



# STUDENT HANDBOOK

2020-2021



**ALABAMA COLLEGE OF  
OSTEOPATHIC MEDICINE**

# Alabama College of Osteopathic Medicine

445 Health Sciences Blvd., Dothan, AL 36303

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[www.acom.edu](http://www.acom.edu)

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## COLLEGE INFORMATION

### 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](mailto:info@acom.edu)  
Website: <http://www.acom.edu>

#### ADMISSIONS

Director of Admissions  
Phone: (334) 699-2266  
Email: [admissions@acom.edu](mailto:admissions@acom.edu)

#### STUDENT RECORDS

Registrar & Director of Student Tracking  
Phone: (334) 699-2266  
Email: [registrar@acom.edu](mailto:registrar@acom.edu)

#### FINANCIAL AID

Director of Financial Aid  
Phone: (334) 699-2266  
Email: [financialaid@acom.edu](mailto:financialaid@acom.edu)

#### STUDENT ACCOUNTS

Bursar  
Phone: (334) 699-2266  
Email: [studentaccounts@acom.edu](mailto:studentaccounts@acom.edu)

#### COMPLIANCE HOTLINE

PHONE: (833) 490-0007  
WEBSITE: [www.lighthouse-services.com/acom](http://www.lighthouse-services.com/acom)

## ACADEMIC CALENDAR 2020 - 2021

2020 Fall Term: July 6, 2020 – January 3, 2021	
Clerkship Rotations Begin	July 6, 2020
OMS-I Orientation	July 20-22, 2020
OMS-I Classes Begin	July 20, 2020
OMS-II Classes Begin	July 27, 2020
Labor Day*	September 7, 2020
Constitution Day	September 17, 2020
Thanksgiving Break*	November 25-29, 2020
Classes End	December 13, 2020
Clerkship Rotations End	January 3, 2021

2021 Spring Term: January 4, 2021 – July 4, 2021	
Classes and Clerkship Rotations Begin	January 4, 2021
Martin Luther King, Jr. Day*	January 18, 2021
Spring Break*	March 29 – April 4, 2021
Classes End	May 30, 2021
Memorial Day*	May 31, 2021
Independence Day*, Clerkship Rotations End	July 4, 2021
<b>*No classes in session</b>	

*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.*

## 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), a 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 10 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 from the Alabama Department of Postsecondary Education in December 2011 and 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 was completed in May 2013, and the College celebrated its historic grand opening on July 29, 2013. ACOM's inaugural class began classes on August 5, 2013 and graduated in May 2017.

## ACCREDITATION AND LICENSURE

### ACCREDITATION

The Alabama College of Osteopathic Medicine (ACOM) is incorporated under the laws of the state of Alabama as a nonprofit, 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 Associate Dean of Student Services.

"The AOA Commission on Osteopathic College Accreditation (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 December 7, 2015), page 3.) The accreditation standards are available at <https://osteopathic.org/accreditation/standards/> or by using the following contact information:

Director, Division of Predoctoral Education Phone: (800) 621-1773  
American Osteopathic Association: (312) 202-8097  
Fax: (312) 202 8397  
Email: [predoc@osteopathic.org](mailto:predoc@osteopathic.org)  
Address: 142 East Ontario Street  
Chicago, IL 60611

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## 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 Alabama Department of Postsecondary Education, 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 Associate Dean of Student Services.

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## MISSION, VISION AND CORE VALUES

### 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.

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### 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.

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### CORE VALUES

*INSPIRED*

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

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 our College 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. The core values describe how we aspire to conduct ourselves in all matters related to and representing the ACOM.

Our core values are:

**Integrity**—We are committed to carrying ourselves in a professional manner with honesty, compassion, and trustworthiness with a dedication to self-improvement in all areas of our daily interactions.

**Service**—We exercise understanding and empathy toward our patients and colleagues. As faculty, staff, students and alumni, we care for our College, the community of Dothan, the communities of our clinical training sites, and all of the patients and families that members of the ACOM family impact now and in the future.

**Passion**—We are all colleagues in the process of teaching and learning. We adhere to the principle that everyone is continually learning and that we learn from each other. The utmost commitment to the highest standards of teaching and learning is at the forefront of our educational mission.

**Innovation**—We take pride in using the most up-to-date methodologies, strategies, resources, facilities, equipment, and technology through evidence-based practice in all areas of our mission.

**Respect**—We treat all people as we would expect them to treat us. We acknowledge the dignity, humanity, and sense of self of everyone.

**Excellence**—We understand that we project the image of the Alabama College of Osteopathic Medicine in all that we do as faculty, staff, students, administrators, and alumni. We are committed to our brand and our actions being synonymous with excellence.

**Diversity**—We understand that our colleagues, students, and patients come from varied cultural, social, and economic backgrounds. We strive to treat everyone with the same degree of acceptance and deference.

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## 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.

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## 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.

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## 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.

## POLICY AND STATEMENT OF NON-DISCRIMINATION

The Alabama College of Osteopathic Medicine does not discriminate on the basis of age, race, color, sex, gender, gender identity, sexual orientation, religion or creed, national or ethnic origin, or disability in its programs, activities, hiring, or the admission of students.

This policy applies in recruitment and admission of students, employment of faculty and staff, and scholarship and loan programs. This policy is also followed in the operation of all other programs, activities, and services of the College.

## STATEMENT ON DIVERSITY

The Alabama College of Osteopathic Medicine recognizes, values, and affirms that diversity contributes richness to the College and enhances the quality of education. Students, faculty, staff, and administrators are valued for their diversity. ACOM is committed to providing an academic and employment environment in which students and employees are treated with courtesy, respect, and dignity. It is the policy of ACOM that no student or employee shall be excluded from participating in, be denied the benefits of, or be subjected to discrimination in any program sponsored by ACOM.



## PROFESSIONAL CONDUCT STANDARDS

### ACOM CODE OF CONDUCT

Recognizing the importance of providing ethical and professional guidance for the College and acting through its Board of Directors, ACOM promulgates this Code of Conduct.

ACOM's ethical and legal obligations pertain to its various facets. As a leading academic institution, ACOM must uphold the tenets of honesty and integrity while providing the highest quality of instruction to its students and effectively equipping its employees to supply this education. As an Alabama nonprofit corporation, ACOM is prohibited from engaging in any activity of which the primary purpose is to financially benefit an individual. As an employer, ACOM must provide comprehensive guidance to its employees on what is expected of them and in avoiding conflicts of interest. Finally, as the academic constituent of Southeast Health, ACOM and the members of the ACOM community are prohibited from participation in any pursuit that might jeopardize the outstanding reputation of either institution.

ACOM is committed to upholding the highest standards of ethical behavior. The Code of Ethics of the American Osteopathic Association has been adopted as an additional standard for professional conduct for ACOM clinical faculty and ACOM students. Furthermore, the ACOM Code of Academic and Professional Ethics has been patterned after the American Association of University Faculty Statement on Ethics.

It is the responsibility of ACOM and each member of the academic community to comply with all applicable laws and regulations. All members must be cognizant of the legal requirements and restrictions applicable to their respective positions and duties. The College will implement programs to further such awareness and will monitor and promote compliance.

### ACOM HONOR CODE

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:

#### **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.

### **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.

### **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.

### **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.

### **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.

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.

## AOA CODE OF ETHICS

The American Osteopathic Association's (AOA) Code of Ethics provides guidance on medical ethics and professional responsibilities. Areas of focus include interacting with patients, engaging in professional relationships and conducting research.

The 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, or 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.

*AOA Code of Ethics* (<https://osteopathic.org/about/leadership/aoa-governance-documents/code-of-ethics/>)

## GENERAL CONDUCT POLICIES

### DRUG FREE CAMPUS AND WORKPLACE POLICY

All students must comply with the Drug Free Campus and Workplace Policy. The full policy is included in the ACOM Security and Fire Safety Report. The report is available online at <https://www.acom.edu/consumer-information/>.

### TOBACCO FREE CAMPUS

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.

### STUDENT IDENTIFICATION BADGES

Upon matriculation, each student shall be issued an ACOM Photo Identification Badge (ID Badge) to which the following rules apply:

- ID Badge must be worn in a highly visible manner while on property owned or controlled by ACOM.
- Each student is responsible for the control and use of his or her ID Badge. Loaning or transferring an ID Badge to any other person is prohibited.
- Alteration or duplication of an ID Badge is prohibited.
- Students must immediately report a lost or stolen ID Badge to the Office of Information Systems. Reports may be submitted in person or by sending an email to [support@acom.edu](mailto:support@acom.edu) from an ACOM-issued email address.

- Each student's ID Badge remains the property of ACOM and must be returned upon the student's permanent withdrawal or dismissal from the College.
- Each student must present his or her ID Badge when requested by ACOM administrators, faculty, staff, or other persons acting on behalf of the College.
- Replacement ID Badges may be obtained through the Office of Information Systems for \$10.

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## FIREARMS AND POTENTIALLY DANGEROUS ITEMS

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 the College 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 in excess of four inches in length
- 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).

This policy shall not apply to duly designated law enforcement officers while in the discharge of their lawful duties. Additional exclusions may be granted in writing by the Director of Campus Safety and Security.

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## FOOD AND BEVERAGES IN LABORATORIES AND AUDITORIUMS

The consumption of food and beverages in the laboratories is prohibited. With the exception of drinks contained in spill-proof containers, the consumption of food and beverages in the auditoriums is prohibited.

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## HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)

Students must abide by the rules established by the Health Insurance Portability and Accountability Act (HIPAA) with a focus on maintaining the privacy of Protected Health Information (PHI). This includes the prohibition of discussing patient information in an inappropriate manner or setting.

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## EMAIL ACCOUNTS

All students will be given an ACOM e-mail address. This is the official means for ACOM representatives to communicate with medical students, and it is the student's responsibility to check e-mail accounts on a regular

basis. During orientation, representatives from the Office of Information Systems will make a presentation about the rules and policies for using the ACOM e-mail account.

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## CELL PHONE USAGE

Non-academic use of cell phones while in class or during clerkship rotations is prohibited.

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## INTERNET USAGE

Individuals given Internet access via ACOM computers are expected to use the Internet to enhance the performance of their work and study responsibilities. No one shall place school material (copyrighted software, internal correspondence, confidential materials, etc.) on any publicly accessible Internet site without permission.

Unacceptable uses of the Internet on ACOM computers include, but not limited to, the following:

1. Use for illegal purposes
2. Downloading or using copyrighted materials in violation of copyright laws and regulations
3. Any use for commercial or for-profit purposes
4. Using software in violation of license and/or software agreements
5. Any use for product advertisement
6. Promotion of personal political beliefs
7. Accessing or processing pornographic material
8. Shopping, stock trading, and other personal business
9. Downloading music files

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## SOCIAL MEDIA POLICY

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.

1. 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.
2. These obligations apply regardless of where access and use originate.

3. 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.
4. 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 his/her 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).
5. 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 the patient care setting 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.

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## UNAUTHORIZED RECORDINGS

The use of devices capable of capturing still or video images or audio recordings, including cell phones, in any laboratory or clinical setting is prohibited. Additionally, students are not permitted to take photographs or record audio or video in classrooms without prior permission of the instructor. The use, transmission, and/or distribution of any unauthorized recording is also prohibited.

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## COPYRIGHT INFRINGEMENT POLICY

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](http://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-sources-onli>) 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.

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## PROFESSIONAL APPEARANCE

All ACOM students are expected to present themselves in a professional manner with respect to attire, grooming, personal hygiene, and demeanor. Students should not wear clothing that violates the Standards or Dress Code below because this may be provocative or distracting to other members of the ACOM community. Students who report to the campus or to a clerkship rotation dressed inappropriately will be asked to leave, change clothes, and return in appropriate attire.

### GENERAL STANDARDS FOR ALL ACADEMIC SETTINGS

- Students should refrain from wearing perfume, cologne, or scented body sprays.
- Students should maintain neatly groomed, conservative hairstyles.
- Students should wear conservative makeup and jewelry.
- Students must conduct appropriate personal hygiene activities prior to the start of each day.
- The following types of piercings are permitted: single nose piercing, single earring in each ear. Gauges and all other types of visible piercings are prohibited.

### DEFINITIONS

Professional attire -

- Men: Dress shirt, dress pants, tie, closed-toe dress shoes and socks.
- Women: Dress or skirt not more than 3 inches above the knee, or dress pants paired with a conservative dress blouse or shirt, closed-toe dress shoes and socks.
- Men and women: A clean, pressed, white coat must be worn during patient encounters, SIM, FOSCE, OSCE, and when hosting guest lecturers.

ACOM Business Casual (the minimum dress standards when representing ACOM at a conference or public forum) -

- Men: Collared shirt (golf shirt, button-down) and long pants (khakis, slacks).
- Women: Dress or skirt not more than 3 inches above the knee or long pants paired with conservative (no visible cleavage) dress blouse or shirt.

## CLASSROOM DRESS CODE

Business casual clothing or clean scrubs are acceptable for most classroom and campus events. Professional attire is required when hosting guest lecturers.

T-shirts, tank tops, shorts, hats, and jeans are prohibited.

These standards are enforced at all classroom and campus events, and campus-wide between the hours of 7:30 am – 4:30 pm on Monday through Friday.

## OPP/OMM 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.

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 are acceptable to be worn over required T-shirt and shorts in cold weather, but must be removed or adjusted when the covered part of the body is being examined. (Long sleeve shirts/leggings may be worn under the required ACOM T-shirt and shorts to accommodate religious practices).
- Sports bras (not wide T-back styles) are to be worn under T-shirts by female students. 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 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.
- Any allowable head or extremity coverings are to be removed or adjusted when they would obscure the immediate area to be examined or treated (e.g., head, neck, upper back, fibular head). They may be immediately replaced after that portion of OPP and PCS skills training.
- 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.

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## PROHIBITED DIRECT PATIENT CARE ACTIVITIES

Students are prohibited from participation in clerkship rotations and other forms of direct patient care activities without the express written permission of ACOM. Student participation in all direct patient care activities within clinical settings is governed by the Scope of Participation guidelines. All such direct patient care activities are scheduled as formal clerkship rotations. Any clerkship rotation not officially scheduled through the Clinical Sciences Division and approved by the Clinical Resources Division will not be recognized for official credit towards graduation.

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## CONSENSUAL RELATIONSHIPS

Consensual sexual or romantic relationships between students and faculty, between students and staff members who are in a position of authority or who have access to student or testing information, or between students and patients are prohibited.

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## BACKGROUND CHECKS

Each student is required to consent to periodic background checks as a condition of enrollment. An initial background check must be conducted and reported to ACOM prior to matriculation. An updated report must be

submitted to ACOM by April 15 of the OMS-II year. Additional background checks may be required at the discretion of ACOM or ACOM's clinical training sites.

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## DRUG SCREENING

Each student is required to consent to periodic drug screening as a condition of enrollment. An initial ten-panel chain of custody drug screen must be conducted and reported to ACOM prior to matriculation. A new ten-panel chain of custody drug screen must be completed and submitted to ACOM by April 15 of the OMS-II year. Additional ten-panel chain of custody drug screens may be required at the discretion of ACOM or ACOM's clinical training sites.

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## REPORTING ARRESTS AND ILLEGAL BEHAVIOR

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 and/or the Office of Compliance.

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## UNAUTHORIZED ENTRY

Entering, attempting to enter, or remaining past authorized operating hours in any room, building, motor vehicle, or other property owned or controlled by ACOM without proper authorization is prohibited.

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## TAMPERING WITH EMERGENCY EQUIPMENT

Unnecessarily setting off a fire alarm, tampering with fire hoses, extinguishers, smoke detectors, exit signs, other emergency equipment, or blocking fire exits is prohibited.

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## UNAUTHORIZED POSSESSION OR USE OF PROPERTY

The possession or use of property owned by the College, its faculty, staff, preceptors, students, or other affiliated organizations or individuals without the owner's express consent is prohibited. A student granted temporary possession or use of property such as journals, books, or scrubs in order to participate in academic-related activities associated with a period of enrollment must return the property to its owner by the conclusion of that period of enrollment.

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## DISORDERLY CONDUCT

Disorderly conduct on property owned or controlled by ACOM or during academic training sessions, clerkship rotations, or other events associated with the College or its affiliates is prohibited. Examples of disorderly conduct include, but are not limited to, the following:

- Loud, threatening, or aggressive behavior or any other behavior which disturbs the peace or disrupts the orderly functioning of the College
- Lewd, indecent, or obscene conduct or expression made by any means
- Disruptive behavior which substantially interferes with, obstructs, or in any way negatively impacts the safety, viewing, or academic-related activities of the campus community

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## HARASSMENT

ACOM is committed to maintaining study and work environments that are 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 its students is strictly prohibited, whether by non-employees (such as contractors or vendors), other students, or its employees, and ACOM will take immediate and appropriate action to prevent and to correct behavior that violates this policy. Likewise, students are strictly prohibited from engaging in harassing behavior directed at ACOM's employees, visitors, vendors and contractors. All students and employees must comply with this policy and take appropriate measures to create an atmosphere free of harassment and discrimination. Appropriate disciplinary action, up to and including suspension, expulsion, termination from employment or being banned from ACOM properties, will be taken against individuals who violate this policy.

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## RETALIATION

To harass or threaten, to engage another person to commit an act on your behalf against, or otherwise to commit an act against another student who has reported a possible policy violation or who has participated in an investigation into the possible violation of a policy, is prohibited.

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## HAZING

Engaging in, supporting, promoting, or sponsoring hazing or violating College rules or state laws governing hazing is prohibited. Hazing is defined as any action or situation that recklessly or intentionally endangers the mental or physical health or safety of a student for purposes including, but not limited to, initiation or admission into or affiliation with any organization operating under the sanction of a postsecondary institution. It is further defined in Alabama Code 16-1-23. Hazing includes, but is not limited to, pressuring or coercing the student into violating state or federal law; any brutality of a physical nature, such as whipping, beating, branding, or exposure to the elements; forced consumptions of any food, liquor, drug, or other substance, or other forced physical activity that could adversely affect the physical health or safety of the student; and any activity that would subject the student to extreme mental stress, such as sleep deprivation, forced exclusion from social contact, forced conduct that could result in extreme embarrassment, or other forced activity that could adversely affect the mental health or dignity of the student. Hazing does not include customary athletic events or other similar contests or competitions or any activity or conduct that furthers legal and legitimate objective. Reports of hazing should be submitted according to the Grievance Policy.

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## TITLE IX POLICY STATEMENT

ACOM is committed to maintaining a safe and healthy educational and work environment free from discriminatory harassment based on age, race, color, sex, gender, 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.

ACOM's Title IX Policy and Procedures 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) 305-1009  
Cell: (334) 596-5360  
Email: [titleXcoordinator@acom.edu](mailto:titleXcoordinator@acom.edu)

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## TITLE IX AND SEXUAL MISCONDUCT POLICY AND COMPLAINT PROCEDURES

### I. WHEN THIS POLICY APPLIES

#### A. 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 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 Institutional Compliance Officer.

#### B. Sexual Harassment

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).

**C. Scope of the Title IX Policy**

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 student misconduct as potential violations of the ACOM Honor Code.

**II. 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, which will initiate ACOM's response, whether or not 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 or the Compliance Hotline (or by mail to the office address):

Title IX Coordinator  
445 Health Sciences Blvd.  
Dothan, AL 36303  
Tel: (334) 305-1009  
Cell: (334) 596-5360  
Email: [titleXcoordinator@acom.edu](mailto:titleXcoordinator@acom.edu)

**Compliance Hotline:**

Tel: (833) 490-0007  
[www.lighthouse-services.com/acom](http://www.lighthouse-services.com/acom)

**III. 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.

#### **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 which will 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 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;
- 6) 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;
- 7) will not restrict the ability of the parties to discuss the allegations or gather evidence (e.g., no "gag orders"); and
- 8) 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.

#### **A. 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 above 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 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.

ACOM may, in 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 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 Code of Conduct. ACOM will promptly send written notice of a dismissal and reason(s) simultaneously to both parties.

## **B. Investigations**

ACOM will investigate the allegations in any formal complaint that is within the scope of this Policy. ACOM's Institutional Compliance Officer may serve as Title IX Investigator to conduct the investigation or, at the Institutional 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 adviser 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 adviser may be present to observe and provide support and counsel to the participant. The adviser may not present evidence on a party's behalf, present argument, examine witnesses, testify, disrupt, or otherwise obstruct meetings or proceedings.

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. While the burden of investigation remains on ACOM, the Investigator will provide equal opportunity for the parties to present fact and expert witnesses and other inculpatory and exculpatory evidence. The Investigator will send written notice of any 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.

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 prompt resolution. ACOM students remain subject to the ACOM Code of Conduct during investigations, and 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.

### **C. 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.

#### **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 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 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.

#### **D. 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.

ACOM's Institutional Compliance Officer may preside over the hearing and serve as decision-maker or, at the Institutional 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. Decision-maker(s) in the hearing must be free from bias or conflict of interest, and 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 decision-maker(s) will receive training on any technology to be used at the hearing.

**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.

If a party or witness does not submit to cross-examination at the live hearing, the decision-maker(s) will not rely on any statement of that party or witness in reaching a determination regarding responsibility; provided, however, that the decision-maker(s) will not draw an inference about the determination regarding responsibility based solely on a party's or witness's absence from the live hearing or refusal to answer cross-examination or other questions.

**Standard of Evidence:** The standard of evidence to determine responsibility in hearings under this Policy is the preponderance of the evidence standard. 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, 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.

## **E. 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 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.

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

**F. 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.

**G. 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 Institutional Compliance Officer may serve as decision-maker for the appeal (if the Compliance Officer was not the Investigator) or, at the Institutional 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 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.

## **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 Code of Conduct violations that do not involve sexual harassment, but arise 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 Code of Conduct 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. 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.

## 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.

## HEALTH/TECHNICAL STANDARDS AND OTHER STUDENT REQUIREMENTS

### HEALTH AND TECHNICAL STANDARDS

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 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.
- **MOTOR:** Students are expected to participate in basic diagnostic and therapeutic maneuvers and procedures, including, but not limited to, performing a complete physical examination; providing osteopathic manipulation, cardio-pulmonary resuscitation, and the application of 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 timeframe. 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 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 and breasts. Students are expected to allow the body regions under study to be accessible for 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.

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. Any requests for individual considerations should be discussed in advance with all course directors for the course that is affected.

#### **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 SIMULATION 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.

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### 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.

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### 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.

## STUDENTS WITH DISABILITIES

ACOM does not discriminate, for the purpose of admission to ACOM or access to and treatment in ACOM's programs or activities, based on disability. Facilities are accessible to all students, and every effort is made to accommodate the needs of the students with disabilities attending ACOM. ACOM will also provide reasonable accommodations to students with properly documented disabilities. If a student with a disability has any issue or question about his/her disability, the Americans with Disabilities Act ("ADA") or Section 504 of the Rehabilitation Act of 1973 (Section 504), the student should contact ACOM's Disability Services Coordinator.

The affiliate organizations, such as hospitals that administer the clinical and practical portion of ACOM's curriculum, expect our students to perform their duties in a timely manner as such ability is a critical and essential part of ACOM's curriculum and of the practice of medicine in general. A student who may have difficulty fulfilling this expectation because of a disability should discuss with ACOM's Disability Services Coordinator whether an accommodation may be available based on the individual circumstances.

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## DOCUMENTATION GUIDELINES

Students requesting accommodations or services from ACOM because of a disability are required to submit documentation to determine eligibility for those accommodations or services in accordance with Section 504 and/or the ADA. A diagnosis of a disability does not necessarily qualify a student for academic accommodations under the law. To establish that a student is covered under Section 504 and the ADA, the documentation must indicate that the disability substantially limits some major life activity, including learning.

The following guidelines are provided in the interest of assuring that documentation of a disability is complete and supports the student's request for accommodations. ACOM will determine eligibility and appropriate services, case by case, based on the quality, recentness, and completeness of the documentation submitted. The following requirements provide students, schools, and professional diagnosticians with a common understanding of the components documentation that is necessary to validate the existence of a disability, the impact on the individual's educational performance, and the need for academic accommodations for the purpose of the ADA and Section 504.

### A. A Qualified Professional Must Conduct the Evaluation

The assessment must be administered by a trained and qualified (i.e., certified and/or licensed) professional who has had direct experience with adults with disabilities. ACOM's Disability Services Coordinator will document and approve the provider.

### B. Documentation Must Be Current

Reasonable accommodations are based on the current impact of the disability on academic performance. In most cases, this means that a diagnostic evaluation should be age-appropriate and relevant to the student's learning environment and should show the student's current level of functioning. If documentation does not address the individual's current level of functioning, a reevaluation may be required. Applicants must submit their evaluation and supporting documents thirty days prior to matriculation.



### C. Documentation Must Include a Specific Diagnosis and Be Comprehensive

The documentation must include a clear and direct statement that a disability exists. The documentation also must include a summary of relevant historical information, instructional interventions, related services, and age of initial diagnosis. If the disability impacts a student's cognitive or learning abilities, the documentation must provide objective data regarding aptitude, achievement, and information processing, supported by standardized test scores and grade equivalencies where appropriate.

### D. Recommendations for Accommodations

A diagnostic report may include specific recommendations for accommodation(s). A prior history of an accommodation, without a demonstration of a current need, does not in and of itself warrant the provision of that accommodation. Each accommodation recommended by an evaluator should include a rationale. The evaluation should support the recommendations with specific test results or clinical observations. If an accommodation is not clearly identified in the diagnostic report, ACOM will seek clarification and/or additional information either from the student's evaluator or from another trained professional chosen by ACOM. ACOM will make the final determination as to whether requested accommodations are reasonable and warranted. ACOM reserves the right to request a reassessment of the student's disability when questions arise regarding previous assessment or provision of services or accommodations or when the student requests additional services or accommodations above and beyond what has been previously provided to the student.

### E. Process for Receiving Reasonable Accommodations

1. Any student seeking accommodations under ADA/Section 504 will meet with the Disability Services Coordinator/Associate Dean of Student Services to discuss needs. The student may then complete an application for services.
2. The student will discuss his/her needs and responsibilities with the Disability Services Coordinator/Associate Dean of Student Services and sign appropriate release forms.
3. The student will provide documentation of a disability in accordance with the Documentation Guidelines within ACOM. The Disability Services Coordinator/Associate Dean of Student Services will determine whether the student is eligible for services and inform the student in writing of the determination. Applications for disability services will be accepted until the last day of the drop/add period for each course or clerkship rotation.

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## REASONABLE ACCOMMODATIONS

1. The Disability Services Coordinator/Associate Dean of Student Services and the student will determine reasonable and appropriate accommodations based upon documentation (submitted in accordance with Qualification for Services above).
2. The Disability Services Coordinator/Associate Dean of Student Services will provide an Accommodation Letter for each instructor.
3. The student is responsible for discussing implementation of accommodations with faculty. Conflicts or disagreements should be referred to the Disability Services Coordinator/Associate Dean of Student Services.
4. The Disability Services Coordinator/Associate Dean of Student Services will ensure and maintain confidentiality of all student disability-related records and services as required by federal and state law.

**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.**

## ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS)

The following guidelines, recommended by the American College Health Association, are based on facts derived from the best currently available medical knowledge about Acquired Immunodeficiency Syndrome (AIDS). The College reserves the right to revise this statement based on further advanced information on AIDS. Because ACOM is an educational institution, its main response to AIDS will be educational in nature. The ACOM Health and Safety Committee will be responsible for disseminating the latest information on AIDS and AIDS prevention to the campus community. The Health and Safety Committee will serve as the AIDS information and review committee to evaluate AIDS-related situations on a case-by-case basis and continue to update the AIDS policy as necessary.

1. There is no medical justification for restricting the access of persons with AIDS, AIDS Related Complex (ARC), or a positive HIV antibody test to campus facilities or activities.
2. Most students, faculty, or staff who have AIDS, ARC, or a positive HIV antibody test will not have restricted access to facilities or activities.
3. Consideration of existence of AIDS, ARC, or a positive HIV antibody test will not be part of the initial admission decision to the institution.
4. Consideration of existence of AIDS, ARC, or a positive HIV antibody test will not be part of the decision regarding residence hall assignment except in the following situation: Immunocompromised students may require special (separate) housing accommodation for their own protection, and this will be provided when such housing is available and only with the permission and consent of the student involved. Although a good faith attempt will be made to provide such accommodations, the institution is under no obligation to create such an accommodation when one is not readily available.

Students, faculty, and staff are encouraged to inform campus authorities (i.e., students inform the Associate Dean of Student Services; faculty/staff inform their supervising Associate Dean) if they have AIDS, ARC, or a positive HIV antibody test so the College can meet the needs of the individual. All medical information must be handled by ACOM authorities in a strictly confidential manner.

1. No specific or detailed information concerning complaints or diagnosis will be provided to faculty, administrators, or parents without the expressed written permission of the individual. No recording of AIDS-related information will be entered in ACOM records without the individual's consent.
2. An effort will be made by the Health and Safety Committee and other College personnel to provide educational measures whereby the ACOM population at large may learn the facts about AIDS and AIDS prevention.
3. While the above guidelines should prove applicable in almost all AIDS-related cases, ACOM reserves the right to apply or disregard these guidelines on a case-by-case basis.

## IMMUNIZATION

### BASIC REQUIREMENTS

Documentation of a student's immunization history and status for the following diseases must be submitted to ACOM during OMS-I orientation and subsequent years as indicated below:

1. Influenza: Submit documentation of a current vaccination or a declination waiver. Additional influenza vaccinations will be required annually. Declination waivers will be approved at the discretion of ACOM administration.
2. Measles (Rubeola): Submit documentation of two vaccinations and a positive antibody titer.
3. Mumps: Submit documentation of two vaccinations and a positive antibody titer.
4. Rubella: Submit documentation of two vaccinations and a positive antibody titer.
5. Varicella (Chicken Pox): Submit documentation of a positive antibody titer.
6. Hepatitis B: Submit documentation of three vaccinations and a positive antibody titer.
7. Tetanus: Submit documentation of a Tdap booster received within the past ten years.
8. Tuberculosis: Submit documentation of a negative TB skin test administered within the past year. If the student has ever had a positive TB skin test or a BCG vaccination, documentation of a clear chest x-ray or a negative QuantiFERON-TB Gold blood test is required. These TB testing requirements must be repeated annually and reported to ACOM by April 15<sup>th</sup> of each year.

Vaccination series in progress may be deemed acceptable. If a titer is negative or equivocal, a second booster and titer may be required. Costs associated with vaccinations, titers, and all other immunization requirements are the responsibility of the student and are not included in ACOM's tuition and fees.

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## ADDITIONAL REQUIREMENTS FOR OMS-III AND OMS-IV

Each student is responsible for ensuring that the vaccination/ immunization documentation listed above is current and on file at ACOM as of April 15<sup>th</sup> of his or her OMS-II year. A student who fails to submit all required immunization documents by the beginning of the OMS-III year will be suspended and is prohibited from enrolling in clerkship rotations until the suspension has been lifted. It is, therefore, important for students to comply with the April 15<sup>th</sup> deadline so that documentation discrepancies can be addressed prior to the student's first scheduled clerkship rotation.

Students must provide immunization documents to clerkship rotations sites upon request. The hospitals and clinics that accept ACOM's students have their own requirements for proof of immunity over which the College has no control. Their requirements cannot be negotiated by ACOM or its students.

## INSURANCE REQUIREMENTS

### 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.

ACOM may act as the liaison between the insurance company and the student. 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 is automatically enrolled in 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 email the student an invoice each semester, and the student will be responsible for sending premium payments

directly to the insurance company. A student's failure to make required payments will be reported to the Associate Dean of Student Services. A student who enrolls in the ACOM insurance plan will be locked in for the full academic year unless the student can provide proof of Medicaid coverage. A student who joins the ACOM insurance plan in mid-semester will be charged a pro-rated premium for that semester.

2. The student can opt-out of the ACOM insurance plan by providing documentation of current health insurance coverage through the online waiver system provided to the student at the beginning of each semester.

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## LIABILITY INSURANCE

The College provides 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.

## ACADEMIC POLICIES

### 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:

<b>Program: Osteopathic Medicine</b>	
<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

For the purpose of certifying enrollment to the VA, courses that do not span the entire length of a term shall be certified according to the VA's Semester Credit Equivalency Table.

### CALCULATION OF CREDIT HOURS

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

#### ASSIGNMENT OF COURSE GRADES

A final numeric grade will be assigned by the appropriate Course Director(s) or Clerkship Chair and reported to the Registrar within 7 to 21 days 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 take a remediation exam. The student will have either 60 days from the final course date or until the end of the current term, whichever comes last, to complete any coursework or remediation exams. A student who fails to complete all coursework by the deadline will be assigned a grade of F.

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:

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

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## **GRADE APPEALS**

### **APPEAL SUBMISSION**

Questions regarding a course grade are to be directed to the Course Director(s) or Clerkship Chair only. Students are never to contact other faculty members, including the supervising physician who evaluated them, regarding grade disputes.

### **PRECLINICAL EXAMS**

Students who question a grade calculation or determination have 48 hours after the grade has been posted in the learning management system grade book to request a grade reconsideration from the Course Director(s). No exam reconsideration can be made after this time frame. The decision of the Course Director(s) is final.

### **PRECEPTOR EVALUATIONS**

Students receive a notification from clerkship management software when a preceptor submits an evaluation of them. It is the student’s responsibility to review these evaluations. If a student wishes to dispute any information found within the evaluation, this request must be submitted via email to the appropriate Clerkship Chair within 48 hours of the initial clerkship management software notification.

## FINAL COURSE GRADES

Students have 48 hours after the final course grade is posted to their official transcript to dispute a grade. If a student wishes to dispute a grade, this request must be submitted via email to the appropriate Course Director(s) or Clerkship Chair within this time frame.

If the student is not satisfied with the decision, he or she may appeal to the Associate Dean of Anatomical Sciences and Molecular Medicine, Research & Graduate Studies or the Associate Dean of Clinical Sciences. If the student chooses to continue the appeal, this must be done in writing within 48 hours of the date the decision was rendered. No administrative grade changes will be accepted 30 days after the grade is recorded. The decision of the respective Associate Dean is final.

## GRADE POINT AVERAGE (GPA)

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, only the highest grade will be used to calculate the class rank.

## REGISTRATION

### REGISTRATION FOR PRECLINICAL 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 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.

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## 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 is no later than 28 days prior to the anticipated start date of the clerkship rotation. The Core Site Coordinator will review and certify the registration request no later than 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. If the rotation is approved, the Core Site Coordinator will add preceptor information and any additional information students should need for the rotation. If the rotation is denied, or if a student does not submit the request within the appropriate time frame, the student must fill out an electronic Drop/Add form that will automatically be sent to the appropriate ACOM staff member(s). After this form is received, the appropriate Regional Coordinator will work with the appropriate Core Site Coordinator and student to locate an alternative clerkship rotation.

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 Coordinator to create and maintain their Student Tracker. 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. Once that request has been approved, students must request approval for registration in the clerkship management system for their desired clerkship rotation. This must be completed no later than 28 days prior to the anticipated start date of the clerkship rotation. The Student Credentialing Coordinator will review and certify the registration request no later than 14 days before the anticipated start date of the clerkship rotation. If the rotation is approved, the Student Credentialing Coordinator will add preceptor information and any additional information students should need for the rotation. If the rotation is denied, or if a student does not submit the request within the appropriate time frame, the student must fill out an electronic Drop/Add form that will automatically be sent to the appropriate ACOM staff member(s). After this form is received, the appropriate ACOM staff member will work with the student to locate an alternative clerkship rotation.

Once reviewed and approved by Clinical Sciences, registration requests will be submitted to the Registrar's Office for final review. If approved, official registration will be completed by a Registrar's Office representative, and the clerkship rotation will be added to the student's schedule. If the clerkship rotation is denied, the request will be returned to Clinical Sciences.

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

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## ADDS, DROPS, WITHDRAWALS, AND LEAVES OF ABSENCE

### DEFINITIONS

- **Course Add:** A student's registration for a course to be added to his or her schedule. See Registration section for more information.
- **Course Drop:** A student-initiated removal of a course from his or her 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 Registration section for more information.



- **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 for more information.
- **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 first Sunday of the course.
- **Official Course Withdrawal:** The act of ceasing participation in a course after the Drop/Add Deadline by submitting a Withdrawal 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 herein for more information.
- **Unofficial Course Withdrawal:** The act of ceasing participation in a course after the Drop/Add Deadline without submitting a Withdrawal 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 herein for more information.
- **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 herein for more information.
- **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.

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## 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 Student Records, Student Accounts, 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.

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## 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 Student Records, Student Accounts, 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 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.

Nothing should prevent ACOM from taking action deemed necessary, including removing a matter from consideration by the Student Progress Committee (SPC), 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.

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#### 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 his or her 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.

## READMISSION

### READMISSION POLICY

Students who are dismissed from ACOM are ineligible for readmission. Students who are withdrawn or suspended, and eligible for readmission must complete an ACOM readmission application and meet all re-matriculation requirements.

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.

### VETERANS READMISSION POLICY

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

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

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

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

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.

## ATTENDANCE

### 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.

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## 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. 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, non-family special events, etc.

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## ABSENCE FROM EXAMINATIONS

Requests for excused absences for exams, practicals, OSCEs, or mandatory student events must be made in writing to the Associate Dean of Student Services. Students who miss an exam without prior approval must meet with the Associate Dean of Student Services who, at that point, will decide if the absence is excused or unexcused. If the absence is unexcused then the student receives 0% on that exam. Exams for students with excused absences will be given at the discretion of the course directors.

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## 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).

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## 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.

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## 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.

## 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 his/her 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 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.

## COMLEX-USA EXAMS

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 ([www.nbome.org](http://www.nbome.org)).

Students must take and pass COMLEX-USA Level 1, COMLEX-USA Level 2-CE and COMLEX-USA Level 2-PE to meet ACOM's graduation requirements. Examination completion date requirements will be provided to the students. Three (3) 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.

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## 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 course work, 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 the COMSAE cut score listed in the course syllabus with a limit of three (3) COMSAE attempts. In order to remediate these course requirements, students will be required to complete an ACOM-recommended board review course at the student's expense during the summer before taking COMLEX-USA Level 1 and progressing to the OMS-III year.

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## 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 date determined each year based on the score report dates published by the NBOME.
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 Division for recommendations and an academic plan. 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 Academic Support Division for recommendations and an academic plan.
6. Three failed attempts at COMLEX-USA Level 1 will result in a recommendation for Dismissal. The student may appeal this decision to the Appeals Board.

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## COMLEX-USA LEVEL 2-CE AND LEVEL 2-PE

The following procedures and responsibilities pertain to COMLEX-USA Level 2-CE and Level 2-PE.

1. At-risk students may be required to meet with the Academic Support Division before qualifying for COMLEX-USA Level 2-CE or Level 2-PE 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, and/or clerkship performance metrics.



2. Students who fail their first attempt at COMLEX-USA Level 2-CE or Level 2-PE will meet with the Academic Support Division for recommendations and an academic plan. An ACOM-approved board review course at the student's expense may be required. Remediation courses may be offered as electives depending on Academic Support Division recommendations.
3. Students who fail their second attempt at COMLEX-USA Level 2-CE or Level 2-PE will meet with the Academic Support Division for recommendations and academic plan.
4. Three failed attempts at COMLEX-USA Level 2-CE or Level 2-PE will result in a recommendation for Dismissal. The student may appeal this decision to the Appeals Board.
5. The Academic Support Division may recommend an administrative leave of absence at any point to enable preparation for re-examination.

## BEGINNING CLERKSHIP ROTATIONS

### CORE SITE ASSIGNMENTS

Students will attend a Clerkship Fair during the Fall term of their OMS-II year to obtain information about each core site within ACOM's network. In January of their OMS-II 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.

### CLERKSHIP ELIGIBILITY

1. 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.
2. Students must have current training in Basic Life Support (BLS), Advanced Cardiac Life Support (ACLS), Occupational Safety and Health Administration (OSHA), 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.
3. 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.
4. Students must abide by the College's health insurance requirements. See Health Insurance section for details.

5. Students must abide by the College's background check requirements. See Background Checks section for details.
6. Students must abide by the College's drug screening requirements. See Drug Screening section for details.
7. Students must abide by the College's immunization requirements. See Immunization section for details.
8. 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.
9. 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 of requirements met at ACOM or previous clerkship rotation sites. For example, students may be required to attend HIPAA training at each of their training sites.

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## SCOPE OF PARTICIPATION IN CLINICAL ACTIVITIES POLICY

The following medical student patient care duties represent the minimum mandatory regulations to be considered by a policy-making body at a health care organization given the local standard of care and applicable state and federal rules, regulations, and laws to the extent such are applicable. If a hospital policy is more restrictive, then ACOM students must adhere to the policy as directed.

### DEFINITIONS

**Direct Physician Supervision:** The physician must be present in his or her office suite or on hospital/clinic grounds and immediately available to provide assistance and direction throughout the performance of the function/procedure. This does not mean that the physician must be present in the room when the function/procedure is performed.

**Personal Physician Supervision:** The physician must be in attendance in the room from beginning to end, without interruption, during the performance of the function/procedure.

**Limited Physical Examination:** This includes such components as the head/neck, skin, chest, cardiac, abdominal, neurologic and musculoskeletal exams; this specifically excludes genitourinary, breast and rectal exams.

### SCOPE OF DUTIES PERMITTED

Medical students will be supervised by ACOM-credentialed attending physicians while on ACOM clerkship rotations. 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 in order 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

**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, if the supervising physician determines the student’s readiness and a gender-appropriate chaperone is present, as indicated.
- Under Direct Physician Supervision, may write student notes regarding evaluation and management services or procedures:
  - If such student notes are to be placed in the patient chart, they must be clearly labeled as student notes and co-signed by the supervising physician within 48 hours; 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.

- May write orders on the chart which must be immediately reviewed and countersigned by supervising physician before any action is taken based on those orders.
- 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
    - Insertion of Foley catheter
  - 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 Exam
    - 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
    - EKG Interpretation
    - 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
    - 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
- Osteopathic Manipulation Treatment (OMT)
- Provide Health Promotion / Disease Prevention
- Psychiatric Assessment
- Pulmonary Function Tests
- Remove sutures or staples
- Resuscitation Team Member (specify role, i.e., Leader, Compressor, etc.)
- Skin Lesion Excision
- Surgical Assist
- Suturing, extremities (indicate type of anesthesia)
- Suturing, Face (indicate type of anesthesia)
- Suturing, Hand/digits (indicate type of anesthesia)
- Ultrasound, bedside – FAST (Focused Assessment with Sonography for Trauma)
- Ultrasound, Other than FAST
- Urinalysis by Dipstick
- Urinary Catheter Insertion
- Vaginal Delivery, Spontaneous
- Well Child Development Exam
- X-Ray Studies (i.e., chest, abdominal series, etc.)

The list above notwithstanding, duties and activities of students must not conflict with hospital policies.

#### 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

## ACADEMIC PROGRESS AND STANDING

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 Guidelines for Ethics and Professional Conduct section.

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#### 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 student will sign the Warning notification document, and a copy of the document will be given to the student and placed in the student's file. Three (3) professionalism Warnings will warrant a meeting with the Associate Dean of Student Services. Five (5) or more Warnings may result in formal disciplinary action.

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#### 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 and can be any length of time up to the remainder of the student's time in the program. 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 in order for the Disciplinary Probation status to be lifted.

A student on Disciplinary Probation is considered to be 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.

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## 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 he or she 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.

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## 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 all ACOM equipment and 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, he or she 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.

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## GUIDELINES FOR ACADEMIC FAILURES

### PRE-CLINICAL CURRICULUM

1. Fall OMS I Guidelines:
  - a. A student who fails Molecular Medicine or Anatomical Sciences 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 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.
  - c. A student who fails two (2) or more courses during the OMS I Fall Term will be subject to Academic Dismissal.
- 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.
  - 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.
- 3. 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 COMLEX-USA Level 1. A student who fails a course or system while on Academic Probation will be subject to Academic Dismissal.

### CLINICAL CURRICULUM

- 1. Any required remediation of a clerkship rotation due to didactics or other clerkship requirements will be determined by the clerkship director and the Associate Dean of Clinical Sciences before a final grade for the clerkship rotation is determined.
- 2. A student who fails his or her first clerkship rotation will be required to repeat the clerkship rotation and will be placed on Academic Probation until graduation.
- 3. A student who fails a second clerkship rotation will be subject to Academic Dismissal.

### 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 the College will not tolerate behavior or conduct that fails to meet these standards or that could damage the reputation of the College, its students, or its faculty and staff.

The College's foundational expectations regarding behavior and professional conduct are outlined in the ACOM Code of Conduct, the AOA Code of Ethics and the ACOM Honor Code. The College also expects students to observe fundamental standards of decency and good citizenship. All incidents and grievances alleging violations of the College'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.

### REQUIREMENTS FOR PSYCHIATRIC CONSULTATION, DRUG TESTING, OR MEDICAL EVALUATION AND TREATMENT

Students may be subjected to drug testing at any time during their enrollment at ACOM. The ability to think clearly and behave professionally in the academic and clinical settings are paramount to the health and safety of patients and colleagues. If at any time suspicious or questionable behavior is observed or reported, immediate drug testing may be ordered. A student's refusal to comply with such requirements may subject the student to Disciplinary Suspension or Disciplinary Dismissal.

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 Physician 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.

## 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 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 Guidelines for Academic Progress and the Guidelines for Ethics and Professional Conduct. 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.

## ACADEMIC PROGRESS AND STANDING APPEALS

Students have the right to appeal Academic Progress and Standing decisions made by the Associate Dean of Student Services. Appeals of academic determinations, including Academic Probation, Academic Suspension, and Academic Dismissal, are made to the Student Progress Committee. Appeals of professionalism or disciplinary decisions, including Disciplinary Probation, Disciplinary Suspension and Disciplinary Dismissal, are made to the Dean's Cabinet. The Student Progress Committee (SPC) is composed of faculty members appointed by the Dean of the College. The Dean's Cabinet comprises the College's senior administrative leaders. For purposes of this section, each of the Student Progress Committee and the Dean's Cabinet, or a panel thereof, is considered the "Appeal Board." Faculty members and administrators are not disqualified from serving on an Appeal Board because they have prior knowledge of the matter that is the subject of the appeal, but the Associate Dean of Student Services will endeavor to the extent practicable to identify Appeal Board members who have not been materially involved in the matter.

NOTE: Any appeal of a Determination Regarding Responsibility with respect to a sexual misconduct or sexual harassment matter is handled in accordance with the College's Title IX and Sexual Misconduct Policy and Complaint Procedures for Students, Faculty and Staff.

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### APPEAL HEARING GUIDELINES

A student seeking 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) 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 College community.

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## APPEAL BOARD RESPONSIBILITIES

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.

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## PROTOCOL AND PROCEDURES FOR APPEAL BOARD HEARINGS

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 College community. The student may select a person from within the College 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 in order 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.

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## APPEAL BOARD DECISION AND NOTIFICATION

The Appeal Board will render a decision by majority 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.

## MISCELLANEOUS ADMINISTRATIVE POLICIES AND PROCEDURES

### STUDENT RECORDS

#### FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT (FERPA)

##### NOTIFICATION OF RIGHTS UNDER FERPA

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. The Alabama College of Osteopathic Medicine 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. The College 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 his or her 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 the College, College law enforcement officials, College attorneys, the National Board of Osteopathic Medical Examiners (NBOME), and students who serve on certain College 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

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## PERMANENT ACADEMIC RECORDS

The student’s permanent academic record may contain the following:

- Name
- Social Security number or numeric identifier
- Chronological summary of ACOM coursework and grades
- Transfer credits, special credits (SC), and credits by examination (CE)
- Degree earned
- Date(s) degree requirements completed, and degree conferred

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## NAME CHANGES

Name changes should be directed to the Office of the Registrar and will only be recorded when there is sufficient evidence supporting the name change. Students must fill out a Change of Name and Contact Information Request Form and provide the following documents showing the change of name:

- Marriage license or court order
- Social security card
- Driver’s license or passport

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## CHANGING CONTACT INFORMATION

Each student is responsible for maintaining accurate and up-to-date contact information in their ACOM academic record. A student may update their current and permanent addresses and other contact information by submitting to the Registrar's Office a Change of Name and Contact Information Request form. The form is available in the Registrar's Office and online at <https://www.acom.edu/student-records/>. Students may also update their address via self-service or by submitting a written request via email to the Registrar's Office at registrar@acom.edu using their ACOM issued email account.

In addition to following the process above, clinical students must also submit updates to their designated Regional Coordinator. Failure to do so may result in failure to receive important information required to successfully complete clerkship rotations.

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## RELEASE OF INFORMATION REQUESTS

Students desiring to grant their parents and/or spouse permission to view and have access to their academic record may do so by submitting a Release of Information Request form to the Registrar's Office. The form is available in the Registrar's Office and online at <http://www.acom.edu/registrar/>.

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## TRANSCRIPT REQUESTS

Students may view their unofficial transcript online. Additionally, requests for official transcripts may be placed via self-service through the secure ACOM Portal. Former students may place transcript requests by filling out a Release of Information Request form and submitting it to the Registrar's Office. Forms may be mailed, emailed, or faxed to the Registrar's Office as long as all required sections are completed. Students may elect to pick up requested transcripts. Additional documents may also be included at the student's request.

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## ENROLLMENT VERIFICATION

Prospective and current students seeking verification of enrollment letters for financial aid reasons may submit a written request to the Office of Financial Aid. Prospective and current students seeking a verification of enrollment letter for reasons other than Financial Aid may submit a Release of Information Request form to the Registrar's Office.

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## REQUESTS FOR LETTERS OF RECOMMENDATION

Students may request that letters of recommendation be written on their behalf from Faculty and Staff members. Requests must be made in writing and submitted to the Faculty or Staff member in question. All sections of the Release of Information Request form must be completed and the information to be included in the letter must be clearly stated/specified.



## TUITION/FEES, BILLING, & FINANCIAL AID

### 2020-2021 TUITION & FEES

<b>Tuition</b>	
2020/2021 AY Standard Tuition Rate	\$ 55,440 (\$27,720/Fall; \$27,720/Spring)
2020/2021 AY Extended Time Tuition Rate	\$ 9,240/term
<b>One-Time</b>	
ACOM Supplemental Application Fee	\$ 50.00
Acceptance/Matriculation Fee (Deposit)*	\$ 2,000.00
<i>* 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.</i>	
<b>Miscellaneous</b>	
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
Laptop/Tablet/Electronic Device Replacement Fee	TBD – Depreciated value of device will be determined by Information Systems at the time of loss.
<b>Due Dates</b>	
20/FA Term	08/31/2020
21/SP Term	01/31/2021

Figures are subject to change.

### 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

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### TUITION PAYMENT PLAN

Students who wish to pay their tuition in four installments per term should contact the Bursar's Office to opt into the payment plan.

Tuition Payment Plan Due Dates					
20/Fall Term			21/Spring Term		
Payment 1	25%	08/31/2020	Payment 1	25%	01/31/2021
Payment 2	25%	09/30/2020	Payment 2	25%	02/28/2021
Payment 3	25%	10/31/2020	Payment 3	25%	03/31/2021
Payment 4	25%	11/30/2020	Payment 4	25%	04/30/2021

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### 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.

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### 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.

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### 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.

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### 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.

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### TUITION REFUND POLICY

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 first date of enrollment within the term.

<b>Withdrawal Date</b>	<b>Percentage Refunded</b>
During first week of term	100%
During second week of term	75%
During third week of term	50%
After third week of term	0%

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## VETERANS TUITION REFUND POLICY

Students receiving Veterans Education Benefits who fail to complete the program, withdraw or are dismissed for any reason prior to the completion of the program, will be charged for tuition, fees and other charges on a pro rata basis. Charges for the completed portion of the program shall not exceed the approximate pro rata portion of the total charges for tuition, fees and other charges for the full length of the program.

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## 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](mailto:financialaid@acom.edu)

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## GRIEVANCES AND COMPLAINTS

### GRIEVANCE POLICY

Student grievances against any ACOM faculty, staff, administrator, preceptor, or core site personnel should be submitted electronically to the office of the Associate Dean of Student Services or the Office of Compliance. Anonymous reporting services are available through 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 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 Student Progress 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.

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## INVESTIGATIONS

All investigations regarding student conduct, violations of policies, filed grievances, and other student matters will be administered by the office of 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.

### **COMPLIANCE HOTLINE**

Phone: (833) 490-0007

[www.lighthouse-services.com/acom](http://www.lighthouse-services.com/acom)

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## ACCREDITATION COMPLAINTS PROCESS

Students wishing to file a complaint related to the accreditation standards and procedures should make these complaints in writing to the Office of the Dean. If the complaint is not satisfied through ACOM, students may contact the Commission on Osteopathic College Accreditation (COCA) at the address below.

Director, Division of Predoctoral Education Phone:	(800) 621-1773
American Osteopathic Association:	(312) 202-8097
Fax:	(312) 202 8397
Email:	<a href="mailto:predoc@osteopathic.org">predoc@osteopathic.org</a>
Address:	142 East Ontario Street Chicago, IL 60611

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## STATE COMPLAINTS 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>.

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## 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>.

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## 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 the ACOM ADA Grievance Form. 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.

## ACADEMIC SUPPORT SERVICES FOR STUDENTS

### DIVISION OF STUDENT SERVICES

The Division of Student Services is responsible for recruitment, admissions, retention, financial aid, records, tracking of outcome data, and counseling for medical students. In addition, the Division is a center of campus life and oversees all student activities, student government functions, student clubs, student representative program and all other non-academic student life issues. The Division is committed to creating an environment that is conducive to learning so that all ACOM medical students fully reach their academic potential. The Division is directed by the Associate Dean of Student Services who oversees qualified personnel including an Executive Director of Enrollment Management, Director of Admissions, Director of Financial Aid, and Registrar. Both academic and financial aid counselors are available for ACOM medical students.

### ACADEMIC ADVISING

The faculty advisor is an important part of the overall academic advising program provided for student physicians at ACOM and the advising relationship with the student provides support, mentorship and role modeling that can benefit students not only during the medical school years but in residency and subsequent careers.

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 Center for Academic and Career Excellence to collectively provide assistance and support to formulate a strategy for improving academic and personal performance.

### CENTER FOR EXCELLENCE IN ACADEMIC AND CAREER SERVICES

The mission of the ACOM Center for Excellence in Academic and Career Services is to help ensure that ACOM students are academically successful. The services are free and individualized for each student who participates.

**The Center for Excellence in Academic and Career Services** staff includes:

- **Fred L. Helms, Ed.D.**, Assistant Dean for Academic and Career Support
- **Jaishree P. Patel, Pharm.D.**, Director of Career Support
- **Kim Chosie, LPC-S**, Director of Academic Support
- **Melanie Elmore, MBA**, Assistant Director of Career Support

## COUNSELING, PHYSICAL, AND BEHAVIORAL HEALTH CARE RESOURCES

### PHYSICAL HEALTH CARE SUPPORT

It is ACOM policy to provide recommendations for primary care providers for access to diagnostic, preventive, and therapeutic services, accessible in all locations where students receive education from ACOM.

ACOM encourages incoming students to establish primary care providers in the Dothan area early in their education. In addition, students are encouraged to establish providers as soon as possible when moving to their core site training areas in the OMS-III year. ACOM recommends the following confidential resource for physical healthcare services in the Dothan area.

The Southeast Health network of primary care providers and services offers ACOM students more choices, more convenience, more ways to take care of themselves when and where they need it.

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

\*\*For more information about Southeast Health primary care services, visit <https://www.southeasthealth.org/se-cares/> or call 855-SE-CARES (732-2737).

*\*\*ACOM students are highly discouraged from seeking medical care at the Southeast Health ACOM Ashford Clinic to maintain the integrity of the student-teacher relationship.*

Urgent care services are recommended if a primary care provider has not been established.

AllSouth Urgent Care East  
1052 Ross Clark Circle  
Dothan, AL 36303  
Ph. (334) 699-3600  
Hours: *Monday - Friday: 8 a.m. - 6 p.m.*

In addition, those students who carry ACOM's student health insurance through UnitedHealthCare are directed to a list of physical and mental health resources that are searchable on the UnitedHealthCare StudentResources webpage. Additional information about these services is included below.

## SAP

Counseling, legal and financial assistance, and mediation services to deal with personal issues and crises.

Counseling - 24/7 access to crisis intervention services and confidential counseling from licensed clinicians.

LiveAndWorkWell.com - health risk assessments, health/fitness calculators and other helpful resources.

Legal and Financial Services - provides help with issues such as credit card debt, divorce, child custody and shelter from abusive relationships.

Mediation - access to a national network of mediators to help resolve family-related disputes such as divorce, separation, child custody, visitation and support.<sup>1</sup>

Call the # on the back of your ID card or log in to [uhcsr.com/myaccount](http://uhcsr.com/myaccount)

<sup>1</sup> Free 30 minute consultation with a 25% discounted rate for additional services.

19COL3848

## HealthiestYou

A nationwide telehealth service providing members with remote access to licensed medical doctors.

- After hours access to a consultation, diagnosis and treatment plan via phone or video chat<sup>2,3</sup>
- English and Spanish speaking physicians and translation services for 170+ languages
- No consultation fees for members<sup>4</sup>
- No appointment necessary
- 13 minute average consult time

Call 855-870-5858 or visit [www.telehealth4students.com](http://www.telehealth4students.com)

<sup>2</sup> This service is not intended for medical emergencies.

<sup>3</sup> Services (and products) may vary based on state.

<sup>4</sup> When services are obtained during the policy effective dates.

## BetterHelp

A nationwide online counseling service available via ongoing text, live chat, phone, video or groupinars.

- Remote access to Psychologists (PhD / PsyD), Marriage and family therapists (LMFT), Clinical Social Workers (LCSW) and Licensed Professional Counselors (LPC)
- Counselor matching based on your goals and preferences
- No consultation fee for members<sup>5</sup>

Visit [www.counseling4students.com](http://www.counseling4students.com)

<sup>5</sup> No consultation fee for UHCSR members when services are obtained during the policy effective dates. Non-UHCSR members can access BetterHelp by registering for a paid account.



Note: As a matter of policy, any health professional providing health services, via a therapeutic relationship, must recuse him/herself from the academic assessment or promotion of the student receiving those services.

## MENTAL HEALTH RESOURCES

The Division of Student Services along with the Center for Excellence in Academic and Career Support work closely with faculty advisors to recognize individual student health and wellness issues. ACOM has four (4) resources available for students for confidential mental health and personal support.

## STUDENT AND EMPLOYEE ASSISTANCE PROGRAM

ACOM provides a student assistance program that is completely confidential and allows students an opportunity to privately discuss their issues/concerns with a Licensed Professional Counselor. The first three (3) sessions are free, and additional sessions are covered by most insurance plans, including ACOM's health insurance plan. Students are entitled to one (1) free legal consultation and one (1) free financial consultation as well.

### Contact Information:

**Andrea Godfrey, LPC**  
**334-701-3307**



This provider has also identified mental health providers at most of ACOM’s core clinical training sites where students can be referred during OMS-III and OMS-IV training.

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## WELLCONNECT STUDENT PROGRAM

Since 1991, WellConnect by Student Resource Services has provided coaching and counseling services to colleges and universities wishing to retain more students, reduce legal and liability risks, support accreditation, and provide students with the support they need to be successful. The WellConnect by SRS Program is specifically designed to help students progress toward their ultimate goal of graduation, as well as to contribute directly to the persistence, retention and graduation goals of the institution.

WellConnect Scope of Service:

- A 24/7/365 Service Toll-free line for in-the-moment support or referrals
- 5 Face-to-Face or telephone counseling sessions per distinct and separate issue per eligible individual student per year; and/or assessment, short term counseling
- Financial/Budget and Debt Consultations
- Referrals for Legal Consultations
- Provide Wellness Student/Work/Life Resources and Referrals
- Wellconnectbysrs.com website and mental health screens
- Student Orientations – unlimited webinars

24-Hour Contact Information:

Ph: 1-866-640-4777

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## ALABAMA DEPT. OF PUBLIC HEALTH/NATIONAL SUICIDE PREVENTION LIFELINE

ACOM is supported by grant funding by 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)

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## 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	
<a href="http://www.mh.alabama.gov/Downloads/COPI/Find_Mental_Health_Servces_By_County.pdf">http://www.mh.alabama.gov/Downloads/COPI/Find_Mental_Health_Servces_By_County.pdf</a>	

Alcoholics Anonymous	<a href="http://aa.org/?Media=PlayFlash">http://aa.org/?Media=PlayFlash</a>
American Council for Drug Education (ACDE)	<a href="http://www.acde.org/">http://www.acde.org/</a>
Center for Substance Abuse Treatment (CSAT)	<a href="https://csat.samhsa.gov/">https://csat.samhsa.gov/</a>
Narcotics Anonymous	<a href="http://www.na.org/">http://www.na.org/</a>
College Drinking: Changing the Culture	<a href="http://www.collegedrinkingprevention.gov/">http://www.collegedrinkingprevention.gov/</a>
Partnership for a Drug-Free Community	<a href="http://www.partnershipforadrug-freecommunity.org/">http://www.partnershipforadrug-freecommunity.org/</a>
SPECTRACARE	<a href="http://www.spectracare.org/">http://www.spectracare.org/</a>

### LOCAL TREATMENT CENTERS

Wiregrass Mental Health System	SpectraCare The Haven
104 Prevatt Road	831 John D. Odom Road
Dothan, AL 36302	Dothan, AL 36303
(334) 794-0731	(334) 794-3771

### NEEDLE-STICK AND BLOOD-BORNE PATHOGEN EXPOSURE PROTOCOL

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

1. **Immediately** wash the area, scrubbing skin with soap and water.
2. For exposures to eyes, mouth, and/or other mucous membranes, rinse with running water, normal saline, or sterile eyewash for at least ten minutes. For eye exposure, hold the eye open for irrigation.
3. **Immediately** report the incident to the attending physician or other appropriate supervising physician. See the charge nurse for assistance 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. This information can quickly be found in clerkship management system.**
  - a. Prompt evaluation and treatment is essential. Post-exposure prophylaxis and other treatment may be indicated and should be started ideally within an hour of exposure.
  - b. The student should report to the facility's emergency room as a patient for purposes of consent to treat and billing. The student's health insurance will be the primary form of insurance used for any such incident(s).
5. **Contact the Regional Coordinator and the ACOM NeedleStick Coordinator. Fill out the NeedleStick Incident Report within 4 hours of the incident.**

Students should also consult the Needle-Stick Policies & Procedures LibGuide, which provides helpful information regarding site-specific protocols. Students may also access the CDC guide for Post-Exposure Prophylaxis (PEP) as needed.

## CAMPUS LIFE

### CAMPUS FACILITIES

ACOM is housed in a 110,000 square-foot facility consisting of three (3) floors with modern technology. There are two (2) large auditoriums with seating capacity of 216 students each. The Division of Student Services is designed for interview sessions with incoming applicants, prospective students, and visitors. There are teaching facilities for gross anatomy and osteopathic principles and practice with locker room space for students. In addition, 39 faculty offices encircle 16 observation exam rooms with patient waiting areas, conference rooms, and a faculty lounge. The building also houses the Dean's Office, President's Office, Division of Clinical Resources, Division of Institutional Effectiveness, Center for Excellence for Academic and Career Support, a 6,200 square-foot Team-Based Learning Center, a 3,600 square-foot Center for Research, and 18 small-group conference rooms for students. Additionally, the campus features a 3,000 square-foot stand-alone Center for Simulation to provide dedicated space for immersive simulation training.

### STUDENT LOUNGE

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

### LEARNING RESOURCE CENTER/ LIBRARY

The Learning Resource Center/ Library provides 6 study rooms, individual carrels, and copy and printing capabilities. The Learning Resource Center houses an electronic library with technology support to provide a modern medical learning environment for ACOM students.

### 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.

## CAMPUS SAFETY

### SECURITY SERVICES DEPARTMENT

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

The Department 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.

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## INTERAGENCY COOPERATION

ACOM's Security Services Department coordinates campus safety planning, training, and operations with local law enforcement agencies, the Southeast Alabama Medical Center Security Services Department, and security representatives from regional College campuses. 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 Department will contact the Dothan Police Department and/or the Houston County Sheriff's Office. There is no written memorandum of understanding between the Department and any outside law enforcement agency.

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## JURISDICTION

The Security Services Department'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 are not authorized and 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 Corvias Campus Living, LLC, and does not fall under the jurisdiction of ACOM's security personnel. However, under a cooperation agreement between ACOM and Corvias, the Security Services Department 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.

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## PHYSICAL SECURITY AND ACCESS TO FACILITIES

ACOM takes pride in maintaining a safe but open campus. To balance the benefits of an open campus with the safety needs of an educational institution, a variety of security measures have been implemented.

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 general 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 adhere to this policy at all times.

ACOM is committed to providing a safe and secure campus through the maintenance of facilities in mitigating unsafe physical conditions. ACOM staff also work to ensure that safety and security are accounted for during project planning and implementation. Security and Facilities Department 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 Departments.

The College has instituted safety and security procedures and services, but the personal safety of each individual 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 continues to develop and implement security measures, but these measures cannot succeed without the support of faculty, staff, students, and visitors.

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## GUEST POLICY

Guests of ACOM students, faculty, and staff are required to sign in at the front security desk and be escorted at all times. Guests are expected to stay in the Student Lounge unless prior authorization has been granted by Security. Guests are not allowed in unauthorized areas of campus, including anatomy and research labs.

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## INCLEMENT WEATHER

Campus closure due to inclement weather is announced on local radio and TV stations and posted on the ACOM website. Email notifications will also be sent to student email accounts and through our emergency communications system RAVE. For more information, please refer to the ACOM Security and Fire Safety Report.

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## OTHER CAMPUS SAFETY POLICIES

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/>.

## STUDENT ORGANIZATIONS

### STUDENT GOVERNMENT ASSOCIATION

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 club funding for student activities; acts as a liaison for the medical student body; promotes osteopathic medicine; supports club and classroom activities; and works to improve the quality of life for all ACOM medical students. Students serving as SGA officers, club officers, class representatives or student ambassadors at national meetings or in any similar position must maintain an overall GPA of 2.5 or higher in their coursework. An officer whose overall grade average falls below 2.5 must have to resign. 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.

### REGISTRATION OF STUDENT ORGANIZATIONS

In an effort to encourage a formal, organized system of student activities, ACOM has adopted processes and policies concerning the registration of student organizations. The registration process is designed to permit students to create a formal organization which is intended to fulfill a common purpose, to provide opportunities for student interaction through participation in managing the affairs of the group and implementation of activities/programs, and to foster individual student growth and development through responsible involvement in co-curricular activities.

Registration of a student organization results from compliance with the criteria and conditions stated below, and it does not directly or indirectly imply the approval of the organization or its activities by ACOM. Organizations must obtain and file registration forms with the Division of Student Services, which includes the securing of an ACOM advisor, in order to take advantage of the privileges accorded registered student organizations by the ACOM.

Once a student organization receives official recognition, the organization must retain ACOM support through the following criteria:

1. Submit an Official Organization Information Form.
2. Secure a minimum of 15 founding members.
3. Submit a copy of the intended organization bylaws.
4. Submit an organization letter of intent.
5. Provide a presentation to the SGA explaining the organization's purpose and goals.
6. Obtain the leadership and advisement of a full-time faculty member or staff member.
7. Obtain Director of Student Life approval of all organizational activities and events.
8. Contribute to and support the philosophy and mission of ACOM.
9. Maintain a membership level of at least 5% of the total student population.
10. Elect a minimum of four Executive Board officers, two of which must hold the title of president and treasurer.
11. Appoint one individual on the Executive Board to serve as the TOUCH Point Coordinator.
12. Conduct an annual election of new Executive Board officers each February.

13. Complete all necessary forms (available from the Director of Student Life or on the ACOM website).
14. Complete all term requirements as stated in the SGA Constitution.
15. Complete evaluations each term in order to receive funding from the SGA.

The SGA Constitution is subject to annual evaluation and revision by the SGA Executive Board. Student Organizations should refer to the current SGA Constitution for a list of official requirements.

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## STUDENT SPONSORED EVENTS

Any on-campus or off-campus event conducted by either a student club or the SGA must be approved by the Director of Student Life. This includes, but is not limited to, all talks, seminars, exhibits, fundraisers, workshops, etc. The appropriate forms are available in the Office of Student Services and on the ACOM website.

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## MERCHANDISE AND ACOM LOGO POLICY

All ACOM student organizations must have approval from the Associate Dean of Student Services before producing organizational merchandise or distributing information to the campus community and/or the public at large. This is to ensure that all appropriate procedures and style guidelines are followed by student organizations. Approval forms may be obtained from the Division of Student Services. Any ACOM student organization that produces merchandise that violates this policy may have the merchandise confiscated and will have to replace the merchandise at the organization's own expense.

## HOLIDAYS

In addition to the mid-year break, which varies from year to year, ACOM is closed on the following designated holidays: Labor Day, Thanksgiving Day and the following Friday, Christmas Day, New Year's Day, Martin Luther King Day, Memorial Day, Fourth of July, and all related shut-downs as approved by the Dean.

## ACOM PERSONNEL

### ADMINISTRATION

Richard O. Sutton, III, FACHE, President  
James C. Jones, DO, FACEP, Dean  
Dianne Ellison, Senior Executive Assistant, Office of the Dean

### DIVISIONS

#### ACCOUNTING / STUDENT ACCOUNTS

Melissa McDaniel Cazenave, CPA, Institutional Controller  
Pam Deal, Senior Accountant/Bursar  
Debra Hurst, GL Accounting Assistant  
Roy Beebe, 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 for Anatomical Sciences, Molecular Medicine, Research & Graduate Studies  
Omer Akyol, MD, PhD, Assistant Professor of Physiology  
Jonathan R. Brown, PhD, Associate Professor of Microbiology & Immunology  
Melinda Carter, MD, PhD, Associate Professor of Anatomy  
Casey Knight Cornell, Anatomy and Research Lab Assistant  
Caleb Hamilton, PhD, Assistant Professor of Biomedical Sciences  
Mark J. Hernandez, PhD, Associate Professor of Physiology & Pharmacology  
Michael Ibiwoye, MD, DTM&H, MPH, PhD, Associate Professor of Anatomy  
Eric Johnson, PhD, Associate Professor of Anatomy  
Whitney Karriger, PhD, Assistant Professor of Anatomy  
Christina Kennedy, PhD, Associate Professor of Physiology  
Lawrence LeClaire, PhD, Associate Professor of Biomedical Sciences  
Gordon MacGregor, PhD, MBA, Associate Professor of Pharmacology  
Thomas McNary, PhD, Assistant Professor of Anatomy  
Starla Meighan, PhD, Assistant Professor of Anatomy  
Wayne Parker, PharmD, Assistant Professor of Pharmacology  
Caitlin Patterson, LPN, Anatomy/Research Lab Assistant  
Chanté Richardson, PhD, Associate Professor of Biochemistry  
Emily Snyder, Grant/Research Lab Assistant  
Krissy Travers, MBA, Director of Willd Body Program & Coordinator of Anatomy and Research Labs

#### BISTRO

Indaly Walker, Bistro Manager  
Latasia Brinkley, Dietary Assistant  
Jamarcus Reynolds, Dietary Assistant  
Keisha Williams, Dietary Assistant  
Alexia Wilson, Dietary Assistant



## CLINICAL RESOURCES

Wil E. Baker, PhD, Associate Dean of Clinical Resources

Jonathan Howell, Executive Director of Clinical Resources

Cheryl Gibson, Director of Clerkship Resources Management

Kathy Whitehead, Affiliation Agreement Coordinator

Lindsey Bock, Preceptor Credentialing Coordinator

## CLINICAL SCIENCES

Sebastian Alston, MD, Interim Associate Dean of Clinical Sciences/Professor of Pathology

Richard Thacker, DO, FACOI, Assistant Dean of Clinical Sciences & Clinical Resources, Assistant Professor of Internal Med.

Katelyn Flynn, Executive Assistant for Clinical Sciences

Katelyn Abraham, Primary Clinical Skills and Curriculum Coordinator

Julie Alexander, MD, Associate Professor of Radiology

Joseph D. Baker, II, DO, FACOFP, Associate Professor of Family Medicine and Geriatrics, Chair of Family Medicine

Natalie Barefield, PA-C, Instructor Family Medicine/Primary Clinical Skills

Jesse Basford, MD, Assistant Professor of Emergency Medicine

Victoria Beverett, LPN, Student Credentialing Coordinator & SP/CSE Program Educator

Justin Bonds, Simulation Instructor & Technical Support

Bascom Bradshaw, DO, Associate Professor of Behavior Medicine

Lana Calvert – Regional Coordinator for Northern Region

Ronda Carter, MD, Assistant Professor of Family Medicine

Lauren Clemmons, DO, Assistant Professor of Family Medicine and Osteopathic Principles & Practice

Martin Clemmons, DO, FACOI, Assistant Professor of Internal Medicine

Brenda Coxwell, Regional Coordinator for Southeast Region

Kimberly Cummings, LPN, Student Credentialing Manager

Danielle Ferguson, BSN, Coordinator of Simulation & Standardized Patient Program

Robin Fischer, MSN, MEd, NP-C, Instructor of Primary Clinical Skills

Amanda Gant, Clinical Curriculum Manager

John Giannini, MD, Associate Professor of Internal Medicine and Faculty Director of SIM Lab

Veronica Hill, NP-C, Instructor of Primary Clinical Skills

Justin Hovey, DO, Associate Professor of Internal Medicine & Pediatrics and Director of ACOM Ashford Clinic

Jeffrey Johns, DO, Chair of Osteopathic Principles & Practice/Assistant Professor Family Medicine & OPP

Becky Jordan, Regional Coordinator for Southern Region

Leigh Kincer, Regional Coordinator for Central Region

Melinda Ledbetter, PA-C, Instructor of Primary Clinical Skills

James Lyons, MD, Professor of Pathology & Family Medicine

Priscilla Mixon, MBA, Clerkship System Analyst

James Nolin, NP-C, Instructor of Simulation

Heath Parker, DO, Associate Professor Internal Medicine & Pediatrics

Praful Patel, MD, FACOG, Chair of OB/Gyn, General Surgery & Trauma

Dianne Walker, Simulation Curriculum Coordinator

Renee Woodham, LPN, Director of the Clinical Competency Center

April Zorn, PES and SIM Activities Manager

### COMMUNICATIONS & MARKETING

Sarah Senn, MA, Director of Communications & Marketing  
Rachel King, Digital Communications Specialist

### COMPLIANCE

Ashley Nelson, Title IX Coordinator and Policy & Procedure Analyst

### FACILITIES

Jeremy Bess, Facilities Manager  
John Hamm, Building Maintenance Tech  
Monterrius Tiller, Building Maintenance Tech  
Marcus McLendon, Grounds  
Ronald Snyder, Receiving & Distribution  
Danny Forrester, EVS Specialist  
Randy Griffin, EVS Specialist  
D. Wesley Killingsworth EVS Specialist  
Correy Willis, Sr., EVS Supervisor  
Rose Wilson, EVS Specialist

### HUMAN RESOURCES

Kevin Broyles, Director of Human Resources

### INFORMATION SYSTEMS

John Abraham, MBA, Director of Information Systems  
Stephen Dansby, Network Infrastructure Engineer  
Alex Davis, Infrastructure Analyst II  
James Echols, Simulation System Analyst  
Howard A. Harrison, Database Systems Analyst  
Michael Kelly, SharePoint Administrator  
Lane Bess, Systems Analyst  
Nick Nolen, Infrastructure Analyst II  
Jason Steele, Infrastructure Manager  
Robert Wileman, Database Systems Applications Administrator

### INSTITUTIONAL EFFECTIVENESS

Carmen Lewis, PhD, MBA, Vice President of Institutional Effectiveness  
Wynne Lewis, Executive Assistant, Institutional Effectiveness  
Sherry Barfield, Continuing Medical Education (CME) Coordinator  
Maria Crase, Director of Assessment & Curriculum Delivery  
Lisa Ennis, MS, MA, Director of Learning Resources, Professor of Library & Information Sciences  
Karen Loftin, Accreditation & Program Evaluation Coordinator  
Michelle Miller, Senior Technical Library Associate  
Nicole Mitchell, MLIS, MA, Information Technology Librarian, Associate Professor of Library & Information Sciences  
Emmanuel Segui, MS, Data Scientist

Audrey Vasauskas, PhD, Director of Research & Grant Development/Associate Professor of Physiology  
Susie White, MA, Instructor, Information Technology Librarian

#### SECURITY

Walter R. Majors, Security Supervisor  
J. Buddy Crosby, Security Rep.  
Johnny Dixon, Security Rep.  
Kyle Gieselmann, Security Rep.  
Jerry Jackson, Security Rep.  
Don Johnson, Security Rep.  
William Rollins, Security Rep.

#### STUDENT SERVICES

Philip D. Reynolds, PhD, Associate Dean of Student Services  
Fred Helms, EdD, Assistant Dean of Academic and Career Support Services/Assistant Professor of Behavioral Medicine  
Catherine Jackson, Executive Assistant for Student Services  
Ashley Allen, Administrative Secretary  
Deanna Averett, Curriculum & Assessment Coordinator  
Jill Blount, Pre-clinical Curriculum Coordinator  
Audrey Bawcum, Director of Student Life & Alumni Affairs  
Kim Chosie-Clark, LPCS, CAP, Director of Academic Support  
Travis O. Cobb, MBA, Director of Financial Aid & Title IV FSA Coordinating Official  
Melanie Elmore, MBA, Assistant Director of Career Development  
Linda Goodson, RN, Director of Admissions and Enrollment  
Jerrica Knight, Assistant Registrar  
MaryAnn May, PhD, Director of Campus Safety and Security  
Ashley Outlaw, MSM, Enrollment Marketing Specialist  
Jaishree Patel, PharmD, Director of Career Development/Associate Professor of Pharmacology  
Tara Ryals, MBA, Executive Director of Enrollment Management  
Tina Skipper, Financial Aid Administrator & Veterans' Certifying Official  
Saimara Soto, Registrar and Director of Student Tracking  
Kendretta Thornton, Administrative Secretary  
Nicole E. Wallace, Assistant Registrar  
Meghan Woodham, Assistant Director of Admissions

## GLOSSARY OF TERMS AND ACRONYMS

<b>AA</b>	An Affiliation Agreement is between an institution and another entity for purposes of providing an educational opportunity for students generally in a supervisory situation.
<b>AACOM</b>	The <b>American Association of Colleges of Osteopathic Medicine</b> is a non-profit organization that supports colleges of osteopathic medicine in the United States and serves as a unifying voice for osteopathic medical resources. <a href="http://www.aacom.org/">http://www.aacom.org/</a>
<b>AAFP</b>	The <b>American Academy of Family Physicians</b> is the national association of family doctors. <a href="http://www.aafp.org">http://www.aafp.org</a>
<b>AAMC</b>	The <b>Association of American Medical Colleges</b> is a non-profit organization based in Washington, DC and established in 1876. It administers the Medical College Admission Test. The AAMC operates the American Medical College Application Service and the Electronic Residency Application Service which facilitate students applying to medical schools and residency programs, respectively. <a href="https://www.aamc.org/">https://www.aamc.org/</a>
<b>ACGME</b>	The <b>Accreditation Council for Graduate Medical Education</b> is responsible for the accreditation of post-MD medical training (residency) programs within the United States. <a href="http://www.acgme.org/acgmeweb/">http://www.acgme.org/acgmeweb/</a>
<b>ACLS</b>	Advanced Cardiac Life Support.
<b>ACOM</b>	Alabama College of Osteopathic Medicine.
<b>AHEC</b>	Alabama Health Education Centers.
<b>Allopathic Medicine</b>	The system of medical practice that treats disease by the use of remedies which produce effects different from those produced by the disease under treatment. MDs practice allopathic medicine.
<b>ALOMA</b>	The <b>Alabama Osteopathic Medical Association</b> is a non-profit professional organization comprising osteopathic physicians, residents, interns, and medical students. <a href="http://aloma.org/">http://aloma.org/</a>
<b>AMA</b>	<b>American Medical Association.</b> <a href="http://www.ama-assn.org">http://www.ama-assn.org</a>
<b>AMEC</b>	<b>Alabama Medical Education Consortium.</b> <a href="http://www.amecdo.com">http://www.amecdo.com</a>
<b>AOA</b>	The <b>American Osteopathic Association</b> is the main representative organization for osteopathic physicians in the United States. <a href="http://www.osteopathic.org/">http://www.osteopathic.org/</a>

<b>Archival List</b>	List of preceptors kept by the ACOM Clinical Resources department which tracks the status of all preceptors, whether active, inactive or other.
<b>Audition Rotation</b>	Elective clerkship rotations during the third and fourth years at sites with residency programs in which a student is interested.
<b>BLS</b>	Basic Life Support.
<b>Clerkship Rotation</b>	A 2- or 4-week period of training in clinical setting.
<b>CME</b>	Continuing Medical Education.
<b>CITI</b>	Collaborative Institutional Training Initiative. Students use this system to obtain additional training in OSHA, HIPAA, Universal Precautions, Sterile Technique, etc.
<b>COCA</b>	The AOA <b>Commission on Osteopathic College Accreditation</b> 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 COMs. <a href="http://www.osteopathic.org/inside-aoa/accreditation/predoctoral%20accreditation/Pages/default.aspx">http://www.osteopathic.org/inside-aoa/accreditation/predoctoral%20accreditation/Pages/default.aspx</a>
<b>COI</b>	Certificate of Insurance. Refers to professional liability insurance for healthcare professionals, including medical students.
<b>COMAT</b>	Comprehensive Osteopathic Medical Achievement Test. A series of examinations designed to assess osteopathic medical students' core knowledge and elements of osteopathic principles and practice essential for pre-doctoral training. This is equivalent to shelf exams provided in MD programs.

<b>COMLEX-USA</b>	<p>The Comprehensive Osteopathic Medical Licensing Examination of the United States is a three-level, national standardized licensure examination designed to assess osteopathic medical knowledge, knowledge fluency, clinical skills, and other competencies essential for practice as an osteopathic generalist physician. <a href="http://www.nbome.org/exams-assessments/comlex-usa/">http://www.nbome.org/exams-assessments/comlex-usa/</a></p> <p><b>Level 1</b> – Computer-based application of osteopathic medical knowledge concepts related to foundational sciences, patient presentations, and physician tasks.</p> <p><b>Level 2-CE</b> – (Cognitive Examination) Computer-based application of osteopathic medical knowledge concepts related to clinical sciences, patient presentations, and physician tasks.</p> <p><b>Level 2-PE</b> – (Performance Examination) Standardized patient-based assessment of fundamental clinical skills essential for osteopathic patient care.</p> <p><b>Level 3</b> – Two-day computer-based application of osteopathic medical knowledge concepts related to clinical sciences, patient safety and independent practice, foundational competency domains and clinical presentations.</p>
<b>COMSAE</b>	Comprehensive Osteopathic Medical Self-Assessment Examinations are used by osteopathic students and residents to assess readiness for the COMLEX-USA cognitive examination. ACOM administers these exams several times before students take COMLEX Level 1.
<b>Core Clerkship Rotations</b>	Four weeks of clinical training in specified disciplines, which must be completed at a Core Site.
<b>Core Site</b>	A medical facility committed to providing sufficient resources to meet curriculum requirements for the third- and fourth-year students.
<b>Core Site Connections</b>	Refers to initial meetings between MEDs, CSCs, and students assigned to their core sites.
<b>CRNA</b>	Certified Registered Nurse Anesthetist.
<b>CRNP</b>	Certified Registered Nurse Practitioner.
<b>CSC</b>	Core Site Coordinator, who manages the day-to-day activities of students, such as preceptor assignment, evaluations, lectures and COMAT exams.
<b>CSE</b>	Clinical Skills Educator.
<b>CV</b>	Similar to a resumé, but also includes detailed and comprehensive description of academic and professional history.
<b>Dean's Letter</b>	See MSPE.

<b>Didactics</b>	Systematic instruction. Examples include lectures, readings, assignments, discussion boards, video conferences, grand rounds, and journal clubs.
<b>Differential Diagnosis</b>	The process of weighing the probability of one condition versus that of others, possibly accounting for a patient's situation. For example, the differential diagnosis of rhinitis (a runny nose) includes allergic rhinitis (hay fever), the abuse of nasal decongestants, and the common cold.
<b>DIO</b>	Designated Institutional Officer. The individual who oversees all Graduate Medical Education at an institution.
<b>DO</b>	Doctor of Osteopathic Medicine.
<b>DSA</b>	Designated Student Assignment. Consists of an independent study module created by the faculty member responsible for the session. The student is expected to complete the DSA out of class. It will be assessed using questions on the exam, quizzes, integrated sessions, and/or TBLs.
<b>Elective Clerkship Rotations</b>	Two or 4 weeks of clinical training in any specialty at an ACOM- approved medical facility.
<b>EMR (EHR)</b>	Electronic Medical Records or Electronic Health Records.
<b>ERAS</b>	The <b>Electronic Residency Application Service</b> is produced by AAMC to transmit residency applications, letters of recommendation, Dean's Letters, transcripts, and other supporting documents to residency program directors via the Internet. <a href="https://www.aamc.org/services/eras/">https://www.aamc.org/services/eras/</a>
<b>E*Value</b>	Software used to manage third- and fourth-year clerkship rotations.
<b>FERPA</b>	The Family Educational Rights and Privacy Act of 1974. Defines the privacy rights of students in academic settings.
<b>FOSCE</b>	Formative Objective Structured Clinical Examination.
<b>FQHC</b>	Federally Qualified Health Centers are community-based health centers that provide primary and preventative care services in underserved areas regardless of ability to pay or health insurance status.
<b>FREIDA</b>	Fellow and Residency Electronic Interactive Database. FREIDA Online is a database with more than 7,800 graduate medical education programs accredited by ACGME as well as more than 200 combined specialty programs. <a href="http://www.ama-assn.org/ama/pub/education-careers/graduate-medical-education/freida-online.page?">http://www.ama-assn.org/ama/pub/education-careers/graduate-medical-education/freida-online.page?</a>
<b>GME</b>	Graduate Medical Education. Formal medical education that includes internship, residency, subspecialty and fellowship programs accredited by ACGME.

<b>Grand Rounds</b>	A formal meeting at which physicians discuss the clinical case of one or more patients. Grand rounds originated as part of residency training wherein new information was taught and clinical reasoning skills were enhanced. Grand rounds today are an integral component of medical education. They present clinical problems in medicine by focusing on current or interesting cases. They are also sometimes utilized for dissemination of new research information.
<b>H&amp;P</b>	Shorthand for history and physical, the initial clinical evaluation and examination of the patient.
<b>HCHCA</b>	The <b>Houston County Health Care Authority</b> is the umbrella organization which owns ACOM and Southeast Health.
<b>HIPAA</b>	The Health Insurance Portability and Accountability Act of 1996 which defines the privacy rights of patients and health care information.
<b>ICD-10</b>	ICD-10 is the 10th revision of the International Statistical Classification of Diseases and Related Health Problems (ICD), a medical classification list by the World Health Organization (WHO). It contains codes for diseases, signs and symptoms, abnormal findings, complaints, social circumstances, and external causes of injury or diseases.
<b>IRB</b>	An institutional review board, also known as an independent ethics committee (IEC), ethical review board (ERB) or research ethics board (REB), is a committee that has been formally designated to approve, monitor, and review biomedical and behavioral research involving humans.
<b>IS</b>	Integrated Session. Presents defined material in an interactive format to demonstrate clinical significance.
<b>IT (IS)</b>	Information Technology (Information Systems).
<b>Journal Club</b>	A form of education in which a group of physicians discuss, analyze, and review a limited number of articles from medical journals, often on a weekly or monthly basis.
<b>Learning Agreement</b>	A document that the student and preceptor create together at the beginning of a clerkship rotation to define learning goals.
<b>Lecture</b>	A didactic presentation given by a faculty member, medical education director, or preceptor.
<b>Letter of Good Standing</b>	Official document from the school that states that a student is in good academic standing and has no issues preventing the student from starting clerkship rotations.
<b>LoR</b>	Letter of Recommendation.
<b>LRC</b>	Learning Resource Center.



<b>The Match</b>	The Match process is a uniform system by which residency candidates and residency programs simultaneously “match” to fill first-year and second-year post-graduate training positions accredited by ACGME. NRMP instituted and maintains The Match system.
<b>Match Day</b>	The date when students find out if they have matched to a residency program.
<b>MD</b>	Doctor of Medicine.
<b>MED</b>	Medical Education Director (formerly known as core site director). Manages a Core Site and its operation, as well as directing interaction with the college regarding the student performance. The required minimum qualifications are MD/DO.
<b>MOA (MOU)</b>	A Memorandum of Agreement (Memorandum of Understanding) is an agreement between two or more parties outlining the terms and details of an understanding, including each party’s requirements and responsibilities.
<b>MSPE</b>	The Medical Student Performance Evaluation (formerly known as the Dean’s Letter) is a comprehensive assessment of medical school performance generally through third year of medical school. Includes grade comparison graphs, class rank for top quartile students for years 1 and 2 and preceptor comments from clerkship rotations.
<b>NBME</b>	The <b>National Board of Medical Examiners</b> is an independent, not-for-profit organization that serves the public through its high-quality assessments of healthcare professionals. <a href="http://www.nbme.org/">http://www.nbme.org/</a>
<b>NBOME</b>	The <b>National Board of Osteopathic Medical Examiners</b> is the leading assessment organization for the osteopathic medical profession. Its mission is to protect the public by providing the means to assess competencies for osteopathic medicine and related health care professions. The NBOME COMLEX-USA examination series provides the pathway to licensure for osteopathic physicians in the United States. <a href="http://www.nbome.org">http://www.nbome.org</a>
<b>NRMP</b>	The <b>National Resident Matching Program</b> which is a national process to match medical students and other applicants with programs to obtain internships and residencies. Applicants submit a confidential list to the NRMP ranking their desired place of residency. Participating hospitals also enter a confidential list of those most desired applicants. On a uniform date (mid-March), all of the applicants and programs are informed of the results of the match. <a href="http://www.nrmp.org">http://www.nrmp.org</a>
<b>OMS</b>	Osteopathic Medical Student (OMS-I, OMS-II, OMS-III, and OMS-IV)
<b>OMM (OMT)</b>	Osteopathic Manipulative Medicine (OMM), also known as Osteopathic Manipulative Treatment (OMT), is a core set of techniques of osteopathy and osteopathic medicine distinguishing these fields from allopathic medicine.
<b>OON</b>	Out of Network.

<b>OPP</b>	Osteopathic Principles and Practices is the title of the course where students learn OMM (OMT).
<b>OPTI</b>	All OGME programs are part of an Osteopathic Postdoctoral Training Institution. Each OPTI is a community-based training consortium comprised of at least one college of osteopathic medicine and one hospital and may include additional hospitals and ambulatory training facilities. <a href="http://www.osteopathic.org/inside-aoa/Education/OGME-development-initiative/Pages/what-is-an-opti.aspx">http://www.osteopathic.org/inside-aoa/Education/OGME-development-initiative/Pages/what-is-an-opti.aspx</a>
<b>OSCE</b>	Objective Structured Clinical Examination.
<b>OSHA</b>	The <b>Occupational Safety and Health Administration</b> is an agency of the United States Department of Labor. OSHA’s mission is to “assure safe and healthful working conditions for working men and women by setting and enforcing standards and by providing training, outreach, education and assistance.” <a href="https://www.osha.gov/">https://www.osha.gov/</a>
<b>PA</b>	Physician Assistant.
<b>PALS</b>	Pediatric Advanced Life Support.
<b>Personal Statement</b>	Consists of information about the student’s professional background, academic and clinical qualifications, how the decision was made to pursue medicine, chosen specialty, and career goals.
<b>PCS</b>	Primary Clinical Skills. A set of courses students complete during each semester of their OMS-I and OMS-II years.
<b>PGY</b>	Post Graduate Year.
<b>Preliminary Year</b>	One-year position in a given field (e.g., Internal Medicine or Surgery), usually preceding training in another specialty.
<b>Preceptor</b>	A practicing physician who provides excellent learning opportunities in clinical settings and delivers quality assessments of students throughout their clinical training.
<b>PRN</b>	Abbreviation for <i>pro re nata</i> , a Latin phrase meaning “as needed.”
<b>Program Director</b>	The individual who oversees graduate medical education in a specified discipline at a specific institution.
<b>RC</b>	Regional Coordinator coordinates core site development and assists core site staff in managing students’ educational experiences within specified geographic regions.

<b>Required Clerkship Rotation</b>	Four weeks of clinical training in a specified OMS year that does not have to be completed at a core site.
<b>ROL</b>	Rank Order List.
<b>SARHA</b>	The <b>Southeast Alabama Rural Health Associates</b> is a private, non-profit corporation established in 1983 to ensure the availability of quality medical services to all residents of southeast Alabama. SARHA currently provides primary and preventive health services to the residents of Barbour, Coffee, Crenshaw, Dale, Geneva, Henry, Houston, Pike and surrounding counties. <a href="http://www.sarhaonline.com/">http://www.sarhaonline.com/</a>
<b>SEAMED</b>	Software used by ACOM students to access curricular information.
<b>Shelf Exam</b>	See COMAT or USMLE.
<b>SIM Lab</b>	Interactive session with either simulated “patients” or standardized patients.
<b>Skills Lab</b>	Skills labs provide an opportunity for students to learn and practice patient interview skills, physical examination skills, and osteopathic manipulative treatment under faculty supervision and instruction.
<b>SOAP</b>	The Supplemental Offer and Acceptance Program is a process for unmatched students in the NRMP match to find residency programs. <a href="http://www.nrmp.org/residency/soap/">http://www.nrmp.org/residency/soap/</a>
<b>SOAP note</b>	The SOAP (i.e., subjective, objective, assessment, and plan) note is a method of documentation employed by health care providers to record notes in a patient’s chart.
<b>SPC</b>	Student Progress Committee.
<b>SP / SPE</b>	Standardized Patient / Standardized Patient Educator.
<b>Student Tracker</b>	Document students maintain and update which lists all their anticipated clerkship rotations, beginning with Period 7 of their OMS-III year.
<b>TBL</b>	Team-Based Learning. Consists of sessions that must include the following components: advance preparation assignment, individual readiness assessment test (iRAT), group readiness assessment test (gRAT), application of course content, and peer evaluation (when applicable).
<b>Transitional Year</b>	One-year position with rotations through various disciplines (e.g. Internal Medicine, Surgery, etc.); also precedes training in other specialties.

<b>USMLE</b>	<p>The <b>United States Medical Licensing Examination</b> is a three-step examination for medical licensure in the U.S. The USMLE assesses a physician’s ability to apply knowledge, concepts, and principles and to demonstrate fundamental patient-centered skills that are important in health and disease and that constitute the basis of safe and effective patient care. Osteopathic students are encouraged and may be required to take the USMLE if they intend to apply for allopathic residency programs. <a href="http://www.usmle.org">http://www.usmle.org</a></p>
<b>USMLE Step 2 CK</b>	<p>Clinical Knowledge Exam (MD Equivalent to CE Exam).</p>
<b>USMLE Step 2 CS</b>	<p>Clinical Skills Exam (MD Equivalent to PE Exam)</p>
<b>VCU</b>	<p>Video Conferencing Unit refers to the hardware that allows for a conference between two or more participants at different sites.</p>
<b>VMR</b>	<p>A Virtual Meeting Room is an online location that can be accessed by the VCU or web browser on a computer, tablet, or smartphone for a conference between two or more participants at different sites.</p>
<b>Visiting Student</b>	<p>A student who is “away” from their home core site while completing clerkship rotations.</p>
<b>VSAS</b>	<p>The Visiting Student Application Service is an AAMC application designed to streamline the application process for senior “away” electives. This service requires students to submit just one application for all institutions, effectively reducing paperwork, miscommunication, and time. All COCA-accredited AACOM member colleges with rising fourth-year classes are VSAS home schools. Students in accredited schools may use VSAS to submit applications. ACOM students will have access to VSAS beginning in March of their third year. <a href="http://www.aamc.org/students/medstudents/vsas/">http://www.aamc.org/students/medstudents/vsas/</a></p>

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**The Alabama College of Osteopathic Medicine is a tobacco-free campus.**

