Purpose:

The purpose is to establish expectations to ensure student professional and ethical conduct during their time as medical students to prepare them as future physicians.

Scope:

This Policy shall apply to all Duquesne University College of Medicine (COM) students.

Responsibility:

The responsibility to review and revise the COM’s professionalism and conduct policies is established by COM leadership and approved by the COM Dean and Duquesne University Provost. It is effective as of the date noted and shall remain effective until amended or terminated by the COM Dean or University Provost.

Policy:

At the Duquesne University COM, students are challenged to think about the physician they will become, in keeping with the mission of the COM and the University. The goal is to help students model the characteristics that will best serve them, their patients, and the community throughout their professional careers. This begins with being a successful and responsible member of the COM community.

Students are expected to uphold University standards of academic and personal integrity and promote responsible behaviors. The COM addresses alleged violations of the Student Handbook through a conduct process that emphasizes student learning and holds individuals accountable for their actions by providing opportunities for personal growth and respect for others.

During orientation, COM students agree, by signing the following statement, to abide by the COM Student Professional and Ethical Conduct expectations throughout their four years of education. Students are also expected to uphold the American Osteopathic Association’s Code of Ethics as outlined in the Professional Ethics for Physicians Policy. While students may encounter professionalism or ethical situations that are not specifically referenced in the agreement, the listed items are representative of the expectations for professional and ethical conduct.
Duquesne University COM Student Professional and Ethical Conduct Agreement
I accept the responsibility for my conduct and expect the highest standards of myself. I will also support others in upholding these standards. I commit to the expectations of COM LEADERS as outlined below:

L  Love and Mercy:
- I will treat others as I would want to be treated, with empathy and compassion.
- I will participate in a culture of tolerance and non-judgementalism.
- I will seek assistance from colleagues or professionals for any problems that adversely affect my education.
- I will strive in thought and deed to use language that affirms and avoid language and interactions that can be characterized as microaggressions.

E  Ethics and Morality:
- I am committed to learning medicine with the highest moral and ethical standards.
- I will demonstrate truthfulness in academic and clinical activities, including examinations, evaluations, and any other representation of my work.
- I will not participate in or be a party to unfair advancement of academic standing.
- I will be truthful in all interactions with patients, peers, and faculty.
- I will not be under the influence of alcohol or other drugs while performing academic or clinical responsibilities.
- I will not exhibit alcohol or drug related misconduct including addiction, driving under the influence, or other illegal or unethical acts in order to maintain the ability to practice my competencies and skills.
- I will not use illicit drugs or misuse prescription drugs in order to maintain the highest levels of competencies and skills when learning and when caring for patients.
- I will always be honest in the collection, interpretation, and reporting of data pertinent to academic work or patient care.
- I will demonstrate the highest standard of ethical and professional behavior in academic and clinical settings.

A  Advancement and Personal Development:
- I am committed to developing a life of self-fulfillment by serving others.
- I will acknowledge my strengths as well as my limitations, offering assistance when I am able and seeking assistance when necessary.
- I will continue to strive to attain the highest level of knowledge, skills, and competence.
- I will assess my progress and identify areas for improvement and issues for continued learning.
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D  **Diversity and Social Justice:**

- I will display a positive attitude and promote diversity, equity and inclusion in the treatment of others.
- I will seek to address inequities in access to health care, both domestically and globally.
- I will not discriminate based on age, gender, sex, race, color, creed, national origin, religion, ancestry, marital status, ethnicity, disability, sexual orientation, gender identity, or status as a protected veteran.
- I will display and expect non-discriminatory behavior toward and from my supervisors, my peers, and staff with whom I work.

E  **Excellence:**

- I will strive to reach my full potential both academically and professionally and support my colleagues as they seek to do the same.
- I will be dutiful in carrying out all academic and clinical responsibilities arriving on times expected and not leaving until all tasks assigned to me are completed.

R  **Responsibility to Profession and Community:**

- I will be open and willing to learn within every aspect of my medical education including areas of primary care and rural/underserved medicine.
- 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 don’t use names, knowing that I must abide by HIPAA standards and that I represent the COM and all medical students by such actions.
- I will not misrepresent myself as other than a medical student in the learning process and not extend my professional activities as a medical student outside of the supervised setting in which I am training or beyond what is expected of a medical student in a supervised setting.

S  **Servant Leadership:**

- I will be respectful of all people and seek to serve God in a way that is consistent with the historic Mission of Duquesne University.
- I will demonstrate a willingness to share and participate in the learning process with peers, faculty, staff and all members of the healthcare team in both academic and clinical settings.

Signature__________________________________________  Date___________________
1. PERFORMING PATIENT CARE ACTIVITIES

Student involvement in patient care is permitted when authorized by the College and the assigned clinical faculty member. Supervision by a physician or authorized medical professional (i.e. PA, APN) who are under the supervision of the faculty physician is required. In certain cases, another healthcare professional may be an appropriate supervisor (Ex: medication counseling with a pharmacist). The student's supervising faculty/preceptor is the faculty member that is responsible for the patient’s care. The COM’s Clinical Division Chiefs assure all core clinical faculty have the appropriate credentialing for student supervision. Students may not perform any medical treatment or procedures without appropriate supervision. Student involvement should be appropriate for his or her level of training. The faculty member/preceptor should be present for any treatment, procedure, or invasive examination. Students are not to take the place of qualified staff. Students may not write patient care orders independently and all such orders must be reviewed and approved by the faculty member/preceptor. Students may not accept payment or remuneration for services.

a. Supervision of Students

A student on clinical rotations must be supervised in patient care situations. Supervision involves a responsible licensed physician to:

- Be physically located in the facility where patient treatment is rendered.
- Grant authorization of services provided by the student doctor.
- Examine all patients seen by the student doctor.
- Supervise procedures when performed by the student doctor.
- Be physically present during any invasive procedure or examination.
- Assure another clinical staff is present during any invasive or sexual organ examination.
- Assure that the documentation in the patient's medical record is appropriate.

b. Assurance of Student’s Health Prior to Involvement in Patient Care

Upon admission, students are required to obtain and provide the required documentation indicating that they do not have conditions that would endanger the health and well-being of patients. The documentation includes immunizations and titers for immunity, verification from a physician who has performed a medical history and physical examination as to the health of the student, and background checks for legal history. Students must also sign a document that they are free from contagious disease prior to caring for a patient. When this is in question, the student and college must
follow CDC guidelines. The presence of communicable diseases may limit a student’s participation in clinical care. If a student has a communicable disease this must be shared with the appropriate personnel at the clinical site and the clinical site has the final determination of the student’s ability to participate in certain areas of clinical training. A student must be able to demonstrate that his or her health and abilities will enable them to meet the technical standards of the program. A copy of all immunizations and laboratory tests will be obtained and shared with the clinical site.

c. White Coats and COM ID Badges

The COM short white coat and ID badge identifies the individual as a medical student at the COM. Students must wear their coat and ID badge provided by the COM in all COM designated clinical settings and to designated and approved COM events. The COM students should not wear their COM white coat or ID badge or verbally represent themselves as representing the College for non-COM-sponsored events. These include, but are not limited to, shadowing experiences that are not part of the required COM curriculum, volunteer activities that are not COM sponsored, or functions that are not College events such as those that are of a political or social nature.

Students are not permitted to give their white coat or ID badge to another student or to an individual who is not a COM student. If the COM white coat or ID badge is missing or stolen, the student must report this to the Director of Clinical Rotations as soon as possible. Not wearing the white coat and ID badge as required, wearing the COM white coat or ID badge to non-sponsored events, or giving or loaning these items to others is considered unprofessional behavior and subject to disciplinary action.

d. Patient Confidentiality

During the course of study, students will come in contact with a patient’s confidential information. Laws such as the Health Insurance Portability and Accountability Act (HIPAA), govern the release of confidential patient information to others. Students are expected to undergo yearly HIPAA training as required by the COM and affiliated clinical training sites. For more information about expectations regarding confidentiality of records, please see Policy 1.3.2c.

e. Medical Records/Charting

The responsibility given to students for medical records varies among the hospitals and clinics. Clinical training sites are encouraged to allow students to write full progress notes and orders directly into the patient’s chart. These notes must be immediately co-signed by the supervising physician and that physician must follow this with her or her physician’s note. Some other hospitals/clinics have separate pages in charts set aside for "Student Progress Notes." These should also be reviewed and co-signed by the
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attending physician. Notes are usually written or entered in the SOAP format. If dictation or computerized entry is allowed by students at a particular hospital or clinic, the resulting notes must also be reviewed and approved by the attending physician. The student is responsible for obtaining charting instructions from the preceptor or rotation coordinator.

Medical Records that are falsified or that are left uncompleted when it is the responsibility of the student to complete, are considered a professional or ethical violation and the student will be subject to the policies and procedures in the student handbook that apply to the violation.

NOTE: The student is responsible for knowing the proper procedure and must sign and date all entries on the medical record by name and educational status (e.g. John Doe, MS 3).

2. PROFESSIONAL OR ETHICAL CONDUCT VIOLATIONS

When a concern arises related to a student’s professional or ethical conduct, the concern will be sent to the chair of the Professionalism and Ethical Conduct Committee (PECC). The Dean will appoint an ad hoc committee or the PECC Chair to investigate the concern and determine the next best step based on the following options.

a. Determine the concern to be unfounded – If there is no clear professional or ethical conduct violation of COM Policy, no course of action will be taken. There is no need for further documentation of the concern.

b. Determine the concern to be minor – If this is a first-time offense or a minor infraction, the Chair may meet with the student, and provide mentorship and steps to resolve the concern. A minor concern will not be a part of the student’s permanent record unless further professionalism concerns arise.

c. Determine the concern to be taken to the Professional and Ethical Conduct Committee (PECC) – If this is a repeated or serious offense, the Professional and Ethical Conduct Committee will become involved. The PECC will consist of the Chair and at least 3 COM leaders appointed by the Dean (at a minimum: 1 from Student Services, 1 from Clinical Affairs, and 1 from Biomedical Affairs). The PECC’s charge is to meet with students for professional and ethical conduct concerns to discuss the concern, provide mentorship and take steps to resolve the concern.

3. CONSEQUENCES FOR UNPROFESSIONAL OR UNETHICAL BEHAVIOR

Professional and Ethical Conduct Committee (PECC)

If a student has a professionalism concern that is brought before the PECC, the committee may enact one of the following consequences:

a. Verbal Warning (This does not become a part of the permanent record unless
further professionalism concerns arise that warrant permanent record documentation).
b. Written Warning (This does not become a part of the permanent record unless further professionalism concerns arise that warrant permanent record documentation).
c. Formal Performance Improvement Plan (This does become part of the permanent record documentation).
d. Probation with criteria for removal from Probation. Students who have displayed repeated or serious unprofessional or unethical behavior may be placed on probation, suspension or considered for dismissal (see below for suspension, dismissal). (This does become part of the permanent record documentation).
e. Suspension with criteria for removal from Suspension. The committee has the option to suspend a student who has been charged with a misdemeanor or felony, pending disposition of the charge. Students convicted of a felony and some misdemeanors will most likely be dismissed. In addition, this recommendation may be utilized for a student who has displayed behavior warranting medical or mental health assessment while pending evaluation. (This does become part of the permanent record documentation).
f. Dismissal - The committee has the option to dismiss a student who has had multiple concerns despite warnings and intervention, another concern arises after a student has already been placed on probation or suspension during their time at the COM, the student is convicted of a misdemeanor or felony, or if the infraction is to a level where the committee cannot confidently recommend the student as competent in the professionalism competency moving forward. (This does become part of the permanent record documentation).

In addition to the consequences above, the committee may:

- Specify a timeline or manner for resolution steps to occur.
- Require further assessment, including but not limited to: psychological evaluations, drug or alcohol screening / testing, or other evaluations that allows them to make appropriate recommendations. Such testing, if recommended, will be at the student's expense. The PECC will require a written evaluation from the party of the referral to determine if the student is at risk or presents a risk to the institution, students, or patient care.
- Limit extracurricular activities.
- Require service activities.
- Make other sanctions as deemed appropriate by the PECC.
- Require the student to sign a consent agreement requiring further evaluation/testing.
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The student may appeal the PECC’s decision for consequences d (Probation), e (Suspension), or f (Dismissal) above. The appeal must be submitted by the student to the Dean in writing within 5 business days of the Professionalism committee’s decision. The Dean will review the concerns and recommendations including all previous professionalism or conduct violations and render a decision. The Dean’s decision is final.

a. Potential Consequences at Clinical Training Sites

A student may be removed from the clinical site by hospital administration and unable to complete his or her clinical education at the site following a professional and/or ethical infraction. The hospitals and clinical sites dictate whether the student has the ability to continue clinical training in their facility and this is outlined in the mutually agreed upon affiliation agreements with all sites. The student is always considered an invited guest or learner in the facility in which he or she is training and must; therefore, become familiar with and follow all clinical site policies and procedures. All reports of unprofessional or unethical behaviors will be thoroughly investigated and, should action be taken, the appropriate procedures will be followed as outlined above. Examples of such concerns include but are not limited to:

- Poor interpersonal skills or deficient clinical skills for a medical student
- Below average academic and/or clinical performance
- Unprofessional behavior in medical reporting or documentation
- Tardiness and/or Unexcused absenteeism
- Medical or psychological illness
- Suspected substance abuse (alcohol and other drugs) by behavior or positive drug screen
- Suspected illegal behavior
- Suspected physical, sexual, or emotional abuse
- Disruptive behavior as a member of the medical team
- Use of alcohol, illegal drugs, or prescription drugs that alter cognition while on duty

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