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SCHOOL OF MEDICINE

Welcome to the Schools of Medicine Academic Bulletin

In the past three decades, the University of South Carolina's School of Medicine located in Columbia (USCSOM-Columbia) has emerged as a national leader in primary care medical education, pioneering research, and providing humanistic patient care. Founded in 1975, the USCSOM-Columbia campus is situated on a beautiful 100-acre suburban campus, just four miles from the main campus of the University of South Carolina. The School of Medicine's 20 year affiliation with the Greenville Health System, South Carolina's largest public hospital, was enhanced in 2011 with the formulation of a second four-year University of South Carolina School of Medicine, USCSOM-Greenville, located on the Greenville Memorial Hospital Campus. USCSOM-Greenville is separately accredited by the Liaison Committee on Medical Education of the Association of American Medical Colleges, making the University of South Carolina one of only seven universities in the United States with two or more four-year campuses for medical education.

Mission: To improve the health of the people and diverse communities of South Carolina and beyond through innovative medical education and research, and compassionate, exceptional patient care.

The School of Medicine reserves the right to make changes in curricula, degree requirements, course offerings, and all School of Medicine academic regulations at any time when, in the judgment of the faculty, the dean, the president, or the Board of Trustees, such changes are in the best interest of the student, the University, or the School of Medicine.

Registration at the University of South Carolina assumes the student's acceptance of all published regulations, including both those which appear in this School of Medicine Bulletin and all others found in any official announcement such as Carolina Community. When two or more regulations contained in University publications appear to be inconsistent, the regulations appearing in this bulletin shall control. When two or more School of Medicine regulations appear to be inconsistent, the regulations in force at the time the student entered the School of Medicine shall control.

Bulletin Updates and Corrections

Noncurricular information (i.e., faculty listings, contact information, college or departmental descriptive text) can be updated by contacting the Office of the University Registrar (bulletin@sc.edu) on the Columbia Campus. Any material pertaining to course descriptions or curriculum changes must have the approval of the Faculty Senate, Graduate Council, Board of Trustees, and/or S.C. Commission on Higher Education before it can be published in the bulletins.

Printing Portions of the Online Bulletins

The academic bulletins are available online only. However, you may produce hard copy of any portion or all of an online bulletin using your local printer.

Additional Information

Registration at the University of South Carolina assumes the students' acceptance of all published regulations, including both those which

appear in this document and all others as applicable in any official announcement

The University has established procedures to certify that all classroom activities are conducted by individuals with spoken and written proficiency in the English language at a suitable level. Student complaints concerning the English proficiency of an individual with classroom responsibilities should follow the grievance procedures available from the Office of the Provost on the Columbia campus.

The University of South Carolina provides equal opportunity in education and employment for all qualified persons regardless of race, color, religion, sex, national origin, age, disability, or veteran status. The University of South Carolina has designated as the ADA Title II, Section 504 and Title IX coordinator the Executive Assistant to the President for Equal Opportunity Programs. The Office of the Executive Assistant to the President for Equal Opportunity Programs is located in:

Suite 805
1600 Hampton St.
Columbia, South Carolina
telephone 803-777-3854

THE UNIVERSITY

UofSC System Mission Statement

Approved by the Board of Trustees- October 11, 2019

Next Board of Trustees Scheduled Review- January 2023

The primary mission of the University of South Carolina System is the education of the state's diverse citizens through teaching, research, creative activity, and community engagement. This public university system serves students from its flagship Columbia campus, three comprehensive universities (Aiken, Beaufort, and Upstate), and four regional Palmetto College campuses (Lancaster, Salkehatchie, Sumter, and Union).

The University of South Carolina System offers degree programs at the associate's, bachelor's, master's, and doctoral levels. Through classroom and laboratory instruction delivered in a variety of face-to-face and distance learning formats and modalities, degree programs are offered in the following areas: arts and sciences; business; education; engineering and computing; hospitality, retail, and sport management; information and communications; law; medicine; music; nursing; pharmacy; public health; and social work.

With a flagship campus recognized by the Carnegie Foundation as a top research and community engaged institution and nationally ranked in start-up businesses, and an eight-campus system that confers nearly 40% of all bachelor's and graduate degrees awarded at public institutions in South Carolina, the university has a profound relevance, reach, and impact on the people of the state. The University of South Carolina System provides all students with the highest-quality education, including the knowledge, skills, and values necessary for success and responsible citizenship in a complex and changing world through engagement in nationally and internationally ranked research, scholarship, service, and artistic creation.

UofSC Columbia Mission Statement

Approved by the Board of Trustees- October 11, 2019

Next Board of Trustees Scheduled Review- January 2023

The primary mission of the University of South Carolina Columbia is the education of the state's citizens through teaching, research, creative activity, and community engagement. Among America's oldest and most comprehensive public universities, the University of South Carolina Columbia is the major research institution of the university system and its largest campus. At the heart of its mission lies the university's responsibility to state and society to promote the dissemination of knowledge, cultural enrichment, and an enhanced quality of life.

The University of South Carolina Columbia serves a diverse population of students with widely varying backgrounds, career goals, and levels of aspiration. The university offers over 320 degrees at the bachelor's, master's, doctoral, and professional program levels, affording students the most comprehensive array of educational programs in the state. Opportunities for personal and career development are provided to the citizens of South Carolina through outreach and continuing education activities. The university provides additional opportunities for associate degrees through Fort Jackson and through the oversight of regional Palmetto College campuses (Lancaster, Salkehatchie, Sumter, and Union).

Through classroom and laboratory instruction delivered in a variety of face-to-face and distance learning formats and modalities, degree programs are offered in the following areas: arts and sciences; business; education; engineering and computing; hospitality, retail, and sport management; information and communications; law; medicine; music; nursing; pharmacy; public health; and social work. The depth and breadth of its graduate programs distinguishes the University of South Carolina Columbia from all other institutions of higher learning in South Carolina.

Recognized by the Carnegie Foundation as a top research and community engaged institution, nationally ranked in start-up businesses, and conferring over 30% of all bachelor's and graduate degrees awarded at public institutions in South Carolina, the university has a profound relevance, reach, and impact on the people of the state. As the flagship institution of the university system, the University of South Carolina Columbia leads the way in providing all students with the highest-quality education, including the knowledge, skills, and values necessary for success and responsible citizenship in a complex and changing world through engagement in nationally and internationally ranked research, scholarship, community outreach, and artistic creation.

Accreditation

The University of South Carolina Columbia is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award associate, baccalaureate, master's, and doctoral degrees. The regional Palmetto College campuses (Lancaster, Salkehatchie, Sumter, and Union) are branch campuses of the University of South Carolina Columbia; the branch campuses' accreditation is dependent on the continued accreditation of the University of South Carolina Columbia. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097 or call 404-679-4500 for questions about the accreditation of the University of South Carolina Columbia.

In addition to this comprehensive accreditation, the professional schools on the Columbia campus are individually accredited by their respective associations as follows:

College of Arts and Sciences

In the Department of Psychology, the graduate degrees in clinical-community psychology are accredited by the American Psychological Association; graduate degrees in school psychology are accredited by the National Association of State Directors of Teacher Education and Certification, the National Council for Accreditation of Teacher Education, and the National Association of School Psychologists with the doctoral program also being accredited by the American Psychological Association. The Master of Public Administration degree offered by the Department of Political Science is accredited by the National Association of Schools of Public Affairs and Administration. The Department of Theatre and Dance is accredited by the National Association of Schools of Theatre and the University/Resident Theatre Association. The Department of Art is accredited by the National Association of Schools of Art and Design. The Department of Chemistry is accredited by the American Chemical Society.

Moore School of Business and the School of Accounting

American Assembly of Collegiate Schools of Business.

College of Education

National Council for Accreditation of Teacher Education, Council for the Accreditation of Counseling and Other Related Educational Programs.

College of Engineering and Computing

Programs in chemical engineering, civil engineering, computer engineering, electrical engineering, and mechanical engineering are accredited by the Engineering Accreditation Commission of ABET, <http://www.abet.org>. The programs in computer science and computer information systems are accredited by the Computing Accreditation Commission of ABET, <http://www.abet.org>.

School of Hospitality, Retail, and Sport Management

Accreditation Commission for Programs in Hospitality Administration.

School of Law

American Bar Association, Association of American Law Schools.

College of Information and Communications

The School of Journalism and Mass Communications is accredited by the Accrediting Council on Education in Journalism and Mass Communications. The School of Library and Information Science is accredited by the American Library Association.

School of Medicine

Liaison Committee on Medical Education of the American Medical Association-Association of American Medical Colleges.

School of Music

National Association of Schools of Music.

College of Nursing

Commission on Collegiate Nursing Education.

College of Pharmacy

American Council on Pharmaceutical Education.

Arnold School of Public Health

Accreditation in Physical Therapy Education, Council on Academic Accreditation of the American Speech-Language-Hearing Association, Council on Education for Public Health, National Council for Accreditation of Teacher Education, National Association of State Directors of Teacher Education and Certification.

College of Social Work

Council on Social Work Education.

University Officials

Board of Trustees

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Administrative Officers

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Ed Walton, *Executive Vice President for Administration and Chief Financial Officer*

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Larry Thomas, *Vice President for Communications*

Monica Delisa, *Vice President for Development*

Julian R. Williams, *Vice President for Diversity, Equity and Inclusion*

Caroline Agardy, *Vice President for Human Resources*

Doug Foster, *Vice President for Information Technology and Chief Information Officer*

Prakash Nagarkatti, *Vice President for Research*

Dennis Pruitt, *Vice President for Student Affairs and Vice Provost for Academic Support*

Bill Kirkland, *Executive Director of the Office of Innovation, Partnership, and Economic Engagement*

Walter "Terry" Parham, *General Counsel and Executive Director of Compliance Programs*

Ray Tanner, *Director of Athletics*

THE SCHOOL OF MEDICINE - COLUMBIA

Vision, Mission, Values

Vision

To be part of a vibrant academic health center that provides access to the best evidence-based medical care and biomedical education, supported by research and cutting edge technologies.

Mission

We serve the people of South Carolina and beyond through exemplary medical and health education, transformative research, and compassionate patient care.

Values

Excellence

We are committed to achieving the highest levels of personal and professional performance in all our endeavors.

Professionalism

We adhere to the highest standards of behavior guided by the values and practices of our professions.

Collaboration

We partner with individuals, teams, institutions and communities to enhance the value of our efforts.

Diversity and Inclusion

We create and sustain an inclusive and diverse environment, demonstrating in word and deed our commitment to valuing and supporting each other and those whom we serve.

Compassion

We are resolute in our efforts to relieve suffering and promote fairness.

History

In 1973, after considerable prior public discussion and planning, the South Carolina Commission on Higher Education and the State Legislature authorized the University of South Carolina to apply for a grant from the Veterans Administration to assist in the development of the medical school; the grant (funded through the Teague-Cranston Act) was approved in 1974. Faculty recruitment and curriculum planning began in 1975 and in 1976 the School of Medicine received provisional accreditation from the Liaison Committee on Medical Education of the American Medical Association and the Association of American Medical Colleges. In February 1977, the school was granted approval for the admission of the first class of 24 medical students in the fall of 1977.

The Charter Class graduated in May 1981, at which time the School of Medicine was fully accredited by the Liaison Committee on Medical Education. Medical student class size has more than tripled since the entrance of the first class.

The School of Medicine's educational programs were further augmented by the establishment of the Ph.D. Program in Biomedical Science in 1981, the M.S. Program in Genetic Counseling in 1985, the M.S. Program in Nurse Anesthesia 1993, and the M.S. Program in Biomedical Science in 1998. The University's M.S. Program in Rehabilitation Counseling program was transferred to the School of Medicine in 1994. A M.S.

Program in Physician Assistant Studies opened in 2017. Residency programs in emergency medicine, family medicine, internal medicine, neurology, obstetrics and gynecology, ophthalmology, orthopaedic surgery, pediatrics, plastic surgery, preventive medicine, psychiatry, and surgery are cosponsored with Prisma Health and the Dorn Veterans Administration Medical Center. Fellowships in surgical, medical, and psychiatric specialties are offered by individual School of Medicine departments in conjunction with Prisma Health.

The School of Medicine's basic science campus, consisting of fully renovated historic buildings, is located four miles from the Columbia campus of the University of South Carolina. The complex provides excellent teaching and research facilities. Most clinical departments are located on the campus at Prisma Health-Richland in central Columbia.

Affiliated hospitals in Columbia include the WJB Dorn Veterans Administration Medical Center, the Prisma Health including Prisma Health Richland Hospital and Prisma Baptist Medical Center. In 2014, the School of Medicine's affiliation with the Greenville Hospital System (GHS) ended.

That affiliation had provided School of Medicine students the opportunity for completion of core third- and fourth-year clerkships and rotations at the GHS facility. The last students from the School of Medicine trained at GHS graduated in 2015.

The School of Medicine started a regional branch campus in 2014 that allows third- and fourth-year students to take core clerkships in Florence, SC. Faculty have been credentialed in all clerkships in addition to elective areas. A regional assistant dean, student services director, and site assistant clerkship directors have been hired. Feedback has been good with students reporting hands on opportunities in procedures, close apprentice-like teaching relationships with faculty and family medicine residents, and great support from the community and institutions. The students at Florence are also enrolled in a longitudinal professional leadership seminar. This partnership is in collaboration with MUSC Health Florence, McLeod Health System, and Francis Marion University.

To aid expanding activities among the various sites and institutions, the School of Medicine has established an extensive high definition video conferencing system at all three Columbia campuses, assisted GHS-UMC in developing a comparable video conferencing capability in Greenville, and installed and maintains video conference units at all three Rural Primary Care Education Centers. The School of Medicine has developed a reputation for its primary care medical education and for the excellent quality of students graduating from the medical school. The medical school collaborates closely with state agencies involved in health service delivery, sponsors research focused primarily on South Carolina health care needs, and provides a wide range of clinical care services to South Carolinians.

To further enhance the educational opportunities for our students, the School of Medicine also signed affiliation agreements with Grand Strand Regional Medical Center in Myrtle Beach, SC to allow third- and fourth-year student electives, and with Providence Hospital in Columbia for part of the surgery clerkship.

Additionally, the School of Medicine has begun integration with its major partner's practices, Prisma Health. This integration will add additional training sites and faculty for education, provide ability for the health care system to provide population health services, and to better serve our patients and learners due to an improved financial environment.

In 2006, the School of Medicine began an integrated ultrasound curriculum for medical students, the first in the nation. Since that time, the School of Medicine has hosted the First and Second World Congress

on Ultrasound in Medical Education, and started the first Primary Care Ultrasound Fellowship in 2011 among many other accomplishments and initiatives in ultrasound for students.

The School of Medicine

The School of Medicine Campus

The Offices of Admissions and Enrollment Services, Student and Career Services, Curricular Affairs and Media Resources, and Diversity and Inclusion, as well as basic science departmental offices and laboratories and the Medical Library are located on the School of Medicine campus adjacent to the Dorn Veterans Affairs Medical Center. The Office of the Dean and clinical department offices are located primarily on the Prisma Health Richland Medical Park campus.

Library Facilities

The School of Medicine Library serves as the School of Medicine's information gateway to over 10,000 biomedical electronic journals, over 1,300 electronic textbooks (Access Medicine, Clinical Key), over 90 biomedical databases (MEDLINE, Cochrane Library, Essential Evidence Plus, Micromedex, Web of Science), a diagnostic decision support system (DxPLAIN), and consumer health information. The library also is a member of PASCAL (Partnership Among South Carolina Academic Libraries) and participates in a state-wide Shared Library Services Platform along with dozens of other academic institutions across South Carolina. This platform, a discovery tool for collective online catalogs, allows the sharing of resources statewide, and includes access to PASCAL Delivers, the mechanism for the cooperative loaning of materials.

The Library's print collection consists of more than 71,000 volumes. The Library provides information resources to meet the needs of the School's faculty, staff, and students and the larger UofSC community, area health care professionals, and consumers. In its role as a resource library in the National Network of Libraries of Medicine Southeastern/Atlantic Region, the Library also provides information services to all health care professionals in South Carolina. Professional librarians offer reference services, customized literature searches, and a series of on-demand classes for faculty and students on Current Awareness Tools, PubMed, Ovid, and evidence-based medicine resources. Librarians also offer course-integrated instruction to meet the specific needs of students and optimize their research and information literacy skills.

Numerous online tutorials are available to provide an overview of an e-resource and can help users improve their searching skills. The Library Liaison Service actively supports the faculty and staff of the School of Medicine, and fosters communication between the Library and School of Medicine departments. Liaison Librarians offer instruction on the use of various library resources and advise on library services and policies.

A Computer Classroom with ten workstations and an instructor's workstation is available for instructional purposes. School of Medicine students and faculty also have access to all of the print and electronic resources available from the Thomas Cooper Library of the University of South Carolina. Located on the University's main campus, the Thomas Cooper Library provides access to over 270,000 electronic journals and has a collection of nearly 3 million bound volumes. To further explore the School of Medicine Library's resources, consult the Library's web site (<http://uscmcd.sc.libguides.com/>).

Affiliated Hospitals

Prisma Health Richland

Prisma Health Richland is one of the largest acute-care facilities in South Carolina and a community teaching hospital that serves patients from every corner of the state. Boasting the region's only Level I emergency/trauma center, the Richland campus also includes the state's only freestanding heart hospital, the first children's hospital in South Carolina, and the region's only primary stroke center. Prisma Health Richland is the Midlands' hub of surgical excellence, offering robotic surgery and incision-free gamma knife radiosurgery in addition to hosting operating rooms for neurosurgery, heart surgery, and orthopaedic, laparoscopic and ear/nose/throat procedures. Among the hospital's other world-class facilities and specialty services are a simulation center, breast center, cancer centers, women's services, a mental/behavioral health services network, and an acclaimed research division that sponsors and conducts innumerable clinical trials. Through its affiliation with the University of South Carolina School of Medicine, Prisma Health Richland hosts over 20 residency and fellowship programs in a wide range of specialties and subspecialties. The hospital is the clinical home to residencies in dentistry, emergency medicine, family medicine, internal medicine, neurology, obstetrics/gynecology, ophthalmology, orthopaedic surgery, pediatrics, plastic surgery, preventive medicine, psychiatry and surgery. Fellowship programs include EMS and simulation, emergency medicine ultrasound, sports medicine, cardiology, endocrinology, geriatrics, infectious disease, pulmonary, child and adolescent psychiatry, forensic psychiatry, geriatric psychiatry, and critical care.

Dorn Veterans Affairs Medical Center

The WJB Dorn Veterans Administration Medical Center is one of the most active VA Medical Centers in the South Carolina-Georgia region which includes Primary Care, Specialty Care, Mental Health, Acute, Medical, Surgical, Psychiatric, Physical Medicine and Rehabilitation, Neurology, Oncology, Dentistry, Geriatrics and Extended Care. Community-Based Outpatient Clinics are located in Anderson, Greenville, Florence, Orangeburg, Spartanburg, Sumter and Rock Hill, SC. VA Administrative support is provided for the Florence National Cemetery in Florence, SC and Fort Jackson National Cemetery in Columbia, SC; the Vet Centers located in Greenville, SC and Columbia, SC; and the VA Regional Office, which is located on the west side of the Dorn VAMC campus.

South Carolina Department of Mental Health

Various clinical facilities of the South Carolina Department of Mental Health provide diverse clinical experiences for medical students: G. Werber Bryan Psychiatric Hospital provides inpatient psychiatric and forensic treatment and evaluation services to adults; Patrick B. Harris Psychiatric Hospital, provides inpatient psychiatric treatment to adults; Morris Village, provides inpatient treatment for adults with alcoholism and drug abuse or addiction and addiction accompanied by psychiatric illness; C. M. Tucker Nursing Care Center, comprised of two licensed nursing homes (Roddey, a general nursing home; Stone, a veterans nursing home) providing intermediate and skilled long-term care.

Carolinas Hospital System

Carolinas Hospital System is located in Florence, SC. Home to the area's first accredited Chest Pain Center, the hospital provides comprehensive acute care, cancer care, cardiac care, emergency/trauma services, maternity care, and an array of specialized rehabilitation programs.

MUSC Health Florence

MUSC Health Florence is located in Florence and serves the Pee Dee region of South Carolina. A Level II trauma center and one of four

designated perinatal centers in the region; the facility includes a heart and vascular center and one of the nation's largest hospital-based health and fitness centers.

Rural Primary Health Care Centers

The John A. Martin Primary Health Care Center, located adjacent to the Fairfield Memorial Hospital in Winnsboro, South Carolina, 35 miles from Columbia, provides medical care to residents of primarily rural Fairfield County and serves as teaching facilities for medical students during the third-year family medicine clerkship.

Academic Regulations

Honor Code

All students enrolled in the School of Medicine are members of the student body of the University of South Carolina and are, therefore, subject to the regulations found in the Carolina Community, a publication of the University's Division of Student Affairs and Department of Academic Support. The Carolina Community contains a description of the procedures for administration of the Honor Code and other University policies. Questions regarding these policies may be directed to personnel in the School of Medicine Office of Student and Career Services.

Students enrolled in the School of Medicine adhere to the University Honor Code, as follows: It is the responsibility of every student at the University of South Carolina to adhere steadfastly to truthfulness and to avoid dishonesty, fraud, or deceit of any type in connection with any academic program. Any student who violates this Honor Code or who knowingly assists another to violate this Honor Code shall be subject to discipline. A violation of the Honor Code may result in suspension or dismissal from the School of Medicine.

Student Conduct and Behavior

Students enrolled in the School of Medicine should conduct themselves in an appropriately professional manner as defined by the School of Medicine Policy on Evaluation of Personal and Professional Conduct. Conduct should be in conformity with the high moral and ethical standards of the profession as well as within the legal constraints of any law-abiding community.

Policy on Evaluation of Personal and Professional Conduct

Medical students have the responsibility to maintain the highest levels of personal and professional integrity and to show compassion and respect for themselves, colleagues, faculty, staff, and, most important, the patients who participate in their education.

Evaluation of the personal and professional conduct of medical students will include the following general and specific considerations:

1. The student will show concern for the welfare of patients. He or she will:
 - a. display a professional attitude in obtaining medical histories and physical examinations;
 - b. act appropriately and respectfully in all verbal and nonverbal interactions with patients;
 - c. treat patients with respect and dignity, both in the presence of patients and in discussions with professional colleagues; and
 - d. display concern for the total patient.
2. The student will show concern for the rights of others. He or she will:

- a. demonstrate a considerate manner and cooperative spirit in dealing with professional staff, colleagues, and members of the health-care team;
 - b. treat all persons encountered in a professional capacity with equality regardless of race, religion, sex, handicap, sexual orientation, or socioeconomic status; and
 - c. assume an appropriate and equitable share of duties among peers and colleagues.
3. The student will show evidence of responsibility to duty. He or she will:
 - a. effectively and promptly undertake duties, follow through until their completion, and notify appropriate persons in authority of problems;
 - b. be punctual and present at rounds, conferences, and all academic and clinical obligations;
 - c. notify course and clinical clerkship directors (or other appropriate persons) of absence or inability to attend to duties;
 - d. see assigned patients regularly and, with appropriate supervision, assume responsibility for their care; and
 - e. ensure that he or she can be promptly located at all times when on duty.
 4. The student will be trustworthy. He or she will:
 - a. be truthful and intellectually honest in all communications;
 - b. accept responsibility and establish priorities for meeting multiple professional demands and for completing work necessary for the optimal care of patients;
 - c. accurately discern when supervision or advice is needed before acting; and
 - d. maintain confidentiality of all patient information.
 5. The student will maintain a professional demeanor. He or she will:
 - a. maintain appropriate standards of personal appearance, attire, and hygiene for the patient population served;
 - b. maintain emotional stability and equilibrium under the pressures of emergencies, fatigue, professional stress, or personal problems; and
 - c. be responsible in the use of alcohol and prescription drugs and avoid their effects while on duty.
 6. The student will possess those individual characteristics required for the practice of medicine. He or she will:
 - a. be capable of making logical diagnostic and therapeutic judgments;
 - b. communicate effectively with patients, supervisors, and peers;
 - c. establish appropriate professional relationships with faculty, colleagues, and patients; and
 - d. show evidence of the ability to be perceptive, introspective, and insightful in professional relationships.

Notification of Student Rights Under FERPA

The Family Educational Rights and Privacy Act (FERPA) affords students certain rights with respect to their education records. These rights include:

1. The right to inspect and review the student's education records within 45 days of the day the University receives a request for access.

A student should submit to the registrar, dean, head of the academic department, or other appropriate official, a written request that

identifies the record(s) the student wishes to inspect. The University official will make arrangements for access and notify the student of the time and place where the records may be inspected. If the records are not maintained by the University official to whom the request was submitted, that official shall advise the student of the correct official to whom the request should be addressed.

2. The right to request the amendment of the student's education records that the student believes are inaccurate, misleading, or otherwise in violation of the student's privacy rights under FERPA.

A student who wishes to ask the University to amend a record should write the University official responsible for the record, clearly identify the part of the record the student wants changed, and specify why it should be changed.

If the University decides not to amend the record as requested, the University will notify the student in writing of the decision and the student's right to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the student when notified of the right to a hearing.

3. The right to provide written consent before the University discloses personally identifiable information from the student's education records, except to the extent that FERPA authorizes disclosure without consent. The University may disclose Directory Information without prior written consent, unless the student has submitted a written request to the Office of the University Registrar not to release Directory Information pertaining to him or her. Students are notified annually, both in the academic bulletins and via email, of their rights under FERPA and are provided with instructions on how to request a "Confidentiality Indicator" on their academic record which prevents the disclosure of Directory Information. A Confidentiality Indicator will be placed on the release of Directory Information filed with the University Registrar, which will remain in effect until the student files a written request to remove it. A request not to disclose Directory Information applies to the entire category of such information and cannot be selective with regard to specific items defined as Directory Information. Similarly, a request not to disclose Directory Information applies to all individuals and cannot be selective with regard to specific individuals or organizations.

- The University discloses education records without a student's prior written consent under the FERPA exception for disclosure to school officials with legitimate educational interests. A school official is a person employed by the University in an administrative, supervisory, academic or research, or support staff position; a person or company with whom the University has contracted as its agent to provide a service instead of using University employees or officials (such as an attorney, auditor, service provider or collection agent); a person serving on the Board of Trustees; or a student serving on an official committee, such as a disciplinary or grievance committee, or assisting another school official in performing his or her tasks.
- A school official has a legitimate educational interest if the official needs to review an education record in order to fulfill his or her professional responsibilities for the University.
- To officials of other institutions in which the student seeks or intends to enroll provided that the student had previously requested a release of his/her record;
- To authorized representatives of the U.S. Department of Education, U.S. Department of Defense (Solomon Amendment), U.S. Attorney General, the Comptroller General of the United States, state education authorities, organizations conducting studies for or on behalf of the University, and accrediting organizations; to the Department

of Homeland Security (DHS) and its Immigration and Customs Enforcement Bureau (ICE) in order to comply with the requirements of SEVIS.

- In connection with a student's application for, and receipt of, financial aid;
- To comply with a judicial order or lawfully issued subpoena;
- To parents of dependent students as defined by the Internal Revenue Code, Section 152;
- To appropriate parties in a health or safety emergency; or
- To the alleged victim of any crime of violence or the results of any disciplinary proceedings conducted by the University.
- The University may disclose the result of a disciplinary proceeding to a parent or guardian so long as the student is under the age of 21 at the time of the incident and the proceeding has resulted in a violation of University drug or alcohol policies, or any federal, state, or local law.
- To students currently registered in a particular class, the names and email addresses of others on the roster may be disclosed in order to participate in class discussion.

Release of Directory Information

In accordance with section 99.7 of the Family Educational Rights and Privacy Act (FERPA), the University of South Carolina provides students annual notification of their FERPA rights. The University of South Carolina has designated certain items as Directory Information. At the University of South Carolina, these items are as follows:

- Name
- Dates of Attendance
- Campus
- College or School
- Classification
- Primary Program of Study
- Full-time or Part-time Status
- Degree(s) Awarded Including Dates
- Honors and Award Including Dean's and President's List
- University Email Address
- City, State, and Zip Code Associated with a Student's Permanent Address

The University may disclose Directory Information without prior written consent, unless the student has submitted a written request to the Office of the University Registrar not to release Directory Information pertaining to him or her. Students are notified annually, both in the academic bulletins and via email, of their rights under FERPA and are provided with instructions on how to request a "Confidentiality Indicator" on their academic record which prevents the disclosure of Directory Information. A Confidentiality Indicator will be placed on the release of Directory Information filed with the University Registrar, which will remain in effect until the student files a written request to remove it. A request not to disclose Directory Information applies to the entire category of such information and cannot be selective with regard to specific items defined as Directory Information. Similarly, a request not to disclose Directory Information applies to all individuals and cannot be selective with regard to specific individuals or organizations.

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

Family Policy Compliance Office
U.S. Department of Education
400 Maryland Avenue, SW
Washington, DC 20202-5901

Transcripts and Other Documents

All transcripts must be requested in writing from the Office of the University Registrar. A fee of \$12 is charged for each transcript copy requested, unless the transcript is for use with a current application to The Graduate School. <http://registrar.sc.edu/html/transcripts/default.stm>.

No transcript will be issued to/for a student who is indebted to the University.

With the exception of copies made for internal University use, no copy of a student's record will be released to anyone (including the State Department of Education) without the student's written consent.

Medical Licensure

Each state has its own licensing board with its own medical licensure requirements. Consequently, although the Doctor of Medicine program at the University of South Carolina School of Medicine is fully accredited by the Liaison Committee on Medical Education (LCME), thereby making its graduates eligible for professional licensure in the state of South Carolina, students must complete the process and requirements for professional licensure in the state of their residency. For students who are not living and completing residency in South Carolina, the following link provides information regarding medical licensure specific to individual states throughout the U.S.

<https://www.fsmb.org/contact-a-state-medical-board> (<https://www.fsmb.org/contact-a-state-medical-board/>)

If a current student is considering relocating to another state after being admitted into the Doctor of Medicine program, the student must contact the Director of Enrollment Services to discuss how the move may impact their ability to participate in academic courses and clinical rotations in a different state.

Medical Student Performance Evaluation

The Medical Student Performance Evaluation (MSPE) is a comprehensive assessment of a student's performance in achieving the educational objectives of the University of South Carolina School of Medicine-Columbia's medical school curriculum. It is neither a letter of recommendation nor the school's prediction of the student's future performance in a residency program. The MSPE is prepared by faculty and staff in the Office of Medical Education and Academic Affairs and transmitted to post-graduate programs to which the student is applying.

The MSPE, as an institutional assessment, is considered a component of the student's academic record, and thus students at the University of South Carolina School of Medicine-Columbia have the option to review the MSPE in its entirety prior to its transmission. The student is permitted to correct factual errors in the MSPE but not to revise any evaluative statements. The student may, however, appeal to the Associate Dean for Medical Education and Academic Affairs for changes

to evaluative statements. The Associate Dean has the final authority as to the content of the MSPE.

The MSPE is required for fellowship applications and for re-applicants going back through the Match, and it will be resubmitted in its entirety for graduates who request/require its resubmission. Once submitted to residency programs, the MSPE becomes a permanent part of the medical student record and will not be updated or changed to reflect activities or accomplishments during residency.

Appeals Regarding University Records

To ensure that records are not inaccurate or misleading, an appropriate hearing board provides students the opportunity to challenge the content of University records, and a procedure for requesting correction or deletion of any inaccurate, misleading, or otherwise inappropriate data contained therein. Such requests should be made through the petitions committees of the individual campuses.

Policy on Registration/Records/Diploma Holds

Registration Hold

Every student is expected to discharge all obligations to the University as promptly as possible. Students who fail to meet their obligations to the University will not be permitted to register for classes.

Transcript and Diploma Holds

No student or individual duly authorized by the student shall be issued a copy of the student's transcript or receive verification, oral or written, of information contained therein, or be issued a diploma if the student is indebted to the University, the School of Medicine or any affiliated training institutions or agencies and/or if a student is in arrears or default on student loans, and/or if a student fails to participate in required assessment activities. However, requests for verification of enrollment will be fulfilled in circumstances required for student loans as required for use of Title V funds.

Evaluating the Curriculum

A realistic medical curriculum must be flexible, capable of withstanding continuous monitoring, and capable of adjustment to accommodate current changes in medical education brought about by changes in the needs of society. The Curriculum Committee, therefore, with the assistance of special subcommittees and with faculty and student input, continually monitors the curriculum in order to ensure that the goals and objectives of the curriculum and the School of Medicine are achieved.

Academic Workload Policy for Students in the Preclinical Curriculum

The University of South Carolina School of Medicine-Columbia recognizes that the time spent in acquiring knowledge is critical to achieving a solid and sound medical education. However, in order to ensure that the learning objectives and intended learning outcomes are not complicated by scheduled contact hours in the preclinical educational experience, this policy places limitations on the weekly academic workload.

Educational engagement hours (i.e., didactic and self-directed learning) for medical students in the preclinical curriculum are not to exceed an average of 20 hours of required educational activity per week when averaged over the total semester's weekly class schedule. An additional 10 hours of scheduled group activity (e.g. laboratories, small

group case-based sessions, problem based learning) is allowed per week.

The academic workload expectations for each course (i.e. the assigned period of contact hours allotted to a course each week) will correspond to the number of assigned credit hours. Each self-directed learning hour is given the same weight as a didactic hour when calculating a course's contact hours.

The monitoring of all scheduled educational activities, and thus the student academic workload, resides with the Curriculum Committee with input from respective subcommittees and assistance from the Office of Curricular Affairs. - Approved 12-10-2015

Class Attendance

Absences

Enrollment in the School of Medicine obligates students to complete all assigned course work promptly and to attend classes on a punctual and regular basis. Absences, whether excused or unexcused, do not absolve the student of these responsibilities.

Grade Penalties for Excessive Absences

Students are expected to attend all regular class sessions. The course or clerkship director has the prerogative to exact a grade penalty for excessive absences. Unsatisfactory class attendance may be considered adequate reason for the instructor to refer to the Student Promotions Committee for consideration in the promotion process.

Notification of the Office of Student and Career Services

Any student who finds it necessary to be absent from a quiz, examination, or other required academic experience due to an emergency situation, illness, or hospitalization, is required to notify the Office of Student and Career Services and the affected course/clerkship director(s) of the reason for the absence prior to the absence or as soon as possible thereafter. Notification should be in the form of a phone call, voice message, or email to both the Office of Student and Career Services and the course/clerkship director(s). When requested, the student will provide written verification of the reason for the absence from the treating physician or other professional to the assistant dean for student affairs. Within the guidelines of University of South Carolina policy, the course/clerkship director will determine whether or not an absence from class shall be excused. Under these guideline, absences from examinations, structured laboratory assignments, or other academic requirements may be made up at the discretion of the course or clerkship director.

Lack of Notification

Any student who does not provide appropriate notification to the Office of Student and Career Services and/or who does not provide written verification of the reason for the absence when requested to do so may forfeit the opportunity to make up missed examinations and/or other academic experiences.

Inclement Weather Policies for M-I and M-II Students

School of Medicine M-I and M-II classes are canceled when University of South Carolina classes are canceled in times of inclement weather. School of Medicine M-I and M-II classes begin on a delayed schedule when University of South Carolina classes begin on a delayed schedule in times of inclement weather.

Inclement Weather and Holiday Policies for M-III and M-IV Students

The inclement weather and holiday policies that have been developed and approved for M-III and M-IV students are discussed in the Student Handbook to Clinical Rotations and in the Clerkship Director Handbook, both of which may be accessed through the Office of Curricular Affairs Webpage.

Grading System

Credit Grades

The grade point average (GPA) is calculated by dividing the total grade points earned by the hours attempted for credit.

Description	Letter Grade	GPA	Numerical Grade ¹
Superior	A	4.0	90-100
Above Average	B+	3.5	85-89
Average	B	3.0	80-84
Satisfactory	C+	2.5	75-79
Marginal	C	2.0	70-74
Poor	D	1.0	65-69
Failure	F	0.0	below 65

Course grades of D or lower cannot be accepted for degree requirements.

¹ Any final numeric grade in a course or clerkship whose first decimal place is calculated to be .5 to .9 shall be rounded to the next whole number, while grades whose first decimal place is calculated to be .0 to .4 should be rounded down to the lower number.

Other Symbols

Other symbols used in the grading system are defined below. These grades do not carry grade points.

S - Satisfactory or passing to be used in evaluating work done on a Pass-Fail basis

U - Unsatisfactory or failure to be used in evaluating work done on a Pass-Fail basis

W - Withdrawal passing, or without penalty, from a course or clerkship

WF - Withdrawal failing, or with penalty, from a course or clerkship

AUD - Course or clerkship was carried on an audit basis

I - Incomplete failure to complete some portion of the assigned work in a completed course or clerkship

NR - No report to be used in the absence of any of the above grades; a temporary mark, to be replaced subsequently by a regular grade, which can be used only when no grade has been assigned

The faculty of the School of Medicine is committed to the philosophy that satisfactory performance is expected of all students. No single course or clerkship or area of study is deemed to be more important than any other. The required courses and clerkships of the curriculum are all essential for the practice of medicine, regardless of the student's future specialty choice.

GPA/Honors/Class Rank

At the conclusion of each academic semester and academic year, the class rank for each student is calculated on the basis of cumulative GPA. The GPA for a student who has repeated a semester/year includes all hours attempted and grades earned. For purposes of promotion only under the minimum 2.000 GPA rule, hours and grades earned during the original year are not considered in GPA calculation.

Graduation honors are based on the cumulative GPA at the end of the fourth year. Honors are noted on the student's diploma and transcript as follows: cum laude 3.500 - 3.749; magna cum laude 3.750 - 3.999; summa cum laude 4.000. Transfer students from schools which assign grades on a pass/fail basis or which do not award grade points are not eligible for graduation honors. To be eligible for honors, transfer students must earn the qualifying grade point average for all work completed at the University of South Carolina, as well as for the transfer work.

Student Appeal of Grades

The procedures herein shall not extend to matters of grading student work where the substance of a complaint is simply the student's disagreement with the grade or evaluation of his/her work. Such matters shall be discussed by a student and his/her instructor; final authority shall remain with the instructor. Students have the right to be graded in an equitable manner, free from arbitrary bias or capriciousness on the part of faculty members. The basis of a student grievance shall be a violation of Teaching Responsibility policies contained in the Faculty Manual (http://www.sc.edu/policies/facman/Faculty_Manual_Columbia.pdf); or a violation of the policies on Protection of Freedom of Expression or Protection against Improper Disclosure, as stated in the Carolina Community.

Students who believe they have the right to grieve under this policy should, within 30 calendar days of receiving a grade, contact the Associate Dean for Medical Education and Academic Affairs to review the appeals process.

1. Appeal of a Course Grade and/or Written Evaluation

a. Initiating an Appeal

- i. Students must submit all appeals in writing to the course/ clerkship director.
- ii. Students must send copies of the appeal to the Associate Dean for Medical Education and Academic Affairs.
- iii. The written appeal must clearly state the grievance.
- iv. Students must initiate an appeal within 30 calendar days of notification of the grade or evaluation.

b. Appeal to the Course or Clerkship Director Level One

- i. The first level of appeal of a course grade and/or written evaluation is to the course or clerkship director.
- ii. Should the course or clerkship director determine that there is a reason to change the course grade or evaluation in the student's favor, the director will send a request for revision to School of Medicine Registrar, who will in turn take the request to the Grade Change Subcommittee. If no reason for change is found, the course or clerkship director will inform the student that the grade or evaluation stands. In either event, the student must receive written notification of the course or clerkship director's decision within ten working days of the student's appeal.

c. Appeal to the Department Chair Level Two

- i. If the course or clerkship director's decision is not favorable to the student, the student's clerkship director's decision.
 1. For departmentally based courses, the student may appeal the course or clerkship director's decision to the department chair.
 2. For team-taught courses, the student may appeal the course or clerkship director's decision to the department chair responsible for management of the course.
 3. The appeal must be made within 10 days of receiving the decision from the course or clerkship director.

- ii. After consultation with the course or clerkship director, the department chair may uphold the director's decision or support the student appeal. Should the department chair determine that there is a reason to change the course grade or evaluation in the student's favor, the department chair will send a request for revision to the School of Medicine Registrar, who will in turn take the request to the Grade Change Subcommittee. If no reason for change is found, the chair will inform the student that the grade or evaluation stands. In either event, the student must receive written notification of the department chair's decision within ten working days of the student's appeal.

d. Appeal to the Grade Change Committee Level Three

- i. If the student is dissatisfied with the decision of the department chair, the student may submit a written appeal to the Grade Change Subcommittee via the School of Medicine Registrar with a copy of the appeal to the Associate Dean for Medical Education and Academic Affairs.
- ii. The written appeal must state grounds for the grievance.
- iii. The appeal must be made within 10 days of receiving the decision from the department chair.
- iv. The Grade Change Subcommittee will then either:
 1. Rule that the appeal lacks the merit to warrant a hearing and will uphold the decision of the department chair.
 2. Rule that the appeal has the necessary merit for a hearing and will schedule a hearing on the appeal.
- v. The Grade Change Subcommittee decision is the final decision for Course grade or Written Evaluation appeals.

2. Faculty Grievance Procedure

- a. A faculty member who feels that he/she has been aggrieved as a result of a student appeal proceeding has the right to appear before the Faculty Grievance Committee and present his/her case of the committee.

Curriculum Accommodations

The School of Medicine will provide reasonable accommodations for students with documented disabilities. Students wishing to request accommodations should make application to the University's Office of Student Disability Services. Once accommodations are approved, the School of Medicine will be notified. The application must be made in a timely manner prior to any coursework for which accommodation is requested. The assistant dean for preclinical curriculum, when indicated, will advise course directors and other pertinent faculty as to the nature and extent of the accommodations to be provided. The School of Medicine, through the subcommittee of the Curriculum Committee, appointed by the chair, retains the right to request additional information, including test results and diagnostic information from a qualified professional, concerning accommodations that extend beyond the following: extended time for written exams, a separate room for exams,

and a note taker. Students receiving accommodations will be held to the same technical standards for graduation as other students.

The assistant dean for preclinical curriculum will also assist students in applying to the National Board of Medical Examiners for permission to take the United States Medical Licensing Examination (USMLE) under nonstandard conditions.

Leave of Absence, Administrative Leave, and Withdrawal

I. Leave of Absence

1. Request for a Leave of Absence. For a variety of reasons, it may become temporarily impossible for a student to continue a medical education. It is appropriate under such circumstances that the student present all available information and details of the situation through the assistant dean for student affairs to the Leave of Absence Committee.
2. Leave of Absence Committee. The Leave of Absence Committee is composed of School of Medicine faculty members (or their faculty designees) and the assistant dean for student affairs who serves, without vote, as secretary to the committee. The committee makes recommendations to the dean regarding the granting of a leave of absence to any student who requests a leave, informs the dean regarding the academic standing of the student at the time of the student's request for a leave, and makes recommendations to the dean regarding a student's return from a leave of absence to full-time student status. According to School of Medicine regulations, a student will be considered as being in good academic standing if he or she had an overall 2.000 grade point average at the conclusion of the prior semester and had passing grades in all courses in the current semester at the time of the request for a leave of absence. A student who leaves the school in good academic standing and returns will not be considered as repeating the semester or year. A student who leaves the school not in good academic standing and returns will be considered as repeating the semester or year. Any student granted a leave of absence is assigned a grade of W in all courses or clerkships in which he or she was enrolled. In that a leave of absence relieves the student of usual academic responsibilities in the School of Medicine, the Leave of Absence Committee reserves the right to recommend to the dean that a leave of absence be granted with stated conditions, stipulations, and/or contingencies that, in the opinion of the committee, are in the best interest of the student, will serve to document the student's ability to return to full-time student status at the conclusion of the leave of absence, and/or will preserve the integrity of the School of Medicine curriculum.
3. Procedure. Each student who requests a leave of absence will be invited to meet with the Leave of Absence Committee and to present relevant materials for the committee's review, including such statements and professional opinions that the student believes will support a request for a leave of absence. The Leave of Absence Committee will review the statements and professional opinions presented by the student in making its recommendations to the dean about a leave of absence, but such statements or opinions presented by the student are not binding on the Leave of Absence Committee. The student may be accompanied to the committee meeting by one or two advisors of personal choice. The committee meeting is an informal, nonadversarial proceeding. The student may consult with the chosen advisor(s) at any time during the meeting, but the

advisor(s) will not be permitted to speak on the student's behalf or to ask questions of committee members.

The committee will inform the dean and the student, in writing, of its recommendation.

4. Decision of the dean. After receiving the recommendation of the Leave of Absence Committee, the dean or his/her designee will invite each student for whom the committee has recommended that a leave of absence not be granted to meet. At this informal and nonadversarial meeting, the student may discuss his or her individual situation and present relevant materials (including a personal statement of a maximum of 10 pages, double-spaced) for the dean's review. The student can be accompanied to this meeting by one or two advisors of personal choice and can consult with the advisor(s), but the advisor(s) will not be permitted to speak on the student's behalf or to ask questions of the dean. The dean will inform each student in writing within 10 working days of this meeting of the decision regarding a leave of absence and of the process of review in the dean's decision.
5. Length of a Leave of Absence. No leave of absence will be granted for a period of time exceeding 12 consecutive months. Any student taking a leave of absence for more than 16 weeks during the third year or fourth year of the medical curriculum will be required to complete the entire third year or fourth year in sequence upon a return to full-time student status.
6. Number of Leaves of Absence. Except under extraordinary circumstances, the School of Medicine will grant only one leave of absence to any student during his or her medical education.
7. Return from Leave of Absence. The Leave of Absence Committee reserves the right to require a meeting with a student prior to his or her return from a leave of absence in order to document the ability to resume full-time student status in the School of Medicine. At this meeting, the student may submit to the Leave of Absence Committee such statements and/or professional opinions that the student believes will support the contention that he or she is prepared to resume full-time student status. The Leave of Absence Committee will review the statements and professional opinions presented by the student in making its recommendations to the dean about the student's return from a leave of absence, but such statements or opinions presented by the student are not binding on the Leave of Absence Committee.
8. Independent Evaluation. The School of Medicine reserves the right to require a student to undergo an independent evaluation, at the School of Medicine's expense, by a physician mutually agreeable to the student and the School of Medicine prior to the student's return from a leave of absence to full-time student status.
9. Review Process. The review process for any decision made by the dean of the School of Medicine can be found in Section V of the "Student Promotions Committee" section.

II. Administrative Leave

During the course of a student's medical education it may become necessary for the student to be placed on administrative leave. A student may be placed on administrative leave due to academic, personal, and/or professional reasons. The associate dean for medical education and academic affairs, in consultation with the chair of the Leave of Absence Committee and the dean, may place a student on administrative leave.

All policies and procedures related to a leave of absence (Section I. A.-I.) will be in effect for any administrative leave.

Any student who is unsuccessful on a first or second attempt at Step 1 of the United States Medical Licensing Examination (USMLE) will be placed on administrative leave according to the policies and procedures for promotion and graduation.

III. Withdrawal

Occasionally a student may decide to withdraw from the School of Medicine without an approved leave of absence. All withdrawals will be made in accordance with University of South Carolina policies if the student is to receive a tuition refund and have the proper grades recorded on the transcript. The School of Medicine uses the University schedule for refunds for any student who is dismissed or who withdraws.

A student who withdraws from the School of Medicine and who subsequently wishes to return to school must make application through the Admissions Committee as a new applicant.

Promotion and Graduation

I. United States Medical Licensing Examination

1. Requirements. Students in the School of Medicine are required to pass the United States Medical Licensing Examination (USMLE) Steps 1 and 2 prior to graduation. Students are required to pass Step 1 in order to be promoted to the third year and to progress to third-year clerkships. Students are permitted a maximum of three attempts at Step 1 and at Step 2. Failure on the third attempt at Step 1 or Step 2 will render students subject to dismissal from the School of Medicine. Students must be enrolled in the School of Medicine in order to take Step 1 or 2.
2. Timelines. Students must adhere to certain timelines and follow established application procedures in order to allow sufficient time for score reporting prior to various promotion deadlines.
 - a. Step 1. Second-year students are required to complete applications for Step 1 during the second year in sufficient time to ensure a test date by the end of June and the beginning of third-year clinical clerkships. Students must take Step 1 prior to beginning any third-year clinical clerkships or electives. Second-year students must receive an equivalent passing score on the NBME Comprehensive Basic Science Examination (CBSE) before sitting for the first attempt at Step 1. Any student not receiving an equivalent passing score on the CBSE by the start of the next academic year will sit out of the first clerkship in order to retake the CBSE and then attempt Step 1. Any student not passing the CBSE by the end of the first eight weeks of the academic year will remain out of the fall academic semester, during which time the student will be expected to continue to prepare for and successfully retake the CBSE, and then sit for Step 1 in time to receive a passing score before the start of the next academic semester.

Any second-year student who is unsuccessful on a first attempt at Step 1 and has started a clerkship will immediately be pulled from the clerkship and placed on administrative leave. The student will not earn academic credit for the clerkship and a grade of W will be received. The second attempt shall be scheduled within eight weeks of the beginning of the third year.

After completion of the second attempt the student will re-enter the third year of medical education in the next scheduled eight-week clerkship. Any student who extends preparation time beyond what is stated in this policy will need to request a leave of absence and will then be required to have a passing score reported at least two weeks before being allowed to return to educational activities. Any student placed on administrative

leave for more than 16 weeks during the third or fourth year of the medical curriculum will be required to complete the entire third year or fourth year in sequence upon a return to full-time student status.

Any second-year student who is unsuccessful on a second attempt at Step 1 will immediately be placed on an administrative leave of absence for the remainder of that academic year in order to prepare for the third and final administration of Step 1 and is expected to complete an application in sufficient time to ensure a test date and score reporting by the beginning of the first third-year clerkship period of the next academic year. In the interim, the student will not be permitted to progress further in the third year of medical education. The student will not earn academic credit for the first clinical clerkship; a grade of W will replace the Incomplete grade.

Any student who is successful on a third attempt at Step 1 will begin third-year clerkships in the first clerkship period of the subsequent academic year and is required to complete the entire third year in sequence.

- b. Step 2. Fourth-year students are expected to complete applications for Step 2 Clinical Knowledge (CK) in sufficient time to ensure test dates by the end of the fall academic semester (which falls on the last day of the sixth MIV rotation block). Any student who has not completed either portion of the Step 2 examination by this deadline will be pulled from rotation(s) until such time as the examination is taken. Any student not passing the Step 2 examination will not receive credit for the USMLE Step 2 Preparation Block (DMED D647), which in turn necessitates the student adding another elective to their fourth-year schedule. Any fourth-year student who is unsuccessful on a first or second attempt at Step 2 CK is expected to complete an application in sufficient time to ensure a test date that will allow sufficient time for the score to be reported by May 15. This date allows time for academic reporting to be complete for the May graduation from the School of Medicine.

II. Requirements for Promotion

1. Academic Progress. In order to be promoted to the next academic year or to be permitted to continue to the next academic semester, a student must be recommended for promotion or continuation to the dean by the Student Promotions Committee. A student should maintain at least a 2.000 grade point average in order to be promoted to the next academic year or permitted to continue to the next academic semester. A student receiving less than a 2.000 grade point average in an academic semester or academic year or less than a 2.000 cumulative grade point average is subject to dismissal.
 - a. Unacceptable Progress. A student who receives a D in a course or clerkship while maintaining a 2.000 grade point average will be considered as making unacceptable progress and will be required to meet with the Academic Review Subcommittee and to repeat the course or clerkship. A student permitted to repeat a clinical clerkship must repeat the clerkship at the University of South Carolina School of Medicine; a student permitted to repeat a preclinical course may repeat the course at another medical school approved by the course director and the assistant dean for preclinical curriculum. If the student fails to achieve a C or better grade in the repeated course or clerkship, the student will be subject to dismissal from the School of Medicine or will be required to repeat the academic

year, at the discretion of the dean in consultation with the Student Promotions Committee.

Upon satisfactory completion of the repeated course or clerkship, both the original D grade and the grade received in the repeated course or clerkship will be recorded on the student's transcript. Grade points and credit hours for both grades will be calculated into the cumulative grade point average which is used for promotion decisions and in the determination of class rank.

In the case of a continuing course (Biochemistry, Pathology), if a student receives a D grade in the first semester, the student will be required to attend classes in that course during the second semester and take all course examinations on a Pass-Fail basis and then repeat the entire course.

- b. Repeat of Course Failed. The grade of F is used to denote failure in a course or clerkship; a student receiving a grade of F in one or more courses or clerkships is subject to dismissal. A student receiving an F grade in a course or clerkship may be permitted by the dean, in consultation with the Student Promotions Committee, to repeat the course or clerkship. A student permitted to repeat a clinical clerkship must repeat the clerkship at the University of South Carolina School of Medicine; a student permitted to repeat a preclinical course may repeat the course at another medical school approved by the course director and the assistant dean for preclinical curriculum. If the student fails to achieve a C or better grade in the repeated course or clerkship, the student will be subject to dismissal from the School of Medicine or will be required to repeat the academic year, at the discretion of the dean in consultation with the Student Promotions Committee.

Upon satisfactory completion of the repeated course or clerkship, both the original F grade and the grade received in the repeated course or clerkship will be recorded on the student's transcript. Grade points and credit hours for both grades will be calculated into the cumulative grade point average which is used for promotion decisions and in the determination of class rank.

In the case of a continuing course (Biochemistry, Pathology), if a student receives an F grade in the first semester and the student is permitted by the dean, in consultation with the Student Promotions Committee, to continue to the next semester, the student will be required to attend classes in that course during the second semester and take all course examinations on a Pass-Fail basis and then repeat the entire course.

- c. Repeated Semester/Year. A student will not usually be permitted to repeat more than one academic semester or academic year. A student who is repeating the semester or year must receive a grade of C or better in repeated courses or clerkships in order to be promoted to the next academic year or permitted to continue to the next academic semester. A student who fails to receive a grade of C or better in repeated courses or clerkships is subject to dismissal.

If a student is required to repeat an academic semester or academic year, grade points and credit hours from the original semester or year will not be calculated into the cumulative grade point average for the purpose of promotions decisions. For all other purposes, grade points and credit hours from the original academic semester or academic year will be calculated into the cumulative grade point average.

- d. Unsatisfactory Evaluation in Personal and Professional Conduct. A student who receives an Unsatisfactory evaluation in the personal and professional conduct portion of a third- or fourth-year clerkship evaluation will receive an Incomplete grade in that clerkship. The student may or may not be permitted to continue

in other clerkships. Remediation may be determined by either the clerkship director or by the Student Conduct Subcommittee, if the clerkship director chooses to refer the issue to this committee. Remediation may include repeating the clerkship or, alternately, repeating the component(s) of the clerkship identified as necessary by the clerkship director; or by completing other requirements as outlined by either the clerkship director or the Student Conduct Subcommittee.

If referral is made to the Student Conduct Subcommittee, the committee's recommendations will be referred by the associate dean for medical education and academic affairs to the Student Promotions Committee for review. The Student Promotions Committee will make recommendations to the dean regarding academic alternatives for a student who has received (an) Unsatisfactory evaluation(s) in personal and professional conduct in a third- or fourth-year clerkship.

If a second Unsatisfactory assessment is received in the personal and professional conduct portion of the professional evaluation in a repeated clerkship, then the student will be subject to dismissal. If the student receives Exemplary or Effective grades in personal and professional conduct and a C or higher letter grade in the repeat clerkship, the student will be permitted to continue in the third or fourth year. Any additional Unsatisfactory grades in personal and professional conduct during the third year or during the fourth year will render the student subject to dismissal.

2. Personal and Professional Conduct. Student progress is based upon professional performance which includes both cognitive mastery of the basic and clinical sciences and personal and professional conduct that reflects the high standards of moral and ethical behavior and judgment necessary for professional practice as a physician. Factors which could result in a student's suspension or dismissal from the School of Medicine, regardless of grades in basic science course work and clinical clerkships and electives, include, but are not limited to, violations of the School of Medicine Policy on Evaluation of Personal and Professional Conduct, violations of University regulations as described in the Carolina Community, or conviction of a criminal offense.

III. Requirements for Graduation

Upon recommendation by the School of Medicine faculty, the University of South Carolina will confer the degree of Doctor of Medicine upon candidates who have:

1. attained the School's educational objectives as evidenced by satisfactory completion of prescribed basic science courses and clinical clerkships and electives and acquisition of all required clinical skills;
2. passed Steps 1 and 2 of the USMLE;
3. completed the clinical skills attainment document;
4. complete requirements for Institute for Healthcare Improvement (IHI) Open School Certification;
5. attended the University of South Carolina School of Medicine on a full-time basis for a minimum of two years; and
6. discharged all financial obligations to the School of Medicine and to the University.

Students enrolled in the School of Medicine will have six (6) years from the date of matriculation to complete their degree for Doctor of Medicine not including any additional time needed to complete a dual degree. If a student fails to complete his or her degree within the specified time,

he or she will be recommended for dismissal by the Student Promotions Committee.

In order to graduate in the May commencement ceremony, fourth-year students must complete successfully all academic requirements by May 31.

Student Promotions Committee

I. Academic Review Subcommittee

The Academic Review Subcommittee, composed of the chair of the Student Promotions Committee and faculty members who are not department chairs, meets at the end of each semester and at other times, as necessary, with each student who is subject to dismissal based upon School of Medicine academic regulations. The committee develops recommendations for consideration by the Student Promotions Committee regarding the student's continued enrollment and/or academic progress in the School of Medicine.

Each student who is subject to dismissal will be invited to meet with committee members in order to discuss his or her individual situation and to present relevant materials for the committee's review. The student may be accompanied to the committee meeting by one advisor of personal choice. The committee meeting is an informal, nonadversarial proceeding. The student may consult with the advisor at any time during the meeting, but the advisor will not be permitted to speak on the student's behalf or to ask questions of committee members. Given the confidential nature of this committee, the committee meeting and its deliberations are closed to nonmembers. Only the student appearing before the committee and his/her advisor will be allowed to attend. They will be excused during the deliberation of the committee.

Each student who is subject to dismissal has the right to submit, prior to the committee meeting, relevant materials, including copies of a personal statement (maximum 10 pages, double-spaced), for review by the Academic Review Subcommittee and the Student Promotions Committee. Recommendations from the Academic Review Subcommittee will be referred by the associate dean for medical education and academic affairs to the Student Promotions Committee.

II. Student Promotions Committee

The Student Promotions Committee, acting for the faculty, makes recommendations to the dean regarding each student's continued enrollment and/or academic/professional progress in the School of Medicine, including continuation to the next academic semester, promotion to the next academic year, suspension, dismissal, or any variation thereof that in the opinion of the committee is appropriate. Voting members of the committee include those faculty members who are the chairs of School of Medicine departments (or their designees) and two faculty members elected by the Faculty Representation Committee. Voting committee members will elect the chair of the Student Promotions Committee at the first meeting of each academic year. The associate dean for medical education and academic affairs will serve, without vote, as executive secretary to the committee.

The Student Promotions Committee will receive information of various types, including, but not limited to, grades, evaluations, narrative comments from course and clerkship directors, and recommendations from members of the Academic Review Subcommittee, the Student Conduct Subcommittee, and/or from personnel in the Office of Medical Education and Academic Affairs, and, where indicated, opinions from other sources, including, but not limited to, faculty members, personnel at

School of Medicine-affiliated hospitals, consultants, and representatives of relevant professional organizations.

The Student Promotions Committee reserves the right, in its deliberations about recommendations to the dean, to consider all relevant information that bears on a student's fitness to become a physician. All recommendations are made by the Student Promotions Committee to the dean, who will have the final decision within the School of Medicine.

The Student Promotions Committee will meet at the conclusion of each semester and, as necessary, at other times during the year. Criteria for continued enrollment and academic progress will be reviewed regularly. The committee will inform the dean and the student, in writing, of its recommendations. Given the confidential nature of this committee, the committee meeting and its deliberations are closed to nonmembers of the committee.

III. Academic/Professional Alternatives

The Student Promotions Committee may recommend to the dean any of the following academic alternatives:

1. permitting the student to continue to the next academic semester;
2. promoting the student to the next academic year;
3. promoting the student to the next academic year, contingent upon satisfactory completion of all academic deficiencies and contingent upon re-review by the committee;
4. requiring the student to repeat successfully a course, a clerkship, an elective, the academic semester, or the academic year;
5. suspending the student from the School of Medicine for a specified period of time, up to a maximum of one calendar year;¹
6. dismissing the student from the School of Medicine; or
7. a combination of any of the above-mentioned academic alternatives.
8. other sanctions/remediations deemed educationally and/or professionally beneficial to the student.

IV. Decision of the Dean

After receiving the recommendations of the Student Promotions Committee, the dean will invite each student for whom the Student Promotions Committee has recommended any academic alternative other than A or B (above) to meet. At this informal and nonadversarial meeting, the student may discuss his or her individual situation and present relevant materials (including a personal statement of a maximum of 10 pages, double-spaced) for the dean's review. The student may be accompanied to this meeting by one advisor of personal choice and may consult with the advisor, but the advisor will not be permitted to speak on the student's behalf or to ask questions of the dean. The dean will inform each student, in writing, within 10 working days of this meeting of the dean's decision and of the process of review of the dean's decision.

In the case of the dismissal of a first- or second-year student, a first- or second-year student will be permitted to remain enrolled in first- and second-year courses during the review process, but, if the review process has not been completed by the commencement of the third year, a second-year student will not be permitted to begin the third year until the outcome of the review process has been determined.

In the case of the dismissal of a third- or fourth-year student, notwithstanding the student's right to a review of the dean's decision, the decision of the dean is effective with the date of the dean's letter informing the student of dismissal. A third- or fourth-year student who has been dismissed from the School of Medicine will not be permitted to continue to engage in patient care activities, will not be permitted

to remain enrolled in clinical clerkships or electives, and will not be considered to be enrolled in the School of Medicine.

A student will not receive grades in any courses completed during the period of the review process and will receive any refund of tuition and fee payments according to the schedules published by the University of South Carolina.

V. Review Process

A final request for review may be made to the provost of the University of South Carolina of any decision made by the dean of the School of Medicine. This request for review must be made, in writing, within 10 working days of the student's receipt of the dean's decision.

During the review process, the student will be invited to submit to the provost a personal statement (maximum 10 pages, double-spaced) in which the grounds for the request for review are explained. There will be four possible grounds for a request for review:

1. that the decision of the dean is not supported by substantial evidence;
2. that a procedural violation has occurred that has prejudiced the dean's deliberations;
3. that, when the record is reviewed as a whole, the decision of the dean is punitive rather than academically appropriate; and/or
4. that the dean's decision is an arbitrary and capricious one.

The provost can reverse, affirm, or modify the dean's decision. Any modification of the dean's decision by the provost cannot require greater remedial effort on the part of the student than that required by the dean's original decision regarding an academic alternative.

Ideally, the outcome of the provost's review will be communicated to the student, in writing, within 30 days of the date of receipt of the request for a review. The provost's review will consist of an assessment of the student's existing record in the School of Medicine, with no new information being provided by the student or by the School of Medicine.

¹ At the end of the period of suspension, the student will submit to the Student Promotions Committee such statements and/or professional opinions believed to support the contention that the reasons for suspension have been resolved and that he or she is capable of returning to full-time student status. The Student Promotions Committee will review the statements and professional opinions presented in making its recommendations to the dean about the return of the student to full-time student status, but such statements or opinions presented are not binding on the Student Promotions Committee.

The School of Medicine reserves the right to require a student seeking to return to full-time student status from a period of suspension to undergo an independent evaluation, at the School of Medicine's expense, by a physician mutually agreeable to the student and to the School of Medicine. The report from this independent evaluation will be submitted to the Student Promotions Committee for its review prior to its making its recommendation to the dean about a student's return to full-time status, but the statements or opinions presented in this report are not binding on the committee. Following receipt of a recommendation from the Student Promotions Committee that a student not be permitted to return to full-time status after a period of suspension, the dean will invite the student to meet. At this informal and nonadversarial meeting, the student may discuss his or her individual situation and present relevant materials, including a personal statement (maximum 10 pages, double spaced) for the dean's review. The student may be accompanied to this meeting by one advisor of personal choice and may consult with the advisor, but the advisor will not be permitted to speak on the student's behalf or to ask questions of the dean. The dean will inform each student, in writing, within 10 working days of this meeting of the decision and of the process of review.

Administration

Administration

Dean: Leslie W. Hall, M.D.

Senior Associate Dean of Strategic Academic Affairs: R. Caughman Taylor, M.D.

Associate Dean for Diversity and Inclusion: Carol L. McMahon, M.D.

Associate Dean for Graduate Medical Education: Charles J. Carter, M.D.

Associate Dean for Medical Education and Academic Affairs: Joshua T. Thornhill IV, M.D.

Associate Dean for Research and Graduate Education, Francis G. Spinale, M.D., Ph.D.

Assistant Dean for Continuous Professional Development and Strategic Affairs: J. Matthew Orr, Ph.D.

Assistant Dean for Administration and Finance: Derek B. Payne, M.B.A.

Assistant Dean for Clinical Curriculum and Assessment: Brian D. Keisler, M.D.

Assistant Dean for Clinical Learning: James W. Cook, M.D.

Assistant Dean for Diversity and Inclusion: Robert M. Rhinehart, Ph.D.

Assistant Dean for Executive Affairs and Director of Library Services: Ruth A. Riley, M.S.

Assistant Dean for Information Technology and Chief Information Officer: D. Lindsie Cone, M.D.

Assistant Dean for Medical Student Education-Florence: Alan G. Sechtin, M.D.

Assistant Dean for Preclinical Curriculum: Falcia H. Harvey, Ph.D.

Assistant Dean for Student Affairs: Eric R. Williams, M.D.

Director of Admissions and Enrollment Services/Registrar: Robert M. Rhinehart, Ph.D.

Director of Medical Student Recruitment: James R. Stallworth, M.D.

Department Chairs

Chair, Department of Cell Biology and Anatomy: Wayne E. Carver, Ph.D.

Chair, Department of Family and Preventive Medicine: Jamee H. Steen, M.D.

Chair, Department of Internal Medicine: Sharon B. Weissman, M.D.

Chair, Department of Neurology: Souvik Sen, M.D.

Chair, Department of Neuropsychiatry and Behavioral Science: Meera Narasimhan, M.D.

Chair, Department of Obstetrics and Gynecology: Berry A. Campbell, M.D.

Chair, Department of Orthopaedic Surgery: Christopher G. Mazoué, M.D.

Chair, Department of Pathology, Microbiology and Immunology: Mitzi Nagarkatti, Ph.D.

Chair, Department of Pediatrics: R. Caughman Taylor, M.D.

Chair, Department of Pharmacology, Physiology and Neuroscience: Marlene A. Wilson, Ph.D.

Chair, Department of Radiology: Floyd E. Bell III, M.D.

Chair (Interim), Department of Surgery: Julian A. Kim, M.D.

Admissions

Applicants admitted to the University of South Carolina School of Medicine are selected by an admissions committee composed of members of the basic science and clinical science faculties of the School of Medicine, University faculty, medical students, and area clinicians. In making selections from each year's group of applicants, members of the Admissions Committee recognize that they are selecting future physicians. The admissions procedure is therefore an effort to select applicants who possess the individual characteristics required for both the study and practice of medicine.

The Admissions Committee considers all aspects of an applicant's application in the decision-making process. We use a holistic process to review each application, taking into account an applicant's unique academic and professional background. As a South Carolina based school, we prioritize applicants who have a significant connection to South Carolina.

Technical Standards

Technical Standards for Admission, Retention and Graduation.

The School of Medicine has adopted the following technical standards:

The curriculum of the University of South Carolina School of Medicine Columbia has been designed to provide a general professional education leading to the medical doctor (M.D.) degree and to prepare undifferentiated students to enter graduate medical training in a wide variety of medical specialties and sub-specialties. All candidates for admission to and all current students at the School of Medicine, herein after designated as candidates for the M.D. degree, should possess sufficient intellectual capacity, physical ability, emotional and psychological stability, interpersonal sensitivity, and communication skills to acquire the scientific knowledge, interpersonal and technical competencies, professional attitudes, and clinical abilities required to pursue graduate medical education and to meet all requirements for medical licensure, which are not necessarily as flexible as the School of Medicine's requirements. All candidates should be aware that the academic and clinical responsibilities of medical students may, at times, require their presence during day and evening hours, seven days per week. Candidates should be able to tolerate physically taxing workloads and to function effectively under stress. Individuals whose performance

is impaired by abuse of alcohol or other substances are not suitable candidates for admission, promotion, or graduation.

While the School of Medicine fully endorses the spirit and intent of Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1992, and the ADA Amendments Act of 2008, it also acknowledges that certain minimum technical standards must be present in candidates for admission, retention and graduation. Patient safety and well-being are considered as major factors in the determination of requirements regarding the physical, cognitive, and emotional abilities of all candidates. Those individuals who would constitute a direct threat to the health or safety of themselves, patients, or others are not considered suitable candidates for admission or retention in medical school.

The delineation of technical standards is required by the Liaison Committee on Medical Education to confirm that accreditation standards are being met. Although these standards serve to delineate the necessary physical and mental abilities of all candidates, they are not intended to deter any qualified candidate for whom reasonable accommodation will allow fulfillment of the complete curriculum. A "qualified person with a disability" is an individual with a disability who meets the academic and technical standards requisite to admission or participation in the School of Medicine's educational programs, with or without reasonable accommodations. Each applicant to the School of Medicine, as part of the school's supplemental application, is required to acknowledge in writing the reading, understanding, and meeting of all technical standards. Candidates for admission who have a disability and use accommodations should begin discussions with the University of South Carolina Student Disability Resource Center (<http://www.sa.sc.edu/sds/>) either prior to or as soon as the offer of admission is received and accepted. All candidates (admission candidates and current students) with disabilities bear the responsibility of providing that office with current information documenting the general nature and extent of the disability and the proposed accommodations. Evaluating and facilitating accommodation requests is a collaborative effort among the candidate, the School of Medicine, and the UofSC Student Disability Resource Center. The School of Medicine reserves the right to request new or additional information through the Student Disability Resource Center should a candidate/student have or develop a condition that would place patients, the candidate/student, or others at risk or that may affect his/her need for accommodation.

The School of Medicine has established the following technical standards for admission to, retention in, and graduation from, the M.D. program:

- Observation

Candidates/students must be able to observe demonstrations, collect data, and participate in experiments and dissections in the basic sciences, including but not limited to, demonstrations in animals, microbiologic cultures, and microscopic studies of microorganisms and tissues in normal and pathologic states. Candidates/students must be able to accurately observe patients and integrate these observations with the findings obtained during the elicitation of a medical history and performance of a physical examination in order to develop an appropriate diagnosis and establish a therapeutic plan.

- Communication

Candidates/students must be able to communicate effectively and efficiently in the English language in oral and written form with patients and their families and all members of the health care team.

They must be able to obtain a medical history and perform a mental status examination, interpret non-verbal aspects of communication, and establish therapeutic relationships with patients. Candidates/students must be able to accurately and clearly record information.

- Motor Function

Candidates/students must possess the capacity to perform complete physical examinations and diagnostic maneuvers. Candidates/students should be able to respond to emergency situations in a timely manner and to execute motor movements required to provide general and emergency treatment to patients.

They must adhere to universal precaution measures and meet safety standards applicable to inpatient and outpatient settings and other clinical activities. Candidates/students must be mobile and able to function independently within the clinical environment.

- Intellectual-Conceptual, Integrative and Quantitative Abilities

Candidates/students must be able to ultimately make logical diagnostic and therapeutic judgments. Candidates/students should be able to make measurements, calculate, and reason; to analyze, integrate, and synthesize data; and to problem-solve. Candidates/students should be able to comprehend three-dimensional relationships and to understand the spatial relationships of structures. Candidates/students should be able to integrate rapidly, consistently, and accurately all data received by whatever sense(s) employed.

- Behavioral and Social Attributes

Candidates/students must be able to establish appropriate relationships with a wide range of faculty members, professional colleagues, and patients. Candidates/students should possess the personal qualities of integrity, empathy, concern for the welfare of others, interest, and motivation. They should possess the emotional and psychological health required for the full use of their intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities associated with the diagnosis and care of patients, and the development of mature, sensitive, and effective relationships with patients, patients' families, and professional colleagues. They must be able to adapt to changing environments, to be flexible, and to function in the face of ambiguities inherent in the clinical situation.

In evaluating candidates for admission and candidates for the M.D. degree, it is essential that the integrity of the curriculum be maintained, that those elements deemed necessary for the education of a physician be preserved, and that the health and safety of patients be maintained. While compensation, modification, and accommodation can be made for some disabilities on the part of candidates/students, candidates must be able to perform the duties of a student and of a physician in a reasonably independent manner. An accommodation is not reasonable if it poses a direct threat to the health or safety of self and/or others, if it requires a substantial modification in an element of the curriculum that is considered essential, if it lowers academic standards, or if it poses an undue administrative or financial burden. The use of a trained intermediary would result in mediation of a candidate's judgment by another person's powers of selection and observation. Therefore, the use of trained intermediaries to assist students in meeting the technical standards for admission, retention, or graduation would constitute an unacceptable substantial modification, except in rare circumstances, and is not permitted.

The School of Medicine will consider for admission any candidate who has the ability to perform or to learn to perform the skills and abilities specified in these technical standards. Candidates for the M.D. degree will be assessed at regular intervals not only on the basis of their academic abilities, but also on the basis of their non-academic (physical, interpersonal, communication, psychological, and emotional) abilities to meet the requirements of the curriculum and to graduate as skilled and effective medical practitioners. The faculty and administration bear significant responsibility in ensuring that the technical standards are maintained by all candidates.

Preparation

While the School of Medicine does not have any prerequisite requirements, for most applicants a strong preparation in the natural sciences is highly recommended including general biology, general chemistry, organic chemistry, and biochemistry. Further advanced studies in the biological, physical and/or chemical sciences is encouraged.

Preference is given to applicants who will, upon enrollment, hold a bachelor's degree. Applicants occasionally are admitted on the basis of 90 semester hours of outstanding undergraduate achievement.

As a matter of policy, the School of Medicine can accept applications only from those individuals who are currently citizens of the United States or who are permitted by the Immigration and Naturalization Service to reside permanently in the United States.

The School of Medicine can accept applications only from those individuals who have completed their undergraduate premedical educations at a college or university in the United States or Canada.

The Medical College Admissions Test (MCAT)

All applicants to the School of Medicine are required to take the Medical College Admissions Test (MCAT). The MCAT should be taken no more than four years prior to the time of application and no later than the fall by the end of September of the year of application. The MCAT is offered several times each year and is administered in colleges and universities throughout the country. It is recommended that applicants consider taking the MCAT at least two times. Registration materials can be accessed at <http://www.aamc.org/students/mcat/registration.htm>

Application Procedures

Inquiries concerning admission should be addressed to:

admissions@uscmed.sc.edu

Office of Admissions and Enrollment Services
School of Medicine
University of South Carolina
School of Medicine VA Campus Bldg. 3
Columbia, SC 29208
803-216-3625

The School of Medicine participates in the American Medical College Application Service (AMCAS). Applications are submitted electronically and can be accessed at www.aamc.org (<http://www.aamc.org>). Applications are available on-line after May 1 and may be submitted after June 1. The deadline for submission of applications to AMCAS is November 1.

Following receipt and individual screening of the initial AMCAS application in the School of Medicine Office of Admissions and Enrollment Services, secondary application materials (including evaluations and a nonrefundable \$95 processing fee) will be requested from all qualified applicants selected to receive further consideration. Interviews on the School of Medicine campus are at the invitation of the Admissions Committee and are a required part of the admissions process for all applicants. For the 2021 cycle, all interviews will be virtual.

The deadline date of November 1 refers only to the date by which the basic application materials must be received at the AMCAS office; December 15 is the deadline date for receipt of all secondary application materials in the Office of Admissions and Enrollment Services. It is in the best interest of the applicant to submit the completed application as early in the application/admissions process as possible. It is the responsibility of the applicant to ensure that all application materials are received in the Office of Admissions and Enrollment Services by the deadline date. No application will be considered until all application materials have been received.

Admission Procedures

Offers of admission are made on a rolling basis after October 15 and throughout the year. An applicant who is offered a position in the next entering class will be required to accept or decline the offer within a two-week period. A \$250 non-refundable seat fee will be due with the Commit to Enroll selection beginning May 1.

An offer of admission is contingent upon the satisfactory completion of all requirements and conditions of admission.

Admitted applicants will be required to submit official transcripts from every college and university attended to the School of Medicine director of enrollment services/registrar prior to matriculation. These transcripts will be included in their School of Medicine academic records.

Assignment of Students for Third and Fourth Year Clinical Rotations

This policy will outline the procedures and guidelines for the assignment of students to either the Columbia campus or the Florence Regional campus for their third and fourth year clinical rotations. In assigning students to a clinical campus, the primary goal is to ensure adequate educational resources for every student to meet the educational objectives of the curriculum. While student preference will be considered in the assignment process, there is no guarantee that a student will be assigned to their preferred campus.

Application

Applicants, at the time of application, will be notified both on the School of Medicine's Website and through published material that two clinical campuses are available for assignment during the third and fourth year of medical school. On their secondary application, applicants will be asked if they are applying to be considered for the Columbia campus, Florence Regional campus, or both campuses.

Interview Day

Applicants will be invited for interviews based on guidelines established by the Admissions Committee and independent of campus preference. During interview day, applicants will be presented with information about both clinical campuses and have an opportunity to ask questions.

Offer Letter

When applicants are made an offer of acceptance into the class, they will be informed that assignment to a clinical campus will occur early in their first year. By accepting the offer the applicant will acknowledge that while they will be able to state a preference, there is no guarantee that they will be assigned to their preferred campus.

Matriculation

At the time of the applicant's matriculation into the School of Medicine in early-August, they will be scheduled for mandatory tours of the facilities and meetings with selected faculty from both clinical campuses. After the completion of the tours, students will be required to submit their preference for their clinical campus assignment.

Assignment

When possible, student preference will be used in the assignment of the clinical campus which will occur in Fall of the M-I year. If student preferences are not sufficient or exceed the educational resources of either campus, a lottery will be held to assign students and meet the educational resources of both campuses. Students will then be informed by the end of the semester of their assigned campus.

Switching Campuses

Students, who mutually agree, will be allowed to switch campuses after jointly making that request prior to January 1 of their M-II year. No switches will be allowed for the six months prior to the beginning of the M-III year.

Appeal

Students may, due to extenuating circumstances, appeal their assignment to a clinical campus up to January 1 of their M-II year. This appeal should be presented in writing to the Assistant Dean for Student Affairs and will be considered by the Student Services Committee, who will make a recommendation to the Associate Dean for Medical Education and Academic Affairs. In general, extenuating circumstances should be considered to be out of the student's control and/or the current assignment would cause undue hardship on the student and not simply that the student's preference for their clinical campus was not met.

Consideration of the appeal will also need to take into account the availability of educational resources at the other clinical campus.

Transfer

Once the clinical assignment is made and the student has begun their M-III year, they are expected to complete all required clerkships and clinical rotations (except for electives) on their assigned clinical campus.

Should a student wish to transfer campuses, they would need to follow the same procedure for the appeal of their clinical assignment. Transfers would only be granted under extenuating circumstances and if sufficient educational resources are available at the other clinical campus.

Early Decision Plan

Through AMCAS, the School of Medicine participates in the Early Decision Plan (EDP). EDP applicants must be highly qualified and apply only to the University of South Carolina School of Medicine by August 1. All secondary application materials must be received in the Office of Admissions and Enrollment Services by August 15; the Admissions Committee will provide responses to EDP applicants by October 1. EDP applicants must take the MCAT no later than mid-July of the year of application. Successful EDP applicants will be constrained from applying to any other medical school and will have a place reserved for them in

the entering class. EDP applicants not admitted under the Early Decision Plan will be reconsidered as regular candidates and will be able to initiate applications to other schools in time to be considered by them.

Timetable for Admission

Event	Date
Submission of AMCAS application	Earliest date-June 5 Latest date-December 1
Submission of supplementary materials	Latest date-December 15
Decision notice to applicants	Earliest date-October 15 Latest date-until class is filled
Submission of EDP applications	Earliest date-June 5 Latest date-August 1
Decision notice to EDP applicants	Latest date-October 1
Applicant's response to acceptance offer	Maximum time-two weeks
Non-Refundable Seat Fee	\$250 due with a Commit to Enroll selection beginning May 1
Estimated number of new entrants	100
Starting date	August

Delayed Matriculation

Applicants accepted to the School of Medicine may request a one-year delay of matriculation for reasons of personal and professional development or significant extenuating circumstances. Application for delayed matriculation must be made, in writing, to the Office of Admissions and Enrollment Services by April 15. The application must contain a description of the specific reasons for the request. The Admissions Committee will make decisions on an individual basis by May 15. The School of Medicine reserves the right to limit the number of applicants granted delays of matriculation in each entering class. For additional information, contact the Office of Admissions and Enrollment Services.

If the request for delayed matriculation is granted, other requirements are as follows:

1. The delay of matriculation will be for a maximum of one year.
2. By May 1 of the year of delayed matriculation, the applicant must provide a written report containing documentation of completion of the purposes for the delay of matriculation for review and evaluation by the Admissions Committee. Delayed matriculation will be contingent upon review, evaluation, and acceptance by the Admissions Committee of the written report.
3. The applicant will agree not to apply to any other medical schools in the interim.
4. The applicant will submit a new AMCAS application for the following year's entering class.
5. The applicant's nonrefundable seat fee deposit will be retained by the School of Medicine for the following year's entering class.
6. The applicant will provide official transcripts of all additional academic work completed or in progress.
7. The applicant must agree, in writing, to accept the offer of delayed matriculation and all associated conditions.

Combined M.D./Ph.D.

A combined M.D./Ph.D. plan is available to students interested in careers in academic medicine or medical research. The plan permits students to receive both the M.D. degree and the Ph.D. degree in biomedical science in approximately six years.

Applicants interested in the combined M.D./Ph.D. plan must be admitted separately to each degree program. For additional information about the combined M.D./Ph.D. plan, contact:

Office of Graduate Studies
School of Medicine
University of South Carolina
Columbia, SC 29208
803-216-3321

Course Exemptions

All applicants accepted to the School of Medicine are expected to enroll and complete successfully all required courses. Occasionally an applicant with specialized training will enter the School of Medicine and apply to exempt specific required courses. With the concurrence of the assistant dean for preclinical curriculum and the appropriate department chair, the applicant may be given an examination to measure the applicant's degree of proficiency in the appropriate area. Any exemption should be granted before matriculation in the course and must be granted no later than one academic week after matriculation.

Transfer and Advanced Standing

The Admissions Committee will consider applications for transfer into the second-year and third-year medical school classes contingent upon the availability of positions. All applicants for transfer must be currently enrolled and in good standing in a medical school accredited by the Liaison Committee on Medical Education and meet the prerequisite requirements in order to receive consideration. All acceptances into the third year are conditional on verification by the National Board of Medical Examiners of an overall, average passing score on Step 1 of the United States Medical Licensing Examination taken by June 30 following completion of the second year.

Applications for transfer are available after January 1. All application materials (including supplemental information and a nonrefundable \$95 processing fee) must be received in the Office of Admissions and Enrollment Services by April 1. Supplemental information includes an essay on the reasons for transfer, letters of evaluation from the dean and two faculty members of the medical school in which the applicant for transfer is currently enrolled, and verification of MCAT scores. Requests for MCAT score verification should be addressed to:

Section for the MCAT
Association of American Medical Colleges
2450 N Street, NW
Washington, DC 20037-1126

If you need more information, call 202-828-0600.

For further information concerning application for transfer, contact:

Office of Admissions and Enrollment Services
School of Medicine
University of South Carolina
Columbia, SC 29208

803-216-3625

Residency in South Carolina

As a state-supported institution, the School of Medicine has a primary responsibility to train future physicians for the state of South Carolina. Preference for admission to the School of Medicine is therefore given to state residents. Determination of residency as defined by the University of South Carolina for the purpose of tuition and fees is the responsibility of the University Residency Office (<http://www.sc.edu/bursar/residency.shtml/>). For information concerning residency questions, contact:

Legal Residency Office
1244 Blossom Street
Suite 106
University of South Carolina
Columbia, SC 29208
803-777-5555

Curriculum

Registration for courses offered in the School of Medicine is limited to medical and graduate students enrolled in School of Medicine programs or visiting students from other LCME accredited medical schools who have applied through the Office of Admissions and Enrollment Services to take fourth year electives.

Guiding Principles

The medical education program in the School of Medicine is conducted in accordance with a set of guiding principles. These principles, as follows, are based upon a commitment to meeting societal expectations regarding the attributes of practicing physicians and can be used as a screen for periodic review and renewal of the medical education program. The educational program in the School of Medicine should:

1. be centrally coordinated by the Curriculum Committee;
2. foster interdisciplinary and interdepartmental collaboration;
3. promote curricular flexibility;
4. respond to changing societal needs and conditions;
5. recognize students' individual talents, interests, and needs;
6. foster students' abilities to be independent and lifelong learners;
7. promote a highly professional and mutually respectful learning environment;
8. prepare students for the ethical challenges of medical practice;
9. recognize the educational importance of diversity within the student population and the faculty.

Our Vision:

The "Ideal" Graduate of the School of Medicine Columbia

Our learners will be competent and caring professionals who are:

- Lifelong learners
- Technologically facile
- Innovative, forward thinking, pioneers
- Open-minded, adaptable communicators
- Collaborative
- Community minded (locally and globally)

So that our graduates will be sought after for their excellence.

Program Objectives

A set of coherent and comprehensive objectives has been established for the medical education program in the School of Medicine. The educational program in the School of Medicine shall:

1. ensure the integration of foundational and clinical sciences; promote students' mastery of scientific and clinical knowledge;
2. provide an understanding of the biopsychosocial model of health and health care;
3. ensure the modeling of high value care that is cost-effective and evidence-based;
4. encourage students' personal and professional development through regular feedback and formative and summative assessments;
5. foster team-building and interprofessional practice models through students' self and peer engagement and evaluation to nurture students' collaboration with other health care team members;
6. foster students' acquisition of necessary clinical, communication, and problem-solving skills;
7. utilize best evidence regarding education to foster learning and retention;
8. provide a variety of experiences in clinical settings with diverse patient populations and healthy clinical learning environments; set appropriate and realistic performance standards for students;
9. utilize both formative and summative evaluation methods for students;
10. increase the use of competency-based student assessments;
11. promote students' interest in translational research and scientific exploration;
12. provide a range of elective opportunities for students;
13. educate generalist physicians who are potentially eligible for practice in South Carolina;
14. prepare altruistic, knowledgeable, skillful, and dutiful physicians;

So that we graduate physicians who are life-long learners who attend equally well to all aspects of health care.

Physician Competencies

1. Patient Care: ability to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health;
2. Medical Knowledge: demonstrate knowledge of established and evolving biomedical, clinical, epidemiological, and social-behavioral sciences, as well as the application of this knowledge to the patient;
3. Practice Based Learning and Improvement: investigate and evaluate the care of patients, appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self evaluation and life-long learning;
4. Systems Based Practice: demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optional health care;
5. Professionalism: demonstrate a commitment to carry out professional responsibilities and an adherence to ethical principles;

6. Interpersonal Skills and Communication: possess skills that are effective in the exchange of information and collaboration with patients, their families, and health professionals.

Educational Objectives and Competencies for Graduates

1. As a member of an interprofessional health care team (EPAs 9, 12), strive to consistently provide appropriate care for patients and populations by applying best evidence as related to the following:
 - normal structure and function of the body as an intact organism and each of its major organ systems; Medical Knowledge, Patient Care
 - molecular, biochemical, and cellular mechanisms that are important in maintaining the body's homeostasis; Medical Knowledge, Patient Care
 - various causes of disease (genetic, developmental, metabolic, toxic, microbiologic, autoimmune, neoplastic, degenerative, traumatic, and psychosocial) and of the ways in which they affect the body (pathogenesis); Medical Knowledge, Patient Care
 - altered structure and function (pathology and pathophysiology) of the body and its major organ systems seen in various diseases and conditions; Medical Knowledge
 - frequent clinical laboratory, roentgenologic, and pathologic manifestations of common maladies; Medical Knowledge, Patient Care
 - important non-biological determinants of health and the economic, psychological, social, and cultural factors including violence and abuse that contribute to the development and/or continuation of maladies; Medical Knowledge, Patient Care, Systems Based Care
 - epidemiology of common health conditions within defined populations and systematic approaches to reduce their incidence and prevalence; Medical Knowledge, Patient Care, Systems Based Care
 - pain assessment and amelioration including the use of medication and alternative or adjunctive therapies; Medical Knowledge, Patient Care
 - various approaches to, and implications of, the organization, financing, and delivery of health care; Patient Care, Professionalism
 - Exercise, nutrition and lifestyle in maintaining health and well-being.
 - Gender, ethnic and age-specific issues that affect disease across the lifespan with particular emphasis on pregnant, newborn, child and geriatric patients; Medical Knowledge, Patient Care
 - Principles of preventive medicine.
 - Principles of patient safety, quality improvement and health care professional safety; Professionalism, Patient Care, Practice Based Learning and Improvement
 - clinical and translational research findings with attention to emerging therapies
2. Retrieve, manage, and utilize information – to include critical review of medical literature when needed – to solve problems, consider differential diagnostic possibilities and make care decisions. (EPAs 2 &7);
3. Use critical judgment based on evidence and experience in solving clinical problems.
4. Demonstrate the personal and emotional characteristics necessary to become a competent physician including: (professional identity formation)
 - Honesty, integrity and respect in interactions with patients, families, coworkers and colleagues
 - Accountability for own actions
 - Appropriate awareness and concern for the needs of patients and families
 - Sensitivity and respect for patients from diverse gender, cultural, economic, educational, and family backgrounds
 - Ethical obligations inherent in the role of physician
 - Advocacy for patient and population needs for health and well-being
 - Identifying ethical dilemmas and applying ethical decision-making when faced with both common and uncommon issues faced in medical practice
 - Identifying threats to medical professionalism posed by the conflicts of interest inherent in various financial and organizational arrangements for medical practice.
 - Recognition and acceptance of limitations in his/her own knowledge and clinical skills and commitment to improve his/her knowledge and ability toward best practices in care through self-assessment and lifelong learning
5. Obtain an accurate and complete medical history with special attention to relevant health issues related to age, gender, sexual orientation, and factors such as socio-economic status for patient health and document appropriately. (EPAs 1 & 5)
6. Be technologically proficient in the acquisition and documentation of that information for provision of high value healthcare. (EPA 1)
7. Perform both complete and problem focused physical examinations including mental status examination and fully document that information as part of a medical record. (EPA 1)
8. Perform basic technical procedures. Examples include: venipuncture, inserting an intravenous catheter, arterial puncture, lumbar puncture, inserting a nasogastric tube, inserting a Foley catheter, and suturing lacerations. (EPA 12)
9. Adhering to patient confidentiality and autonomy, effectively communicate - both orally and in writing - with patients and families, colleagues and others with whom information must be exchanged when carrying out duties of patient care. Examples include:
 - Discussing orders (EPA 4)
 - Providing an oral presentation of a patient encounter (EPA6)
 - Giving and receiving a patient handover to transition care responsibly (EPA 8)
 - Obtaining informed consent (EPA 11)
10. Identify factors placing individuals at risk for disease or injury, select appropriate tests for detecting patients at risk for specific diseases or in the early stages of diseases, and determine appropriate response strategies.
11. Identify factors placing individuals at risk for disease or injury, select appropriate tests for detecting patients at risk for specific diseases or in the early stages of diseases, and determine appropriate response strategies.
12. Apply appropriate management strategies - both diagnostic and therapeutic - for patients with common acute and chronic medical,

psychiatric, surgical conditions and conditions requiring short-and long-term rehabilitation therapy.

13. Recognize when a patient requires urgent or emergent care due to immediate life threatening conditions – whether cardiac, pulmonary, neurologic or other cause – and initiate evaluation and critical management. (EPA 10)

14. Adhere to state and federal regulations regarding reporting of domestic violence, child abuse, criminal activity, fraud, and the Health Insurance Portability (HIPAA).

15. Contribute to a culture of safety and improvement through applying skills in teaming and leadership and in the identification and reporting of system failures or errors. (EPA 13)

Curriculum (160 Credit Hours)

The School of Medicine is dedicated to the goals of preparing students in the art and science of medicine and providing students with a background for further postgraduate training in a variety of fields of medicine. The curriculum is designed to promote professional growth and a compassionate response to patients’ needs, to assist students in understanding the complexity of patient care, and to provide students with a perspective on the role of medicine in society.

The four-year curriculum consists of basic science courses and clerkships in applied clinical medicine. All students are required to complete a specific set of courses during the four years, except as noted under “Course Exemptions.” Elective opportunities are presented during the third and fourth years to assist students in pursuing their individual interests and career goals.

Basic Sciences (Years 1 and 2)

During the first two years of medical school, students study a core curriculum of those basic sciences and clinical disciplines necessary for an understanding of the structure and function of human systems. During the first year, students gain a basic understanding of normal structure and function. During the second year, emphasis is placed on microbiology, pathology, and general therapeutic principles as they function within the organ system. Throughout the first two years, research, case studies, and clinical correlations to basic science material are integral components of the curriculum, as is the four-semester Introduction to Clinical Medicine course continuum. Interdisciplinary material on such subjects as health system science, nutrition, substance abuse, ethics and professionalism, ultrasonography, and patient safety and quality is also presented. The main goal of the Introduction to Clinical Medicine course continuum and clinical correlations is to provide students with clinical background and skills in preparation for clinical clerkships in the third and fourth years. All Introduction to Clinical Medicine courses are based upon a comprehensive knowledge of basic science material.

The School of Medicine will be in a curriculum transition for the 2021-2022 academic year. There may be some variation in course credit for the first two years. Hours required for graduation will be updated based on any changes in the course credit hours.

Clinical Clerkships (Years 3 and 4)

Clerkship experiences in the third year of medical school include rotations of twelve weeks each in internal medicine/neurology, eight weeks each in surgery and pediatrics, six weeks each in family medicine, psychiatry, and obstetrics/gynecology, and two one-week elective opportunities.

Fourth-year students are required to participate in eight four-week rotations, including an acting internship and a critical care rotation, and in Capstone, a one-week program of interdepartmental and interdisciplinary material designed to prepare students for the transition to residency training. The learning experience is enhanced by direct contact with patients in which students actively participate in the clinical setting. Emphasis is placed on the correlation of basic science material and clinical material. This correlation is further promoted by means of tutorial seminars, lectures, and small group discussions.

Electives

Elective opportunities for third and fourth-year students are listed by department in the OASIS scheduling system. Electives are available at the discretion of the department chair. National and international elective programs are also available and encouraged. For more information on third and fourth-year electives, contact the School of Medicine director of enrollment services/registrar.

Course	Title	Credit Hours
First Year		
Fall		
MCBA D603	Foundational Medical Anatomy	12
DMED D601	Introduction to Clinical Medicine I	3
DMED D680	Application of Clinical Evidence I (ACE)	1
Credit Hours		16
Spring		
PHPH D621	Medical Physiology	7
BMSC D604	Molecular Foundations of Medicine	8
DMED D602	Introduction to Clinical Medicine I	4
DMED D680	Application of Clinical Evidence I (ACE)	1
Credit Hours		20
Second Year		
Fall		
DMED D603	Introduction to Clinical Medicine II	2
DMED D683	General Principles	5
DMED D685	Cardiovascular	4
DMED D686	Renal	2
DMED D687	Pulmonary	2
DMED D688	Hematology	3
DMED D689	Musculoskeletal (MSK) System	2
DMED D681	Application of Clinical Evidence II (ACE)	1
Credit Hours		21
Spring		
DMED D604	Introduction to Clinical Medicine II	2
DMED D681	Application of Clinical Evidence II (ACE)	1
DMED D694	Gastrointestinal (GI)	3
DMED D695	Endocrine/Reproduction	4
DMED D696	Neuroscience	6
DMED D697	Integrated Disease	2
Credit Hours		18
Third Year		
FPM D605	Family Medicine Clerkship	6
MEDI D611	Medicine/Neurology	12
OBGY D605	Obstetrics/Gynecology Clerkship	6

PEDI D605	Pediatrics Clerkship	8
NPSY 605	Psychiatry Clerkship	6
SURG D605	Surgery Clerkship	8
Electives (2)		2
DMED D643	Intersession Week	1
Credit Hours		49
Fourth Year		
DMED D647	USMLE Step 2 Preparation	4
DMED D607	Capstone	4
Acting Internship		4
Critical Care		4
Transforming Health Care		1
Electives		16
Credit Hours		33
Total Credit Hours		157

Clinical Skills Attainment Document

Medical students must demonstrate mastery of all required clinical skills enumerated in the Clinical Skills Attainment Document (CSAD) prior to graduation from the School of Medicine. Demonstration of mastery of some of these clinical skills is required for a passing grade in the second-year Introduction to Clinical Medicine course (see "Interdisciplinary Courses" section), while demonstration of mastery of other clerkship-specific clinical skills is required for successful completion of each third-year clinical clerkship (see "Clinical Sciences" section). In addition, students must demonstrate mastery of required non-departmental clinical skills during the third and fourth years of medical education.

Guidelines for Conduct in Teacher/Learner Relationships

1. Statement of Philosophy

The University of South Carolina School of Medicine is committed to fostering an environment that promotes academic and professional success in learners and teachers at all levels. The achievement of such success is dependent on an environment free of behaviors which can undermine the important mission of our institution. An atmosphere of mutual respect, collegiality, fairness, and trust is essential. Although both teachers and learners bear significant responsibility in creating and maintaining this atmosphere, teachers also bear particular responsibility with respect to their evaluative roles relative to student work and with respect to modeling appropriate professional behaviors. Teachers must be ever mindful of this responsibility in their interactions with their colleagues, their patients, and those whose education has been entrusted to them.

2. Responsibilities in the Teacher/Learner Relationship

a. Responsibilities of Teachers

- i. Treat all learners with respect and fairness;
- ii. Treat all learners equally regardless of age, gender, race, ethnicity, national origin, religion, disability, or sexual orientation;
- iii. Provide current material in an effective format for learning;
- iv. Be on time for didactic, investigational, and clinical encounters;
- v. Provide timely feedback with constructive suggestions and opportunities for improvement/remediation when needed.

b. Responsibilities for learners

- i. Treat all fellow learners and teachers with respect and fairness;
- ii. Treat all fellow learners and teachers equally regardless of age, gender, race, ethnicity, national origin, religion, disability, or sexual orientation;
- iii. Commit the time and energy to your studies necessary to achieve the goals and objectives of each course;
- iv. Be on time for didactic, investigational, and clinical encounters;
- v. Communicate concerns/suggestions about the curriculum, didactic methods, teachers, or the learning environment in a respectful, professional manner.

3. Behaviors Inappropriate to the Teacher-Learner Relationship

These behaviors are those which demonstrate disrespect for others or lack of professionalism in interpersonal conduct. Although there is inevitably a subjective element in the witnessing or experiencing of such behaviors, certain actions are clearly inappropriate and will not be tolerated by the institution. These include, but are not limited to, the following:

- Unwanted physical contact (e.g. hitting, slapping, kicking, pushing) or the threat of the same;
- sexual harassment (including romantic relationships between teachers and learners in which the teacher has authority over the learner's academic progress) or harassment based on age, gender, race, ethnicity, national origin, religion, disability, or sexual orientation;
- loss of personal civility including shouting, personal attacks or insults, displays of temper (such as throwing objects), use of culturally insensitive language;
- discrimination of any form including in teaching and assessment based upon age, gender, race, ethnicity, national origin, religion, disability, or sexual orientation;
- requests for another to perform inappropriate personal errands unrelated to the didactic, investigational, or clinical situation at hand;
- grading/evaluation on factors unrelated to performance, effort, or level of achievement.

4. Avenues for Addressing Inappropriate Behavior in the Teacher/Learner Context

a. Learners' Concerns

Learners may address situations in which they feel that they have been the object of inappropriate behavior at various levels. At the most basic level, the most effective way to handle a situation may be to address it immediately and non-confrontationally. Oftentimes, a person is simply unaware that his/her behavior has offended someone, or even if aware, will correct the behavior appropriately if given the opportunity to do so in a way that is not threatening. The way to raise such an issue is to describe the behavior factually ("When you said..."), describe how the behavior made you feel ("I felt..."), and state that the behavior needs to stop or not be repeated ("Please, don't do that again.").

Sometimes, such a request is not successful, or the person repeats the behavior, or the learner does not feel comfortable speaking directly to the teach about his/her behavior. In those cases, it may be helpful to discuss the behavior with course/ clerkship directors, laboratory mentors, program directors, or department chairs. Students may also elect to speak to any one of the assistant deans or the assistant dean for minority affairs, the director of student services, or one of the School of

Medicine’s three ombudspersons for informal advice and counsel about these issues. These individuals may offer additional suggestions for resolving the matter informally, such as, for example, speaking to the individual on the learner’s behalf or on behalf of an entire class, raising the general issue in a faculty meeting, assisting the learner with writing to the individual teacher or even direct intervention to get the behavior to stop.

If no satisfactory resolution is reached after these discussions or the learner does not feel comfortable speaking to these individuals, he/she may bring the matter formally to the attention of the School of Medicine administration. The avenues for this more formal reporting vary depending upon the status of the reporting individual. In either case the learner always has the option of submitting a formal complaint to the University’s Student Grievance Committee through the procedure outlined in the Carolina Community.

- i. If the person reporting the behavior is a medical student:
The student should speak with the director of student services, the associate dean for medical education and academic affairs, or one of the school’s ombudspersons.
- ii. If the person reporting the behavior is a graduate student or MD/PhD student pursuing their graduate studies:
The student should speak with the director of student services or the director of graduate studies program.

b. Teachers’ Concerns

If a teacher feels that a learner has engaged in inappropriate behavior, it is likewise most effective to address the situation immediately and non-confrontationally. If the matter is not resolved satisfactorily, the teacher should contact the course/ clerkship director, program director, or laboratory mentor to discuss the matter. If the teacher wishes to make a formal allegation of misconduct, they should contact the following members of the administration:

- i. If the matter involves a medical student, contact one of the assistant or associate deans in the Office of Medical Education and Academic Affairs.
- ii. If the matter involves a graduate student, contact the director of the graduate studies program.

These allegations will be handled on an individual basis by the appropriate School of Medicine official in consultation with the dean and where applicable according to established School of Medicine and University policies.

5. Procedures for Handling Allegations of Inappropriate Behavior in the Teacher/Learner Context

- a. Upon being notified of alleged inappropriate behavior, the associate/assistant dean or program director will notify the dean and other appropriate senior administration officials in a written report within five business days of the allegation.

If the complaint is lodged against a faculty member, other than those matters referred to the Office of Equal Opportunity Programs, the matter will be handled by the dean in consultation with the appropriate associate dean and department chair and, where established, the appropriate School of Medicine and University policies. The dean may also choose to appoint an ad hoc committee to investigate the complaint.

- b. If the behavior involves unlawful discrimination or sexual or other forms of unlawful harassment, the matter will be referred to the Office of Equal Opportunity Programs and be handled through

University policies established for that office. The student may also directly contact that office.

- c. If the behavior involves unwanted physical contact or other forms of violent or threatening acts, the matter may be referred to the University’s campus police or appropriate security.
- d. The School of Medicine is committed to the fair treatment of all individuals involved in this process. All efforts will be made to maintain the confidentiality of the resolution process to the extent possible and subject to the overriding concern of a prompt fair investigation and/or resolution of the complaint.
- e. The School of Medicine will not tolerate any form of retaliatory behavior toward learners who make allegations in good faith. Individuals who believe that action has been taken against them in retaliation for raising concerns under this policy, may address those concerns through the procedures described in this policy or through the Student Grievance Committee.
- f. Records of all communications as well as written reports of the associate/assistant deans, program directors, and any ad hoc committee (if formed) will be kept in the dean’s office.
- g. If it is determined that the allegations from the complainant were not made in good faith, the student will be referred for disciplinary action to the Student Academic Responsibility Committee.

Financial Information/Aid

Financial Information

Fees and Expenses

All students are required to register and pay tuition and fees each semester. Any financial aid a student might be awarded is disbursed at the time of registration for the fall and spring semesters.

Fees and charges imposed by the University are subject to change by the Board of Trustees without notice.

No degree will be conferred upon any candidate prior to the payment of all tuition, fees, and indebtedness to the University.

A full-time student who withdraws within a specified period of time may be eligible for a prorated refund in accordance with University policy. For a schedule of University refund allowances, contact the School of Medicine director of enrollment services/registrar.

Academic Fees 2020-2021

Fee	Cost
South Carolina Residents (per academic year)	\$42,888
Nonresidents (per academic year)	\$87,150
Supplementary Application Fee (nonrefundable)	\$95
Admissions Deposit (applied toward first year tuition, nonrefundable after May 15)	\$250
Matriculation Fee (first year only)	\$80
Gross Anatomy Fee (first year, first semester only)	\$1000
Technology Fee	\$600

Estimated expenditures for books, supplies, equipment, educational travel, insurance, and related educational expenses:

Fee	Cost
First Year	\$8,098
Second Year	\$2,966
Third Year	\$6,898
Fourth Year	\$4,156

Books and Equipment

All required books and equipment are available in the University of South Carolina Bookstore. Students are given a list of acceptable models for clinical equipment and are required to purchase such items as stethoscopes and sphygmomanometers, according to individual preference.

Computers

A laptop computer with designated software is required as part of the technology enhanced curriculum in the School of Medicine. Specifications are available on the School of Medicine web site and are updated as necessary.

Refund Policy

1. Policy

The University will refund a part of academic fees in certain cases:

- a. Changes in a student's status, which may require a refund.
 - i. Change in a full-time student's schedule, which results in reclassification to part-time status
 - ii. Change in a part-time student's schedule, which results in fewer credit hours.
- b. Situations, which may require a refund.
 - i. Course or courses dropped
 - ii. Withdrawal from the University
 - iii. Cancellation of a class by the University

2. Refund Requests

All requests for refunds must be received during the academic year for which the fees were paid. The academic year begins with the fall term and ends with the last summer session (Summer II). Refunds may be requested at any time during the academic year in which the applicable term occurs.

3. Determining the Refundable Portion Procedure

The refund is for the portion of the tuition, fees, room, board, and other charges assessed the student under the control of the University equal to the portion of the period of enrollment for which the student has been charged that remains on the withdrawal date, less any unpaid amount of a schedule cash payment for the period of enrollment for which the student has been charged.

4. Withdrawal Refund Policies

Standard Refund Policy For Withdrawal From The University

100% refund of the charges if the student's **Official Withdrawal Calculation** is by the first week of classes of a sixteen-week session
TITLE IV Funds

Refunds Policy For Students Who Have Received TITLE IV Funds And Withdraw From The University

Federal financial aid funds are awarded with the expectation that students will complete the entire period of enrollment. Students "earn" a percentage of the funds that are disbursed with each day of class attendance. When a student who has received federal aid funds (Title IV Funds) leaves school before the end of the semester or period of enrollment, federal regulations require the University of South Carolina to calculate the percentage and amount of "unearned" financial aid funds that must be returned. Once a student

has completed more than 60% of the enrollment period, they are considered to have earned all funding received. This calculation may have the effect of requiring the student who withdraws before this time frame to repay funds that have already been disbursed to the student or credited towards their current account for tuition, fees, housing and/or meals. Students are encouraged to meet with a counselor in the Office of Student Affairs, or the appropriate office on their campus, prior to making the decision to withdraw from school.

TITLE IV Refund Distribution

For fully withdrawn students receiving federal and/or state funds, the refund will be governed by the current Federal Title IV refund policy. The Office of Student Financial Aid and Scholarships determines the amount of the refund that is distributed back to Title IV, HEA Programs or other Financial Aid sources. For students and their parents who have received student loans or other forms of financial aid, refunds will be returned in the order prescribed by federal regulations. The institution must return the refund to the financial aid program other than College Work Study, up to the amount of assistance that the student received from those programs. Refunds are to be distributed to the financial aid programs in the following order:

- Unsubsidized Federal Stafford
 - Federal PLUS Loan
 - State funds
 - Private or institutional scholarship(s) and loan(s)
- Any remaining balance will first be used to repay any outstanding university charges and any subsequent balances will be refunded to the student/parent.
- Exit interviews are required before leaving the University of South Carolina for all students who withdraw and have received Stafford, Perkins, or Federal Nursing Loans. Exit interviews can be completed on the Internet at <http://www.sc.edu/financialaid/>. Click on "Loan Counseling on the Web" and follow the instructions. Or, you may contact the Office of Student Financial Aid and Scholarships at (803)-216-3629 or the Loan Collection Department of the Bursar's Office at (803)-777-3559 for the Columbia Campus. Telephone numbers and referenced offices are different for each campus.

5. Summer Sessions and Other Shortened Sessions Refund Procedure for Withdrawal

Adjusted refund schedules are printed in the **Master Schedule of Classes** and are available in the Office of Financial Services.]

- a. 100% refund of the charges if the student's **Official Withdrawal Calculation** is by the end of late registration period
- b. 90% refund of the charges if the student's **Official Withdrawal Calculation** is between the period specified in (A) and on or before the end of the 10% period of enrollment for which the student was charged
- c. 50% refund of the charges if the student's **Official Withdrawal Calculation** is between the period specified in (B) and on or before the end of the 25% period of enrollment for which the student was charged
- d. 40% refund of the charges if the student's **Official Withdrawal Calculation** is between the period specified in (C) and on or before the end of the 36% period of enrollment for which the student was charged
- e. 25% refund of the charges if the student's **Official Withdrawal Calculation** is between the period specified in (D) and on or before the end of the 50% period of enrollment for which the student was charged

6. Refund Schedules

Refund schedules are printed in the Schedule of Classes.

7. Dropped Courses - Refund Procedure

A percentage of fees will be refunded for course(s) dropped within two weeks (fall, spring and summer) after the first official day of classes or within an equivalent period for other sessions. No refunds will be made thereafter.

- a. Drops - Fall And Spring Courses
 - i. 100% refund for courses dropped before the end of the late registration period
- b. Drops - Summer Terms
 - i. 100% refund for courses dropped before the end of the late registration period
 - ii. 40% refund of the charges if the student's **Official Withdrawal Calculation** is between the period specified in (A) and on or before the end of the 36% period of enrollment for which the student was charged
 - iii. 25% refund of the charges if the student's **Official Withdrawal Calculation** is between the period specified in (B) and on or before the end of the 50% period of enrollment for which the student was charged
- c. Other Shortened Sessions
Adjusted refund schedules are printed in the Schedule of Classes
- d. Correspondence Course Fees¹
Circumstance:
 - i. 100% if application is not accepted
 - ii. 75% if withdrawal is within one month and/or before an assignment has been submitted for grading and correction
 - iii. No refund for withdrawal after one month, or after an assignment has been submitted for grading and correction

8. Appeals Process

A process for appeals exists for students or parents who believe circumstances warrant exceptions from published policy.

A Withdrawal Appeals Committee reviews and act on all appeals.

¹ All requests for refunds must be received in writing before the end of the first month of enrollment.

Financial Aid

Students in the School of Medicine are individually responsible for tuition, fees, and living expenses. It is imperative that all students anticipating the need for financial assistance at any time during their medical educations undertake early long-term planning. Limited aid specifically oriented for medical students is available from the School of Medicine. However, financial aid programs of the University of South Carolina make it possible for many students to attend the University who could not do so if they were entirely dependent on their own resources. Eligibility for all aid, except for some academic scholarships, depends on applicants' financial circumstances. Students must file a Free Application for Federal Student Aid (FAFSA) or Renewal FAFSA annually to determine the amount of assistance they are eligible to receive. Information and application forms for the various financial aid programs may be obtained from the School of Medicine Office of Student and Career Services. www.sc.edu/financialaid/ (<http://www.sc.edu/financialaid/>)

Policy for Satisfactory Academic Progress for Financial Aid Eligibility

Medical students follow the graduate satisfactory academic progress policy set by the Office of Student Financial Aid and Scholarships.

Listed below are some of the financial aid programs available to students. For complete information, contact the School of Medicine Office of Student and Career Services.

Loans

Federal Loan Programs

Information about federal programs is subject to change based upon changes in federal legislation.

The Federal Direct Unsubsidized Loan Program provides long-term, low interest loans to undergraduate, graduate, and professional students. In August of 2013, Congress passed and the President signed, the Bipartisan Student Loan Certainty Act of 2013. The Act ties federal student loan interest rates to the financial markets. Under the Act, interest rates are determined each spring for new loans being made for the upcoming award year, which runs from July 1 to the following June 30. Each loan has a fixed interest rate of the life of the loan. The interest rate for the 2019-2020 academic year for the unsubsidized Federal Stafford Loans is 6.08%. These rates are subject to change by law.

Medical students have \$40,500 per year in unsubsidized eligibility, and a career maximum total of \$224,000 including any amounts borrowed as an undergraduate. Interest begins to accrue at the time the lender makes the loan and is not automatically deferred. A student may choose to pay the interest or request that it be deferred. This results in the deferred interest being capitalized and creating a greater expense during repayment.

Medical students are now eligible to borrow under the Federal Direct PLUS Loan Program up to their cost of attendance minus other estimated financial assistance. The terms and conditions applicable to the Parent PLUS loans also apply to Grad PLUS. These requirements include a determination that a student does not have an adverse credit history. Repayment begins on the date of the last disbursement of the loan. The interest rate for Grad PLUS is 7.08% for the 2019-2020 academic year. To apply for this loan students are required to complete the Free Application for Federal Student Aid (FAFSA) and must also have applied for a Federal Direct Subsidized and Unsubsidized Loan.

Federal Programs with a Service Commitment

Information about federal programs is subject to change based upon changes in federal legislation.

National Health Service Corps Scholarships are offered by the federal government to students and physicians interested in pursuing careers in primary care and serving in health professional shortage areas in the United States.

Armed Forces Health Professions Scholarship recipients are commissioned in the armed forces and their tuition, fees, books, and equipment, including microscope rental, are paid by their particular branch. In addition, a monthly stipend is paid directly to the student. Recipients are required to serve 45 days of training duty each year. Repayment is on a year-for-year basis. A deferment for postgraduate education is given only if a student is not chosen for a military residency program.

Other Programs with a Service Commitment

The John T. Stevens Foundation Grant

This grant is for up to four years of medical education expenses and is awarded to worthy medical students enrolled in the School of Medicine who reside in Lancaster or Kershaw county. The grant requires the scholar to practice in Lancaster or Kershaw county for a defined period

of time upon completion of training. Call the USC School of Medicine at 803-216-3629 for more information.

Scholarships

Private Sources

Columbia Medical Society Auxiliary Scholarship. Established by members of the Columbia Medical Society and Auxiliary, several scholarships are awarded annually to deserving medical students.

Fullerton Medical Scholarship. The School of Medicine nominates one candidate from each entering class for consideration for the Fullerton Medical Scholarship. The scholarship nominee is guaranteed a minimum of \$1,000 for one year and competes for a four-year, \$80,000 Fullerton Medical Scholarship with medical students from other medical schools in North and South Carolina. Must interview by January 16 for consideration for Fall matriculation.

South Carolina Medical Association Foundation in alliance with the South Carolina Medical Association Alliance. These scholarships are awarded annually to several academically worthy students in need of financial assistance.

School of Medicine Scholarships

Alumni Scholarship. This scholarship is awarded annually (or as funds are available) to one or more students who demonstrate a strong academic record, excellent professional skills, and a commitment to serving patients' needs.

American Medical Association Foundation Scholars Award. This scholarship is awarded to a medical student based on financial need and/or academic excellence.

Anniversary Scholarship. Income from this fund is used to award scholarships to students selected by the School of Medicine Scholarship and Loan Committee.

Tom L. Austin Student Scholarship. Income from this endowed fund, established by the Department of Neonatology at Palmetto Health Richland in honor of Dr. Tom L. Austin, is used to award scholarships to students selected by the School of Medicine Scholarship and Loan Committee.

Bruner-Waddell Scholarship in Medicine. This endowed scholarship was established by the Bruner and Waddell families in memory of Robert Rayson Bruner Jr. and Henry Grady Waddell, M.D. It is awarded annually to a medical student who is a resident of South Carolina.

Laura R. and William M. Corbett Trust Scholarship. This funding started as a loan program before the School of Medicine Columbia was founded and is now a scholarship program for new and continuing medical students based on academic merit.

Lilla Bush McNulty and William McNulty Medical Student Scholarship. This scholarship is awarded by the School of Medicine Columbia and is based on financial need. The criteria may be revised to include other stipulations such as clinical areas of interest, academic merit, geographic and/or other requirements/preferences.

The William Childs Cantey Sr., M.D., Medical Scholarship. Funds generated by the endowment for this scholarship, which honors Dr. Cantey, are allocated toward tuition for its recipient, who must be a resident of South Carolina. The scholarship is renewable each year for four years and the recipient is designated as a Cantey Scholar.

Thomas C. Chow, M.D., D.P.H. and Rosemary Y. Chow, M.D., D.P.H. Scholarship. This endowed scholarship, which honors the parents of Jim C. Chow, M.D., a 1985 School of Medicine graduate, is awarded to a fourth-year medical student who has demonstrated an interest in a career in family or preventive medicine.

The William Q. and Marguerite D. Claytor Medical Scholarship. This endowed scholarship was established by Dr. Hubert Claytor in memory of his parents.

Dr. and Mrs. George W. Dick Scholarship in Medicine. The income from a fund provided by Mrs. Caroline McKissick Dial, in memory of her father and mother, provides an annual scholarship to a medical student based on scholastic achievement and financial need.

William B. Douglas Scholarship. The interest from this permanent endowment is awarded to medical students in good academic standing and with financial need. Preference is given to South Carolina residents, especially those from the Florence area.

Dr. Lawrence H. Erdman Scholarship. This endowed scholarship, in memory of Dr. Erdman, is awarded to an outstanding student selected by the School of Medicine Scholarship and Loan Committee. Consideration is given to student with financial need and scholastic ability.

Louise Mickle Harvey Medical Student Scholarship. This endowed four-year scholarship is awarded to a student from Camden, S.C. (or the nearest geographic area within South Carolina), who has demonstrated financial need, a record of academic achievement, and the potential for becoming a personable and compassionate physician.

Ellington Cody Hawes, M.D., Medical Scholarship. This is a merit-based scholarship for a resident of Georgia, preferably from the central Savannah River area. This scholarship covers up to \$30,000 of the student's educational expenses per year; it may be renewed for up to four years contingent upon the recipient's maintaining satisfactory progress as determined by the School of Medicine Student Promotions Committee.

Arthur L. Humphries Scholarship. This is an endowed scholarship in memory of the father of J. O'Neal Humphries, M.D., Dean of the School of Medicine, 1983-1994. The recipient may receive the scholarship for up to four years, provided that stated criteria are met.

The Jowers Scholarship Fund. The income from this fund, provided by Dr. Lawrence V. Jowers in memory of his friends, provides an annual award to a student who has earned the highest achievement in the first or second year of medical school.

James Stanley Liverman, M.D., Scholarship. This is an endowed fund in memory of Dr. Liverman, who devoted his professional life to improving the health of the people of South Carolina.

Lillian Ashe Scholarship. The income from a fund provided by Lillian Ashe provides scholarships to medical students based on scholastic achievement and financial need.

A. Hines McWaters Scholarship. This is an endowed scholarship awarded annually to an academically sound and financially needy medical student.

Dr. Frank Capers Owens Scholarship. This endowed scholarship, in memory of Dr. Owens, is awarded annually to a qualified third-year or fourth-year student planning a career in family practice.

School of Medicine Faculty and Staff Scholarship. This scholarship, established by the faculty and staff of the School of Medicine, is awarded

annually to a medical student who has achieved academic excellence, provided service to the School of Medicine and the University, and exhibited a professional demeanor.

James R. Stallworth Student Scholarship. This scholarship is awarded to a medical student who has an outstanding academic record and who shows evidence of good clinical acumen, devotion to patient care, and potential for future leadership

The Todd Medical Foundation Scholarship. The interest from this permanent endowment is awarded to second-, third-, and fourth-year medical students in good academic standing and with financial need.

John A. Warren Scholarship. This endowed scholarship, established in honor of John A. Warren, the former chairman and chief executive officer of the SCANA Corporation, is given to the rising fourth-year student who has expressed and demonstrated an interest in pursuing a medical career in family practice, pediatrics, and/or oncology. The recipient is selected by the School of Medicine Scholarship and Loan Committee.

George Walker Waring Memorial Scholarship. The income from this fund, established by the Waring family to honor the memory of their father and grandfather, provides a scholarship for medical students who have completed the first two years at the School of Medicine.

Dr. Hudnall Gentry Weaver Scholarship. This endowed scholarship was established by the family of Robert S. Paschal Jr. in memory of Dr. Weaver, a former Macon, Ga., surgeon. Dr. Weaver was the father of Mrs. Paschal and the grandfather of Dr. Hudnall Weaver Paschal, a 1985 School of Medicine graduate.

Dr. Hugh H. Wells Scholarship. The interest from this endowed scholarship in memory of Dr. Wells is awarded annually to a medical student from South Carolina who has a demonstrated financial need.

Veterans Benefits

Veterans and children of deceased or disabled veterans who meet regular admission requirements may be eligible to receive educational assistance benefits through the Department of Veterans Affairs. Application for benefits may be made through the campus University Office of Veterans Affairs. Students are urged to apply for benefits at least 45 days prior to the beginning of the semester.

All veterans and other eligible persons are responsible for informing the University veterans records clerk of any change in enrollment status or withdrawal from the University.

Other Sources of Financial Aid

The School of Medicine Office of Student and Career Services has current information on various financial aid opportunities. Additionally, the School of Medicine Library has national directories listing sources of loans, fellowships, and scholarships. A number of city and county medical societies offer loans or scholarships for residents of their localities, as do churches, businesses, fraternities, and sororities.

Policy on Management of Financial Resources from External Entities

It is the policy and practice of the University of South Carolina School of Medicine to assist enrolled students in the identification of financial resources from external entities to aid them in the financial support of their educations. External entities providing such financial resources can be individuals, employers, professional organizations, hospitals, communities, foundations, and others. The School of Medicine is also

required to follow federal and state laws and regulations and University of South Carolina policies, procedures, and guidelines in the processes associated with nominating students for, the awarding of, and the handling of financial resources from external entities for which enrolled students qualify.

For these reasons, and because:

1. the School of Medicine usually does not have specific information about the external entities providing financial resources to students;
2. the School of Medicine usually has not been involved in the prior contractual arrangements associated with students' receipt of financial resources from external entities;
3. the School of Medicine cannot provide legal advice about tax consequences, either for the external entity or for the student, of the award of financial resources to students by those external entities; and
4. all final decisions about the nomination of eligible medical students for awarding of financial resources from external entities are made by the School of Medicine Scholarship and Loan Committee, a faculty committee, it is therefore the policy of the School of Medicine:
 - a. to refer external entities wishing to provide financial resources to enrolled students to the School of Medicine director of development for information about the creation of accounts in the University of South Carolina Educational Foundation from which scholarship monies can be awarded to students;
 - b. to refer external entities to the University of South Carolina Office of Student Financial Aid and Scholarships when those entities wish to underwrite any portion of a student's tuition and/or fees at the School of Medicine;
 - c. to refer students to their legal and financial advisors when questions arise about the tax consequences of financial resources provided to them in support of their educations by external entities; and
 - d. to refer all requests for nominations of eligible enrolled students for awards of financial resources from external entities to the School of Medicine Scholarship and Loan Committee for final decisions about those nominations.

Employment

Employment must be discussed with the assistant dean for student affairs. When employment appears to interfere with the student's academic and professional development, the assistant dean for student affairs may refer the matter to the Student Promotions Committee for consideration. The academic responsibilities of the first year of medical school preclude outside employment. The Office of Student and Career Services attempts to identify clinical clerkship employment opportunities for rising second-year students for the summer between the first and second years of medical education.

Student and Career Services

Student Services

Office of the Ombudsperson

The educational program in the School of Medicine has been developed to support and encourage the collegiality and professionalism essential to an effective learning environment. Students who believe that they have been punitively assessed or mistreated because of religion, race,

ethnicity, gender, sexual orientation, age or other factors have access to the School of Medicine ombudspersons.

The ombudspersons are empowered to receive and investigate reports of mistreatment in a completely confidential manner, to mediate between the parties involved, and, in the event mediation is not successful, to make recommendations directly to the dean of the School of Medicine regarding appropriate resolution of any complaints.

The use of the ombudspersons' services to resolve a complaint represents a form of alternate dispute resolution. For this reason, the services of the ombudspersons will no longer be available to a student once that student engages an attorney to initiate legal action against the School of Medicine, the University of South Carolina, or the employees of those institutions.

Advisors

Faculty members from all School of Medicine departments volunteer to serve as advisors to medical students. Advisors counsel students regarding academics or other areas pertinent to students' satisfactory progress in the medical curriculum. They also assist students with such aspects of their clinical years as fourth-year electives, specialty selection, and residency application.

Faculty advisors and medical students are encouraged to meet at least once per semester. Advisors assist personnel in the School of Medicine Office of Student and Career Services in following the academic progress of their advisees.

Student-student advisory systems are at the discretion of the respective classes of the School of Medicine. Incoming first-year students are assigned student mentors in the summer so that they may meet preceding matriculation.

Student Housing

The majority of students elect to rent/purchase housing in the area adjacent to the School of Medicine campus. Information is posted on the bulletin board in the student mailroom in building 3. Additional information about off-campus housing can be obtained from:

Office of Off-Campus Housing Service
Russell House University Union
University of South Carolina
Columbia, SC 29208

The University provides a limited number of housing units for married couples. They are assigned on the basis of date of application receipt. For information, contact:

University Housing
University of South Carolina
Attn: Family Housing
1215 Blossom Street
Columbia, SC 29208

Student Bookstores

The University Bookstore, located in the Russell House University Union on the University campus, stocks textbooks, supplies, general interest books, popular and classical recordings, and a wide range of gift items.

Student Lounge/Canteen

A large well-furnished student lounge and adjoining small kitchen area are located on the first floor of the Basic Science Annex on the School of

Medicine campus. The lounge, containing a television, computers, and a telephone, is available to students 24 hours a day.

Arthur L. Humphries Physical Fitness Center

The Arthur L. Humphries Physical Fitness Center is located on the ground floor of the Dorn V.A. Medical Center Auditorium. Equipped with a variety of exercise machines and mats, the center is open to School of Medicine students, faculty, and staff and Dorn V.A. Medical Center physicians, staff, and patients (under medical supervision).

Services for Students with Disabilities

The University of South Carolina does everything reasonably possible in an attempt to accommodate students with disabilities in the attainment of their academic objectives. The Student Disability Resource Center is available to help disabled students with any problems in their campus life experience and to facilitate any adjustments that might be required. Medical students are invited to contact:

Student Disability Services

1705 College Street
Close-Hipp, Suite 102
Columbia, SC 29208
Phone: 803-777-6142
Fax: 803-777-6741
Email: sadrc@mailbox.sc.edu

University Programs

As students of the University of South Carolina, medical students are entitled to use all facilities and programs available to University students. A partial listing follows.

Russell House University Union

Located at the center of the campus, this facility contains numerous meeting rooms, a ballroom, television and conversational lounges, music listening rooms, a browsing lounge, a theater, and office space for student organizations, including the Student Government, campus newspaper, and radio station.

A variety of services is provided throughout the building. Personnel assist students in locating services. University Dining Services operates food service facilities in the Russell House University Union.

Carolina Productions arranges educational, recreational, and social activities for and with the entire University community. For information, contact the Carolina Productions in the Russell House.

Athletics

The University sponsors extensive programs in men's and women's intercollegiate sports. Its athletic teams, the Gamecocks and the Lady Gamecocks, compete as members of the Southeastern Conference of NCAA Division 1A.

Among the facilities for athletics at the University are Williams-Brice Stadium, Colonial Center, an all-weather track, a baseball stadium, and tennis courts. The Blatt Physical Education Center and the Strom Thurmond Wellness and Fitness Center provide extensive indoor space for student sports, including Olympic-sized swimming pools.

Intramural Recreational Athletic and Club Sports

The Division of Student and Alumni Services of the University conducts an extensive intramural athletic and recreational sports program for all

students, with competition in many areas. Students may participate as individuals and teams in more than 25 intramural sports and in 13 club sports.

Student Health

The School of Medicine is committed to providing all students with appropriate health care and personal counseling in a compassionate, confidential, and professional manner. Student confidentiality is a priority. No physician treating a student will be involved in the education, evaluation or advancement process for the School of Medicine, with the exception of emergency services, wherein USCSOM Columbia faculty and residents may be the clinical staff responsible for the facility to which the student presents, and it is in the best interest of the student to receive immediate care. The student will be transferred to the care of non-faculty physicians as soon as medically appropriate.

Student Health Policies

Contagious Infections and/or Diseases

The School of Medicine has adopted the following policy regarding applicants and students with contagious infections and/or diseases:

The University of South Carolina School of Medicine supports fully the spirit and intent of Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1992 in fulfilling its role of providing a medical education to qualified candidates with contagious infections and/or diseases who do not constitute a direct threat to the health and safety of other individuals and who are otherwise able to fulfill the requirements incident to attending medical school.

In fulfilling its obligation to educate future physicians, the School of Medicine is charged with maintaining the integrity of the curriculum; preserving, as part of the curriculum, those elements deemed necessary to the education of physicians; and adhering to procedures consonant with those established with the Centers for Disease Control, among others, to maintain the health and safety of patients.

It is, therefore, the policy of the School of Medicine to fulfill the above-stated obligation, and to provide expert and safe patient care; protect the personal rights of students with contagious infections and/or diseases, including the right to be free from disparate treatment and improper management of confidential information; provide information, education, and support services that promote the professional and personal well-being of students; provide a safe working environment for all students; and provide for the implementation of laws and regulations pertaining to public health and welfare.

Therefore, pursuant to the above-stated policy, in appropriate cases, after obtaining the advice and consultation of the appropriate clinical clerkship director, the School of Medicine will monitor and modify the clinical activities of infected students who pose unwarranted risks to patients. The decision to modify the clinical activities shall be based upon an objective evaluation of the individual student's experience, technical expertise, functional disabilities, and the extent to which the contagious infection and/or disease can be readily transmitted. The infected student shall be afforded full participation in clinical activities that do not pose unwarranted risks to patients, as determined by the appropriate clinical clerkship director. In all instances where the educational activities of a student are modified, steps shall be taken to ensure that his/her educational experience is equivalent to that of his/her uninfected peers. In such cases, maintaining the integrity of the educational experience afforded such a student shall be of paramount importance.

Chemical Dependency

The School of Medicine has adopted the following policy regarding chemical dependency in medical students:

The University of South Carolina School of Medicine recognizes that chemical dependency represents a problem of national proportions and that medical students may be at increased risk.

The School of Medicine is therefore committed to providing an integrated substance abuse curriculum to medical students as a component of their medical education, to promoting student wellness by identifying and assisting students who may be chemically dependent, and to providing access for medical students to confidential chemical dependency treatment programs that will not jeopardize their professional career goals.

Definitions

Substance abuse is characterized as insidious, progressive, chronic, malignant, primary, family-centered, and treatable. The medical consequences resulting from impairment from substance abuse range from a mild hangover to death due to bleeding, infection, or trauma. For medical students, impairment is defined as recurring trouble associated with alcohol or drug abuse; the trouble may occur in any of several domains, including interpersonal (family or other relationships), educational, legal, financial, or medical. Examples include the range of behaviors from absences from class, clinical clerkships, and electives; repeated lateness in the initiation or completion of assigned responsibilities; binge drinking to violence while under the influence of chemicals; traffic accidents and arrests for driving under the influence; attempts to reduce chemical use; receipt of criticism about alcohol and/or drug use from fellow students, faculty members, medical residents, and other clinical supervisors; and, most especially, the student's continued drinking and/or drug use in spite of adverse consequences.

Sources of Assistance

Confidential assistance for medical students with suspected chemical dependency impairment may be obtained from any of the following sources:

- Community resources: The South Carolina Medical Association Physicians' Assistance and Advocacy Committee has formally agreed to provide compassionate assistance to medical students and medical residents with chemical dependency problems. Confidential assistance with assessment, intervention, or treatment questions can be obtained by contacting the Physicians' Assistance and Advocacy Committee chair at 803-798-6207 or 800-327-1021. South Carolina Medical Association offices are located at:
132 Westpark Blvd.
Columbia, SC 29210
- University of South Carolina/School of Medicine resources: Medical students concerned about their use/abuse of chemical substances and/or that of their peers may obtain confidential assistance by contacting UofSC Counseling and Psychiatry Services (803-777-5223). The Psychological Services Center (803-777-4864), and the Thomson Student Health Center (803-777-3957), all on the Columbia campus of the University of South Carolina provide confidential assessment, referral, and treatment. Assistance is also available from the associate dean for medical education and academic affairs (803-216-3600), the assistant dean for student affairs (803-216-3630).
- Other resources: An additional list of resources is published annually by the University of South Carolina in the Carolina Community: Student Handbook and Policy Guide provided to each

medical student at the beginning of the fall semester. The Carolina Community also contains those University policies and procedures relating to the use of alcohol and other drugs to which all enrolled University students are subject as members of the University community.

Student Health Services

Student Health Services provides accessible, convenient, high quality, low cost health care. The health services team is sincerely interested in your health and wants to be your partner in wellness.

Student Health Services provides on-campus medical, mental health, ancillary, and health and wellness services for students. Services include

1. ambulatory primary care at clinics and ancillary services located at the nationally accredited Thomson Student Health Center;
2. a comprehensive array of counseling, testing, and psychological and psychiatric services available at the nationally accredited Counseling and Human Development Center; and
3. a wide variety of wellness-oriented programs and educational services offered by the Office for Campus Wellness and the Office for Sexual Health and Violence Prevention.

Students are encouraged to visit the various Student Health Services Web sites for additional information on clinics, services, and programs (803-777-3175).

Counseling/Consultation Services

Students in the School of Medicine have available to them various counseling, consultation, and psychotherapeutic resources. These may be sought from the Office of Student and Career Services, faculty and student advisors, and psychologists and psychiatrists with appointments in the School of Medicine, as well as from the various services and counseling centers on the University campus. Emergency psychiatric services and confidential assessment, referral, and treatment services are available on a 24-hour-a-day basis from the School of Medicine Department of Neuropsychiatry and Behavioral Science (803-434-4300).

Students enrolled in the School of Medicine program at the Greenville Hospital System University Medical Center have access to equivalent counseling and medical services; information about these services is provided to students at the time of third-year orientation.

Medical Insurance

Students enrolled in the School of Medicine are required to have a current medical insurance policy in effect at the time of fall registration and throughout the academic year and to provide the School of Medicine with verification/proof of insurance or sign a formal declaration waiver form.

A comprehensive health insurance policy is made available by Pearce & Pearce, Inc. through the University of South Carolina for students and their spouses and/or children. Brochures and registration materials are available to all students. The policy is in effect from August 1st to July 31st, with fee payment due at the time of fall and spring registrations.

Immunizations

Students are also required to provide, prior to matriculation, a current medical history, the results of a physical examination, and immunization data on forms provided by the School of Medicine. In order to ensure the health and safety of students and patients in both the classroom and clinical settings, students must provide documentation of immunizations: two dates/doses of MMR or immune state (titers) for rubeola, rubella,

mumps; varicella (either a titer or documentation of two doses of varicella vaccine, history of chickenpox is no longer accepted); polio at the time of initial matriculation (refusal form available); and evidence of a tetanus booster. A TB test is required within six months of matriculation. If the results of TB testing are positive or if the student is known to have tested positive previously, the student must provide proof of positive PPD and negative chest x-ray within the last three years. Continuing students will receive TB testing each year as arranged by the medical school. Evidence of a hepatitis-B vaccine is required with a blood titer prior to matriculation, or to be completed by the end of the first semester (refusal form available). Students accepted in transfer must also provide documentation of hepatitis B immunization and evidence of immune status by blood titer by the end of the first year of transfer (refusal form available). A hepatitis B immunization program is available, at cost, through the School of Medicine during the first year of medical education.

Drug Screenings

Drug screening is required prior to matriculation and at the beginning of the M-III year.

Workers Compensation Insurance

All medical students are covered by Workers Compensation insurance through the State Accident Fund for any injuries sustained by students during the course of those clinical activities that are a part of their medical educations. The premium for this insurance is paid by the School of Medicine. Information about Workers Compensation insurance policies and procedures and the reporting requirements for injuries sustained by students during their medical educations is provided to students annually and available in the Office of Student Services.

Disability Insurance

A disability insurance policy is available and required for all medical students. Annual premium payment is due at the time of fall registration.

Student Organizations

Students enrolled in the School of Medicine may participate in a wide variety of University organizations, including those of specific interest to medical students.

Alpha Omega Alpha (AOA)

AOA is the national honor society for medical students. Election to AOA membership is based upon academic achievement, integrity, leadership ability, and service to the School of Medicine. Eligibility for AOA membership is limited to third- and fourth-year medical students.

Medical Student Association (MSA)

The goal of the MSA is to foster the exchange of ideas among health science students. Toward this end, periodic seminars are held at which research and health-related topics of both a general and specific nature are discussed. The MSA also sponsors social, athletic, and community service activities for students and faculty members.

American Medical Student Association (AMSA)

AMSA is a national student organization that offers supplementary educational programs, including sections in specialized fields and summer preceptorships. Membership dues are a one-time fee that includes organizational membership, publications, an opportunity to purchase life insurance, and other services. Members are also eligible to attend the annual national convention.

American Medical Women's Association (AMWA)

AMWA is a national organization representing women medical students and physicians. Its goal is to enhance the education and training of members and to educate them and the public on health issues of women.

Medical Student Section of the American Medical Association (AMA-MSS)

The AMA-MSS enables students to be represented in the activities of organized medicine within the state and nation.

Student National Medical Association (SNMA)

The School of Medicine SNMA chapter encourages minority students to consider careers in the health professions and promotes mutual support and communication among minority medical students.

Journal Club

The Journal Club keeps students informed on new research and procedures in medical science; gives students the opportunity to read and present research to their peers in a comfortable setting (as good practice for future presentations as upperclassmen or residents); and, gives students the opportunity to access the appropriate faculty while preparing their presentations.

Dermatology Interest Group

The Dermatology Interest Group is for medical students who have an interest in pursuing a career in dermatology. The group participates in several projects, including the National Melanoma Awareness Project. Members will have opportunities to work with local practicing dermatologists.

Emergency Medicine Interest Group

The Emergency Medicine Interest Group provides opportunities for students to learn about the specialty of emergency medicine. At quarterly meetings and seminars, students meet emergency medicine physicians, participate in practical, hands-on workshops, and discuss topics of relevance to emergency medicine.

Family Medicine Interest Group

The Department of Family and Preventive Medicine and the South Carolina chapter of the American Academy of Family Physicians sponsor a Family Practice Club for students who have an interest in careers in this field. At meetings held throughout the academic year at student-determined intervals, students meet family and preventive medicine faculty members, practicing family physicians, and family practice residents. In addition, an annual dinner meeting is held at which a prominent family physician is featured as guest speaker.

Internal Medicine Interest Group

The Internal Medicine Interest Group holds informational and social meetings during the academic year for students interested in general internal medicine and in the various specialties and subspecialties of internal medicine. These meetings include presentations by faculty members in the Department of Medicine, community physicians, and internal medicine residents.

Obstetrics and Gynecology Interest Group

The OB/GYN Interest Group provides programs for students interested in OB/GYN and other women's health issues. Meetings include presentations by faculty in the Department of OB/GYN, community

physicians and OB/GYN residents. Students are also involved in the Teen Clinic at 1801 Sunset Blvd.

Oncology Interest Group Ophthalmology Interest Group Pediatric Interest Group

The Pediatric Interest Group was initiated by the Department of Pediatrics to assist students potentially interested in pediatrics to pursue their interests by means of regular contact with departmental faculty members and residents and with regional and national experts in the field. Meetings and social events are held regularly throughout the academic year.

Psychiatry Interest Group

The Psychiatry Interest Group was created to foster students interested in psychiatry and behavioral science. Four to six dinner meetings are held throughout the academic year, with presentations by faculty members involved in behavioral science/psychiatry research.

Radiology Interest Group Surgery Interest Group

For students with an interest in surgery, the Surgical Interest Group is a student-administered organization that meets monthly throughout the academic year. At these meetings, open to students in all four years, case discussions about surgical cases are moderated by faculty members, with first-year students presenting the anatomy, second-year students presenting the pathophysiology, and third- and fourth-year students presenting the work-up and diagnosis of the case.

Wilderness Medicine Interest Group

The Wilderness Medicine Interest Group provides programs for students with an interest in aspects of wilderness medicine, including emergency response and preventive care.

Military Medicine Interest Group

The purpose of the Military Medicine Interest Group is to establish fellowship among future military physicians. The group also works to establish continuity of information between classes in order to ease the transition into military duties and military residencies.

American Geriatrics Society (AGS)

The purpose of the student chapter network of AGS is to interest physicians-in-training in the field of geriatrics, to enhance the visibility of geriatric medicine at the medical school level, and to provide educational programs on geriatric medicine. AGS holds events in which speakers in the field of geriatrics educate students on relevant issues in the areas of research as well as standard practices.

Religious Activities

Medical students are invited to participate in a wide range of student religious activities on the University campus. There is a University chaplain available for counseling. Several denominations provide religious centers with full-time chaplains offering services to the University community. Columbia churches and denominations also serve University students.

Christian Medical Association (CMA)

Medical students may participate in monthly CMA activities on the School of Medicine campus.

IHI Open School

The Institute for Healthcare Improvement (IHI), an international organization focused on improving healthcare quality and patient safety around the globe, has established the IHI Open School for health professions. The University chapter connects students from all of the University's health professions schools, including medicine, nursing, pharmacy, physical therapy, social work, healthcare administration, and others. Open School works to establish an interprofessional educational community that gives students the skills to become change agents in healthcare. The chapter has a primary focus in the areas of patient safety, quality improvement, teamwork and communication, and leadership.

THE SCHOOL OF MEDICINE - GREENVILLE

Administration

Marjorie Jenkins, MD, *Dean*

Angela Sharkey, MD, *Senior Associate Dean for Academic Affairs*

April Buchanan, MD, *Associate Dean for Curriculum*

Paul Catalana, MD, *Associate Dean for Student Affairs and Admissions*

Julie Linton, MD, *Assistant Dean for Admissions*

Brenda Thames, EdD, *Associate Dean for Culture and Inclusion*

Desmond Kelly, MD, *Associate Dean for Research*

David Cull, MD, *Associate Dean for Graduate Medical Education*

The School of Medicine Greenville offers the Doctor of Medicine degree (MD) and is accredited by the Liaison Committee on Medical Education (<https://lcme.org/>) (LCME).

Overview

The University of South Carolina School of Medicine Greenville offers a hands-on, real-world experience that isn't a mere promise for the future, but a way of life. The UofSC School of Medicine Greenville is a place where students learn using the latest clinical, information and simulation technology and where they develop the leadership, clinical and interpersonal skills essential to delivering the next generation of patient-focused health care with confidence and compassion.

Learning Outcomes

PATIENT CARE: Provide patient-centered care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health

- PC 1: Demonstrate the ability to perform routine technical procedures.
- PC 2: Gather essential and accurate information about patients and their condition through history-taking, physical examination, and the use of laboratory data, imaging, and other tests
- PC 3: Organize and prioritize responsibilities to provide care that is safe, effective and efficient.
- PC4: Interpret laboratory data, imaging studies, and other tests required for the area of practice
- PC 5: Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment
- PC 6: Develop and carry out patient management plans
- PC 7: Counsel and educate patients and their families to empower them to participate in their care and enable shared decision making
- PC 8: Provide appropriate referral of patients including ensuring continuity of care throughout transitions between providers or settings and following up on patient progress and outcomes
- PC 9: Provide health care services to patients, families, and communities aimed at preventing health problems or maintaining health

KNOWLEDGE FOR PRACTICE: Demonstrate knowledge of established and evolving biomedical, clinical, epidemiological, and social-behavioral sciences, as well as the application of this knowledge to patient care

- KP1: Demonstrate knowledge of the normal structure and function of the body and of each of its major organ systems across the life span.
- KP2: Demonstrate knowledge of the molecular, biochemical, and cellular mechanisms that are important in maintaining the body's homeostasis.
- KP3: Demonstrate knowledge of the various causes (genetic, developmental, metabolic, toxic, microbiologic, autoimmune, neoplastic, degenerative, and traumatic) of maladies and the ways in which they affect the body (pathogenesis).
- KP4: Demonstrate knowledge of the altered structure and function (pathology and pathophysiology) of the body and its major organ systems that are seen in various diseases and conditions.
- KP5: Demonstrate an investigatory and analytic approach to clinical situations
- KP6: Apply established and emerging biophysical scientific principles fundamental to health care for patients and populations
- KP7: Apply established and emerging principles of clinical sciences to diagnostic and therapeutic decision making, clinical problem solving, and other aspects of evidence-based health care
- KP8: Apply principles of epidemiological sciences to the identification of health problems, risk factors, treatment strategies, resources, and disease prevention/health promotion efforts for patients and populations
- KP9: Apply principles of social-behavioral sciences to provision of patient care, including assessment of the impact of psychosocial-cultural influences on health, disease, care-seeking, care-compliance, and barriers to and attitudes toward care

PRACTICE-BASED LEARNING AND IMPROVEMENT: Demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and lifelong learning

- PBL1 1: Identify strengths, deficiencies, and limits in one's knowledge and expertise
- PBL1 2: Set learning and improvement goals
- PBL1 3: Identify and perform learning activities that address one's gaps in knowledge, skills, or attitudes
- PBL1 4: Incorporate feedback into daily practice
- PBL1 5: Locate, appraise, and assimilate evidence from scientific studies related to patients' health problems
- PBL1 6: Use information technology to optimize learning
- PBL1 7: Participate in the education of patients, families, students, trainees, peers, and other health professionals
- PBL1 8: Obtain and utilize information about individual patients, populations of patients, or communities from which patients are drawn to improve care
- PBL1 9: Continually identify, analyze, and implement new knowledge, guidelines, standards, technologies, products, or services that have been demonstrated to improve outcomes

INTERPERSONAL AND COMMUNICATION SKILLS: Demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals

- ICS 1: Communicate effectively with patients, families, and the public, as appropriate, across a broad range of socioeconomic and cultural backgrounds

- ICS 2: Communicate effectively with colleagues within one's profession or specialty, other health professionals, and health-related agencies
- ICS 3: Work effectively with others as a member or leader of a health care team or other professional group
- ICS 4: Maintain comprehensive, timely, and legible medical documentation
- ICS 5: Demonstrate sensitivity, honesty, and compassion in difficult conversations (e.g. about issues such as death, end-of-life issues, adverse events, bad news, disclosure of errors, and other sensitive topics)
- ICS 6: Demonstrate insight and understanding about emotions and human responses to emotions that allow one to develop and manage interpersonal interactions

PROFESSIONALISM: Demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles

- P 1: Demonstrate honesty, integrity, compassion and respect in all interactions with others
- P 2: Demonstrate responsiveness to patient needs that supersedes self-interest
- P 3: Demonstrate respect for patient privacy and autonomy
- P 4: Demonstrate accountability to patients, society, and the profession
- P 5: Demonstrate sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation
- P 6: Demonstrate a commitment to ethical principles pertaining to provision or withholding of care, confidentiality, informed consent, and business practices, including compliance with relevant laws, policies, and regulations

SYSTEMS-BASED PRACTICE: Demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care

- SBP 1: Coordinate patient care within the health care system
- SBP 2: Incorporate considerations of cost awareness and risk-benefit analysis in patient and/or population-based care
- SBP 3: Advocate for quality patient care and optimal patient care systems for all patients
- SBP 4: Participate in identifying system errors and implementing potential systems solutions to promote patient safety and quality outcomes

INTERPROFESSIONAL COLLABORATION: Demonstrate the ability to engage in an interprofessional team in a manner that optimizes safe, effective patient and population-centered care

- IPC 1: Work with other health professionals to establish and maintain a climate of mutual respect, dignity, diversity, ethical integrity, and trust
- IPC 2: Use the knowledge of one's own role and those of other professions to appropriately assess and address the health care needs of the patients and populations served
- IPC 3: Communicate with other health professionals in a responsive and responsible manner that supports the maintenance of health and the treatment of disease in individual patients and populations

- IPC 4: Participate in different team roles to establish, develop, and continuously enhance interprofessional teams to provide patient- and population-centered care that is safe, timely, efficient, effective, and equitable

PERSONAL AND PROFESSIONAL DEVELOPMENT: Demonstrate the qualities required to sustain lifelong personal and professional growth

- PPD 1: Develop the ability to use self-awareness of knowledge, skills, and emotional limitations to engage in appropriate help-seeking behaviors
- PPD 2: Demonstrate healthy coping mechanisms to respond to stress
- PPD 3: Manage conflict between personal and professional responsibilities
- PPD 4: Practice flexibility and maturity in adjusting to change with the capacity to alter behavior
- PPD 5: Demonstrate trustworthiness that makes colleagues feel secure when one is responsible for the care of patients
- PPD 6: Provide leadership skills that enhance team functioning, the learning environment, and/or the health care delivery system
- PPD 7: Demonstrate self-confidence that puts patients, families, and members of the health care team at ease
- PPD 8: Recognize that ambiguity is part of clinical health care and respond by using appropriate resources in dealing with uncertainty

FEES AND REFUNDS

Graduate Fee Schedule

Complete details about fees, payments, tax credits, loans, late charges, and related information may be found at the bursar's Web site, www.sc.edu/bursar (<http://www.sc.edu/bursar/>). For the complete graduate fee schedule, visit www.sc.edu/bursar/studentfees.html (<http://www.sc.edu/bursar/studentfees.html>). **Tuition and fees are approved by the Board of Trustees and subject to change at any time.**

For information about non-academic fees, charges, and regulations, visit the Web sites below.

- University Housing: www.housing.sc.edu (<http://www.housing.sc.edu>)
- Carolina Dining Services: www.sc.edu/dining (<http://www.sc.edu/dining/>)
- Thomson Student Health Center: www.sa.sc.edu/shs/tshc/ (<http://www.sa.sc.edu/shs/tshc/>)
- Vehicle Management and Parking Services: www.sc.edu/vmps (<http://www.sc.edu/vmps/>)

Checks, Money Orders, and Credit Cards

The University assesses a credit-card convenience fee for all students paying fees by credit card. If you decide to pay with a credit card, this nonrefundable fee will be added to your bill to cover the cost being charged to the University. Since the majority of students find Self-Service Carolina (<https://my.sc.edu/>) a convenient way to pay, it will present you with an option to accept this fee or decline the transaction. If you decline, you must select another method of payment. Alternative methods include payment by E-check, UofSC's preferred method of payment, when using Self-Service Carolina or payment by check or money order through the mail.

Legal Residency Requirements for Fee and Tuition Purposes

The University of South Carolina is required by state law to determine the residence classification of applicants. The initial determination of one's resident status is made at the time of admission. The determination made at that time, and any determination made thereafter, prevails for each subsequent semester until information becomes available that would impact the existing residency status and the determination is successfully challenged. The burden of proof rests with the students to show evidence as deemed necessary to establish and maintain their residency status.

Code of Laws Governing Residence

Rules regarding the establishment of legal residence for tuition and fee purposes for institutions of higher education are governed by Title 59, Chapter 112, of the 1976 South Carolina Code of Laws, as amended.

Definitions

"Academic Session" is defined as a term or semester of enrollment.

"Continue to be Enrolled" is defined as continuous enrollment without an interruption that would require the student to pursue a formal process of readmission to that institution. Formal petitions or applications for change of degree level shall be considered readmissions.

"Dependent Person" is defined as one whose predominant source of income or support is from payments from a parent, spouse, or guardian, who claims the dependent person on his/her federal income tax return. In the case of those individuals who are supported by family members who do not earn enough reportable income for taxation purposes, a dependent person can be defined as one who qualifies as a dependent or exemption on the federal income tax return of the parent, spouse, or guardian. A dependent person is also one for whom payments are made, under court order, for child support and the cost of the dependent person's college education. A dependent person's residency is based upon the residency of the person upon whom they are dependent.

"Domicile" is defined as the true, fixed, principal residence and place of habitation. It shall indicate the place where a person intends to remain, or to where one expects to return upon leaving without establishing a new domicile in another state. For purposes of this section, one may have only one legal domicile. One is presumed to abandon automatically an old domicile upon establishing a new one. Housing provided on an academic session basis for student at institutions shall be presumed not to be a place of principal residence, as residency in such housing is by its nature temporary.

"Family's Domicile in this State is Terminated" is defined as an employer directed transfer of the person upon whom the student is dependent and is not construed to mean a voluntary change in domicile. Also included is a relocation of the person upon whom the student is dependent who is laid off through no fault of their own, e.g., plant closure, downsizing, etc., who accepts employment in another state prior to relocating.

"Full time employment" is defined as employment that consists of at least thirty seven and one half hours a week on a single job in a full time status, with gross earnings of at least minimum wage. However, a person who works less than thirty seven and one half hours a week but receives or is entitled to receive full time employee benefits shall be considered to be employed full time if such status is verified by the employer. A person who meets the eligibility requirements of the Americans with Disabilities Act must present acceptable evidence that they satisfy their prescribed employment specifications in order to qualify as having full time employment.

"Guardian" is defined as one legally responsible for the care and management of the person or property of a minor child based upon the five tests for dependency prescribed by the Internal Revenue Service; provided, however, that where circumstances indicate that such guardianship or custodianship was created primarily for the purpose of conferring South Carolina domicile for tuition and fee purposes on such child or dependent person, it shall not be given such effect.

"Immediately Prior" is defined as the period of time between the offer of admission and the first day of class of the term for which the offer was made, not to exceed one calendar year.

"Independent Person" is defined as one in his/her majority (eighteen years of age or older) or an emancipated minor, whose predominant source of income is his/her own earnings or income from employment, investments, or payments from trusts, grants, scholarships, commercial loans, or payments made in accordance with court order. An independent person must provide more than half of his or her support during the twelve months immediately prior to the date that classes begin for the semester for which resident status is requested. An independent person cannot claim the domicile of another individual as their own for the purposes of establishing intent to become a South Carolina resident. An independent person must have established his/her own domicile for

twelve months prior to receiving in-state tuition and fees. An independent person cannot be claimed as a dependent or exemption on the federal tax return of his or her parent, spouse, or guardian for the year in which resident status is requested.

“Minor” is defined as a person who has not attained the age of eighteen years. An “emancipated minor” shall mean a minor whose parents have entirely surrendered the right to the care, custody and earnings of such minor and are no longer under any legal obligation to support or maintain such minor.

“Non-resident Alien” is defined as a person who is not a citizen or permanent resident of the United States. By virtue of their non-resident status “non-resident aliens” generally do not have the capacity to establish domicile in South Carolina.

“Parent” is defined as the father, mother, stepfather, stepmother, foster parent or parent of a legally adopted child.

“Reside” is defined as continuous and permanent physical presence within the State, provided that absences for short periods of time shall not affect the establishment of residence. Excluded are absences associated with requirements to complete a degree, absences for military training service, and like absences, provided South Carolina domicile is maintained.

“Resident” for tuition and fee purposes is defined as an independent person who has abandoned all prior domiciles and has been domiciled in South Carolina continuously for at least twelve months immediately preceding the first day of class of the term for which resident classification is sought and for whom there is an absence of domiciliary evidence in other states or countries, notwithstanding other provisions of the Statute.

“Spouse” is defined as the husband or wife of a married person in accordance with Title 20, Chapter 1 of the 1976 South Carolina Code of Laws, as amended.

“Temporary Absence” is defined as a break in enrollment during a fall or spring semester (or its equivalent) during which a student is not registered for class. (62-606.A)

“Terminal Leave” is defined as a transition period following active employment and immediately preceding retirement (with a pension or annuity), during which the individual may use accumulated leave.

“United States Armed Forces” is defined as the United States Air Force, Army, Marine Corps, Navy, and Coast Guard.

“Trust” is defined as a legal entity created by a grantor for the benefit of designated beneficiaries under the laws of the state and the valid trust instrument. However, that where circumstances indicate that such trust was created primarily for the purpose of conferring South Carolina domicile for tuition and fee purposes on such child or independent person, it shall not be given such effect.

Citizens and Permanent Residents

Independent persons who have physically resided and been domiciled in South Carolina for twelve continuous months immediately preceding the date the classes begin for the semester for which resident status is claimed may qualify to pay in-state tuition and fees. The twelve-month residency period starts when the independent person establishes the intent to become a South Carolina resident per Section 62-605 entitled “Establishing the Requisite Intent to Become a South Carolina

Domiciliary.” The twelve-month residency period cannot start until the absence of indicia in other states is proven. Absences from the State during the twelve-month period may affect the establishment of permanent residence for tuition and fee purposes.

The resident status of a dependent person is based on the resident status of the person who provides more than half of the dependent person’s support and claims or, only in the case of those individuals who are supported by family members who do not earn enough reportable income for taxation purposes, qualifies to claim the dependent person as a dependent for federal income tax purposes. Thus, the residence and domicile of a dependent person shall be presumed to be that of their parent, spouse, or guardian.

In the case of divorced or separated parents, the resident status of the dependent person may be based on the resident status of the parent who claims the dependent person as a dependent for tax purposes; or based on the resident status of the parent who has legal custody or legal joint custody of the dependent person; or based on the resident status of the person who makes payments under a court order for child support and at least the cost of his/her college tuition and fees.

Non-Resident Aliens, Non-Citizens, and Non-Permanent Residents

Except as otherwise specified in this section or as provided in Section 62-609 (1) & (2), independent non-citizens and non-permanent residents of the United States will be assessed tuition and fees at the non-resident, out-of-state rate. Independent non-resident aliens, including refugees, asylees, and parolees may be entitled to resident, in-state classification once they have been awarded permanent resident status by the U.S. Department of Justice and meet all the statutory residency requirements provided that all other domiciliary requirements are met. Time spent living in South Carolina immediately prior to the awarding of permanent resident status does not count toward the twelve-month residency period. Certain non-resident aliens present in the United States in specified visa classifications are eligible to receive in-state residency status for tuition and fee purposes as prescribed by the Commission on Higher Education. They are not, however, eligible to receive state-sponsored tuition assistance/scholarships.

Title 8 of the Code of Federal Regulations (CFR) serves as the primary resource for defining visa categories.

Establishing the Requisite Intent to Become a South Carolina Domiciliary

Resident status may not be acquired by an applicant or student while residing in South Carolina for the sole primary purpose of enrollment in an institution or for access to state-supported programs designed to serve South Carolina residents. An applicant or student from another state who comes to South Carolina usually does so for the purpose of attending school. Therefore, an applicant or student who enrolls as a non-resident in an institution is presumed to remain a non-resident throughout his or her attendance and does not qualify under any of the residency provisions.

If a person asserts that his/her domicile has been established in this State, the individual has the burden of proof. Such persons should provide to the designated residency official of the institution to which they are applying any and all evidence the person believes satisfies the burden of proof. The residency official will consider any and all evidence provided concerning such claim of domicile, but will not necessarily

regard any single item of evidence as conclusive evidence that domicile has been established.

For independent persons or the parent, spouse, or guardian of dependent persons, examples of intent to become a South Carolina resident may include, although any single indicator may not be conclusive, the following indicia:

1. Statement of full time employment;
2. Designating South Carolina as state of legal residence on military record;
3. Possession of a valid South Carolina driver's license, or if a non-driver, a South Carolina identification card. Failure to obtain this within 90 days of the establishment of the intent to become a South Carolina resident will delay the beginning date of residency eligibility until a South Carolina driver's license is obtained;
4. Possession of a valid South Carolina vehicle registration card. Failure to obtain this within 45 days of the establishment of the intent to become a South Carolina resident will delay the beginning date of residency eligibility until the applicant obtains a South Carolina vehicle registrations card;
5. Maintenance of domicile in South Carolina;
6. Paying South Carolina income taxes as a resident during the past tax year, including income earned outside of South Carolina from the date South Carolina domicile was claimed;
7. Ownership of principal residence in South Carolina; and
8. Licensing for professional practice (if applicable) in South Carolina.

The absence of indicia in other states or countries is required before the student is eligible to pay in state rates.

Maintaining Residence

A person's temporary absence from the State does not necessarily constitute loss of South Carolina residence unless the person has acted inconsistently with the claim of continued South Carolina residence during the person's absence from the State. The burden is on the person to show retention of South Carolina residence during the person's absence from the State. Steps a person should take to retain South Carolina resident status for tuition and fee purposes include:

1. Continuing to use a South Carolina permanent address on all records;
2. Maintaining South Carolina driver's license;
3. Maintaining South Carolina vehicle registration;
4. Satisfying South Carolina resident income tax obligation. Individuals claiming permanent residence in South Carolina are liable for payment of income taxes on their total income from the date that they established South Carolina residence. This includes income earned in another state or country.

Effect of Change of Residency

Notwithstanding other provisions of this section, any dependent person of a legal resident of this state who has been domiciled with his/her family in South Carolina for a period of not less than three years and whose family's domicile in this state is terminated immediately prior to his/her enrollment may enroll at the in state rate. Any dependent person of a legal resident of this state who has been domiciled with his/her family in South Carolina for a period of not less than three years and whose family's domicile in this state is terminated after his/her enrollment may continue to receive in state rates, however, a student must continue to be enrolled and registered for classes (excluding summers) in order to maintain eligibility to pay in state rates

in subsequent semesters. Transfers within or between South Carolina colleges and universities of a student seeking a certificate, diploma, associate, baccalaureate, or graduate level degree does not constitute a break in enrollment.

If a dependent or independent person voluntarily leaves the state, and information becomes available that would impact the existing residency status, eligibility for in state rates shall end on the last day of the academic session during which domicile is lost. Application of this provision shall be at the discretion of the institution involved. However, a student must continue to be enrolled and registered for classes (excluding summers) in order to maintain eligibility to pay in state rates in subsequent semesters.

Effect of Marriage

In ascertaining domicile of a married person, irrespective of gender, such a review shall be determined just as for an unmarried person by reference to all relevant evidence of domiciliary intent.

If a nonresident marries a South Carolina resident, the nonresident does not automatically acquire South Carolina resident status. The nonresident may acquire South Carolina resident status if the South Carolina resident is an independent person and the nonresident is a dependent of the South Carolina resident.

Marriage to a person domiciled outside South Carolina shall not be solely the reason for precluding a person from establishing or maintaining domicile in South Carolina and subsequently becoming eligible or continuing to be eligible for residency.

No person shall be deemed solely by reason of marriage to a person domiciled in South Carolina to have established or maintained domicile in South Carolina and consequently to be eligible for or to retain eligibility for South Carolina residency.

Exceptions

Persons in the following categories qualify to pay in state tuition and fees without having to establish a permanent home in the state for twelve months. Persons who qualify under any of these categories must meet the conditions of the specific category on or before the first day of class of the term for which payment of in state tuition and fees is requested. The following categories apply only to in state tuition and do not apply to State supported scholarships and grants. Individuals who qualify for in state tuition and fees under the following exceptions do not automatically qualify for LIFE, SC HOPE or Palmetto Fellows Scholarships.

1. **"Military Personnel and their Dependents:"** Members of the United States Armed Forces who are permanently assigned in South Carolina on active duty and their dependents are eligible to pay in state tuition and fees. When such personnel are transferred from the State, their dependents may continue to pay in state tuition and fees as long as they are continuously enrolled. Such persons (and their dependents) may also be eligible to pay in state tuition and fees as long as they are continuously enrolled after their discharge from the military, provided they have demonstrated an intent to establish a permanent home in South Carolina and they have resided in South Carolina for a period of at least twelve months immediately preceding their discharge. Military personnel who are not stationed in South Carolina and/or former military personnel who intend to establish South Carolina residency must fulfill the twelve month "physical presence" requirement for them or their dependents to qualify to pay in state tuition and fees.

2. **“Faculty and Administrative Employees with Full Time Employment and their Dependents.”** Full time faculty and administrative employees of South Carolina state supported colleges and universities and their dependents are eligible to pay in state tuition and fees.
3. **“Residents with Full Time Employment and their Dependents.”** Persons who reside, are domiciled, and are full time employed in the State and who continue to work full time until they meet the twelve month requirement and their dependents are eligible to pay in state tuition and fees, provided that they have taken steps to establish a permanent home in the State. Steps an independent person must take to establish residency in South Carolina are listed in Section 62-605 entitled (“Establishing the Requisite Intent to Become a South Carolina Domiciliary (p.)”).
4. **“Retired Persons and their Dependents.”** Retired persons who are receiving a pension or annuity who reside in South Carolina and have been domiciled in South Carolina as prescribed in the Statute for less than a year may be eligible for in state rates if they maintain residence and domicile in this State. Persons on terminal leave who have established residency in South Carolina may be eligible for in state rates even if domiciled in the State for less than one year if they present documentary evidence from their employer showing they are on terminal leave. The evidence should show beginning and ending dates for the terminal leave period and that the person will receive a pension or annuity when he/she retires.

South Carolina residents who wish to participate in the Contract for Services program sponsored by the Southern Regional Education Board must have continuously resided in the State for other than educational purposes for at least two years immediately preceding application for consideration and must meet all other residency requirements during this two year period.

Application for Change of Resident Status

Persons applying for a change of resident classification must complete a residency application/petition and provide supporting documentation prior to a reclassification deadline as established by the institution.

The burden of proof rests with those persons applying for a change of resident classification who must show required evidence to document the change in resident status.

Incorrect Classification

Persons incorrectly classified as residents are subject to reclassification and to payment of all non-resident tuition and fees not paid. If incorrect classification results from false or concealed facts, such persons may be charged tuition and fees past due and unpaid at the out of state rate. The violator may also be subject to administrative, civil, and financial penalties. Until these charges are paid, such persons will not be allowed to receive transcripts or graduate from a South Carolina institution.

Residents whose resident status changes are responsible for notifying the Residency Official of the institution attended of such changes.

Inquiries and Appeals

Inquiries regarding residency requirements and determinations should be directed to:

Legal Residency Office
University Of South Carolina
Columbia, SC 29208
803-777-4060

Any person, following a decision on his or her resident classification, may appeal the decision to the University Committee on Legal Residence. The committee, however, is bound by the same laws and regulations as the residency officials, so its purpose is only to review the facts and details of any case brought before it to evaluate the correctness of the decision may by residency officials. Neither the committee nor residency officials may waive the provisions of the law or regulations.

Persons who appeal residency decisions must provide a letter to the Legal Residency Office informing the office that they want to appeal the decision made by the residency official. The letter must also include a summary of the person's situation and a statement which specifies the residency provision under which the person feels he or she qualifies to pay in-state fees. The director of legal residency will then schedule a hearing as soon as possible for the committee to hear the appeal.

The residency requirements are subject to change without notification.

Academic Fees

Application Fees

Every new graduate student will be charged a nonrefundable application fee of \$50. All applications must be accompanied by the application fee. International students pay an enrollment fee of \$500.

Matriculation Fee

A nonrefundable matriculation fee of \$50 is assessed to all current degree-seeking students on a one-time basis. This fee is also assessed to entering (or re-entering) degree-seeking students.

Free Tuition

(This includes tuition only-all other academic and mandatory fees are the responsibility of the student.)

Certain exemptions from tuition fees have been established under South Carolina Law. Relevant sections of the Code are reproduced below:

1. **S.C. Code Ann. § 59-111-110 (Law Co-op. 1976)** No tuition shall be charged for a period of four school years by any state-supported college or university or any state-supported vocational or technical school for children of firemen, both regularly employed and members of volunteer organized units, organized rescue squad members, members of the Civil Air Patrol, law enforcement officers or correction officers, as defined herein, including reserve and auxiliary units of counties or municipalities, who become totally disabled or are killed in line of duty (on or after July 1, 1964).
2. **S.C. Code Ann. § 59-111-320 (Law Co-op Supp. 1984)** Legal residents of South Carolina who have attained the age of sixty (60) and meet admission and other standards deemed appropriate by the University may attend classes for credit or non-credit purposes on a space available basis; provided, however, that neither such persons nor their spouses receive compensation as full-time employees.

Examination Fees

Graduate Record Examination

1. General Test (\$60)
2. Subject Test (\$60)

Revalidation examinations intended to revalidate USC courses, obsolete under the statute of limitations. Per hour, \$25.

Note: Revalidation examinations require permission of the dean of The Graduate School. The fee must be paid in advance, and is nonrefundable, once the student is presented to the instructor for the examination.

Refund Policy Policies

The University will refund a part of academic fees in certain cases:

1. Changes in a student's status, which may require a refund:
 - a. Change in a full-time student's schedule which results in reclassification to part-time (Less than 12 credit hours).
 - b. Change in a part-time student's schedule which results in fewer credit hours.
2. Situations which may require a refund:
 - a. Course or courses dropped.
 - b. Drop/Withdrawal from the University.
 - c. Cancellation of a class by the University.

Procedures

The refund procedures for the School of Medicine Greenville reflect those of the University as a whole and use the same calculation procedures to determine a percentage of refund for each Part of Term in which a student is enrolled. In cases where a student has not begun a particular Part of Term, the student will receive a full refund for courses within that Part of Term.

1. Refund Requests

All requests for refunds must be received during the academic year for which the fees were paid. The academic year begins with the fall term and ends with the summer term.

Refunds may be requested at any time during the academic year in which the applicable term occurs.

2. Determining the Refundable Portion Procedure

Student refunds for tuition are calculated based on the student's liable hours after the drop/withdrawal. Liable hours are calculated as the total hours a student is still registered plus the liable portion of the dropped/withdrawn course(s). The liable portion is computed by taking the number of dropped hours times the liability rate (which is 100 percent minus the refund percentage). The refund amount is determined to be the difference of the original assessment and the assessment based on the new liable hours. For students whose liable hours are 12 or above, no refunds are processed. Other academic fees are non-refundable after the 100 percent refund percentage. For students activated for full-time military service during an academic term, the University follows state law in Section 59-101-395. Any refund calculated will be applied to the student account.

3. Drop/Withdrawal Refund Policy

Standard refund procedures for dropping/withdrawal from the School of Medicine Greenville:

Standard refund procedures for dropping/withdrawal from the university:

All refunds will be based solely on the percentage of time (in days) between the first day of a part-of-term and the last day of a part-of-term. The percentage (in days) will include all Saturdays, Sundays, and holidays between the start and end dates of each part-of-term. Exceptions to this rule may only be made by the Bursar's Office. In these instances, any change in the refund percentage would be

moved out to the next closest business day. Courses fewer than six days long, first day = 100% refund, remaining days = no refund.

- a. 100 percent if the student's official drop/withdrawal calculation is within 6% of the enrollment period for which the student is liable.
- b. 70 percent if the student's official withdrawal calculation is between the period specified in (1) or before the end of the 10 percent period of enrollment for which the student is liable.
- c. 50 percent if the student's official withdrawal calculation is between the period specified in (2) or before the end of the 16 percent period of enrollment for which the student is liable.
- d. 20 percent if the student's official withdrawal calculation is between the period specified in (3) or before the end of the 25 percent period of enrollment for which the student is liable.

4. Refund Schedules

The University Registrar maintains the official refund schedules for all programs at the University. When a medical student seeks to withdraw from the University, S/He must first contact the Sr. Asst. Director of Financial Aid and Student Records to discuss the amount and procedure for a refund. As medical student schedules are very complicated, no refund calculation can be completed until the student decides on a date for withdrawal.

5. Refund Rate

Owing to the fact that the School of Medicine Greenville has a flat tuition rate, there is no traditional "part-time" rate for enrollment that the USC Banner system can use for the calculation of refunds. For this purpose, a partial tuition rate must be created for sole use in the calculation of refunds. Both medical schools of USC have decided upon the following equation to establish the refund rate:

6. Return of Title IV Funds

- a. Refunds Policy for Students Who Have Received Title IV Funds And Withdraw From The University. Federal financial aid funds are awarded with the expectation that students will complete the entire period of enrollment. Students "earn" a percentage of the funds that are disbursed with each day of class attendance. When a student who has received federal aid funds (Title IV Funds) leaves school before the end of the semester or period of enrollment, federal regulations require the University of South Carolina to calculate the percentage and amount of "unearned" financial aid funds that must be returned. Once a student has completed more than 60 percent of the enrollment period, they are considered to have earned all funding received. This calculation may have the effect of requiring the student who withdraws before this time frame to repay funds that have already been disbursed to the student or credited towards their current account for tuition, fees, housing and/or meals. Students are encouraged to meet with a counselor in the Office of Student Affairs, or the appropriate office on their campus, prior to making the decision to withdraw from school.
- b. Title IV Refund Distribution
 - i. For fully withdrawn students receiving federal and/or state funds, the refund will be governed by the current Federal Title IV refund policy. The Office of Student Financial Aid and Scholarships determines the amount of the funds that are distributed back to Title IV, HEA Programs or other Financial Aid sources. For students and their parents who have received student loans or other forms of financial aid, funds will be returned in the order prescribed by federal regulations. The institution must return the funds to the financial aid program other than College Work Study, up to the amount of

assistance that the student received from those programs. Funds are to be distributed to the financial aid programs in the following order:

- Unsubsidized Federal Stafford
 - Federal PLUS Loan
 - Federal Iraq/Afghanistan Service Grant
- ii. Any remaining balance will first be used to repay any outstanding university charges and any subsequent balances will be refunded to the student/parent.
 - iii. Exit interviews are required before leaving the University of South Carolina for all students who withdraw and have received Stafford, Perkins or Federal Nursing/Health Professions Loans. Exit interviews can be completed at: http://www.sc.edu/financialaid/loan_counseling/default.html.

Questions regarding exit counseling should be referred to the appropriate campus Financial Aid and Scholarships Office.

7. Appeals Process

A process for appeals exists for students who believe circumstances warrant exceptions from published policy. The student must be fully withdrawn from the University in order to apply for an appeal.

The Withdrawal Refund Appeals Committee for each campus reviews and act on all appeals:

Withdrawal Refund Appeals Committee
Office of the Registrar
University of South Carolina
Columbia, SC 29208
803-777-5555

Housing Fees

1. Students in the following categories are eligible for refunds in accordance with the terms shown in their Residence Hall contract:
 - a. newly admitted students who do not attend the University of South Carolina
 - b. students who graduate from school at the end of the fall semester
 - c. students who are suspended for academic reasons
 - d. students who get married.
2. Check the contract or call University Housing for deadline dates and other information.
3. Tenants who do not withdraw from the University but desire release from their contracts will be placed on a contract release waiting list with University Housing. Releases will be granted only when all other space is filled and the space can be rented for the balance of the year to another tenant. Students will be notified upon release and appropriate refunds will be made.

Withdrawal Refunds

All full- or part-time students wishing to withdraw from the University or to discontinue enrollment from all courses for the semester should follow the instructions online at my.sc.edu (<https://my.sc.edu/>) when they request to drop their last course. Staff members of the Office of the University Registrar are available to assist students in completing the withdrawal process. In addition, staff from the Student Ombudsman Office located in the Osborne Administration building can provide counseling. Students requesting withdrawal for extenuating

circumstances after the penalty date (last date for **W** grade) should see their college dean.

In establishing a diminishing-scale refund process for withdrawals, the University operates on the philosophy that many of the basic costs of instruction are incurred at the end of the first week of classes or within an equivalent period for nonstandard semesters. The assignment of a classroom seat to an individual student precludes any other student from occupying that seat. In addition, an instructor is assigned and the costs of instruction are encumbered on the first day of classes.

A student who withdraws from the University after the first week of classes has already occupied a classroom seat that cannot be reassigned. As a result, the University cannot both maintain its financial integrity and also provide a full refund. Accordingly, the University has established a series of refund deadlines commensurate with student progress into the semester.

University Withdrawal Refund Appeal Procedures

The University Withdrawals Refund Appeal Committee is authorized to consider appeals and approve extraordinary exceptions to the University's published withdrawal refund schedule due to humanitarian and due-process considerations.

Guidelines for committee consideration of withdrawal appeals are:

1. The appeal must be submitted in writing to the Office of the University Registrar and will be considered only in written form. A standardized appeal form must be submitted.
2. All requests for appeal must be submitted directly by the student through the Office of the University Registrar and must meet one or more of the following criteria to be considered and approved by the appeals committee:
 - a. Documentation of an accident, illness, injury, or incident which could not be influenced, predicted, planned for, or prevented by the student or the institution. This provision specifically excludes conditions or chronic illnesses known to the student at the time of enrollment
 - b. Demonstration that the application of the published refund policy would result in a specific and substantial personal hardship to the student. This provision specifically excludes circumstances or effects which would simply inconvenience the student or the student's family.
 - c. Documentation of substantiated circumstances where a student has in good faith relied upon the veracity of a University official's advice, or the official's interpretation of the text of a University document or publication, and was consequently misled or mistaken about the terms of the published refund policy.
3. The appeal must be initiated during the semester for which the refund is requested.
4. The appeal must involve a total withdrawal from the University. No partial withdrawals will be considered.
5. Appeals will only address whether or not a refund will be granted. No consideration will be given to grade assignment or other academic issues. Students must address such issues directly with the faculty members and the college. If applicable, requests for Extenuating Circumstances Withdrawals for grade change purposes must be resolved prior to deliberations by this committee.
6. Grounds for consideration of an appeal will be restricted to only those circumstances personally experienced by the enrolled individual with whom the University has a direct relationship. Loss or illness of

a family member, close associate, or employee, and/or difficulty in family-operated businesses, are excluded from consideration.

7. Decisions will be made by a simple majority vote of the committee membership and documented in writing by the chair. The student will be informed of the outcome of the appeal by letter from the Office of the Associate Vice President for Student Life and Development.

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