Therapy Appointments
- Nutrition Counseling
- On-Demand Crisis Counseling
- RX Discount Program
- Financial Wellness Tools
- Online Health & Wellness Resources

Visit academiclivecare.com for more information. Sign up using your ACOM email address. A Mobile App is available as well.

D. Alabama Dept. of Public Health/National Suicide Prevention Lifeline

ACOM is supported by grant funding from the Alabama Department of Public Health in a Mental Health and Wellness Initiative with training for faculty, staff, and students on recognizing suicidal ideation. The following Suicide Prevention Lifeline is available 24 hours a day.

Contact Information:

National Suicide Prevention Lifeline 1-800-273-TALK (8255)

E. Helplines and Other Drug and Alcohol Abuse Prevention Resources

Free information and confidential support are available from many organizations. Some provide counseling, referrals to local treatment facilities, support groups,

and community-based organizations, and free publications and other information on substance abuse and mental health issues.

- SAMHSA National Helpline: (800)-662-HELP
- National Suicide Prevention Lifeline: (800) 273-TALK
- Alabama Dept. of Mental Health: <https://mh.alabama.gov>
- Alcoholics Anonymous: <http://aa.org/?Media=PlayFlash>
- American Council for Drug Education (ACDE): <http://www.acde.org/>
- Center for Substance Abuse Treatment (CSAT): <https://www.samhsa.gov>
- Narcotics Anonymous: <http://www.na.org/>
- College Drinking: Changing the Culture:
<http://www.collegedrinkingprevention.gov/>
- Partnership for a Drug-Free Community:
<http://www.partnershipforadrug-freecommunity.org/>
- SPECTRACARE: <http://www.spectracare.org/>

LOCAL TREATMENT CENTERS:

Wiregrass Mental Health System

104 Prevatt Road
Dothan, AL 36302
(334) 794-0731

SpectraCare The Haven

831 John D. Odom Road
Dothan, AL 36303
(334) 794-3771

Behavioral Medicine Unit *Inpatient psychiatric services*

1108 Ross Clark Circle
Dothan, AL 36301
334-793-8858 or 1-855-846-8253

Student Physical Health Services Policy

PURPOSE

Alabama College of Osteopathic Medicine (ACOM) is committed to providing the human and physical resources required to support and promote health and wellness in order to meet and advance the physical, emotional, mental, career, academic, and professional needs of its students. All osteopathic medical students of ACOM have the right to receive comparable services regardless of location or program level.

The purpose of this policy is to provide ACOM students with information regarding access to diagnostic, preventive, and therapeutic health services. These services are accessible in all locations where students receive education from ACOM.

SCOPE

This ACOM Policy applies to all ACOM students.

POLICY & ENFORCEMENT

Physical Health Resources

A. Find a Provider

ACOM's commitment to student health and wellbeing is evident in its association with Blue Cross Blue Shield, which provides the current student insurance plan through Academic Health Programs (AHP). Students can find physical healthcare providers anywhere in our teaching network by searching the "Find a Provider" function on the dedicated webpage: <https://acom.mycare26.com/>.

B. Southeast Health for Local Providers in Dothan

ACOM recommends the Southeast Health network of primary care providers and services. Southeast Health primary care provider access includes the following amenities/services:

- Same-day appointments with ACOM Fast-Track
- Urgent care with walk-in appointments
- Health screenings
- Chronic disease management
- Immunizations
- Seamless access to the specialists of Southeast Health

ACOM students may access these providers and services by calling 855.SE.CARES.

ACOM students are not permitted to seek medical care at the Southeast Health ACOM Ashford Clinic to maintain the integrity of the student-teacher relationship.

ACOM ensures that any health professional providing health services, through a physician-patient relationship recuses themselves from the academic assessment or promotion of the student receiving those services. These procedures are further detailed in the [ACOM Health Professionals Recusal Policy](#).

C. AcademicLiveCare

Academic Live Care is a physical and mental telehealth care service available to ALL ACOM students. Whether or not a student is residing on-campus, they will have access to unlimited services all with a \$0 copay by using ACOM's coupon code.

- 24/7 Urgent Care
- Psychiatry Appointments
- Therapy Appointments
- Nutrition Counseling
- On-Demand Crisis Counseling
- RX Discount Program
- Financial Wellness Tools
- Online Health & Wellness Resources

Visit academiclivecare.com for more information. Sign up using your ACOM email address. A Mobile App is available as well.

Health Professionals Recusal Policy

PURPOSE

The purpose of this policy is to confirm that ACOM health professionals providing health services via a therapeutic relationship recuse themselves from the academic assessment or promotion of the student receiving those services.

SCOPE

This policy applies to all ACOM divisions, departments, faculty, including affiliate clinical faculty, staff, and students.

POLICY & ENFORCEMENT

Students at the Alabama College of Osteopathic Medicine (ACOM) are expected to seek personal medical care from a non-ACOM faculty clinician. If a student has a pre-existing or establishes a therapeutic relationship with an ACOM faculty clinician, then said clinician must recuse themselves from all evaluations, assessments, discipline or promotion decisions regarding that student. However, the faculty may continue to instruct and train such students according to the normal expectations of the curriculum.

A “therapeutic relationship” is defined as either ongoing provision of healthcare services (more than two interactions) or any health care services involving “sensitive health services”. “Sensitive health services” include, but are not limited to, psychiatric/psychological counseling, substance abuse, and sexually transmitted diseases. A single health care visit for non-sensitive health services may not constitute a therapeutic relationship for the purposes of this policy.

While the focus of this policy relates to conflicts of interest resulting from therapeutic relationships and/or the provision of sensitive health services to medical students, other types of conflicts of interest may exist. In such situations, faculty members will also recuse themselves from participating in performing academic assessments for grading purposes and in decisions regarding promotions for such students.

All faculty engaged in an established provider-patient relationship with a student or having other conflicts of interest pertaining to a student must identify themselves and recuse themselves from all summative assessment, grading, or promotional activities concerning that student. Committee meetings involving grading, assessment, or disciplinary action will call for declaration of such conflicts of interest and recusal from decision-making at the onset of each meeting.

If any student or faculty member has any questions, they should be directed to the Associate Dean of Clinical Sciences or the Compliance Officer.

Student Fatigue Mitigation Policy

PURPOSE

The Alabama College of Osteopathic Medicine (ACOM) is committed to maintaining an environment that fosters wellness and understands that fatigue mitigation forms an important component of a wellness-focused clinical learning environment.

SCOPE

This ACOM Policy applies to all ACOM students.

POLICY & ENFORCEMENT

The safety of patients is paramount and should always supersede concerns regarding productivity or other short-term training requirements. In the event an ACOM student must terminate clinical duties due to fatigue, the situation must be reported to the core site coordinator and the Associate Dean of Clinical Sciences. ACOM students are expected to use professional judgment to ensure adequate rest prior to any clinical duties. Reports of excessive fatigue related to extracurricular activities at a clinical rotation site will be addressed with the student, and a plan to reduce fatigue will be instituted.

Clerkship Rotation Hours of Duty

Each clinical training site sets its own schedule. Night call, weekend coverage, and holiday assignments are at the discretion of the training site.

- Clerkships begin at 7:00 a.m. on the first Monday of the clerkship block and end at 7:00 p.m. on Friday evening 26 days later. Deviation from these hours is at the discretion of the supervising physician preceptor. Students may not take calls or remain on service after 7:00 p.m. on the last Friday of the clerkship. If the supervising physician deviates from the clerkship plan and alters student hours or has planned numerous "days off" such as their personal vacation, it is the student's responsibility to contact the core site coordinator or clerkship chair for advice and counsel.
- An example of a typical workweek is 60 – 72 hours per week. The workweek shall be limited to a minimum of 40 hours and a maximum of 80 hours, averaged over the four-week period of the clerkship. Students may "compress" their clerkship schedule only with approval from the preceptor and in accordance with the preceptor's scheduled duties. Please be aware that some preceptors have 7-on/7-off schedules; during such "off" days, students still are expected to participate in all assigned didactic activities at their core site.

- The maximum duration of any work period will be 24 hours and must be followed by a minimum of 12 hours off duty. No student shall be required to be on call or perform night duty after a day shift more than once every three (3) days.
- Students shall be given a minimum of two (2) days off every 14 calendar days. This requirement may be met by giving a student every other weekend off, but this is at the discretion of the supervising physician.
- Departure prior to the scheduled departure date will be considered an unexcused absence and may result in failure of the clerkship unless approved by the supervising physician and the clerkship chair.

On the final weekend of the rotation, the student must be given adequate time to travel to the next clerkship rotation site. It is intended that Saturday and Sunday are all travel days and that all student assignments are completed by the final Friday of the clerkship rotation.

Psychiatric Consultation or Medical Evaluation Policy

PURPOSE

The Purpose of the Psychiatric Consultation or Medical Evaluation Policy is to promote a safe, healthy, and productive learning and working environment to ensure the safety and welfare of students, faculty, and patients cared for by the Alabama College of Osteopathic Medicine (ACOM) representatives.

SCOPE

The Scope of the Psychiatric Consultation or Medical Evaluation Policy is for all students at ACOM.

POLICY & ENFORCEMENT

A student may be required to seek medical or psychiatric consultation, evaluation and treatment in order to meet the College's Health and Technical Standards. The confidentiality of the physician/patient relationship will be preserved, and the student retains the authority and discretion to consent to the release of any report by the consulting physician. However, where the College has required medical or psychiatric assessment, the student's ability to continue their enrollment at ACOM may be possible only if a report of such assessment is provided to ACOM by a medical professional appointed or approved by ACOM. ACOM may require the student to authorize the medical professional's written confirmation of the student's ability to satisfy the Health and Technical Standards as a condition for continued enrollment.

ACOM reserves the right to refer a student to the Alabama Professionals Health Program for evaluation and treatment before returning to the academic or clinical setting. Failure to meet all the requirements of this program may subject the student to Disciplinary Dismissal. All costs associated with this program are the responsibility of the student.



9 ACADEMIC STANDARDS

9.1 Enrollment Status and Credit Hour Calculation Policy

9.2 Grading Policy (Clinical Grading found under Clerkship Training)

9.3 Registration Policy

9.4 Adds, Drops, Withdrawals, and Leave of Absence Policy

9.5 Readmission Policy

9.6 Student Attendance Policy

9.7 Pre-Clinical Course Examination Absence Policy

9.8 Student Government, Officer, and Representative Eligibility Policy

9.9 COMLEX-USA Eligibility Policy and Procedures

Enrollment Status and Credit Hour Calculation Policy

PURPOSE

The Purpose of the Enrollment Status and Credit Hour Calculation Policy is to define a student's enrollment status based on the number of credit hours per term and how credit hours are calculated.

SCOPE

The Scope of the Enrollment Status and Credit Hour Calculation Policy is applied to all enrolled students at the Alabama College of Osteopathic Medicine (ACOM).

POLICY & ENFORCEMENT

Enrollment Status

Enrollment status is defined below for the purposes of determining eligibility for financial assistance and reporting to various agencies and organizations which may include, but are not limited to, the following:

- Insurance Companies
- U.S. Dept. of Veterans Affairs (VA)
- Federal Student Aid Lenders and Servicers
- Mortgage Lenders
- Scholarship Providers

A student's enrollment status shall be determined according to the following scale:

Program: Osteopathic Medicine

<u>Enrollment Status</u>	<u>Credit Hours Per Term</u>
Full-Time	8+ Credit Hours
Three-Quarter-Time	6-7 Credit Hours
Half-Time	4-5 Credit Hours
Less-Than-Half-Time	1-3 Credit Hours

Calculation of Credit Hours

The calculation of credit hours is based on the definition prescribed by the private school licensure division of the Alabama Community College System, which provides our ACOM state license for operation in the state of Alabama.

Calculation of credit hours is based on the following formula: One semester credit hour is defined as fifteen (15) clock hours of lecture and a minimum of thirty (30) clock hours of out-of-

class work, thirty (30) clock hours of laboratory and a minimum of fifteen (15) clock hours of out-of-class work, or forty-five (45) hours of clinical/externship, or an equivalent amount of student work in a different instructional model.

Grading Policy

PURPOSE

The purpose of the Grading Policy provides definitions and mechanisms regarding all procedures for grading, including assignment of grades, grade appeals, and calculations of GPA and Class Rank. It is intended to balance the right of students to a grading system that is free from inaccurate, unfair, arbitrary or capricious evaluation, while supporting the right of faculty to determine course criteria and grades.

SCOPE

The Scope of the Grading Policy applies to faculty, curriculum management staff, and students.

POLICY & ENFORCEMENT

ASSIGNMENT OF COURSE GRADES

A final numeric grade will be assigned by the appropriate Course Director(s) or Clerkship Director(s) and reported to the Registrar after the completion of each course. Details regarding specific grading elements can be found in each course syllabus.

A letter grade of A, B, C, or F shall be assigned to the score for each course by the Registrar based on the following scale:

A = 90-100% B = 80-89% C = 70-79% F = < 70%

The minimum satisfactory grade for each required course is C.

A grade of Incomplete (I) may be assigned if the student work in a course is incomplete or if the student will be required to meet remediation requirements. The student will have to complete all remaining requirements 30 days before the end of the subsequent term. A student who fails to complete all coursework by the deadline will be assigned a grade of F. The following criteria details the eligibility for an Incomplete grade.

1. The student must be demonstrating satisfactory progress/performance in the course, and it is mathematically possible to earn a passing grade [Verified by the Course Director(s)].
2. Student basis for an Incomplete must be for medical, personal, or unique circumstances beyond the student's control.
3. The "I" grade cannot be used to mask failing work.
4. The "I" grade must be approved by an official grade change form.

A student who withdraws or is administratively withdrawn prior to the completion of one or more courses will receive a grade of "W" or "Withdrawal" for each course in which they are enrolled at the time of withdrawal.

Letter grades shall be reported on the transcript using the following qualitative grade representation:

Quality of Performance	Grade	Points Per Credit Hour
Excellent	A	4.0
Good	B	3.0
Satisfactory	C	2.0
Failure	F	0.0
Incomplete	I	-
Withdrawal	W	-

GRADE APPEALS

RECONSIDERATION OF EXAM OR ASSIGNMENT SCORE

Students receive a notification from the learning management system or clerkship management software when an exam grade or assignment score has been posted. It is the student's responsibility to review these posts. Students who question a grade calculation or determination have five (5) business days after the grade has been posted in the learning management system to request a grade reconsideration and/or clarification from the course/clerkship directors. This includes errors or discrepancies that may have occurred in the grading process.

RECONSIDERATION OF PRECEPTOR EVALUATION

Students receive a notification from the clerkship management software when a preceptor evaluation of them has been posted. It is the student's responsibility to review these evaluations. If students identify any portion of the preceptor evaluation of them that does not accurately reflect their clinical performance, they have five (5) business days after the evaluation has been posted in the clerkship management software to request a reconsideration and/or clarification from the course/clerkship directors.

Students may only direct this reconsideration request to the appropriate Clerkship Director. Students are never to contact the supervising physician who evaluated them. Students who contact the supervising physician may face disciplinary action.

FINAL GRADE APPEALS

Students have five (5) business days after the FINAL course/clerkship grade is posted to the learning management system. A form will be provided to formally appeal a grade and submitted to the appropriate curriculum manager (preclinical or clinical). The curriculum manager will forward the appeal to the appropriate Associate Dean for review. The decision of the Associate Dean is final.

Students should not contact additional faculty or preceptor physicians who are not course/clerkship directors. All appeals should go through the grade appeal process indicated.

The FINAL GRADE APPEAL is the sole means for a student to appeal final course grades at ACOM. The only acceptable grounds for appealing a final course grade are:

1. The course grade was assigned on a basis other than performance in the course; or
2. Course faculty used unfair or unequal application of grading standards, including application of grading criteria to a student or group of students in a manner that treated them differently than other students in the same class; or
3. The grade was the result of unfair or unannounced alterations of assignments, grading criteria, or computational processes; or
4. The student disputes the computation of the final grade or believes the grade was incorrectly transmitted to the registrar.
5. In the clinical curriculum, the student disputes the accuracy of the preceptor evaluation.

GRADE POINT AVERAGE

A student's GPA is reflected on their ACOM transcript and, except as noted below, is based upon the letter grades for each course attempted as part of the student's current program of study.

Grades of A, B, C, and F will be factored into the GPA calculation. Grades of I and W do not affect GPA.

Transfer credits that are accepted toward the student's current program of study will be factored into the GPA calculation. All other transfer credits are excluded.

For a student who repeats a course, the original grade will appear on the transcript along with the new grade, but only the highest grade will be used to calculate the GPA.

CLASS RANK

Class rank is determined for each cohort of students at the beginning of each academic year after all grades have been posted for the previous academic year. For the purposes of determining class rank, the calculation will use the actual percentage grade. Percentage grades are not reported on student transcripts.

For example, a percentage score of 87% in a course would appear as a B on the transcript, and the multiplier used to calculate the GPA would be 3.0. However, for determining class rank the actual percentage grade of 87% would be used. Likewise, a grade of 81% percent would be recorded as a B on the transcript, 3.0 would be the multiplier used in the GPA calculation, and 81% would be used for calculating class rank.

For a student who repeats a course, both grades will be used to calculate class rank. All students will be ranked within their expected graduating class at the time of calculation.

Registration Policy

PURPOSE

The purpose of the Registration Policy is to define the policy and procedure for course registration in the Pre-Clinical and Clinical Curriculum.

SCOPE

The Scope of this policy includes ACOM faculty and staff, affiliate clinical faculty who serve as preceptors, and students.

POLICY & ENFORCEMENT

Registration of Pre-Clinical Courses

Upon completion of all of the matriculation requirements, a prospective student will be deemed ready for registration. No earlier than two weeks before the beginning of each term, the student will be registered in a prescribed manner by the Registrar's Office according to the student's academic plan. Students who do not wish to be registered for courses at ACOM during a particular term must submit a written request to the Registrar's Office prior to the first day of that term. Requests will be forwarded to the Associate Dean of Student Services for review. Students who are unaccounted for by the Drop/Add Deadline without prior authorization will be dropped from previously registered courses.

Registration for Clerkship Rotations

For all core clerkship rotations during the OMS-III year, students will work closely with their Core Site Coordinator to obtain the best possible schedule to help students reach their goals. Students must request approval for registration in the clerkship management system for each clerkship rotation. The deadline to have this completed at least 28 days prior to the anticipated start date of the clerkship rotation. The Core Site Coordinator will review and certify the registration request at least 21 days before the anticipated start date of the clerkship rotation.

Once certified, the student will automatically receive an email from the clerkship management system. When the rotation is certified, the Core Site Coordinator will edit the request and add preceptor information and any additional information students should need for the rotation. If the rotation is not certified, the student will edit or delete the request in the clerkship management system. If the changes occur within the 28-day window before the start of the rotation, or if a student does not submit the request within the 28-day window, the student must complete an electronic Drop/Add form with the updated/correct clerkship rotation information that will automatically be sent to the appropriate ACOM staff member(s).

For all non-core clerkship rotations during the OMS-III and OMS-IV years, students will be responsible for working closely with their Core Site Coordinator, Regional Coordinator, and Student Credentialing Manager to create their schedule.

If students want to do an In-Network rotation, they will work with their Core Site Coordinator and follow the same process listed in the paragraph above.

If students want to do an Out of Network (OON) Rotation, they must submit an OON Request.

OON Requests are reviewed by Student Credentialing Manager and any other required reviewers for approval.

Once that request has been approved, students must enter the information in the clerkship management system for their desired clerkship rotation. This must be completed at least 28 days prior to the anticipated start date of the clerkship (OON) rotation. The Student Credentialing Manager will review and certify the registration request at least 14 days before the anticipated start date of the clerkship rotation. The Student Credentialing Manager will add preceptor information and any additional information students should need for the rotation. If the student does not enter the rotation before the 28-day deadline, the student must complete an electronic Drop/Add form that will automatically be sent to the appropriate ACOM staff member(s).

Registration information will be submitted to the Registrar's Office for final review the week prior to the start of the clerkship rotation. Official registration will be processed by a Registrar's Office representative, and the clerkship rotation will be added to the student's schedule.

Once a clerkship rotation has started, students have until the Drop/Add Deadline (end of the first week of a clerkship rotation) to request schedule changes. During this period, students must double-check their official schedules on file with the Registrar to confirm that they are registered for the correct clerkship rotation for the correct dates.

Adds, Drops, Withdrawals, and Leave of Absence Policy

PURPOSE

The Purpose of the Adds, Drops, Withdrawals, and Leave of Absence (LOA) Policy is to define the policy and procedure for changes in registration status during the Pre-Clinical and Clinical Curriculum.

SCOPE

The Scope of the Adds, Drops, Withdrawals, and LOA Policy is for all enrolled students at the Alabama College of Osteopathic Medicine (ACOM).

POLICY & ENFORCEMENT

Course Drop/Add

Students may drop or add courses to their schedule in accordance with this policy. Course drops may be either student-initiated or college-initiated. See specifics for each in the definitions section.

Drop/Add Deadline

Drop/Add Deadline: The end of the period during which a Course Drop or Course Add may be completed. Unless otherwise posted, the Drop/Add Deadline is 11:59:59 pm Central Time on the second Monday of the course.

Withdrawal

Withdrawals may be official, unofficial, or administrative. See specifics for each in the definitions section.

Official Withdrawal Procedures

A student who is considering withdrawing from ACOM should first contact the Associate Dean of Student Services to discuss their situation and determine whether alternatives to withdrawal are available.

Prior to withdrawing from the College, the student should schedule and attend exit interviews with the Office of the Registrar, Finance, Accounting and Bursar's Office, and Financial Aid Office representatives. A student who withdraws from ACOM is solely responsible for determining the impact, if any, of withdrawal upon their academic record, charges, and financial aid.

A student who elects to withdraw must submit to the Registrar's Office a Withdrawal Form along with any additional documentation that may be requested.

Leave of Absence

Voluntary Leave of Absence

A voluntary leave of absence (LOA) may be granted from ACOM for one of the following reasons: 1) a medical emergency; 2) a financial emergency; 3) maternity; 4) a call to active military service; or 5) pursuit of an academic endeavor other than the regular classroom work, either on campus or at another recognized teaching facility. Only the Dean has the authority to grant an LOA. Only students who are in good standing with ACOM may be granted an LOA without condition.

The student must meet with the Associate Dean of Student Services to discuss the reasons for the leave of absence. The student must then submit a written request for an LOA to the Associate Dean of Student Services, who will review the request and make a recommendation to the Dean. The Dean is responsible for approving or not approving a request for an LOA. The student will receive a letter from ACOM outlining any requirements about the student's return to campus. LOAs are granted for up to one (1) year. A student may petition the Associate Dean of Student Services to extend the leave for an additional year.

The official start date of the LOA will be the student's last date of attendance at a documented academically related activity.

Prior to beginning an LOA from the College, the student should schedule and attend exit interviews with the Registrar and Financial Aid Office representatives. A student who takes an LOA from ACOM is solely responsible for determining the impact, if any, of the LOA upon their academic record, charges, and financial aid.

The student must comply with all terms and conditions of the LOA in order to be approved to return to ACOM. All required documentation associated with the student's LOA must be submitted to the Registrar's Office at least ninety (90) days in advance of the academic year during which the applicant wishes to re-enroll unless otherwise notified.

Administrative Leave of Absence

The College reserves the right, and the student by the act of matriculation concedes to the College the right, to require a leave of absence at any time the College deems it necessary to safeguard ACOM standards of education, conduct, and compliance with regulations or for such other reasons deemed appropriate by the College.

ACOM reserves the right to place a student on an administrative leave of absence due to physical or emotional reasons. The student may be considered for readmission/continued enrollment upon producing documented medical evidence satisfactory to a medical advisor selected by the College which proves that the condition requiring the LOA has been corrected.

Nothing shall limit the right of ACOM to immediately remove a student from the College who has been accused of a violent act or threat or any act that constitutes a violation of state, local, or

federal criminal law subject to further proceedings consistent with these rules. A student who has been removed from the College may not return until given written permission by the Dean. The student must comply with all terms and conditions of the LOA in order to be approved to return to ACOM. All required documentation associated with the student's LOA must be submitted to the Registrar's Office at least ninety (90) days in advance of the academic year during which the applicant wishes to re-enroll unless otherwise notified.

Nothing should prevent ACOM from taking action deemed necessary, including removing a matter from consideration by the Professionalism and Ethics Committee or Faculty Appeal Board whenever, in the Dean's judgment, such action may prevent harm to the health, safety, and welfare of any individual; to school property; or to the integrity of the educational process.

Nothing shall limit the right of ACOM or any of its representatives or students to file a report with any law enforcement or civil agency.

Additional Information

The official withdrawal date is determined by the Registrar's Office. A student's withdrawal date is the student's last date of documented attendance at an academically related activity.

Any type of school-mandated or student-initiated drop, withdrawal, LOA, or other schedule or enrollment status change may be classified as a withdrawal for the purpose of administering the federal student aid programs and may adversely impact a student's eligibility for funding.

A student Direct Loan borrower who is graduating, leaving school, or dropping below half-time enrollment is required to complete exit counseling. Please visit <https://studentloans.gov> to complete the U.S. Dept. of Education's online Exit Counseling and contact the Financial Aid Office for more information.

If a student withdraws, the student and/or the College may be required to return a portion of any federal financial aid received. If ACOM is required to return unearned aid to any federal Title IV program, the student will be responsible for payment to the College of any balance that becomes due.

A student who owes a balance to ACOM may have a hold placed on their account by the Bursar, and the College may withhold all records pertaining to the student's attendance.

Refunds of tuition are made in accordance with the Tuition Refund Policy. Please contact the Student Accounts Office for more information.

DEFINITIONS

- **Course Add:** A student's registration for a course to be added to their schedule. See the Registration section in the student handbook.
- **Course Drop:** A student-initiated removal of a course from their schedule prior to the Drop/Add Deadline. The course will not be recorded on the student's transcript, and no grade will be assigned. See the Registration section in the student handbook.
- **Administrative Course Drop:** A College-initiated removal of a course from a student's schedule due to the student's failure to begin attendance in the course. The course will not be recorded on the student's transcript, and no grade will be assigned. See Registration section in the student handbook
- **Drop/Add Deadline:** The end of the period during which a Course Drop or Course Add may be completed. Unless otherwise posted, the Drop/Add Deadline is 11:59:59 pm Central Time on the second Monday of the course.
- **Official Course Withdrawal:** The act of ceasing participation in a course after the Drop/Add Deadline by submitting a Withdrawal Request Form to the Registrar's Office. The course will be recorded on the student's transcript, and a grade of W will be assigned. See Assignment of Course Grades, GPA, and Official Withdrawal Procedures in the student handbook.
- **Unofficial Course Withdrawal:** The act of ceasing participation in a course after the Drop/Add Deadline without submitting a Withdrawal Request Form to the Registrar's Office. The course will be recorded on the student's transcript, and a grade of W will be assigned. See Assignment of Course Grades, GPA, and Ceasing Attendance in the student handbook.
- **Administrative Course Withdrawal:** A College-mandated removal of a student from a course in which the student has begun attendance. The course will be recorded on the student's transcript, and a grade of W will be assigned. See Assignment of Course Grades, GPA, Ceasing Attendance, and Academic Progress and Standing in the student handbook.
- **Voluntary Leave of Absence:** A student-initiated, temporary interruption in the student's participation in his or her program of study. See Leave of Absence for more information.
- **Administrative Leave of Absence:** A college-mandated, temporary interruption in a student's participation in his or her program of study. See Leave of Absence for more information.

Readmission Policy

PURPOSE

The Purpose of the Readmission Policy is to define the policy and procedure for readmission of non-Veterans Affairs (VA) students and VA students.

SCOPE

The Scope of the Readmission Policy is applied to all enrolled students at the Alabama College of Osteopathic Medicine (ACOM).

POLICY & ENFORCEMENT

READMISSION POLICY for non-VA-students.

Students who are dismissed from ACOM are ineligible for readmission. Students who are withdrawn (including Leave of Absence) or suspended, and eligible for readmission must complete an ACOM readmission application and meet all re-matriculation requirements. These include background checks, drug tests, documentation, and any requirements that were imposed following withdrawal or suspension.

All documents must be submitted at least 90 days in advance of the academic year during which the applicant wishes to re-enroll unless otherwise notified. Students may be subject to the degree requirements in effect at the time of readmission.

Additional information:

While students are in periods of non-enrollment, access to ACOM facilities, email accounts, and learning resources may be continued, unless otherwise specified. Medical insurance may be eligible for continued service for the remainder of the academic year for which the student paid their premiums. Students will not have access to ongoing course materials in courses in which they are not enrolled. Returning students will not be eligible for new electronic devices. Returning students will be required to attend orientation for their respective class.

VETERANS READMISSION POLICY (VA students only)

Under the Higher Education Opportunity Act of 2008 (HEOA), institutions are required to readmit an individual who left school or did not accept an offer of admission in order to perform military service with the U.S. Armed Forces. The following sections explain the eligibility and re-admission requirements of this policy.

ELIGIBILITY (VA)

This policy applies only to U.S. military veterans seeking readmission to the program which they previously attended; it does not apply to individuals seeking admission to a different program at ACOM.

Students are eligible for readmission under this provision if, during a leave, the student performed or will perform voluntary or involuntary active-duty service in the U.S. Armed Forces, including active duty for training and National Guard or Reserve service under federal (not state) authority, and received a discharge other than dishonorable or bad conduct. In general, the cumulative length of absence and all previous absences for military service (service time only) must not exceed five years.

NOTICE REQUIREMENT (VA)

If a student plans to take leave for military service, the student must provide oral or written notice to the Associate Dean of Student Services as far in advance as is reasonable under the circumstances. Alternatively, at the time of readmission, the student may submit an attestation of military service that necessitated his or her absence from ACOM. No notice is required if precluded by military necessity, such as service in operations that are classified or would be compromised by such notice.

Students must also provide to the Associate Dean of Student Services oral or written notice of his or her intent to return to ACOM. The notice must be submitted no later than three years after the completion of the period of service. If a student is recovering from a service-related injury or illness, the student must notify ACOM no later than two years after his or her recovery.

A student who fails to apply for readmission within the designated time limits may not be eligible for readmission.

TUITION AND FEES (VA)

For the first academic year in which the student returns, the student will be readmitted with the same tuition and fee charges the student was or would have been assessed for the academic year when the student left.

READMISSION REQUIREMENTS (VA)

ACOM will allow the student to re-enroll in the next class or classes in the same program, with the same enrollment status, number of credits, and academic standing as when the student was last in attendance at ACOM. Students may be subject to the degree requirements in effect at the time of readmission. The student may also request a later date of admission or, if unusual circumstances require it, ACOM may admit the student at a later date. If ACOM determines that the student is not prepared to resume the program where the student left off, then ACOM will make reasonable efforts at no extra cost to the student to enable the student to resume and complete the program. Such reasonable efforts include, but are not limited to, providing a refresher course and allowing the student to retake a pretest, as long as they do not place an

undue hardship on ACOM. If reasonable efforts are unsuccessful or if ACOM determines that there are no reasonable efforts that ACOM can take, then ACOM is not required to readmit the student.

If the program to which the student was admitted is no longer offered, the student will be admitted to the program that is most similar, unless the student requests or agrees to admission to a different program.

Student Attendance Policy

PURPOSE

The Purpose of the Student Attendance Policy is to define the expectations of professional development that occur in the classroom, laboratory, and clinical environments.

SCOPE

The Scope of the Student Attendance Policy is for all enrolled students at ACOM.

POLICY & ENFORCEMENT

General Requirements

ACOM recognizes that professional development occurs in the classroom, laboratory, and clinical environments. Students develop the skills to interact professionally with their colleagues, faculty, and staff, which is integral to their success in entering a medical residency program and subsequent medical practice.

Students are responsible for all the material presented in all academic events. While course directors are not required by the institution to take attendance, many courses have individualized attendance requirements. Detailed information regarding attendance is provided in each course syllabus.

Excused Absences

With the student's well-being in mind, it is essential for any student who misses class because of illness to notify the Division of Student Services as soon as possible and provide documentation from a health care provider on the day of the illness.

A student may request an excused absence from class for personal, emergency, civic, professional, or health-related reasons. In addition, students may request excused absences for conference attendance if they have an approved and accepted poster/presentation, or if their ACOM or national executive board position requires travel to a conference. Other excused absences for conference attendance may be granted at the discretion of the Associate Dean of Student Services. Written documentation may be required. Please refer to specific course syllabi for further details. General guidelines for excused absences are listed below.

Preclinical students need to notify the appropriate course directors and the Associate Dean of Student Services prior to the event, if possible. Preclinical students are responsible for completing the request process via the learning management system.

Clinical students need to notify their supervising physician, Core Site Coordinator (if In-Network), and Regional Coordinator prior to any absence. If they are absent for more than 2 days for any reason, they must notify in writing the Associate Dean of Student Services. Clinical

students are responsible for completing the request process via the clerkship management system.

As professionals, students are expected to adhere to the ACOM excused absence policy with diligence. Excused absences should not be requested for the following: weddings, vacations, birthdays, special events, etc.

Absence From Examinations

See “[Pre-Clinical Course Examination Absence Policy](#)”

Ceasing Attendance

Any student who, without notice, ceases to attend a course(s) in which attendance is required will be reported to the Associate Dean of Student Services, who will coordinate efforts to determine the student’s enrollment status. The student will be administratively withdrawn within 14 days from the student’s last date of attendance unless it can be determined that the student will resume attendance in the course(s).

Tardiness

Tardiness is defined as reporting to a class or other educational activity after the time at which it is scheduled to begin. Tardiness is disruptive to other students who arrived on time and are engaged in academic activities. Tardiness to a mandatory event may result in a grade reduction.

Make-Up Work

Students who miss any required exams, laboratory exercises, clinical experiences, or other mandatory course activities must make up those academic requirements as determined by the Course Directors. Additional details regarding exams can be found in the Pre-Clinical Course Examination Absence Policy.

Clerkship Rotation Hours of Duty

See “[Student Fatigue Mitigation Policy](#)”

Pre-Clinical Course Examination Absence Policy

PURPOSE

The Alabama College of Osteopathic Medicine's (ACOM) purpose of the Pre-Clinical Course Examination Absence Policy is to provide clarity on the expectations of students regarding make-up examinations for pre-clinical courses.

SCOPE

This ACOM Policy applies to ACOM Pre-Clinical students (OMS-I and OMS-II).

POLICY & ENFORCEMENT

Make-up policy for absences from pre-clinical course examinations

- This policy applies to written examinations but does not apply to OSCEs and laboratory practical examinations.
- A student's absence from an examination may be approved by the Associate Dean of Student Services. Examinations that are missed without approval by the Associate Dean of Student Services will be considered unapproved absences. A grade of zero will be given for any unapproved absence from an examination.
- A student with an approved absence from an examination will be eligible for a make-up examination. All make-up examinations will be scheduled and administered through the Division of Medical Education. A single make-up examination will be scheduled within ten days of the initial examination. Make-up examinations may not necessarily be identical to the original examination. They may consist of multiple-choice questions and possibly subjective format questions such as essay, short-answer, or fill-in-the-blank items. A grade of zero will be given for any unapproved absence from a make-up examination.
- If a student is granted an approved absence for a make-up examination, they will receive an incomplete grade in the course and may be given the opportunity to complete another make-up examination on a designated date near the end of the semester as determined by the Division of Medical Education. Make-up examinations may not necessarily be identical to the original examination and may consist of multiple-choice questions and possibly subjective format questions such as essay, short-answer, or fill-in-the-blank items. A grade of zero will be given for any unapproved absence from a make-up exam.

Student Government, Officer, and Representative Eligibility Policy

PURPOSE

To establish eligibility requisites to participate in student government, club/organization executive board officer, or official representative of ACOM.

SCOPE

This policy applies to all ACOM students.

POLICY & ENFORCEMENT

The ACOM Student Government Association (SGA) is the official voice for osteopathic medical students. ACOM SGA is open to all medical students at ACOM and welcomes proposals and participation from the entire body. The SGA works in conjunction with ACOM and the Southeast Health accounting department to determine student organization funding for student activities; acts as a liaison for the medical student body; promotes osteopathic medicine; supports group and classroom activities; and works to improve the quality of life for all ACOM medical students.

Students serving as SGA officers, student group officers, class representatives or student ambassadors at national meetings or in any similar position must maintain an overall GPA of 2.75 or higher in their coursework. An officer whose overall grade average falls below 2.75 must resign their position.

A student on probation for any reason must resign from all ACOM and national positions representing ACOM. Osteopathic medical students are encouraged to develop, organize and participate in student associations and government organizations; additionally, a pre-clinical student who meets the criteria may hold two Executive Board positions of different organizations as long as he or she does not hold the title of president in both.

Elections for offices are held each spring for the following year. The ACOM Division of Student Services is responsible for providing support for these associations or organizations. Every student organization is required to have a faculty advisor. The advisor for SGA is the Associate Dean of Student Services.

COMLEX-USA Policy

PURPOSE

Alabama College of Osteopathic Medicine (ACOM) is committed to ensuring that all osteopathic medical students successfully pass COMLEX-USA Level 1 and Level 2-CE prior to graduation from osteopathic medical school. ACOM publishes the COMLEX-USA Level 1, Level 2-CE, and Level 3 first-time pass rate for all students in each class.

SCOPE

This ACOM Policy applies to all ACOM students.

POLICY & ENFORCEMENT

Prior to graduation, all ACOM students must demonstrate osteopathic medical knowledge and osteopathic clinical skills by passing the Comprehensive Osteopathic Medical Licensing Examination of the United States (COMLEX-USA) undergraduate examinations (Level 1 and Level 2) and meeting a national standard for osteopathic clinical skills competency.

The COMLEX-USA series, administered by the National Board of Osteopathic Medical Examiners (NBOME), is an examination sequence with three levels. While all examination levels have the same two-dimensional content structure, the depth and emphasis of each level parallel the educational experiences of the candidate. This progressive nature of the COMLEX-USA examinations ensures the consistency and continuity of the measurement objectives of the osteopathic medical licensing examinations.

Students must take and pass COMLEX-USA Level 1 and COMLEX-USA Level 2-CE to meet ACOM's graduation requirements. On November 13, 2020, the Commission on Osteopathic College Accreditation's Executive Committee (COCA EC) suspended the requirement for students to successfully complete COMLEX-USA Level 2-PE prior to their graduation.

Examination completion date requirements will be provided to the students for Level 1 and Level 2-CE. Four (4) attempts are allowed for each exam; however, please note that many state licensure boards may have limits on the number of exams taken in issuing medical licenses.

Preparation and Eligibility for COMLEX-USA Level 1

ACOM uses the COMSAE (COMLEX Self-Assessment Exam Series) produced by the NBOME to track the progress of students in their test-taking abilities and overall comprehension of the curriculum. At the end of the second year of the curriculum, the Clinical Integration Capstone

Course is offered as a preparation course for board exams and OMS III clerkship training. The COMSAE and/or other assessments will be used as requirements to pass this course.

Students must pass all OMS I and OMS II coursework, including the Clinical Integration Capstone Course, to be eligible to take COMLEX-USA Level 1. Students who do not meet the course requirements for the Clinical Integration Capstone Course will not be eligible to take COMLEX-USA Level 1. These requirements include meeting or exceeding the COMSAE qualifying score listed in the course syllabus with a limit of two (2) COMSAE attempts. In order to remediate these course requirements, students will be required to successfully complete an ACOM-approved board review course at the student's expense during the summer before taking COMLEX-USA Level 1 and progressing to the OMS-III year. Successful completion of the board review courses will be verified by ACOM. The student will be expected to follow and complete all requirements of the board review course in a professional manner. Unprofessional behavior may result in a failure of the remediation of the Clinical Integration Capstone Course.

Eligibility for COMLEX-USA Level 2-CE

1. Students must complete all OMS III clerkships that require a COMAT (except ACOM Rural Health Clinic OPP COMAT).
2. Students must successfully complete the required COMSAE self-assessment in the Spring of OMS III.
3. Students must complete all components of the Pathway to Residency.

Clerkship Eligibility

To be eligible to begin clerkship rotations, students must successfully complete the entire OMS-II course of study and have achieved a passing COMLEX-USA Level 1 score. To be eligible to begin OMS-IV clerkship rotations, students must successfully complete all components of OMS-III clerkship rotations. In a special circumstance, such as an incomplete grade, the student may begin OMS-IV clerkship rotations, but a hold will be placed on the student record until all third-year requirements are met, which may hinder subsequent registration.

COMLEX-USA Procedure

Implements: COMLEX-USA Policy

PROCEDURE & PROCESS

COMLEX-USA Level 1

The following procedures and responsibilities pertain to COMLEX-USA Level 1.

1. Students are required to take COMLEX-USA Level 1 as soon as possible following completion of the second year and must take it no later than the ACOM-designated date determined each year based on the score report dates published by the NBOME. Failure to complete and pass the exam by the ACOM-designated date will result in administrative withdrawal from the curriculum until the respective exam is passed.
2. Students must receive a passing score on COMLEX-USA Level 1 before starting OMS-III clerkship training.
3. Students who have not met the requirements stated above for the Clinical Integration Capstone Course or who fail their first attempt at COMLEX-USA Level 1 will be placed on Academic Suspension until the requirements are satisfied.
4. Students who fail their first attempt at COMLEX-USA Level 1 will meet with the Academic Support department for recommendations and an academic plan. In addition, an ACOM-approved board review course may be required.
5. Students who fail their second attempt at COMLEX-USA Level 1 will meet with the Center for Medical Student Success for recommendations and an academic plan.
6. Four failed attempts at COMLEX-USA Level 1 will result in a recommendation for Dismissal. Students may appeal this decision to the Appeal Board.

COMLEX-USA Level 2-CE

The following procedures and responsibilities pertain to COMLEX-USA Level 2-CE. On November 13, 2020, the Commission on Osteopathic College Accreditation's Executive Committee (COCA EC) suspended the requirement for students to successfully complete COMLEX-USA Level 2-PE prior to their graduation.

1. Students are required to take COMLEX-USA Level 2-CE by the ACOM-designated date determined each year based on the score report dates published by the NBOME. Failure to complete and pass the exam by the ACOM-designated date will result in administrative withdrawal from the curriculum until the respective exam is passed.

2. At-risk students may be required to meet with the Academic Support department before qualifying for COMLEX-USA Level 2-CE to develop an academic success plan. This may include COMSAE Level 2 requirements and/or an ACOM-approved board review course at the student's expense. At-risk students are identified by COMLEX-USA Level 1 performance, COMAT performance, COMSAE performance, and/or clerkship performance metrics.
3. Students who fail their first attempt at COMLEX-USA Level 2-CE will meet with the Academic Support department for recommendations and an academic plan. An ACOM-approved board review course at the student's expense may be required. Elective courses may be required depending on the Academic Support department's recommendations.
4. Students who fail their second attempt at COMLEX-USA Level 2-CE will meet with the Academic Support department for recommendations and academic plan.
5. Four failed attempts at COMLEX-USA Level 2-CE will result in a recommendation for Dismissal. The student may appeal this decision to the Appeal Board.
6. The Academic Support department may recommend an administrative leave of absence at any point to enable preparation for re-examination.



10 CLERKSHIP TRAINING

10.1 Eligibility for Clinical Rotations Policy

10.2 Clerkship Rotation Grade Reporting Procedure

10.3 Clerkship Rotation Procedures

10.4 Clinical Assessments Policy and Procedure

10.5 Clinical Education Policy

10.6 Clinical Scope of Duties Policy

10.7 Patient Care Supervision Policy

10.8 Needlestick Policy

Eligibility for Clinical Rotations Policy

PURPOSE

The Alabama College of Osteopathic Medicine (ACOM) is committed to preparing its graduates for competency in the world of primary care medicine. A successful ACOM graduate will, after completion of the program, demonstrate sufficient knowledge, skill sets, experience, values, and behaviors that meet established professional standards, are supported by the best available medical evidence, and which are ultimately in the best interest of the patient. This policy is in place to prescribe eligibility for ACOM students who are preparing to enter clerkship rotations.

SCOPE

This policy applies to all third- and fourth-year ACOM students.

POLICY & ENFORCEMENT

Only OMS-III or OMS-IV students will be allowed on clerkship rotations. To be eligible to begin clerkship rotations, students must successfully complete the entire OMS-II course of study and have achieved a passing COMLEX-USA Level 1 score. To be eligible to begin OMS-IV clerkship rotations, students must successfully complete all components of OMS-III clerkship rotations. In a special circumstance, such as an incomplete grade, the student may begin OMS-IV clerkship rotations, but a hold will be placed on the student record until all third-year requirements are met, which may hinder subsequent registration.

Students must have current training in Basic Life Support (BLS), Advanced Cardiac Life Support (ACLS), pertinent Occupational Safety and Health Administration (OSHA) regulations, Health Insurance Portability and Accountability Act (HIPAA), Universal Precautions and Sterile Technique. Attendance is mandatory at any clerkship rotation site at which these sessions are required.

Students are required to keep a copy of BLS and ACLS certification cards and present them to training sites upon request. It is the responsibility of the student to recertify in these areas before the certification expiration date. Students are encouraged to locate and register for recertification courses three (3) months in advance of the expiration date in order to prevent lapses in certification. Many core hospitals and other clerkship rotation sites routinely offer recertification classes, free of charge to students.

Students must abide by the following ACOM requirements: current health insurance, current satisfactory background check, negative drug screen, current immunizations (as set forth in the Student Handbook).

Students must complete all clerkship readiness modules and activities before the assigned deadline. Failure to meet this deadline means the student may not start the OMS-III year on time.

Students are required to attend all hospital and clinic orientations assigned to them by their Core Site Coordinator. These orientations will occur before the official start of the OMS-III year.

Some clinical training sites may require documentation in addition to that referenced above. Students should pay close attention to clerkship rotation requirements when applying for placement at non-ACOM sites. Students must adhere to and complete facility-specific orientation and/or training requirements at each clerkship rotation site, even if repetitive requirements are met at ACOM or previous clerkship rotation sites. For example, students may be required to attend HIPAA training at each of their training sites.

Clerkship Rotation Grade Reporting Procedure

PROCEDURE & PROCESS

The purpose of the Clerkship Rotation Grade Reporting Procedure is to define the end of clerkship assessment and reporting process and track student performance during clerkship rotations by utilizing a robust and thorough reporting process.

- I. After the student's completion of the clerkship period, the Clinical Curriculum Manager compiles information from a variety of sources (the LMS, NBOME, eValue, TrueLearn, etc.) to create an End of Clerkship Rotation Grade Report for each core course, each specialized elective course, one for all general OMS-III electives, and one for all general OMS-IV electives. This grade report includes, but is not limited, to the following elements:
 - a. Enrollment Data – lists all students enrolled in the course during the current rotation period, dates of the current rotation period, credit hours, clinical training site, and educator(s).
 - b. Registrar Scores – complete list of final scores being reported during the current grading period, which may include scores from previous rotation periods as necessary.
 - c. Grade Approval – a signature page attesting that all signatory parties have reviewed the information contained within the grade report and approve the final scores being reported to the Registrar.
 - d. Gradebook – exported gradebook, including reported and outstanding/incomplete scores from the Learning Management System.
 - e. Additional Grade Related Forms (if applicable) – may include grade change forms, preceptor evaluation reconsideration forms, final grade appeal forms, etc.
 - f. COMBANK Data – student performance statistics on the assigned board preparation quiz. (Core clerkship rotations only, excluding Emergency Medicine and Hospice)
 - g. COMAT Data – lists COMAT scores for the current rotation period, followed by a more detailed report from NBOME. (Core clerkship rotations only, excluding Internal Medicine I, Emergency Medicine, and Hospice)
 - COMAT scores are listed in percentages, which are calculated by dividing the standard score (provided by NBOME) by 125 (the number of questions on each COMAT exam).
 - h. Preceptor Evaluation Analysis– lists student scores and performance from their preceptor's evaluation. Analysis includes current or delayed preceptor evaluations submitted within the grading period. PDF copies of all evaluation forms are included.
 - Please see the Clinical Assessments Policy for more information.

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- i. End of Clerkship Survey Data – provides confidential student evaluation of instruction, regarding their clerkships, faculty, and other relevant student experiences gathered from the End of Clerkship Survey.
 - j. Rotation Tracking Log – provides data regarding any student or preceptor issues of note (i.e., COMAT failure, missing didactic assignment(s), absence from video conference, preceptor evaluation trigger(s), end of clerkship survey concerns).
 - II. Once all required signatures are obtained, the Clinical Curriculum Manager reports final grades to the Registrar.
 - a. Required signatures include the appropriate Clerkship Director(s), Associate Dean of Clinical Sciences, Associate Dean of Medical Education, Vice President of Institutional Effectiveness, and Associate Dean of Anatomical Sciences, Molecular Medicine, Research, and Graduate Studies.
 - III. Once all required signatures are obtained, the Clinical Curriculum Manager ensures that these electronic reports are saved in the designated location so that all signatory parties may access them as needed.
 - IV. The Clinical Curriculum Manager or their designee creates a deidentified, electronic report of all the End of Clerkship Survey results from each clerkship rotation period, saves it in the designated location, and sends an email notification when a new report is prepared to the appropriate faculty and staff who do not already review this data as grade report signatory parties (i.e., Associate Dean of Clinical Resources, Regional Coordinators, Clerkship Systems Analyst).
 - a. In addition to the deidentified monthly report mentioned above, the Clinical Curriculum Manager or their designee creates an aggregated report of all End of Clerkship Survey results at the end of academic year. This report is also de-identified and is organized by site and discipline. It may be shared with core site coordinators and medical education directors as needed; however, those parties will have the opportunity to view an overall summary and any trending comments when they receive their Annual Site Report for the academic year.
 - b. Trending comments and statistics are also periodically shared with interested preceptors who attend MED/preceptor training programs.
 - V. The Clinical Curriculum Manager, in collaboration with the rest of the Clinical Curriculum team, tracks student performance throughout OMS-III and OMS-IV years to provide any related data as needed.
 - VI. The Clinical Curriculum Manager schedules annual Course Achievement Reports, which are presented by Clerkship Directors to Curriculum Committee. The Clinical Curriculum team provides data and/or other support to Clerkship Directors as needed when Clerkship Directors prepare these reports.

Clerkship Rotation Procedures

PROCEDURE & PROCESS

The Alabama College of Osteopathic Medicine (ACOM) is committed to preparing its graduates for competency in the world of primary care medicine. A successful ACOM graduate will, after completion of the program, demonstrate sufficient knowledge, skill sets, experience, values, and behaviors that meet established professional standards, are supported by the best available medical evidence, and which are ultimately in the best interest of the patient. This procedure is in place to detail procedures surrounding clerkship rotations for all ACOM students.

Classification of Clerkship Rotations

Clerkship rotations are classified as core, required, or elective:

- a. Core Clerkship Rotations: Core clerkship rotations must be completed at the assigned core site and are assigned by ACOM – they cannot be changed by the student.
 - In the unusual situation that a student's core site is unable to provide a scheduled core clerkship rotation, then that student may be assigned by the appropriate Regional Coordinator to the nearest available core site, with approval by the Associate Dean of Clinical Sciences and/or the Associate Dean of Clinical Resources.
- b. Required Clerkship Rotations: Required clerkship rotations do not have to be completed at a core site but are required to be taken in the appropriate OMS year.
- c. Elective Clerkship Rotations: Students have the opportunity to complete many elective clerkship rotations in the third and fourth years. Electives can be in any specialty and at any medical facility. Preceptors for elective clerkship rotations may be any licensed, practicing physician approved by ACOM; they are not required to be a member of the ACOM Clinical Faculty. Students are encouraged to schedule elective clerkship rotations in a variety of clinical practice areas for broad-based clinical exposure.
 - Core site coordinators cannot require a student to complete a particular elective; however, they can regulate if/when a particular elective may be taken at their core site. This decision is based on preceptor availability and the student's core clerkship rotation schedule.
 - Medical education directors may require a student to complete a particular elective based on identified preceptor and/or student needs and availability.
 - Students must work with their core site coordinator and regional coordinator for scheduling assistance if a particular elective is not available at a student's core site.

- Students who choose to complete elective clerkship rotations at locations outside the ACOM network must follow the out-of-network application process.

Limits on Clerkship Rotations

- a. There is no limit on the number of credit hours students may complete in a particular discipline; however, students should endeavor to make smart, strategic choices when planning their elective schedules. Students are encouraged to seek out and follow the guidance from ACOM Faculty and Medical Education Directors.
- b. Students may not complete more than eight credit hours of clerkship rotations, core or elective, with the same supervising physician or at the same residency program in the same discipline over the combination of the clinical years without special permission from the Associate Dean of Clinical Sciences and/or the Associate Dean of Clinical Resources.
- c. Students may not complete more than four credit hours of off-cycle clerkship rotations without special permission from the Associate Dean of Clinical Sciences and/or the Associate Dean of Clinical Resources.
- d. Students may complete only four credit hours with a preceptor who is a member of the student's family. A clerkship rotation completed with a family member must be an elective clerkship rotation.
- e. Students may not complete more than eight credit hours of Research electives over the combination of the clinical years without special permission from the Associate Dean of Clinical Sciences and/or the Associate Dean of Clinical Resources.
- f. Students may not complete more than eight credit hours of hospice rotations over the combination of the clinical years without special permission from the Associate Dean of Clinical Sciences and/or the Associate Dean of Clinical Resources.
- g. Students may not complete more than four credit hours of the Wilderness Medicine elective.

Clinical Assessments Policy

PURPOSE

The Clinical Assessments Policy aims to identify the responsibilities of students, preceptors, and others involved in the clinical assessment process during each clerkship rotation.

SCOPE

This policy applies to ACOM faculty and staff involved in the OMS-III and OMS-IV curriculum, including affiliate clinical faculty, and OMS-III and OMS-IV students.

POLICY & ENFORCEMENT

The Clinical Assessment Cycle is designed to ensure students are clearly aware of their preceptor's expectations of them, receive feedback during the clerkship rotation, and were able to successfully meet their preceptor's expectations. Students also share their feedback regarding their training site, preceptor, course design, and clinical performance during the clerkship rotation.

The Learning Agreement, the Mid-Rotation Evaluation, the Preceptor Evaluation of Student, end-of-clerkship surveys, and other clinical assessment forms are used in the clinical assessment cycle. For more information on these evaluations and forms, please see the Clinical Assessments Procedure.

Preceptor Responsibilities

The primary role of a preceptor is to assess a student's ability to accurately:

1. Perform a **medical history and physical exam** based on presenting complaint & appropriate to the setting
2. Formulate a **differential diagnosis** appropriate to patient & setting
3. Order and interpret tests to narrow the differential diagnosis to a **working diagnosis**
4. Describe/perform **procedures** to diagnose & treat a patient's problems
5. Craft a **treatment** plan appropriate to a patient's problems and situation
6. Work with patients & members of the healthcare team **ethically and professionally**

Student Responsibilities

It is the responsibility of the student to ensure that preceptors' evaluations are submitted to the core site coordinator or other appropriate ACOM staff member at the completion of each clerkship rotation. ACOM staff will assist with obtaining the evaluation if a preceptor is neglectful in completing the evaluation form, but the responsibility rests with the student. If a

student has difficulty in getting an evaluation submitted, he/she should inform his/her core site coordinator or regional coordinator at the end of the clerkship rotation. The more time that passes after a clerkship rotation is completed, the more difficult it becomes to receive an accurate evaluation. The student's transcript will not be complete until all evaluations have been posted. Application for Graduate Medical Education (GME) programs cannot be submitted, nor diplomas issued without a complete transcript.

Preceptors may complete an online evaluation through eValue. In instances when a paper evaluation is requested by the preceptor, one will be sent to the training site. Students may also give a copy of the evaluation to the preceptor. The evaluation can be faxed, mailed, or sent by email to the appropriate core site coordinator or ACOM staff member. Please note that evaluations received directly from students will not be accepted. The evaluation must be received from the preceptor or training site.

Preceptors for Core Clerkship Rotations: The coordinator at each core site will ensure ACOM has current preceptor information. The preceptor listed for a core clerkship rotation may not be the primary preceptor, but the supervising physician who oversees the core clerkship rotation. The student should address any concerns regarding the preceptor listed for core clerkship rotations with his/her Site Coordinator by the second week of the clerkship rotation. Individual Preceptors: The student should also make certain that ACOM has a correct email address for the preceptor, or the person who should receive the email notice that an evaluation is due (such as a practice manager). This information should be received by the student's Regional Coordinator by the second week of the clerkship rotation.

Preceptors at Medical Education Programs: When on a clerkship rotation at another medical school or GME program, the student should consult with the medical education coordinator at that program regarding their procedures for preceptor's evaluations. Evaluation procedures may vary at each site. In some cases, one preceptor may complete the evaluation online. In other cases, students may work with multiple preceptors who contribute to the evaluation. In this case, the coordinator or supervising physician at the host site will combine the input received from all evaluators and submit one overall evaluation to ACOM.

Please note: while nurses, advanced practice providers, and resident physicians may offer feedback to the preceptor of record regarding student performance, those individuals may not serve as the preceptor of record, and, therefore cannot submit a Preceptor Evaluation of Student form to ACOM.

It is the responsibility of the student to determine the evaluation process at the host site and provide that information, along with the name and contact information of the preceptor of record, to ACOM. This information should be received by the student's Regional Coordinator by the second week of the clerkship rotation.

Clinical Assessments Procedure

Implements: Clinical Assessments Policy

PROCEDURE AND PROCESS

The Clinical Assessments Procedure details the cycle of clinical assessments during each clerkship rotation.

Clinical Assessment Cycle

The following forms are used in the clinical assessment cycle:

1. *Learning Agreement.* The evaluation process should begin during the first week of the clerkship rotation. Students should meet their preceptor at the beginning of the clerkship rotation to discuss expectations for clinical and academic performance and complete a Learning Agreement. This provides the student with the opportunity to become familiar with and meet preceptor expectations and avoid being surprised by the evaluation at the end of the clerkship rotation. Students should not hesitate to request clarification of anything that is not made clear by the preceptor. The student should provide the preceptor with a copy of the Mid-Rotation Evaluation Form. If the preceptor does not have a copy of the clerkship rotation syllabus, the student should provide a copy at the beginning of the clerkship rotation.
2. *Mid-Rotation Evaluation.* Two weeks into the clerkship rotation, the student should ask for an informal mid-rotation evaluation. The student should review the Mid-Rotation Evaluation form with the preceptor, discuss areas of competency that will be evaluated at the conclusion of the clerkship rotation, and ask for their input on their performance to date and specific recommendations for improvement. This is not intended to be a formal evaluation. These forms should be submitted in eValue, either by the preceptor electronically filling out the form or by the student uploading the completed and signed form.
3. *Preceptor Evaluation of Student.* A student evaluation will be completed by the supervising physician at the completion of each clerkship rotation. The evaluation will be based on the student's behaviors, knowledge, and skills observed by the preceptor and other members of the healthcare team in each of the following core competencies:
 - Osteopathic philosophy and osteopathic manipulative medicine
 - Medical knowledge
 - Patient Care
 - Interpersonal and communication skills
 - Professionalism
 - Practice-Based Learning and Improvement
 - Systems-Based Practice

At ACOM, these competencies are defined within the following standards statements:

- EPA 1 Gather a history and perform a physical examination.
- EPA 2 Develop a prioritized differential diagnosis and select a working diagnosis following a patient encounter.
- EPA 3 Recommend and interpret common diagnostic and screening tests
- EPA 4 Enter and discuss patient orders/prescriptions.
- EPA 5 Provide documentation of a clinical encounter in written or electronic format.
- EPA 6 Provide an oral presentation/summary of a patient encounter.
- EPA 7 Form clinical questions and retrieve evidence to advance patient care.
- EPA 8 Give or receive a patient handover to transition care responsibility to another health care provider or team.
- EPA 9 Participate as a contributing and integrated member of an interprofessional team.
- EPA 10 Recognize a patient requiring urgent or emergent care, initiate evaluation and treatment, and seek help.
- EPA 11 Obtain informed consent for tests and/or procedures.
- EPA 12 Perform general procedures of a physician.
- EPA 13 Identify system failures and contribute to a culture of safety and improvement.

The Preceptor Evaluation of Student is a list of observable behaviors directly referencing these Core Entrustable Professional Activities for Entering Residency.

There are three narrative feedback sections of the evaluation form. The first section is designed to identify the student's strengths and areas for improvement. The second section is designed to allow preceptors to share feedback about student performance with potential program directors. The third section is designed to allow preceptors to specify what comments should be used as content for the Medical Student Performance Evaluation (MSPE) for the residency match program. Students are encouraged to inform the preceptor about the importance of making specific comments about their clinical performance.

It is the responsibility of the student to ensure that evaluation forms are completed and submitted online or turned into the core site coordinator or other appropriate ACOM staff member at the completion of the clerkship rotation. Students should inform ACOM of any difficulty in obtaining an evaluation by the preceptor at the end of that clerkship rotation.

- Scoring: Each observable behavior is weighted so that evaluation scores can be calculated. Students receive a notification from the clerkship management

software when a preceptor evaluation of them has been posted. It is the student's responsibility to review these evaluations. If the student identifies any portion of the preceptor evaluation of them that does not accurately reflect their clinical performance, they have five (5) business days after the evaluation has been posted in the clerkship management software to request a reconsideration and/or clarification from the course/clerkship directors.

Students may only direct this reconsideration request to the appropriate Clerkship Director. Students are never to contact the supervising physician who evaluated them. Students who contact the supervising physician may face disciplinary action.

4. *End of Clerkship Survey.* Students are required to complete evaluations regarding their clerkship rotation experience. Student feedback received from the evaluations will assist in the overall assessment and improvement of clerkship rotations and future faculty development programs. To assist core sites in improving student experiences, a summary of student ratings and comments will be reported anonymously, in redacted form, to those training sites and preceptors on an annual basis. The following evaluations are to be completed on the last day of each clerkship rotation.

- Evaluation of Preceptor: Provides feedback that can be used to assess and improve the teaching of up to three preceptors for each clerkship rotation.
- Evaluation of Site: Provides feedback that can be used to assess and improve learning opportunities and the learning environment of specific clerkship rotation sites.
- Evaluation of Clerkship Rotation Experience: Provides feedback that can be used to assess and improve the clerkship rotation syllabus, learning materials, assignments, activities, and the instructional/support efforts of the clerkship director.

Other Clinical Assessment Forms

1. Observed Patient Clinical Encounter form

Students must ask their supervising physician to observe their performance as they complete a patient history and physical examination. Students should have a total of four (4) of these evaluations completed and submitted in eValue by the end of their OMS-III year. All four will be incorporated into didactic assignments within core clerkship rotations.

2. Annual Site Survey

Students are asked to complete an Annual Site Survey toward the end of their OMS-III year, typically in May, to provide overall feedback regarding their experience at their assigned core site during the year. This data, in conjunction with other data points, is de-identified and shared with core sites via Annual Site Reports.

3. Preceptor Evaluation of ACOM Experience

Preceptors are asked to complete a survey regarding their experience with ACOM during the

year. This data allows ACOM to strive for continuous improvement in the clinical arena, including providing preceptor development.

Clinical Education Policy

PURPOSE

The Alabama College of Osteopathic Medicine (ACOM) is committed to preparing its graduates for competency in the world of primary care medicine. A successful ACOM graduate will, after completion of the program, demonstrate sufficient knowledge, skill sets, experience, values, and behaviors that meet established professional standards, are supported by the best available medical evidence, and which are ultimately in the best interest of the patient. This policy is in place to demonstrate how clinical education is delivered to all ACOM students.

SCOPE

This policy applies to all OMS-III and OMS-IV students and the ACOM faculty, staff, and affiliated clinical faculty who participate in the OMS-III and OMS-IV curriculum.

POLICY & ENFORCEMENT

The clinical curriculum reflects the mission of ACOM through planning and evaluation by Clerkship Directors, the Curriculum Committee, and the input and review of the Dean's Cabinet. ACOM's academic program for years three (3) and four (4) is designed to reflect a strong commitment to primary care and includes both hospital and ambulatory-based rotations. ACOM partners with its various clinical training sites, medical education directors, and supervising physician preceptors to train students for excellence in clinical practice.

Under the leadership of ACOM, the preceptors and clinical training sites implement the curriculum. To enhance learning, preceptors and sites are encouraged to use a variety of teaching methods and innovations, including observation, monitored participation, video and audio recordings, technology, readings, individual discussions, and presentations by students, faculty, and others. Specific curricular expectations are outlined in the syllabus for each of the required clerkship rotations.

Students at each site are assigned to work with local preceptors who provide learning opportunities in clinical settings and deliver qualitative assessments of students throughout their clinical training. These educational exposures occur in a practical, clinical environment designed to help students develop expertise in patient diagnosis, management, and professional etiquette within healthcare teams. In addition to outpatient experiences at hospital-based clinics, free-standing clinics, and physicians' offices, students will be provided with inpatient clinical experiences at affiliated hospitals. As part of these educational experiences, students may be required to work with a variety of instructors at various levels, including interns, residents, and attending physicians, all under the purview of the supervising physician preceptor. All clinical faculty are approved by ACOM based

on interest and dedication to teaching, as well as a credentialing process including evaluation of the Curricula Vitae (CV), recommendation by appropriate Medical Education Director, board certification or board eligibility, medical license verifications, and certificate of insurance. Additional information regarding the clinical curriculum is included in the Clerkship Rotation Manual, Student Handbook, and Academic Catalog.

Clinical Training Sites

Each clinical training site is based within a hospital setting or utilizes a free-standing Federally Qualified Health Center (FQHC), with sufficient resources within a 50-mile radius for all required OMS-III clerkship rotations. Formal clinical affiliation agreements are in place with these training sites. Students are expected to comply with the policies, procedures, and general rules of the training facility at which any clerkship rotation is completed. Each institution is responsible for determining the degree of student involvement at that institution, including access to the facility and areas within the facility, clinical access to patients, access, and contribution to patients' medical records, as well as observation and participation in procedures. Each student should have access to the hospital library or learning resources center in the same capacity as physicians and house staff at that institution. Additionally, each institution defines what benefits the students have while at that institution (e.g., discounted or free meals, lodging, etc.) and under what circumstances the students will have access to those benefits.

At each core site, there is a Medical Education Director and Core Site Coordinator. The Medical Education Director manages the core site and its operation, as well as directing interaction with ACOM regarding student performance, and is also the direct liaison to the sponsoring institution's administrative team. The Core Site Coordinator manages the day-to-day activities of students, such as preceptor assignments, evaluations, lectures, and COMAT exams.

Each site is located within a specified geographic region – North, Central, South, and Southeast. A Regional Coordinator is assigned to each region. The Regional Coordinator assists in developing and managing the clinical clerkship network and assists core site staff in managing students' educational experiences.

ACOM requires all hospital sites to maintain up-to-date affiliation agreements and accreditation by The Joint Commission, DNV, or other agency authorized to confer deemed status by CMS. They must also be duly licensed within their jurisdiction. All affiliate clinical faculty preceptors are required to be credentialed by ACOM every three (3) years, remain actively licensed in their respective jurisdictions, board eligible or specialty board certified, and carry malpractice insurance or an equivalent deemed acceptable to ACOM. Additionally, all core sites must:

- Provide and maintain an environment conducive to the education and training of osteopathic medical students.
- Assist the osteopathic medical students in obtaining experience in patient care by allowing students to share responsibility for patient care with qualified staff physicians.
- Provide and maintain an environment which encourages critical dialogue between the medical staff physicians and students through clinical rotations, rounds, and conferences.

Core Site Assignments

Students will attend a Clerkship Fair during the Fall term of their second (2nd) year to obtain information about each core site within ACOM's network. In January of their second (2nd) year, students rank all core sites in order of preference. Using a complex algorithm through ACOM's clerkship management software, ACOM assigns each student to a core site, based, to the extent possible, on the students' ranked preferences. The Associate Dean of Student Services will conduct any trading period deemed appropriate following core site assignments. After this trading period ends, students may not alter their core site assignment.

Competency Portfolio

Students must record clinical thinking and procedural skills witnessed by their preceptors in their electronic Competency Portfolio. Each skill will be listed as "performed," "assisted," or "observed." Students should access the portfolio daily while on each clerkship rotation to record each clinical skill. Skills are self-reported by students and verified randomly by ACOM staff. Students must make sure they are accurately recording their experiences with each symptom/problem and clinical skill during their third (3rd) year. Doing so is important because ACOM will use this information to populate the Medical Student Performance Evaluation (MSPE; formerly called Dean's Letter). This MSPE is a vital part of each student's residency application. The more complete the portfolio, the better a program director will understand the depth of the student's training. It is, therefore, in the student's best interest to populate the portfolio as accurately and completely as possible. If the competency portfolio is incomplete, potential Residency Program Directors will not be able to see a true picture of the student's abilities. Competency portfolios will continue to be important throughout students' careers. Continuing to populate the portfolio during their fourth (4th) year will lead to a more complete representation of student exposure to the clinical skill sets they will be expected to perform on their first day of residency. ACOM strongly recommends at least three logs of each symptom/problem listed in the Clerkship Rotation Manual by graduation.

Students must log at least one "Case Log" into their Competency Portfolio by Thursday of each week in a rotation period in order to demonstrate attendance on the clerkship rotation for that week. Failure to consistently document on a weekly basis may result in a change of enrollment status.

The portfolio will serve as a method for students to track their performance of common skills typically encountered during clinical clerkship rotations. As such, this portfolio will become an important asset to the student when applying for residency. In addition, the portfolio will serve as a tool to assist ACOM to evaluate the clinical experiences received by students at various training sites.

Medical Records/Charting

Policies regarding documentation by medical students in medical records will vary among hospitals and clinics. These notes should be approved and signed by the supervising physician in

accordance with that clinical entity's bylaws governing chart documentation. Students are responsible for proactively obtaining charting/documentation instructions from the preceptor or site coordinator at each clerkship rotation site. The student must always sign and date all entries into the medical record by name and educational status, such as John Smith, OMS-III.

Expectations of Students in Clinical Settings

ACOM students are expected to demonstrate high ethical standards. They should conduct themselves with empathy, compassion, honesty, academic integrity, and professionalism at all times. Also, unless otherwise indicated by the preceptor, the student should wear a clean, wrinkle-free white ACOM clinic jacket and identification badge. The ID badge should be worn above the waist and visible at all times. More details regarding professionalism standards are included in the Student Handbook.

Students will refer to themselves as "First name, Last name, third/fourth year medical student at Alabama College of Osteopathic Medicine" in a clinical setting. As a group, students are referred to as "Medical Students." Students will refer to other professionals in the clinical setting by their appropriate title, such as "Dr. Smith," "Ms. Jones," etc. Students are never to represent themselves as licensed physicians. If a student has a doctoral degree in any field, this title cannot be used while matriculated at ACOM. Students may expect to be treated as professionals by all clinical personnel at all times, and in turn conduct themselves professionally, ethically, and respectfully at all times. Courtesy and a professional demeanor at all times are essential traits for a physician.

It is important for students to observe and participate in clinical experiences such as tumor board, journal club, or hospital committees to understand and appreciate the full spectrum of activities in which physicians are involved. Students are expected to participate in as many clinical experiences as are approved by the preceptor, medical education director, and/or clerkship director.

Clinical Scope of Duties Policy

PURPOSE

The Alabama College of Osteopathic Medicine (ACOM) is committed to ensuring that its osteopathic students in clinical learning situations involving patient care are under direct supervision by a licensed health care professional at all times in order to ensure patient safety. ACOM ensures that all supervised activities are within the scope of practice of the supervising health care professional and that students have clear guidelines on their role in care and the limits of their scope of authority.

SCOPE

This policy applies to ACOM students in their clinical rotations and to the clinical faculty and affiliate clinical faculty who are supervising them.

POLICY & ENFORCEMENT

Scope of Duties Permitted

Each student's essential learning task while on clerkship rotations is to improve the ability to:

- Perform an accurate medical history and physical exam based on the presenting complaint and appropriate to the clinical setting.
- Formulate a differential diagnosis appropriate to the patient and the clinical setting.
- Order and accurately interpret tests and procedures in order to narrow the differential diagnosis to a working diagnosis.
- Accurately describe and/ or perform procedures to diagnose and treat the patient's problem.
- Craft a treatment plan appropriate to the patient's problems and situation.
- Work with patients and members of the healthcare team ethically and professionally.

By year, the scope of duties medical students may perform to complete the above learning tasks are:

OMS-I Students:

OMS-I students are permitted to perform the following functions only:

- Observation and follow
- History taking under Personal Physician Supervision

OMS-II Students:

OMS-II students are permitted to perform the following functions only:

- All functions permitted for OMS-I, as stated above
- History taking under Direct Physician Supervision
- Limited Physical Examination under Personal Physician Supervision until the physician determines competency, after which student may perform Limited Physical Examination under Direct Physician Supervision

Students are not covered by ACOM's medical liability insurance during OMS-I or OMS-II. Students are covered by ACOM's medical liability insurance during OMS-III and OMS-IV for enrolled activities only.

OMS-III and OMS-IV Students:

OMS-III and OMS-IV students are permitted to perform the following functions only:

- All functions permitted for OMS-I & OMS-II students, as stated above
- Under Direct Physician Supervision, may 'round' on patients, to include
 - Gathering lab, radiology, nursing and other information/results
 - Obtaining history
 - Performing Limited Physical Exam
 - Developing interim assessments and recommendations
- For genitourinary, breast or rectal exam, student may perform exam under Personal Physician Supervision only.
- Under Direct Physician Supervision, may write student notes regarding evaluation and management services or procedures:
 - If permitted by the rotation site to be placed in the patient chart, student notes must be clearly labeled as such. Completed student notes must be co-signed by the supervising physician within 48 hours; unsigned student notes may be used by the physician as a draft but must be thoroughly reviewed and edited prior to physician authentication. These student notes are just that – student notes. They are not the progress notes for the patient and should never stand alone as such.
 - If such notes are strictly for the educational experience of the student and will not be placed in the chart, they must not use patient identifiers and should be shredded as consistent with hospital HIPAA policies.
- The following procedures may be performed by 3rd or 4th-year medical students only if (a) the supervising physician determines the student's readiness to start to perform the procedure under Personal Physician Supervision, (b) the supervising physician has the appropriate privileges, competency and teaching proficiency to perform and educate medical students in their performance, and (c) the appropriate patient consent has been obtained.
 - The following procedures must be performed under Personal Physician Supervision until the physician determines the student is competent to perform the procedure under Direct Physician Supervision:

- Perform insertion of IVs or draw blood – stick attempts limited to two (2) per patient
 - Ocular Exam with Slit-Lamp
 - Wart treatment
- The following procedures must always be performed by the student under Personal Physician Supervision:
 - Airway Management (i.e., nasotracheal, oropharyngeal, etc.)
 - APGAR and Dubowitz/Ballard Assessment
 - Arterial puncture – for blood gases (ABG)
 - Arthrocentesis
 - Breast, Pelvic, or Rectal Exams
 - Cardiac ultrasound and Doppler studies
 - Casting/Splinting, Elbow
 - Casting/Splinting, Knee/Ankle
 - Casting/Splinting, Lower Extremity
 - Casting/Splinting, Other
 - Casting/Splinting, Shoulder
 - Casting/Splinting, Thumb Spica
 - Casting/Splinting, Upper Extremity
 - Casting/Splinting, Wrist/Hand
 - Colposcopy
 - Ear, Evaluation and Treatment – Cerumen Removal
 - Ear, Evaluation and Treatment, EAC foreign body removal/wick insertion
 - Echocardiography
 - Electroencephalogram
 - Episiotomy and repair
 - Eye, Evaluation and Treatment – Evaluation of Corneal Abrasion
 - Eye, Evaluation and Treatment – Evaluation of foreign body with lid eversion
 - Eye, Evaluation and Treatment – Tonometry
 - Eye, Evaluation and Treatment of conjunctival foreign body
 - Intravascular Access, Peripheral (excluding a heparin lock)
 - Intravascular Access, Central
 - Lumbar Puncture
 - Mouth/Dental Evaluation and Treatment – Treatment of Aphthous Ulcers
 - Nasogastric Tube Placement
 - Newborn Management, Uncomplicated Delivery
 - Newborn Management – Newborn Resuscitation
 - Nose, Evaluation and Treatment – foreign body removal
 - Nose, Evaluation and Treatment, Epistaxis Control
 - Pulmonary Function Tests
 - Resuscitation Team Member (specify role, i.e., Leader, Compressor, etc.)
 - Skin Lesion Excision

- Surgical Assist
- Suturing, Face
- Suturing, Hand/digits
- Ultrasound, bedside – FAST (Focused Assessment with Sonography for Trauma)
- Ultrasound, Other than FAST
- Urinary Catheter Insertion
- Vaginal Delivery, Spontaneous

Scope of Duties Prohibited

Medical Students are strictly prohibited from performing any and all functions that are not specifically permitted above. Additionally, medical students are specifically prohibited from performing the following:

- Giving verbal or telephone orders
- Writing orders regarding end-of-life, such as DNR

Patient Care Supervision Policy

PURPOSE

ACOM is committed to ensuring that its osteopathic students in clinical learning situations involving patient care are under direct supervision by a licensed health care professional at all times in order to ensure patient safety. ACOM ensures that all supervised activities are within the scope of practice of the supervising health care professional. Students have clear guidelines on their role in care and the limits of their scope of authority.

SCOPE

The Scope of this policy includes ACOM faculty and staff, affiliated clinical partners who serve as preceptors, and students.

POLICY & ENFORCEMENT

Clinical Activities

Alabama College of Osteopathic Medicine (ACOM) students may only be involved in patient care activities as part of an approved ACOM activity and under the supervision of an assigned clinical faculty member. ACOM students are not legally or ethically permitted to practice medicine or assume responsibility for patients. The assigned clinical site will determine the degree of student involvement in patient care activities, including but not limited to night/weekend call, house calls, and telemedicine experiences. Students participating in telemedicine activities must do so under direct physician supervision. The supervising clinical faculty/preceptor is ultimately responsible for all patient care. Students are required to comply with all general and specific rules and medical ethics established by the clinical rotation site at which they are placed.

Students are not permitted to provide any type of medical treatment, procedure, or invasive examination without the direct supervision of an assigned clinical faculty member/preceptor. Patient care activities include, but are not limited to, early clinical experiences and clinical clerkship rotations. If a student receives approval from the preceptor and if permitted by the rotation site, they may take histories, perform physical examinations, and enter findings into the patient's chart. Students are not permitted to conduct a high-risk procedure or intimate exam without personal physician supervision of an assigned clinical faculty member/preceptor or their designee. Students are not permitted to write or enter patient care orders independently and/or issue prescriptions; any such orders/prescriptions must be reviewed and approved by the clinical faculty member/preceptor.

Student Titles

Students of ACOM should accurately represent themselves as an “osteopathic medical student” or “student doctor.” If any entries are made into patient medical records, any student signature should be followed by “OMS-III” or “OMS-IV” written legibly or entered electronically. Students are not permitted to introduce themselves as “Doctor” at any time, regardless of any previous degrees they may hold. Students should never provide care beyond what is appropriate for their level of training, even under supervision.

Preceptor Guidelines

ACOM places its students at clinical education training sites for the clinical component of their medical education. All clinical education sites should provide and maintain an environment conducive to the education of osteopathic medical students and encourage critical dialog between preceptors and students. In addition, preceptors should assist students in obtaining experience in patient care by allowing them to share responsibility with qualified staff and physicians. All supervised activities must be within the scope of practice of the supervising health care professional.

Needlestick Reporting Procedure

PROCEDURE & PROCESS

If a student experiences a needle stick, puncture wound, accident, sharp injury, or is otherwise exposed to bodily fluids of a patient while on a clinical clerkship, the student should:

1. **Immediately** wash the area, scrubbing the skin with soap and water.
2. For exposures to eyes, mouth, and other mucous membranes, rinse with running water, normal saline, or sterile eyewash for at least 10 minutes. For eye exposure, hold the eye open for irrigation.
3. **Immediately** report the incident to the attending physician or another appropriate supervising physician. See the charge nurse for obtaining contact information for house supervisors or attending physicians.
4. **Immediately report to the appropriate personnel and follow the post-exposure protocol as designated by the core site.**
 - a. Prompt evaluation and treatment is essential. Post-exposure prophylaxis and other treatment may be indicated and should be started within an hour of exposure.
 - b. You will present yourself to the facility's emergency room as a patient for purposes of consent to treat and billing., Your health insurance will be the primary form of insurance used for any such incident(s).
5. **Contact your Regional Coordinator, Core Site Coordinator, and the ACOM Director of Campus Safety.**
6. **Fill out the Needlestick Incident Report within 4 hours of the incident.**



11 ACADEMIC STANDING AND PROGRESS

11.1 Academic Standing and Progress Policy

11.2 Student Due Process, Appeal Board Policy

Academic Progress and Standing Policy

PURPOSE

To establish definitions, actions, and guidelines used as a measure of a student's academic progress relative to the degree requirements including all academic and professional standards expected to satisfactorily complete the program of Doctor of Osteopathic Medicine.

SCOPE

This policy applies to all ACOM students.

POLICY & ENFORCEMENT

Academic Standing is a classification used as a measure of a student's academic progress and achievement relative to the degree requirements, including, but not limited to, ethics and professional behavior standards. This classification determines the student's eligibility to proceed in their academic plan and allows or restricts certain participation levels in extra-curricular activities. A student's Academic Standing will change only as a result of action by the Associate Dean of Student Services or a final decision by an Appeal Board (as defined below) regarding a student's appeal of such action by the Associate Dean of Student Services. The College makes all determinations regarding disciplinary matters using a standard of preponderance of the evidence (i.e., "more likely than not"). Academic Standing is reported along with certain requests for academic records.

GOOD STANDING

Good Standing means a student is qualified by academic and professional standards to adequately discharge all responsibilities of an osteopathic medical student based on their current training level.

ACADEMIC AND DISCIPLINARY ACTIONS

The actions available to the College when a student deviates from expected academic or professional standards range from Warning through Probation and Suspension to Dismissal, each as defined herein. The Guidelines for Academic Performance section provides more detailed information regarding the College's expectations and requirements for academic progress and performance. The College's standards and requirements for behavior and professional conduct are outlined in the Professional Conduct Standards section.

WARNING

A Warning is a written notification to the student that any continuation of repeated inappropriate or unprofessional conduct may result in further disciplinary action. The written warning will be sent through Maxient and stored in the Maxient system.

PROBATION

Probation is defined as a period during which a student has the opportunity to demonstrate that he or she can improve his or her deficient academic performance (Academic Probation) or can effectively cease behavioral

or professional misconduct (Disciplinary Probation). The length of any Probation is determined by the Associate Dean of Student Services using the guidelines for Academic and Disciplinary Probation below. If the student violates the terms of Probation, the Associate Dean of Student Services may take additional appropriate actions, up to and including Dismissal from the College.

At the end of a student's prescribed Probation period, the Associate Dean of Student Services may extend the Probation period in the following circumstances:

- The student has unremediated course failures or otherwise is not making satisfactory progress toward meeting degree requirements.
- The Associate Dean of Student Services concludes that the student has failed to achieve sufficient maturity of thought or professionalism.

ACADEMIC PROBATION

Academic Probation applies to a student who has demonstrated a marginal level of performance to the degree that any additional academic deficiencies will subject the student to Suspension or Dismissal from the College. The duration and conditions of Academic Probation will be determined by the Associate Dean of Student Services.

A student on Academic Probation is considered to be in Good Standing in order to continue their academic and clinical training. Any period of Academic Probation is reported on the student's permanent academic record.

Academic Probation status is assigned when a student has a course or clerkship rotation failure. While on Academic Probation, the student must comply with the following:

- Resign all national, class, or club officer roles.
- Step down from representing ACOM in any manner (e.g., peer mentor, student ambassador).
- Withdraw from all classes outside of the required ACOM curriculum.
- Postpone any scheduled board exam(s) unless otherwise stipulated in the conditions of probation.
- Successfully remediate all course failures and show appropriate behavioral, professional, and personal conduct, as defined in the conditions of probation.

DISCIPLINARY PROBATION

A student may be placed on Disciplinary Probation by the Associate Dean of Student Services if the student fails to demonstrate a high standard of professionalism, including violations of the ACOM Code of Conduct, the AOA Code of Ethics or the ACOM Honor Code. The Associate Dean of Student Services determines the length of the Probation period and the requirements that the student must meet for the Disciplinary Probation status to be lifted.

A student on Disciplinary Probation is in Good Standing in order to continue their academic and clinical training. Any period of Disciplinary Probation is reported on the student's permanent academic record.

While on Disciplinary Probation, the student must comply with the following requirements:

- Resign all national, class, or club officer roles.
- Step down from representing ACOM in any manner (e.g., peer mentor, student ambassador).
- Withdraw from all classes outside of the required ACOM curriculum.
- Postpone any scheduled board exam(s) unless otherwise stipulated in the conditions of probation.

Because the circumstances surrounding a decision to impose Disciplinary Probation are unique to each situation, the conditions of each student's Disciplinary Probation status will be stipulated in writing at the beginning of the Probation period. While a student is on Disciplinary Probation, the student must show appropriate behavioral, professional and personal conduct. Further conduct violations or failure to comply with Disciplinary Probation conditions may result in Dismissal from the College.

SUSPENSION

Suspension prohibits a student from attending classes or participating in College activities or functions for a defined period of time. The Associate Dean of Student Services has the authority to suspend a student, with consent from the College's Office of Compliance.

Any Suspension period is included in the calculation of the six-year time limit for completing all graduation requirements. A student on Suspension may not apply for a leave of absence.

ACADEMIC SUSPENSION

A student is subject to Academic Suspension when they are waiting to repeat coursework. When Academic Suspension is imposed, the student is withdrawn from courses or clerkship rotations. The Associate Dean of Student Services will detail in writing the terms and conditions of the Academic Suspension, including the extent of the student's continued access to ACOM facilities and services.

While the student is on Academic Suspension, the student is not in Good Standing. Any period of Academic Suspension will be noted on the student's permanent academic record. The Associate Dean of Student Services will consider lifting the Academic Suspension when the student has met the required terms and conditions and may place the student on Academic Probation.

DISCIPLINARY SUSPENSION

A student is subject to Disciplinary Suspension when he or she fails to comply with the College's professionalism standard, such as engaging in significant or repeated unprofessional behavior, failure to satisfy the terms of Disciplinary Probation, or other disciplinary concerns. When Disciplinary Suspension is imposed, the student is withdrawn from courses or clerkship rotations. The Associate Dean of Student Services will detail in writing the terms and conditions of the Disciplinary Suspension, including the extent of the student's continued access to ACOM facilities and services.

While the student is on Disciplinary Suspension, the student is not in Good Standing. Any period of Disciplinary Suspension will be noted on the student's permanent academic record. The Associate Dean of Student Services will consider lifting the Disciplinary Suspension when the student has met the required terms and conditions and may place the student on Disciplinary Probation.

DISMISSAL

Dismissal is the permanent termination of a student's enrollment at ACOM without eligibility to reenter. The Associate Dean of Student Services has the authority to dismiss a student, with consent from the College's Office of Compliance.

A student subject to Dismissal is not in Good Standing, and any Dismissal decision will be noted on the student's permanent academic record. A dismissed student must return student identification and must complete a final checkout procedure with Student Services.

ACADEMIC DISMISSAL

A student may be subject to Academic Dismissal due to persistent poor academic performance, including but not limited to, the following conditions:

- Failing two (2) courses in the same term.
- Failing a course or clerkship rotation while on Academic Probation.
- Failing a remediation.
- Failing a repeated course or clerkship rotation.

DISCIPLINARY DISMISSAL

A student may be subject to Disciplinary Dismissal due to persistent or significant poor conduct or disciplinary issues that deviate from the College's expectations of ethical behavior or professional conduct. These include, but are not limited to, gross, severe, repeated, or illegal conduct or behavior.

GUIDELINES FOR ACADEMIC PROGRESS

The College's overarching goal is to ensure that every ACOM graduate has the skills, knowledge and judgment to assume the responsibilities of and to perform successfully as an osteopathic physician. The Associate Dean of Student Services will monitor each student's academic progress and ensure that each student is on track to meet the College's requirements for academic promotion and graduation. When the Associate Dean of Student Services determines that a student is or may be off track such that the student may not be able to achieve academic progress or satisfy the graduation requirements, the Associate Dean will take appropriate action, including for any of the following reasons:

- A student fails to meet the academic standards set forth in a course, system, or clerkship rotation.
- A student is performing at a level that places him or her at risk for academic failure.
- A student fails or is at risk of failing any level of COMLEX-USA.
- A student is failing to meet any other standards required for academic promotion or graduation.
- A student is failing to complete assignments for any course or clerkship rotation.

The Associate Dean of Student Services generally will follow the Guidelines for Academic Failures below when evaluating a student's academic performance in the Pre-Clinical and Clinical curriculums. The College recognizes that special circumstances may impact a student's academic performance, such as a death in the

student's family or personal illness. A student experiencing such special circumstances is encouraged to discuss these issues at the earliest opportunity with the Associate Dean of Student Services, who retains the discretion to consider them in the application of these guidelines.

GUIDELINES FOR ACADEMIC FAILURES

PRE-CLINICAL CURRICULUM

1. Fall OMS I Guidelines:
 - a. A student who fails Molecular Medicine or Anatomical Sciences will have the following outcome based on their final grade.
 - Grade of 65-69 will have the option to continue into the Spring semester and remediate the course during the summer between OMS I and II. The student will be given the option to repeat the semester in lieu of remediation. The student must choose this option before the first day of the Spring semester.
 - Grades below 65 will be required to repeat the Fall Term in its entirety and will be placed on Academic Suspension until the next Fall Term begins.
 - b. A student who fails any single course (or any section of a course as defined in the course syllabus) worth three (3) or fewer credit hours will be subject to remediation requirements, which must be satisfied before the beginning of the Spring Term. A student who fails remediation will be subject to Academic Dismissal. Opportunities for remediations/repeats may be rescinded if the student withdraws from any course(s) before the end of the term.
 - c. A student who fails two (2) or more courses during the OMS I Fall Term will be subject to Academic Dismissal.
 - d. A student who fails any Pre-Clinical Curriculum course or system will be placed on Academic Probation for the remainder of the Pre-Clinical Curriculum and until the student successfully completes and passes COMLEX-USA Level 1. A student who fails a course or system, including remediation, while on Academic Probation will be subject to Academic Dismissal.

Opportunities for remediations/repeats may be rescinded if the student withdraws from any course(s) before the end of the term.

2. Spring OMS I, Fall OMS-II, and Spring OMS II (Systems-Based Curriculum) Guidelines:
 - a. A student who fails in any one (1) system or course but who has not previously failed a system or course will be subject to remediation requirements, which must be satisfied before the next term begins. A student who fails remediation will be subject to Academic Dismissal. Opportunities for remediations/repeats may be rescinded if the student withdraws from any course(s) before the end of the term.
 - b. A student who fails two (2) or more systems or courses in any combination in the same term will be subject to Academic Dismissal.
 - c. A student who fails any Pre-Clinical Curriculum course or system will be placed on Academic Probation for the remainder of the Pre-Clinical Curriculum and until the student successfully completes and passes COMLEX-USA Level 1. A student who fails a course or system, including remediation, while on Academic Probation will be subject

to Academic Dismissal. Opportunities for remediations/repeats may be rescinded if the student withdraws from any course(s) before the end of the term.

CLINICAL CURRICULUM

1. A student who fails one clerkship rotation will be placed on Academic Probation until graduation.
2. A student who fails a second clerkship rotation will be subject to Academic Dismissal.

PROCEDURES FOR ACADEMIC PROGRESS AND STANDING DECISIONS

The Associate Dean for Student Services monitors each student's progress and standing each semester. If the Associate Dean determines that a student is failing to achieve the College's academic progress requirements or may have violated the College's expectations regarding ethics or professional conduct, the Associate Dean for Student Services will initiate appropriate oversight and intervention actions. These proceedings are confidential and closed to anyone who is not part of the College community. The student may select an advisor or advocate from within the College community to assist the student in preparing for and participating in any proceeding initiated by the Associate Dean of Student Services, but external representation in the proceedings will not be permitted.

The Associate Dean for Student Services or delegate generally will meet with the student who is subject to academic progress and standing measures to discuss the student's status and to learn about any special circumstances that may be impacting the student's performance. The Associate Dean for Student Services then will conduct any investigations or fact-finding activities that may be warranted.

If the investigation relates to alleged violations of the College's expectations for ethical behavior and professional conduct, the Associate Dean for Student Services, in consultation with the Office of Compliance, has the authority to direct interim action as appropriate while the investigation is conducted. Possible interim actions include a temporary leave of absence, counseling, medical treatment or other requirements intended to rehabilitate the student and protect the College community.

Once the student has had an opportunity to present any facts or explanations and the Associate Dean for Student Services has gathered the information needed to make a decision, the Associate Dean for Student Services will prepare a written Academic Progress and Standing Report summarizing the facts and circumstances regarding the student's academic performance deficiencies or violations of ethics and professional conduct requirements and take appropriate action, such as:

- An Academic Plan requiring remediation such as additional assignments, repeating a course or clerkship rotation, or repeating a term or academic year.
- Warning
- Probation

- Suspension
- Dismissal

The Associate Dean of Student Services generally will take action consistent with the Honor Code, Code of Conduct, or Guidelines for Academic Progress and Standing. Students should recognize, however, that decisions and actions may vary depending on any special circumstances, the student's academic and disciplinary history, and the student's recognition of their academic or behavioral shortcomings. A primary concern of the College is the student's commitment to fulfilling the College's requirements and demonstrating the ability to achieve the high standards expected of a physician.

Student Due Process, Appeal Board Policy

PURPOSE

ACOM has a published policy regarding due process for students.

The purpose of this policy is to establish due process procedures for a student seeking to appeal an Academic Progress and Standing decision made by the Associate Dean of Student Services.

SCOPE

This policy applies to all ACOM students who seek to appeal an Academic Progress and Standing decision and to the faculty members who serve on the Appeal Board.

POLICY & ENFORCEMENT

It is the policy of the Alabama College of Osteopathic Medicine (ACOM) to provide a fair, equitable, and consistent process for students seeking to appeal an Academic Progress and Standing decision made by the Associate Dean of Student Services.

The role of the Appeal Board is to conduct an Appeal Hearing to receive and decide the student's appeal of the actions or decisions outlined in the Academic Progress and Standing Report. The Appeal Board will fulfill its responsibilities fairly and objectively, without bias for or against the appealing student.

A student seeking an appeal of an Academic Progress and Standing decision by the Associate Dean of Student Services must initiate the appeal by filing a written notice of appeal with the Associate Dean of Student Services. The written notice of appeal must be filed no later than ten (10) days following the student's receipt of the Academic Progress and Standing Report. The notice of appeal should specify the actions or decisions being appealed, provide a detailed explanation of the basis for the appeal, summarize, and include any documentation or evidence supporting the appeal, and describe the relief sought by the student on appeal.

As soon as possible following receipt of the notice of appeal, generally within five (5) business days, the Associate Dean of Student Services will notify the student of the composition of the Appeal Board, which will include a minimum of three (3) members. The Associate Dean of Student Services will designate the chair of the Appeal Board and provide contact information for the chair to the student.

As soon thereafter as is practical, the chair of the Appeal Board will advise the student of the details regarding the Appeal Hearing and the procedures to be followed, including the time and place where the hearing will be held and the deadline for the student to advise the Appeal Board

of any witnesses the student intends to call. These witnesses may be internal or external to the ACOM community.

The Appeal Board has the discretion to adopt any hearing protocols it determines to be appropriate for the appeal under review. Appeal Hearing protocols typically will include at least one (1) live hearing where the student will have the opportunity to present arguments to the Appeal Board and the Appeal Board members will be able to question the student. Although not required, the Appeal Board may call the Associate Dean of Student Services or other persons for testimony and questioning. The student generally will not have the right to question any hearing participants other than the witnesses called by the student.

The Appeal Hearing will be an informal proceeding, and no particular rules of evidence will be used. The Appeal Hearing is private and closed to anyone outside the ACOM community. The student may select a person from within the ACOM community to serve as an advisor to the student at the Appeal Hearing, but the advisor may not actively participate except as invited by the Appeal Board.

The student and their advisor may be present during the course of the hearing, as may the Associate Dean of Student Services. Any witnesses called by the student or other persons called by the Appeal Board will be present only during their testimony. Attendance by any other persons will be at the discretion of the Appeal Board.

Prior to concluding the hearing, the Appeal Board may invite the student to make a closing statement or provide a summation of the student's case. After adjourning the hearing, the Appeal Board will deliberate privately to resolve the appeal. Such deliberation will continue as long as is necessary and may be stayed if the Appeal Board determines that it needs additional factors or information.

The Appeal Board will render a decision by majority vote. The Chair of the Appeal Board will cast a vote only after the results are known and in the occurrence of a tie vote. The decision of the Appeal Board will be provided in writing to the Associate Dean of Student Services, who will notify the student immediately. The Appeal Board decision is final and is not subject to any further appeal.

The Associate Dean of Student Services is responsible for the enforcement of this policy.



12 FINANCIAL AND STUDENT RECORDS

2023/2024 Tuition & Fees

2023/2024 Tuition Payment Due Dates

Financial Aid Contact Information

12.1 Tuition Charges and Refund Policy

12.2 FERPA Compliance Policy

12.3 FERPA Consent to Release Student Information for Research

12.4 FERPA Rights Policy

12.5 FERPA Training Policy

2023/2024 TUITION & FEES

Tuition	
2023-2024 AY Standard Tuition Rate	\$ 59,388 (\$29,694/Fall; \$29,694/Spring)
2023-2024 AY Extended Time Tuition Rate	\$ 9,898/term
One-Time	
ACOM Supplemental Application Fee	\$ 50.00
Technology Fee	\$250.00 (OMS-I Fall term only)
Acceptance/Matriculation Fee (Deposit)*	\$ 2,000.00
* The \$2,000 Acceptance/Matriculation fee (deposit) is payable by the future student to hold a seat in the class and is non-refundable. It is credited toward tuition.	
Miscellaneous	
Late Payment Fee	\$ 50.00
Returned Check Fee	\$ 25.00
Objective Structured Clinical Exam (OSCE) Remediation Fee	\$ 50.00
ID Badge Replacement Fee	\$ 10.00
Due Dates	
23/FA Term	08/31/2023
24/SP Term	01/31/2024

Tuition Payment Plan Due Dates					
23/Fall Term			24/Spring Term		
Payment 1	25%	08/31/2023	Payment 1	25%	01/31/2024
Payment 2	25%	09/30/2023	Payment 2	25%	02/28/2024
Payment 3	25%	10/31/2023	Payment 3	25%	03/31/2024
Payment 4	25%	11/30/2023	Payment 4	25%	04/30/2024

FINANCIAL AID

The administration of financial aid programs at ACOM complements and serves the educational programs of the institution by facilitating student access to medical education. The services provided by the Office of Financial Aid are necessary for the operation of the College and will be provided through a cooperative relationship with other departments within ACOM. The needs of the student will remain paramount in all decisions.

Financial aid policies, application instructions, and other resources are available on the ACOM website, in the Student Financial Aid Guide, and in the Financial Aid Office. Additional information can be obtained by contacting the Office of Financial Aid at (334) 699-2266 or financialaid@acom.edu.

Tuition Charges, Payments and Refund Policy

PURPOSE

The purpose of the Tuition Charges and Refund Policy is to define the policy and procedure for tuition charges and tuition refunds.

SCOPE

The Scope of this policy includes all ACOM students.

POLICY & ENFORCEMENT

Tuition Charges

ACOM's Board of Directors approves the College's Standard Tuition Rate on an annual basis. All D.O. students enrolling in ACOM courses provided within an academic year are assessed tuition at the prevailing Standard Tuition Rate. The Standard Tuition Rate is billed to students in two equal, flat-rate installments, at the beginning of fall and spring terms. Students are required to pay a minimum of four years (or eight terms) of tuition at the Standard Tuition Rate. Students who have paid the Standard Tuition Rate for eight terms will be assessed the prevailing Extended Time Rate for enrollment in additional terms required for completion of the D.O. degree.

Exceptions

- Students admitted with advanced standing are not required to pay tuition for the portion of the curriculum for which they receive credit upon admission.
- Students enrolling as ACOM Fellows have their minimum tuition payment obligations reduced by one year (or two terms).

Tuition Payments

Online payments may be submitted via the ACOM Self-Service portal. Note: There is a fee to pay online with a debit or credit card. There is no fee to pay with an electronic check using the bank routing and account number.

Paper checks may be submitted in person to the Bursar's Office. Checks may also be submitted by mail to the address below.

Alabama College of Osteopathic Medicine ATTN: Bursar
445 Health Sciences Blvd.
Dothan, AL 36303

See Student Handbook for Due Dates

Late Payment Fee

If a student's balance for a term is not paid in full by the due date, a late fee of \$50.00 may be assessed.

Veterans Affairs Delayed Disbursement Statement

Students utilizing Veterans Affairs (VA) education benefits shall not be charged a penalty, including assessment of late fees, denial of access to classes, libraries, or other institutional facilities, or be required to borrow additional funds because of the individual's inability to meet their financial obligations due to the delayed disbursement of a payment to be provided by the Department of Veterans Affairs.

Registration Holds

The Bursar may place a registration hold on the account of a student who owes a past due balance. The hold will prevent the student from registering for the next term, receiving transcripts, viewing grades, or receiving a diploma. Once a past due balance has been paid in full, the hold will be removed.

Returned Checks

Check and ACH payments are periodically returned by the bank for a variety of reasons. When this occurs, the payee must repay the debt along with a penalty, and the ACOM must take steps to minimize the risk of repeated returned payments. There will be a \$25.00 fee assessed for any returned check.

Tuition Refunds

A student who cancels, withdraws, or is suspended or dismissed will receive a refund of tuition charged for the term based on the table shown below. The calculation will be based on a student's earliest course start date within the term.

Withdrawal Date	Percentage Refunded
During first week	100%
During second week	75%
During third week	50%
After third week	0%

FERPA (Family Educational Rights and Privacy Act) Compliance Policy

PURPOSE

Alabama College of Osteopathic Medicine (ACOM) provides policies and procedures to ensure an accurate, confidential, and secure system for official student record keeping that includes admissions, advisement, academic and career counseling, evaluation, grading, credits, and the training of faculty and staff in the regulations regarding these records, Family Educational Rights and Privacy Act (FERPA). The purpose of this policy is to explain the methods the Alabama College of Osteopathic Medicine (ACOM) uses to protect the privacy of student education records and ensure secure record-keeping in accordance with FERPA regulations.

SCOPE

This policy applies to all ACOM employees, contractors, students, and other individuals who work with or have access to ACOM student education records.

POLICY & ENFORCEMENT

ACOM is committed to protecting the privacy of all student education records as outlined under the Family Educational Rights and Privacy Act of 1974 (FERPA). All ACOM employees are required to participate in FERPA training overseen by the Office of the Registrar at the time of hire and at least biennially thereafter.

Employees are informed of their rights for accessing student academic records, including education records maintained in the Student Information System. These rights are communicated by the Office of the Registrar and enforced by the Information Systems department. The appropriate level of access (*i.e.*, editing, viewing) is granted after the Information Systems department has confirmed with the employee's supervisor that the information is necessary for the employee to carry out such employee's job, also known as legitimate educational interest.

Copying student personally identifiable information (PII) (paper or electronic) without prior authorization or saving PII on flash drives or hard drives that are not properly encrypted, is also prohibited. ACOM servers maintain a secure environment that is FERPA compliant. For storage on mobile media or environments outside of ACOM's network, employees should check with the Information Systems department to determine the appropriate level of security and/or encryption. The Information Systems department will verify that the requestor has received FERPA training before access is allowed, and in addition, must acknowledge that an improper disclosure could lead to disciplinary action or termination of the contract.

All student education records, including records for admissions, advisement, academic and career counseling, evaluation, grading and credits, are saved daily, in addition to being stored at an offsite secure location monitored by the IS department.

Paper files, if maintained, are color coded for easy identification of its corresponding department within the Student Services division. Manila files are used to store academic records, while blue files contain financial aid records. Paper files are kept in locked fire-resistant filing cabinets located in the Records room within the Student Services suite. Files being processed will be kept temporarily in the Registrar's office under a similar secure environment. The filing cabinets are designed to provide protection under extreme conditions. The vendor certifications for these cabinets demonstrate that a high level of protection can be expected against the elements, fire, and substantial amount of impact.

FERPA also grants to students specified rights to access any portion of their education records, whether maintained electronically or by paper. ACOM abides by this FERPA regulation by informing students of their rights on an annual basis and maintaining these rights on the school website as well as in the Student Handbook. These rights are also communicated with faculty and staff annually and during FERPA training.

Research investigators are responsible for meeting FERPA and human subject protection regulations (IRB requirements) and ACOM policy when accessing Education Records. FERPA stipulates that an educational institution has the authority to determine what information may be accessed from an Education Record. If an institution denies an investigator access to information in an Education Record, the IRB cannot overrule the decision. FERPA and IRB requirements are usually met if an eligible student signs a consent form to participate in a research study and authorizes release of Education Records for research purposes. FERPA regulations specify that an eligible student must provide a signed and dated written consent in accordance with the requirements of § 99.30 before Personally Identifiable Information from Education Records is disclosed, unless the disclosure falls within one of the exceptions set forth in § 99.31.

FERPA's consent provisions require a specification of 1) the records that may be disclosed; 2) the purpose of the disclosure; and 3) the identity of the party or class of parties to whom the records may be disclosed. Education records may be released without consent under FERPA if all personally identifiable information has been removed, including:

- Student's name and other direct personal identifiers, such as the student's social security number or student number.
- Indirect identifiers, such as the name of the student's parent or other family members; the student's or family's address, and personal characteristics or other information that would make the student's identity easily traceable; date and place of birth and mother's maiden name.
- Biometric records, including one or more measurable biological or behavioral characteristics that can be used for automated recognition of an individual, including

fingerprints, retina and iris patterns, voiceprints, DNA sequence, facial characteristics, and handwriting.

- Other information that, alone or in combination, is linked or linkable to a specific student that would allow a reasonable person in the school community, who does not have personal knowledge of the relevant circumstances, to identify the student with reasonable certainty.

Please refer to the appropriate office for questions regarding the record type.

FERPA Custodians of Record:

Record Type	Custodian of Record
Academic Advising Records	Student Services Division Office of Academic Support Services
Admissions Records	Student Services Division Office of Admissions
Career Counseling Records	Student Services Division Office of Career Development
Enrollment Records	Student Services Division Office of the Registrar
Financial Aid Records	Student Services Division Office of Financial Aid
Financial Records	Division of Finance, Accounting, and Bursar's Office Office of the Bursar
Health Insurance Records	Student Services Division Office of Student Life & Alumni Affairs
Immunization Records	Clinical Sciences Division Office of Student Credentialing
Research Records	Institutional Effectiveness Division Office of Research
Student Information System Records	Student Services Division Office of the Registrar
Tutoring Records	Student Services Division Office of Academic Support Services
Veterans' Benefits Records	Student Services Division Office of Financial Aid



FERPA CONSENT TO RELEASE STUDENT INFORMATION FOR RESEARCH

I, <<Student's Full Name>>, request that the following educational records be released to <<Principal Investigator>> for <<research project title>>.

The only type of information that may be released under this consent is:

<<specific records being requested>>

I understand that this information may be released in oral, written, or electronic format as required by the principal investigator.

I understand that I have the right to inspect any written records released to the principal investigator pursuant to this consent.

I understand that I may revoke this consent upon providing written notice to the principal investigator.

I understand that until this revocation is made, this consent shall remain in effect and my educational records will continue to be provided to the principal investigator for the research project designated below.

<<Principal Investigator (PI)>>

<<Project Title>>

<<PI's Department or Division>>

<<PI's Telephone Number>>

<<PI's Email Address>>

Student's Printed Name:

Student's Signature:

Date:

FERPA Rights Policy

PURPOSE

The purpose of this policy is to identify student rights under FERPA and describe how the Alabama College of Osteopathic Medicine (ACOM) responds in compliance with the FERPA regulation.

SCOPE

This policy applies to all ACOM student records, wherever created or maintained, and describes rights of all ACOM students.

POLICY & ENFORCEMENT

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) affords students certain rights with respect to their education records. They are as follows:

The right to inspect and review education records within 45 days of the day ACOM receives a request for access.

Students may request to inspect records by completing a Request to Review Education Records form. Completed forms must be sent to the Registrar's office to make pertinent arrangements. ACOM must provide the records for review within 45 days of receipt of request. ACOM is not required to provide access to records of applicants for admission who are denied acceptance or who, if accepted, do not attend.

The right to request amendment of education records that students believe are inaccurate or misleading.

Students may challenge information in their education records that they believe to be incorrect, inaccurate, or inappropriate. This challenge must be made in writing and must be submitted to the appropriate records custodian within one (1) year of the term of the records in question. The records custodian must decide within a reasonable period of time as to whether corrective action is warranted and must provide written notification to the student and the Registrar of any corrective action approved. Students who are not provided full resolution sought by their challenge must be referred to the Associate Dean of Student Services, who will inform them of their right to a formal hearing. All requests for a formal hearing must be made in writing to the Dean and the Associate Dean of Student Services.

The right to provide written consent before ACOM discloses personally identifiable information contained in education records, except to the extent that FERPA authorizes disclosure without consent.

ACOM may disclose, without consent, “directory” information. ACOM has declared the following information to be “directory”: name, address, telephone listing, date and place of birth, major field of study, dates of attendance, degrees and awards received, participation in student activities, photographs, educational institutions attended, enrollment status, anticipated graduation date, class level, residency program matched, and e-mail address. Student social security numbers will be provided as requested in the registration process for the COMLEX and USMLE testing. For this purpose, only, the social security number will be considered directory information, subject to disclosure without prior consent from the student. Students have the right to request that the school refrain from disclosing some or all directory information. This will prevent ACOM, however, from printing the student’s name in certain publications (i.e., commencement program) or disclosing directory information requested by third parties, including spouses and parents. A student can complete a “Request to Opt-Out of Directory Information” form and submit it to the Registrar’s office.

The following exceptions permit disclosure without consent:

- School officials with legitimate educational interest;
- Other schools to which a student is transferring;
- Specified officials for audit or evaluation purposes;
- Appropriate parties in connection with financial aid to a student;
- Organizations conducting certain studies for or on behalf of the school;
- Accrediting organizations;
- To comply with a judicial order or lawfully issued subpoena; and
- Appropriate officials in cases of health and safety emergencies.

* “School officials with legitimate educational interest” are those officials who are performing a task specified in such person’s position description or by a contract/agreement, performing a task related to a student’s education, or performing a task related to the discipline of a student. ACOM has determined that the following school officials have legitimate educational interests: counselors, instructors, preceptors, contractors, site directors, site coordinators, administrators, board of directors, professional and clerical staff who directly relate to the administrative tasks of ACOM, ACOM Safety and Security Officers, ACOM attorneys, the National Board of Osteopathic Medical Examiners (NBOME), and students who serve on certain ACOM committees.

Students have the right to file a complaint with the U.S. Department of Education concerning alleged failures by the ACOM to comply with the requirements of FERPA.

Complaints regarding FERPA may be made with the following agency:

Student Privacy Policy Office U.S. Department of Education

400 Maryland Avenue, SW

Washington, D.C. 20202-8520

Phone: 1-800-USA-LEARN (1-800-872-5327) FERPA.Complaints@ed.gov

FERPA (Family Educational Rights and Privacy Act) Training Policy

PURPOSE

ACOM is committed to providing policies and procedures for training of faculty and staff pursuant to the Family Educational Rights and Privacy Act (FERPA) (20 USC 1232g; 34 CFR § 99). This policy memorializes ACOM's commitment to providing ongoing FERPA training to faculty and staff.

SCOPE

Applies to all Alabama College of Osteopathic Medicine workforce members.

POLICY & ENFORCEMENT

The FERPA training is formatted to promote employee engagement and retention of the information. The design and delivery of the training is subject to change based on the needs of the institution, changes to federal and/or local regulations, or to address relevant current events. During FERPA training, employees will learn that sharing student information without prior written consent outside of what is considered to be directory information or existing legal provisions/exclusions is strictly prohibited. The Office of the Registrar tracks the completion of FERPA training for all employees. Failure to complete FERPA training without previous authorization may result in disciplinary action taken against the employee.



13 ACADEMIC AND CAREER SUPPORT

13.1 Academic and Career Support Policy

Academic and Career Support Policy

PURPOSE

The Purpose of the Academic and Career Support Policy is to define the resources ACOM provides to guide a student through the academic program, including career preparation through residency application guidance programs.

SCOPE

The Scope of the Academic and Career Support Policy is applied to all enrolled students at ACOM.

POLICY & ENFORCEMENT

The mission of the **ACOM Center for Medical Student Success** is to help ensure that ACOM students are academically successful. Academic support can determine student strengths and weaknesses, teach specific strategies for particular courses, help with stress and anxiety issues, and improve time management skills. Academic support is proactive and students who are struggling may be contacted to receive assistance.

The Center for Medical Student Success also provides guidance in career development, including navigating the residency match process, developing a curriculum vitae, and identifying appropriate audition rotation opportunities.

ACOM offers academic support services designed to enhance learning and aid in the success of all students. These services include individual consultation and planning, large and small group presentations, and peer-assisted learning (tutoring). For third- and fourth-year students located off campus, telephone guidance is available as well as regularly scheduled in-person visits.

For first- and second-year students, peer tutoring is offered (both individual and in small groups) which is designed to help students understand the concepts covered in the curriculum and to prepare for exams and labs. Students who serve as peer tutors receive content guidance from appropriate faculty and course directors. Any student, regardless of academic performance, may attend a tutoring session. Students scoring low on any exam may be identified as needing academic assistance and referred for personal academic counseling and/or tutoring. Attendance is kept in these instances.

ACOM's peer tutoring program was established as a resource for all students desiring to improve their academic performance. Peer tutoring is a peer-mediated strategy in which students support other students on their road to academic success. To be chosen as a peer-tutor, the student must distinguish themselves academically and professionally, and they must be willing to commit the

time necessary to develop and present study materials to students both individually and in group settings. Funding for the peer tutor program is provided by the Southeast Health Foundation.

Academic assistance can include, but is not limited to, the areas outlined here:

- assessment of study habits
- board preparation
- time management strategies
- stress management techniques
- assessment tools
- study strategies
- ongoing follow-up
- acting as liaison for students with faculty and staff
- student advocacy

OMS-I students will be assigned a faculty advisor during fall orientation, and this will be an ideal time for the advisor to make initial contact with his or her advisees. Faculty are also encouraged to meet with their OMS-II advisees during the first month of school. Monthly contact is suggested but should not be less than once per term and can be initiated by the faculty advisor or the student.

Advisors will work closely with the Division of Medical Education to collectively provide assistance and support to formulate a strategy for improving academic and personal performance.

ACOM offers career development support by assisting students in preparing for audition rotations and gathering and creating the necessary information to obtain the residency of their choice. Staff offer guidance through the match process and help students position themselves for the best possible opportunities.

Career development services include, but are not limited to, the areas below:

- individual career planning
- curriculum vitae development
- goal setting
- assistance in medical specialty selection
- education regarding audition rotations
- navigating the match process
- student advocacy



14 GRIEVANCES

14.1 Grievance Policy

14.2 Accreditation Standard Complaint Policy

Grievance Policy

PURPOSE

The Grievance Policy is to provide the appropriate procedures for students to file complaints against any ACOM faculty, staff, administrator, preceptor, or core site personnel in a safe manner, free of retaliation or disciplinary action, regarding any violation of policy, licensure, disability, or discrimination. All accreditation grievances and/or complaints should refer to the “Accreditation Standard Complaint Policy”.

SCOPE

The Scope of the Grievance Policy is for all prospective students and enrolled students at ACOM.

POLICY & ENFORCEMENT

Student grievances against any ACOM faculty, staff, administrator, preceptor, or core site personnel should be submitted electronically through Maxient, the Associate Dean of Student Services or the Office of Compliance. Anonymous reporting services are available through Maxient or the Office of Compliance.

A grievance may be filed against a student for a breach in professionalism by a student, staff, faculty, administrator, preceptor, or core site personnel. Grievances submitted against a student should be submitted formally in writing through Maxient, the Associate Dean of Student Services or representative of the Office of Compliance. The appropriate ACOM representative will investigate the grievance and determine the appropriate course of action, whether the case should go before the Professionalism and Ethics Committee or be handled administratively. The student’s academic progress may or may not be interrupted while the investigation is conducted. ACOM reserves the right to recommend remediations or other solutions to appropriately address academic or professional deficits. Students may be placed on Disciplinary Warning, Disciplinary Probation, Disciplinary Suspension, or Dismissal as described above, which may alter their Academic Standing status with ACOM.

All investigations regarding student conduct, violations of policies, filed grievances, and other student matters will be administered by the Associate Dean of Student Services in conjunction with the Office of Compliance when appropriate.

All matters related to violations of any federal, state, and local laws, regulations, or guidance shall be investigated by the Office of Compliance.

Maxient link: <https://www.acom.edu/report/>

COMPLIANCE HOTLINE

Phone: (833) 490-0007

www.lighthouse-services.com/acom

STATE LICENSURE COMPLAINT PROCESS

Students wishing to file a complaint related to licensure or other issues should make these complaints in writing to the Office of the Dean. If the complaint is not satisfied through ACOM, students may report the complaint to the state authorizing agency online at <https://psl.asc.edu/External/Complaints.aspx>.

VETERANS AFFAIRS (VA) COMPLAINTS PROCESS

Any complaint against the school should be routed through the VA GI Bill® Feedback System by going to the following link: <http://www.benefits.va.gov/GIBILL/Feedback.asp>. The VA will then follow up through the appropriate channels to investigate the complaint and resolve it satisfactorily. GI Bill® is a registered trademark of the U.S. Department of Veterans Affairs (VA). More information about education benefits offered by the VA is available at the official U.S. government web site at <https://www.benefits.va.gov/gibill>.

GRIEVANCE PROCESS FOR STUDENTS WITH DISABILITIES

A party making a complaint should meet with the party with whom he/she is in disagreement and attempt to discuss and clarify the problem.

If the problem cannot be resolved, the next step is for the complainant to discuss it with the Disability Services Coordinator/Associate Dean of Student Services. If the complaint is made against the Disability Services Coordinator/Associate Dean of Student Services, the party making the complaint will meet with the Disability Services Coordinator's/Associate Dean of Student Services' immediate supervisor.

If the Disability Services Coordinator's/Associate Dean of Student Services supervisor is unable to resolve the issue, the party making the complaint will submit the complaint, using Maxient: <https://www.acom.edu/report/>. A complaint must be filed not later than 180 days from the date of the alleged discrimination unless the time for filing is extended by the designated agency for good cause shown.

The Dean will designate a reviewing authority that will initiate the investigation. The reviewing authority shall investigate each complaint, attempt informal resolution, and, if resolution is not achieved, issue to the complainant and the respondent a Letter of Findings that should include: findings of fact, conclusions, a description of a remedy for each violation found, and notice of the rights available to a complainant who is not satisfied with the resolution or decision rendered.

by the reviewing authority (see Students with Disabilities). Findings will be reported within 30 working days upon receipt of the formal complaint, if possible. A Letter of Findings will be provided to the parties involved via certified mail, return receipt requested, informing each party of the determinations.

The right of an individual to a prompt and equitable resolution of a complaint filed under this Grievance Procedure shall not be impaired by his/her right to pursue other avenues of resolution, such as filing an ADA complaint with an appropriate federal agency or department. If a satisfactory resolution is not achieved, complaints may be directed to the Regional Office for Civil Rights, U.S. Department of Education, Atlanta, GA 30301- 3104.

The reviewing authority will maintain files and records of ADA complaints and reports of investigations for a minimum of five (5) years.

Accreditation Standards Complaint Policy

PURPOSE

ACOM has published policies and procedures that include a confidential accreditation standard complaint resolution process that includes a description of how these complaints are filed with ACOM, resolved through an adjudication process (without retaliation), and maintained through ACOM's records retention system. The accreditation standard complaint filing process also includes instructions for filing confidential complaints directly with the COCA and the contact information of the COCA.

The purpose of this Accreditation Standards Complaint Policy is to confirm ACOM's commitment to excellence, integrity, and continual improvement by providing a confidential accreditation standard complaint resolution process.

SCOPE

This Policy applies to all ACOM personnel, ACOM students, those in affiliation with ACOM, and to all sites where ACOM, its students, or its affiliates engage in ACOM-sponsored activities.

POLICY & ENFORCEMENT

ACOM is committed to operating in accordance with ACOM mission, vision, and values, as well as in compliance with all applicable laws and accreditation standards. All persons affiliated with ACOM, and all ACOM-sponsored activities, whether conducted on ACOM's main campus or at an affiliate site, should reflect this commitment.

Similarly, ACOM is committed to maintaining an environment where anyone with non-compliance concerns may raise such concerns confidentially, without fear of retaliation.

Anyone who observes or has knowledge of conduct that does not appear to align with ACOM's commitment to compliance with accreditation standards is encouraged to report those concerns. ACOM has designed a confidential process for reviewing all accreditation concerns and for establishing corrective action measures, as needed. Concerns may be reported online through Maxient, by completing an accreditation complaint form and submitting it to the Institutional Effectiveness division, or by reporting such concerns to the AOA Commission on Osteopathic College Accreditation (COCA). All records of this nature will be securely maintained by the Vice President of Institutional Effectiveness through ACOM's online document retention system.

Any concerns of retaliation in connection with the filing of any complaint under this Policy should be raised to the director of **Human Resources** or to the **Compliance Officer**.

Accreditation Complaint Filing and Review Process

Implements: Accreditation Standards Complaint Policy

PROCEDURE & PROCESS

Anyone who believes that ACOM may not be operating in compliance with a standard of accreditation has the right to file a complaint, either with ACOM, with COCA, or both. The filing of a complaint is a formal request for review. To file a complaint:

- I. File an accreditation complaint with ACOM utilizing Maxient, an online platform, to confidentially share concerns with the college.
 - A. Submit a report through the ACOM Accreditation, DEI, and Other Concerns link located on the [ACOM website](#) under “[Report a Concern](#)”
 1. Reference the complaint form for the information required.
 - B. Upon receipt of a completed, formal complaint, ACOM will initiate the internal review process.
 1. The Vice President of Institutional Effectiveness and the Compliance Officer (together, the “Internal Review Team”) will review and investigate the complaint. A written report of the findings will be generated.
 2. If the complaint is substantiated, the Internal Review Team will make a recommendation for corrective action.
 3. The Internal Review Team will submit its report to the Dean. If corrective action is recommended, the Dean will assign responsibility and a timeline for accomplishing corrective action.
 4. The Internal Review Team will notify the complainant of the decision and resolution.
 5. If dissatisfied with the decision, the complainant may file a complaint with COCA.
 - C. All official records related to accreditation complaints filed with ACOM will be maintained by the Vice President of Institutional Effectiveness.
- II. File an accreditation complaint form with the Vice President of Institutional Effectiveness.
 - A. Submit a completed and signed accreditation complaint form to the ACOM Vice-President of Institutional Effectiveness.
 - B. Mail the signed complaint, as follows:

Vice-President of Institutional Effectiveness
Alabama College of Osteopathic Medicine
445 Health Sciences Boulevard
Dothan, Alabama 36303

- III. File an accreditation complaint with COCA.
- A. Submit a signed, written complaint to the American Osteopathic Association Commission on Osteopathic College Accreditation (COCA).
 - B. Mail (or email) the signed complaint, as follows:
 - American Osteopathic Association Commission on Osteopathic College Accreditation
 - 142 E. Ontario Street
 - Chicago, IL 60611-2864
 - Via email to: predoc@osteopathic.org
 - Via phone: (312) 202-8124
 - C. The COCA's accreditation complaint policies and complaint form can be found at <https://osteopathic.org/accreditation/accreditation-guidelines/>



15 ACOM PERSONNEL

Administration

Divisions

ADMINISTRATION

Richard O. Sutton, III, MS, FACHE, President
James C. Jones, DO, FACEP, Dean
Dianne Ellison, Senior Executive Assistant, Office of the Dean

DIVISIONS

ACCOUNTING / STUDENT ACCOUNTS

Melissa Cazenave, CPA, Institutional Controller
Pam Deal, BS, Senior Accountant/Bursar
Wanda Deese, GL Accounting Assistant
Debra Hurst, AS, GL Accounting Assistant

ANATOMICAL SCIENCES, MOLECULAR MEDICINE, RESEARCH & GRADUATE STUDIES

James D. Foster, PhD, Associate Dean of Anatomical Sciences, Molecular Medicine, Research & Graduate Studies
Sue Harrell, Executive Assistant
Jonathan R. Brown, PhD, Associate Professor of Microbiology & Immunology
Casey Knight Cornell, Anatomy and Research Lab Assistant
Ingrid Herrmann, MD, MPH, Associate Professor of Microbiology & Immunology
Mark J. Hernandez, PhD, Professor of Physiology & Pharmacology
Michael Ibiwoye, MD, DTM&H, MPH, PhD, Associate Professor of Anatomy
Eric Johnson, PhD, Associate Professor of Anatomy
Christina Kennedy, PhD, Associate Professor of Physiology
Lawrence LeClaire, PhD, Associate Professor of Biomedical Sciences
Jonathan Leo, PhD, Professor of Anatomy
Thomas McNary, PhD, Associate Professor of Anatomy
Benford Mafuvadze, PhD, Associate Professor of Physiology
Starla Meighan, PhD, Assistant Professor of Anatomy
R. Wayne Parker, III, PharmD, Assistant Professor of Pharmacology
Frank Petrassi, PhD, Assistant Professor of Biomedical Sciences
Caitlin Patterson, LPN, Anatomy/Research Lab Assistant
Emily Snyder, Anatomy/Research Lab Assistant
Krissy Travers, MBA, Director of Willard Body Program & Coordinator of Anatomy and Research Labs

BISTRO

Indaly Walker, Bistro Manager
Latasia Brinkley, Dietary Assistant
Zakaria Critten, Dietary Assistant
Alonzo Smith, Dietary Assistant
Keisha Williams, Dietary Assistant

CLINICAL RESOURCES

Richard R. Thacker, DO, MACOI, Associate Dean of Clinical Resources
Wil Baker, EdD, Associate Dean of Graduate Medical Education and Development
Jonathan Howell, Executive Director of Clinical Resources
Victoria Beverett, LPN, Student Credentialing Manager
Kathy Whitehead, Affiliation Agreement Coordinator
Katelyn Flynn, Preceptor Credentialing Manager
Denise Fowler, Administrative Assistant
Lana Calvert – Regional Coordinator for Northern Region
Brenda Coxwell, Regional Coordinator for Southeast Region
Becky Jordan, Regional Coordinator for Southern Region
Leigh Kincer, Regional Coordinator for Central Region

CLINICAL SCIENCES

Richard R. Thacker, DO, MACOI, Interim Associate Dean of Clinical Sciences
Lori Hogan, Executive Assistant
Julie Alexander, MD, Associate Professor of Radiology
Mitzi Amelon, DO, Faculty Physician, Clinical Educator
Sebastian Alston, MD, Professor of Pathology
Natalie Barefield, PA-C, Instructor Family Medicine/Primary Clinical Skills
Brandy Bodiford, DO, Assistant Professor of Family Medicine
Lauren Clemmons, DO, FACOFP Assistant Professor of Family Medicine and Osteopathic Principles & Practice
Martin Clemmons, DO, FACOI, Chair of Primary Care, Assistant Professor of Internal Medicine
Danielle Ferguson, MSN, RN, Manager of Standardized Patients and Clinical Skills Educator Program
Thomas J. Fotopoulos, DO, Chair of Osteopathic Principles & Practice, Associate Professor of OPP
John Giannini, Jr., MD, Associate Professor of Internal Medicine and Faculty Director of SIM Lab
Veronica Hill, NP-C, Adjunct Faculty in Clinical Sciences
Justin Hovey, MD, FAAP, FACP, Associate Professor of Internal Medicine & Pediatrics/Director of ACOM Ashford Clinic
Sara Bethany Weir, DO, Assistant Professor of Family Medicine
Gregory T. Jacobs, DO, FACEP, FAAEM, Assistant Professor of Emergency Medicine
Jeffrey Johns, DO, Assistant Professor Family Medicine & OPP
Melinda Ledbetter, PA-C, Instructor of Family Medicine & Primary Clinical Skills
James Lyons, MD, Associate Dean of Medical Education, Professor of Pathology & Family Medicine
James Nolin, NP-C, Instructor in FM and PCS
Sandra Parker, MD, Associate Professor of Behavioral Medicine
Praful Patel, MD, FACOG, Chair of Specialty Medicine, Assistant Professor of OB/Gyn & Surgery
Katie Price, MD, Adjunct Professor
William Barron, MD, Adjunct Professor
Sherry Roach, Assistant Professor of Surgery
Melanie Nichols, MD, Assistant Professor of Internal Medicine
Aubrey Lee Scott, MD, FAAP, Assistant Professor of Pediatrics
Dianne Walker, Simulation Curriculum Coordinator
Renee Woodham, LPN, Director of the Clinical Competency Center
April Zorn, MSRS, RT, R (ct), PES and SIM Activities Manager
Justin Bonds, Simulation Instructor & Technical Support

COMMUNICATIONS & MARKETING

Mark Stewart, Director of Marketing
Zac Chatham, Digital Communications Specialist
Rachel Massieu, Communications & Marketing Coordinator

COMPLIANCE

Eugenia Thomas, JD, CHC, Compliance Officer

FACILITIES

Jeremy Bess, Facilities Manager
John Hamm, Building Maintenance Technician
Marcus McLendon, Building Maintenance Technician
Jamarcus Reynolds, Building Maintenance Technician
David Andrews, Building Maintenance Technician

ENVIRONMENTAL SERVICES

Correy Willis, Sr., EVS Supervisor
Danny Forrester, EVS Specialist
Rose Wilson, EVS Specialist
Christopher Sawyer, EVS Specialist
Andrea Dunlap, EVS Specialist

HUMAN RESOURCES

Kevin Broyles, Director of Human Resources

INFORMATION SYSTEMS

John Abraham, MBA, Director of Information Systems
Stephen Dansby, Network Infrastructure Engineer
Howard A. Harrison, BA, Database Systems Analyst
Michael Kelly, BA, SharePoint Administrator
Lane Bess, Systems Analyst
Nick Nolen, BA, Systems Analyst II
Jason Steele, BA, Infrastructure Manager
Robert Wileman, BS, Senior Database Systems Administrator
Scottie Penley, Systems Analyst

INSTITUTIONAL EFFECTIVENESS

Carmen Lewis, PhD, MBA, Vice President of Institutional Effectiveness
Wynne Lewis, BS, Executive Assistant
Sherry Barfield, Continuing Medical Education (CME) Coordinator
Lisa Ennis, MS, MA, MPH, DrPH Director of Learning Resources, Professor of Library & Information Sciences
Kristen Helms, PharmD, Assistant Dean of Faculty Development
Rahul Garg, PhD, M.Pharm, Director of Evaluation & Outcomes Assessment
Karen Loftin, Accreditation & Program Evaluation Coordinator
Michelle Miller, ASN, Senior Technical Library Associate
Susie White, MA, Contracts and Policy Manager, Interim DEI Officer

MEDICAL EDUCATION

James Lyons, MD, Associate Dean of Medical Education
Jonathan Leo, PhD, Senior Assistant Dean of Student Advancement
Fred Helms, Ed.D., Assistant Dean of Academic & Career Support
Kim Chosie Clark, LPC-S, CAP, Director of Academic Support Services
Jaishree Patel, PharmD, Director of Career Development
Melanie Elmore, MBA, Assistant Director of Career Development
Deanna Averett, MS, Pre-Clinical Curriculum Manager
Jill Blount, Pre-Clinical Curriculum Coordinator
Katelyn Abraham, Clinical Curriculum Coordinator
Kandice Scott Bladen, Clinical Curriculum Manager
Priscilla Mixon, MBA, Clerkship Systems Analyst

SECURITY

MaryAnn May, PhD, Director of Campus Safety and Security
James Andrews, Security Supervisor
Walter R. Majors, Security Representative
Matthew Barnwell, Security Representative
Robert Baumgardner, Security Representative
J. Buddy Crosby, Security Representative
Johnny Dixon, Security Representative
Kyle Gieselmann, Security Representative
John Christopher Harrison, Security Representative
Jerry Jackson, Security Representative
Don Johnson, Security Representative
Ros Pennywell, Security Representative
Scott Smith, Security Representative
Kurt Welte, Security Representative

STUDENT SERVICES

Philip D. Reynolds, PhD, Associate Dean of Student Services
Tasha Maxwell, Admissions Counselor
Tara Ryals, MBA, EdD, Executive Director of Enrollment Management
Anna Elizabeth Capps, MS, Enrollment Marketing Specialist
Linda Goodson, RN, Director of Admissions and Enrollment
Audrey Bawcum, M.Ed. Director of Student Life & Alumni Affairs
Hannah Taylor, M.Ed., Student Leadership & Activities Coordinator
Travis O. Cobb, MBA, Director of Financial Aid & Title IV FSA Coordinating Official
Tina Skipper, Financial Aid Administrator & Veterans' Certifying Official
Yasmine Hill, MPhil, MS, PhD, Registrar
Catherine Jackson, MBA, Associate Registrar
Nicole E. Wallace, Assistant Registrar
Emily Wood, Executive Assistant