



كلية طب وايل كورنيل في قطر  
Weill Cornell Medical College in Qatar

Member of Qatar Foundation

# **WCMC-Q Student Handbook**

## **Medical Program**

### **2015-2016**

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## About the Institution

Welcome to Weill Cornell Medical College in Qatar (WCMC-Q). We invite you to discover how WCMC-Q is contributing to Qatar's objective to become a knowledge-based society by advancing our mission of excellence in education, research and patient care.

We are a young institution that established academic operations in 2002 as a historic partnership between Qatar Foundation and Cornell University. We offer a unique, six-year American curriculum, which includes premedical and medical education, leading to the same M. D. awarded to graduates of Weill Cornell Medical College in New York City.

Through the generous support of the Qatar Foundation, we are becoming a significant contributor to the renaissance of education, research and state-of-the-art patient care in Qatar and the region.

We have graduated seven classes of physicians who have continued their graduate medical training in residencies and clinical research at outstanding institutions in the United States and Qatar. Many of these young physicians will soon begin to return to become leaders and innovators in the planning and delivery of medical care in Qatar and the region.

We have a world-class biomedical research team who are conducting basic, translational and clinical research that focuses on diseases and disorders that are among the most frequent and challenging issues for patient care in Qatar.

## Mission Statement

Weill Cornell Medical College in Qatar was established by Cornell University in partnership with Qatar Foundation for Education, Science and Community Development, pursuant to an agreement signed in January 2001.

WCMC-Q is part of Weill Cornell Medical College, which was founded in New York City over 100 years ago, and shares the same mission:

- To provide the finest education possible for medical students
- To conduct research at the cutting edge of knowledge
- To improve health care both now and for future generations
- To provide the highest quality of care to the community

## **Affiliations**

### **Qatar Foundation**

A private, non-profit organization established in 1995 by His Highness the Emir, Sheikh Hamad Bin Khalifa Al-Thani, in Qatar Foundation for Education, Science and Community Development is integral to Qatar's drive to become an advanced knowledge-based society.

Chaired by wife of the Emir, Her Highness Sheikha Moza bint Nasser, Qatar Foundation is dedicated to serving the educational needs of the whole person up to postgraduate level; to fostering community health and development; and to nurturing research and entrepreneurship.

Its flagship project is the visionary Education City campus in Doha, where branches of American universities offer programs in medicine, international affairs, business administration, computer science, engineering and design. The Faculty of Islamic Studies opened in 2007, and a school of journalism will open this year.

Outside the academic sphere, activities include the Doha Debates and its Arabic counterpart, Lakom Karar; Al Jazeera Children's Channel, producing quality television for the young; Reach Out to Asia, promoting voluntary action for community development in Asia; and Qatar Diabetes Association, with programs of public education and practical support.

Research and business innovation are key parts of Qatar Foundation's work. Qatar Science and Technology Park (QSTP) provides international technology companies with world-class premises and services in a free zone, as well as an incubator for start-up enterprises. Situated in Education City, QSTP is enhancing the culture of research and collaborative effort on the campus, along with Qatar National Research Fund, launched in 2006 to address key national needs through research and to diversify the economy.

Looking ahead, Sidra Medical and Research Center, set to open in 2014, will play a central role, along with WCMC-Q and HMC, in the field of biomedical research.

## **Message from the Dean**

Dear Students,

The WCMC-Q Medical Student Handbook outlines the policies, regulations, programs and practices you need to become familiar with as a medical student. It is important that you read this handbook in its entirety and become familiar with its contents.

Every member of the WCMC-Q family is committed to providing you with the academic, administrative, social, cultural and recreational support to help you succeed in your endeavors.

We wish you the best for your continued success.

Sincerely,

Javaid I. Sheikh, MD

Dean

Weill Cornell Medical College in Qatar

## Important Numbers

Dean's Office	974-4492-8800
Office of Curriculum Support (OCS) Reception Desk	974-4492-8336
OCS - Basic Science Courses	974-4492-8348 974-4492-8346 974-4492-8347
OCS - Clinical Courses and Clerkships	974-4492-8345 974-4492-8323 974-4492-8367 974-4492-8378
Office of Admissions	974-4492-8500
Office of Student Affairs	974-4492-8529
Office of the Registrar	974-4492-8512
Information Technology Services Help Desk	974-4492-8711
Distributed eLibrary	974-4492-8100
Environmental Health & Safety	974-4492-8132
Facilities Management	974-4492-8133
Human Resources	974-4492-8611
WCMC-Q Security Office	974-4492-8150
WCMC-Q Security – North Hall	974-4492-8175
WCMC-Q Security - South Hall	974-4492-8176
Qatar Foundation Security	974-4454-0999
Emergency Police, Ambulance, Fire, or QF Primary Healthcare Clinic	974-4454-1244 974-4454-1240 999 122
QF Medical Clinics – ECCH Lot #3	974-5563-2206 974-4454-1244
QF Medical Clinics - Recreation Center	974-4482-6888
Police Non-Emergency	974-4433-0000
Hamad Medical Corporation Emergency Department	974-4439-3507

On weekends and evenings, in case of emergencies, contact the Director of Student Affairs and Academic Counseling at 974-5535-6323.



# Emergencies, Safety, & Security

## Safety & Security Handbook

Every student is issued with a copy of the WCMC-Q Safety & Security Handbook during orientation, which includes information on procedures for reporting crimes and emergencies, policies and procedures for emergency response and evacuation, including fire and for addressing crimes on the WCMC-Q campus. The handbook is updated at least annually and the most recent version can be found on the Intranet at <https://redbench.qatar-weill.cornell.edu/admin/Pages/CentralAdministration.aspx>

## Reporting Crimes, Emergencies, and Suspicious Behavior

Incidents of crime and other emergencies occurring on the WCMC-Q campus should be reported as soon as possible to QF Security at (+974) 4454-0999, and to the Director of Facilities Management (+974) 4492-8131/ 5549-0513, on a voluntary basis. The Medical College encourages its students and employees to call QF Security in the event of any crime, emergency or non-emergency security related matter.

## Emergency Phone Numbers

QF Security Control Centre	4454-0999
Qatar Emergency Services	999
WCMC-Q Assistant Dean for Administration	4492-8802/5587-3163
WCMC-Q Director of Facilities Management	4492-8131/5549-0513
WCMC-Q Director of EHS	4492-8132/5586-5745
WCMC-Q Security Control Room	4492-8150

## Emergency Alerting

In an emergency, WCMC-Q will notify students using the Emergency Notification System (ENS) – see Section 4 of the Safety & Security Handbook. All students are responsible for ensuring that their contact information held by the Registrar is accurate.

## Campus Security Report

The annual Campus Security Report which also has information on procedures for reporting crimes and emergencies; policies and procedures for emergency response and evacuation; as well as information on addressing crimes on the WCMC-Q campus can be found at: <http://qatar-weill.cornell.edu/education/sa/life.html>. Crime statistics from local law enforcement authorities and QF is also available.

## Fire Safety

Please refer to the Safety & Security Handbook, Sections 8 for information on fire safety, also found at: <http://qatar-weill.cornell.edu/ehs/fireSafetyDocuments.html>. Remember your “CARE” Procedures: If you discover a fire or smoke condition: **C**ontain the fire by closing all doors as you leave; **A**ctivate the nearest alarm point; **R**eport the fire by calling 4454-0999 from a safe location; **E**vacuate the building via the nearest exit.

# ACADEMICS

Students at the Medical College are required to complete a rigorous academic program that will enable them to demonstrate a mastery of the substantive fields of study, the technical skills of a medical practitioner and the personal demeanor and character suitable to the practice of medicine. The Medical College has developed a set of regulations to govern academic achievement and fitness to be a doctor. It is the responsibility of each medical student to be fully familiar with the Medical College's academic requirements and standards, the regulations in this document and the procedures that guide the application of these policies to students.

The faculty of the Medical College is vested with the primary responsibility for developing, interpreting, and applying these policies and procedures to medical students. In conjunction with the Medical College's administrators, the faculty considers how to assist a student who is not meeting the academic standards and the manner in which the policies of the Medical College will be enforced.

The policies and procedures apply to students while matriculated as a student in the Medical College, when at the campus and when engaged in programs or activities related to Medical College studies and professional experiences even if away from campus. Certain conduct by the students and by members of the Medical College community may be closely connected to academic integrity and/or fitness for professional duties, and may involve more than one of the established policies; these crossovers can be complex and multifaceted so that from one vantage point the conduct affects the academic standards, while from a different perspective it is viewed as pertaining to standards of professional conduct. The Dean of the college, in such instances, will make the final decision as to which of the relevant procedures is applicable for adjudicating the matter.

In many cases, and to the extent feasible, the initial approach with a student may be a direct conversation between the student and an appropriate administrator or faculty member, with the goal of achieving agreement on a course of action to resolve the situation. When an informal approach satisfactorily resolves a problem, it may be possible to conclude the matter at that stage. The Medical College will invoke formal procedures to address unresolved matters and in those circumstances where an informal process is not realistic.

These are the general standards applicable to study at the Medical College and for professional preparation; they do not and cannot anticipate every issue that may arise, either substantively or procedurally. The Medical College reserves the right to interpret how these policies and procedures shall apply in specific situations, has the authority to adjust time frames as needed, shall determine the staffing of committees, shall designate which bodies will consider a matter, and will provide guidance on how the review is to be conducted, in accordance with these rules, the complexity of a case and the resources available.

## **Objectives for the Educational Program for the M.D. Degree**

*Approved by the (WCMC-NY) Executive Faculty Council and the (WCMC-NY) General Faculty Council in 2002.*

### **Knowledge**

The medical school intends that before graduation, a student will have demonstrated, to the satisfaction of the faculty, the following knowledge:

- K1. The basic scientific principles underlying the biochemical, genetic, molecular, and cellular mechanisms that determine the normal development, structure and function of the body as a whole and of its major organ systems;
- K2. The normal psychosocial development of individuals from birth through old age;
- K3. The role of nutrition, exercise, healthy lifestyles, and preventive medicine in promoting health and decreasing risk of disease;
- K4. The epidemiology of common disorders in populations and approaches designed to screen and detect illness and to reduce incidence and prevalence of disease in populations;
- K5. The etiology of diseases and disorders (e.g. genetic, developmental, toxic-metabolic, infectious, autoimmune, degenerative, neo-plastic, traumatic and behavioral causes) and the non-biological determinants of poor health including economic, socio-cultural, and psychological factors that may contribute to or prolong illness;
- K6. The clinical, laboratory, radiographic and pathologic manifestations of major diseases and disorders;
- K7. The pathology and pathophysiology (altered structure and function) of major diseases and abnormal conditions;
- K8. The spectrum of pharmacologic, surgical, psychological treatments of common physical and mental disorders and symptoms such as pain; the biological and sociocultural role of complementary medicine; common adverse effects of therapies; and the relative efficacy of therapeutic interventions in the healing process;
- K9. The palliative care of individuals with life-terminating illness, particularly management of acute and chronic pain;
- K10. The variants in clinical manifestation, course, prognosis of diseases and in therapeutics in children, older adults, or immunologically, neurologically, or behaviorally compromised patients, and the need to modify therapeutic regimens in these groups;
- K11. Medical decision making, particularly with regard to beginning and end of life issues, genetics and molecular technologies;
- K12. The organization, financing and delivery of health care services with particular awareness of the needs of the underserved;
- K13. The strengths and weaknesses of the study designs used to develop new knowledge to evaluate diagnostic, preventative, and therapeutic modalities;

## **Skills**

The medical school intends that before graduation, a student will have demonstrated, to the satisfaction of the faculty, the following skills:

- S1. Ability to formulate accurate hypotheses about the causes and solutions of medical problems, to develop strategies for exploring these problems, and to achieve reasoned conclusions;
- S2. Ability to search, retrieve and utilize from electronic databases and other resources, biomedical information that is useful and relevant for clinical problem solving and decision-making;
- S3. Ability to critically analyze original biomedical data and secondary data in the medical literature with special emphasis on the evaluation of the appropriateness of methodological design, statistical analysis, and data interpretation;
- S4. Ability to obtain an accurate, complete medical and psychosocial history;
- S5. Ability to perform an accurate, complete and organ-specific, physical, neurological and mental status examination in adults, infants and children;
- S6. Ability to perform core technical procedures (e.g. phlebotomy, performance of electrocardiograms, and insertion of intravenous catheters) as would be expected of a beginning intern;
- S7. Ability to select appropriate tests for screening individuals considered at high risk for disease, to select appropriate tests for the evaluation and diagnosis of individuals with presumptive disease, and to interpret results of common screening tests, diagnostic procedures and laboratory data and correlate the findings with specific clinical conditions;
- S8. Ability to formulate an appropriate plan for evaluating patients to achieve a reasonable differential and working diagnosis and to develop therapeutic management plans for patients with common acute or chronic medical, surgical, or psychiatric conditions;
- S9. Ability to recognize patients with acute, life-threatening conditions; to perform procedures to stabilize such conditions, in particular the initiation of basic life support when appropriate; and to institute initial therapy and plan for further diagnostic evaluation and critical care;
- S10. Ability to apply principles of evidence-based medicine, medical ethics, and cost-effectiveness to decisions regarding diagnosis, therapeutics, and prognosis;
- S11. Ability to present clinical and scientific information clearly and cogently, both orally and in writing, to colleagues and other health professionals;
- S12. Ability to communicate effectively and compassionately with patients and their families about the evaluation, diagnosis, therapy and prognosis of disease and ability to counsel patients in a caring, empathetic, and culturally-sensitive way about behaviors that promote a healthy lifestyle and prevent disease.

## **Attitudes**

The medical school intends that before graduation, a student will have demonstrated, to the satisfaction of the faculty, the following attitudes:

- A1. Acknowledgement of the importance of altruism, patient advocacy, and dutifulness to patients, that involves placing the patient's needs before one's own;
- A2. A commitment to provide compassionate care to all patients regardless of the patient's disease, prognosis, age, gender, race, sexual orientation, ethnicity, religious, cultural or health-related beliefs, socioeconomic class, citizenship status, or ability to pay for care;
- A3. A respect in all interactions for patients' privacy, confidentiality, dignity, beliefs, and family, cultural or religious values even when such values would conflict with one's own values;
- A4. Honesty and integrity in all interactions and activities with patients, families, medical colleagues and others, and in the collection, synthesis, analysis, and presentation of scientific and clinical data;
- A5. Acceptance, collaboration, and respect for other colleagues and for other health professionals who provide services to patients, populations or communities;
- A6. Maintenance of a professional demeanor in one's work and as a role model for society including the demonstration of an attitude that values timely attendance, punctuality, and reliability in the performance of one's duties;
- A7. Recognition and acceptance of ambiguity and uncertainty in biomedical information, clinical situations, and medical decision-making;
- A8. Recognition and acceptance of limits in one's medical knowledge and skills and an accompanying willingness both to seek consultation and to defer to more experienced individuals;
- A9. Commitment to a scholarly approach to medical problems and a recognition of the need to continually improve knowledge and skills through lifelong self-directed study;
- A10. Acknowledgement of the critical role of research and scholarship in understanding human disease and alleviating human suffering, and commitment to participation in research activities;
- A11. Willingness to educate colleagues, students, and other health professionals.

## Required Courses in the Curriculum

- First Year**
- Molecules, Genes, Cells
  - Human Structure and Function
  - Host Defenses
  - Medicine, Patients, and Society I

- Second Year**
- Brain and Mind
  - Basis of Disease
  - Medicine, Patients, and Society II

	<u>Clinical Clerkships</u>	<u>Courses</u>
<b>Third &amp; Fourth Years</b>	<ul style="list-style-type: none"> <li>• Introductory Clerkship</li> <li>• Anesthesia, Circulation, and Ventilation</li> <li>• Medicine</li> <li>• Neurology</li> <li>• Obstetrics and Gynecology</li> <li>• Pediatrics</li> <li>• Primary Care</li> <li>• Psychiatry</li> <li>• Surgery (including Anesthesia requirement)</li> </ul>	<ul style="list-style-type: none"> <li>• Advanced Biomedical Science Course</li> <li>• Medicine, Patients, and Society III</li> <li>• Public Health</li> </ul>
<b>Additional Requirements</b>	<ul style="list-style-type: none"> <li>• Advanced Biomedical Science               <ul style="list-style-type: none"> <li>○ Research, Tutorial or Teaching Elective</li> <li>○ Advanced Biomedical Science Course</li> </ul> </li> <li>• Clinical Electives (16 weeks)</li> <li>• Subinternship (Medicine/Pediatrics)</li> </ul>	

### Advanced Biomedical Science (ABS)

The ABS requirement encompasses two components: 1) participating in meaningful biomedical science research, or tutorial, or teaching in a basic science course; 2) satisfactory completion of the Advanced Biomedical Science course in the fourth year. Students must obtain approval for one of the three options (research, tutorial or teaching) by completing and submitting the ABS Pre-Approval Form prior to July 1<sup>st</sup> of the fourth year. All options must be approved at least 8 weeks prior to the start of the activity. After the completion of the research, tutorial, or teaching experience, the ABS Final Approval Form must be submitted prior to February 1<sup>st</sup> of the fourth year.

### ***ABS Experience***

To fulfill the first component of the ABS requirement, students must choose one of the following experiences described below.

#### **Teaching Elective**

4-weeks of teaching in the medical school curriculum. This may include teaching in anatomy lab course, PBL classroom, or the pathology lab course. The faculty mentor, of this experience will work with the student to specify the learning objectives, including the knowledge, skills, and attitudes to be acquired as well as determining the final work product. This option must then be pre-approved by the Assistant Dean for Clinical Curriculum.

#### **Tutorial**

4-weeks of biomedical science tutorial. Students receive advanced training from, or are tutored by, a member of the medical college faculty in a selected subject. The faculty member must be an expert in the chosen subject. A specific format will be developed and followed for the duration of the tutorial, which may include extensive readings, discussions, and hands-on practice in clinical or scholarly pursuits germane to the subject matter. This option must be pre-approved by the Assistant Dean for Clinical Curriculum.

#### **Research**

At least 8 weeks of full-time, continuous biomedical science research in any year of the medical program (M1 to M4). Biomedical research is broadly defined and includes hypothesis driven research in clinical medicine, community health, epidemiology, medical ethics, and basic science. Only research conducted during medical school satisfies the ABS requirement. It may include research during the summer between first and second year. Students who take a yearlong fellowship also qualify under this option. A written work product is required at the completion of the research experience. In addition to meeting this ABS component requirement, students will also be able to receive credit for 4 of the 16 weeks of elective credits that are required to graduate. Any research conducted to meet the ABS requirement must be approved prior to the beginning of the research by completing the pre-approval forms via the ABS site ([abs.qatar-weill.cornell.edu](http://abs.qatar-weill.cornell.edu)). After completion of the research, final approval must also be obtained by completing the final approval forms through the ABS site.

### ***ABS Course (Today's Science for Tomorrow's Medicine)***

In addition to the ABS Experience described above, medical students are required to successfully complete the 2-week ABS Course held in the spring term of the fourth year. Completion of the ABS Experience does not exempt students from the ABS course. Verification of course completion by the ABS Course Director is required.

### **International Electives**

International electives are considered a privilege and only students in good academic standing can participate in an international elective. Courses that result in a failing or marginal grade must be repeated or remediated prior to travel. Students who take required clerkships late in the fourth

year and receive the grade "Fail" or "Marginal" will not have time to remediate or repeat the course before their international travel. All international electives must be pre-approved by the Assistant Dean for Clinical Curriculum and the Associate Dean for Student Affairs.

## **Registering for Courses, Clerkships, and Electives**

Third-year medical students are scheduled in clerkships according to a lottery process performed by the Office of the Registrar before the start of the clinical curriculum. To change the dates of a clerkship, a student must receive approval from the Assistant Dean for Clinical Curriculum or the Associate Dean for Medical Education. A student is advised to consult with the academic counselor to determine scheduling options. Any changes to a student's clinical schedule needs to be documented, approved and submitted to the Office of the Registrar at least 30 days before the start of the course or clerkship to be changed. Failure to meet this deadline is likely to result in the student not participating in the clerkship.

## **Promotion and Graduation Standards and Procedures**

The Medical College curriculum represents the academic standards students are required to achieve; the curriculum is divided into four successive academic years, each year building on the subject material and experiences of preceding years. A student is expected to exhibit mastery of course objectives set by the faculty and to complete required clerkships and rotations as determined by faculty. A student's progress is assessed and monitored on an on-going basis. If a student does not demonstrate an acceptable level of proficiency or has not made timely progress toward the satisfactory completion of the curricular requirements, the faculty bodies will determine a student's continued status in the Medical College.

The academic year in each of the first two years of the curriculum consists of sequential integrated courses. The third year consists of an introductory period followed by required clinical rotations and courses of varying lengths. Remaining requirements for graduation include subinternships, sixteen weeks of clinical electives, and the Advanced Biomedical Science (ABS) requirement. The ABS requirement consists of an ABS research, tutorial or teaching experience and the ABS course. Upon the completion of each course and curricular unit, a student's performance is evaluated and recorded. In addition, several times each year, the Committee on Promotion and Graduation<sup>1</sup> convenes scheduled meetings to review the ongoing progress of each student. There is a meeting of the Committee on Promotion and Graduation for each year of the curriculum. The Committee on Promotion and Graduation consists of all of the directors of each of the required courses and is chaired by the Associate Dean for Medical Education (without a vote).

## **Faculty Principles**

The following general principles guide faculty during consideration of a student's status:

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<sup>1</sup>The Committee on Promotion and Graduation consists of the directors of each of the required courses. It is chaired by the Associate Dean for Medical Education (without a vote) and is supported by the Registrar in the Office of Student Affairs.



A student must successfully complete all of the course work of one academic year before he or she can be approved for promotion to the next year, except as otherwise specified in these standards.

Remedial work and re-examination may be offered to a student who fails a course, as provided for in these standards.

A student will have access to a review process, and an appeal, in cases where a denial of academic advancement or dismissal from the Medical College is at issue.

Any student who, in the judgment of a faculty member, lacks suitability to enter the medical profession, can, pursuant to an applicable policy or procedure, be dismissed from the Medical College.

## **Grades and Grade Review**

### **Grades**

Each course director determines the final grade of a student after evaluation of the student's performance in all aspects of the course work, including results of examinations. Faculty members are also expected to evaluate each student early enough during a course to allow time for remediation. Students will be required to be present at the time of a regularly scheduled examination or other course activities in order to pass the course unless they have made previous arrangements with the course director, as detailed in the section herein entitled "Attendance Standards."

Faculty members are expected to submit grades promptly after a course or curricular unit is completed; generally grades will be submitted within six weeks after a course or unit is completed. Faculty members should include narrative descriptions of student performance and non-cognitive achievement in all required courses and clerkships where teacher – student interaction permits this form of assessment.

In the first two years of the curriculum, students may receive the following grades: "Pass" (satisfactory performance), "Marginal" (a non-passing, interim grade based on less than satisfactory performance in one or several components and/or activities comprising the final grade), or "Failure" (below satisfactory performance in all or a preponderance of the components and/or activities comprising the final grade). In the evaluation of clinical clerkships in the third year, an additional grade of "Honors" (outstanding performance) and "High Pass" (excellent performance) can be assigned. Certain courses are graded only on a "Pass/Fail" basis. In addition, the interim grade "Incomplete" may be assigned to any course in which the performance is otherwise satisfactory but the student has not attended to a component or activity that the course director has agreed may be completed at a subsequent date.

If a student receives a non-passing interim grade of "Marginal" or "Incomplete," the course director will discuss the performance with the student and will notify the Office of Medical Education and the Office of the Registrar (see Section below entitled "Faculty Determinations Regarding Unsatisfactory Academic Performance"). The opportunity to do remedial work, or complete necessary work, generally will be presented to the student, in accordance with the procedures described in these regulations. The work that is necessary to address an "Incomplete"

or “Marginal” grade must be undertaken before the start of the next academic year. It should take place at the first available opportunity (as determined by the course director in consultation with the student and the appropriate Assistant Dean or Associate Dean for Medical Education, but may not conflict with any other scheduled academic activity. If a student completes the remedial or missing work satisfactorily, the “Marginal” or “Incomplete” interim grade will revert to a grade of “Pass”; if not, the grade will revert to “Failure.” If a student receives a grade of “Failure,” the course director will notify the Office of Medical Education and the Office of the Registrar and will discuss with the student the need to repeat the course or other remediation if appropriate. In the event a student’s performance is deemed unsatisfactory, the Medical College may follow other procedures, also described in these regulations, to assess continued participation in the M.D. program.

### **Student Request for a Grade Review**

Students may seek clarification about an evaluation or grade awarded that does not seem consistent with the student’s view of his or her performance. If the student believes that there is a credible basis to assert that the grade received does not reflect his or her objective course performance, the student should seek the guidance of the course director. If a discussion with the course director does not resolve the issue, or the student has additional reasons for seeking guidance from someone other than the course director, he or she shall promptly present his or her concern in writing to the Associate Dean for Medical Education for a request for review of the grade or evaluation. The student should set forth the reasons for his or her request for review of the grade.

In consultation with the faculty involved, the Associate Dean for Medical Education, or his/her representative, has discretion to request documents and relevant information that would be needed to conduct a full and fair assessment of the grade under review. The Associate Dean for Medical Education shall recommend a final resolution, where appropriate, to the course director.

## **Unsatisfactory Academic Performance in a Course**

### **Actions During a Course / Clerkship**

Any student who is having academic difficulty with a course(s) (or his or her overall academic performance) should consult with faculty or administrators at the Medical College. Depending upon the problem, a student may wish to seek advice or assistance from a course director, the Associate Dean for Medical Education or the appropriate Assistant Curriculum Dean. Early intervention with academic difficulties may provide a wider range of solutions and is in the student’s best interest. It is the responsibility of a student to seek advice or assistance when such student is having difficulty with a course(s) (or his or her overall academic performance).

If a student exhibits unsatisfactory performance during a course, before a non-passing grade is assigned, the course director(s) shall make an effort to notify the student and the appropriate Assistant Dean and the Associate Dean for Medical Education in sequence. Faculty in the course may meet with the student and outline a program to address deficiencies in the student’s performance. The Associate Dean for Medical Education, or his or her designee, also may make an effort to address this with the student.

## **Actions upon Completion of a Course / Clerkship**

The Committee on Promotion and Graduation (the “Committee”) is responsible for assessing the overall performance of students in the Medical College on an ongoing basis. In the event of unsatisfactory work (Marginal, Incomplete or Failure), the grade will be reported in writing to the Office of the Registrar and the Office of Medical Education upon the completion of a course. At his or her discretion, the Associate Dean for Medical Education, or his or her designee, will meet with a student who has earned non-passing grades to discuss the reasons for the student’s unsatisfactory work. The Associate Dean for Medical Education shall assemble and present information to the Committee about the students with non-passing grades to assist the Committee in its deliberations. If time permits, a student will have the option of submitting, through the Associate Dean for Medical Education, his or her own independent written information to the Committee. Generally, a student will not have an opportunity to appear before the Committee during this stage of the process, unless requested by the Committee.

## **Faculty Determinations Regarding Unsatisfactory Academic Performance**

The Committee on Promotion and Graduation will review each student's performance, and will make decisions, in consultation with the course director, about whether to permit a student to have an opportunity for remedial work, re-examination, repetition of a course, or other appropriate alternatives. Remedial work, re-examination or repetition of a course are not to be regarded as a right for a student who has an unsatisfactory record in a course, but are options which may be offered to individual students, in the judgment of the faculty, based on the student’s academic record and consideration of circumstances related to completion of the course.

## **Remedial Course Work**

Remedial work, including re-examination, for courses in which a student has not received a passing grade will ordinarily be offered at times which do not conflict with regularly scheduled academic activities. Generally, remedial work, including re-examination, will be available only if the student has successfully completed the majority of course work required for a passing grade in the course. Remedial work and any re-examination needed in first year courses will be scheduled during the summer. Re-examination in second year courses will be scheduled to occur prior to the beginning of the third year courses. A course failure in designated second year courses will have to be remedied prior to the beginning of the third year clerkships. A clerkship that is failed usually will, if applicable, be repeated as soon as possible.

In the case of a “Marginal” grade, the remedial work may be targeted in scope, as determined at the discretion of the course director in consultation with the course faculty. A student who successfully completes remediation for a “Marginal” grade is eligible only for a grade of “Pass.” However, if the first attempt by a student at remediation of a “Marginal” grade is not satisfactory, the course grade converts to a “Failure” and remediation for a “Failure” grade must ensue. In the case of an “Incomplete” grade, completion within the period specified by the faculty can result in a grade of “Honors,” “High Pass” (if available), “Pass,” or “Failure.” An “Incomplete” not successfully addressed within the specified period shall revert to a grade of “Failure” and remediation for a “Failure” grade must be undertaken. In the case of a “Failure” grade, the

remediation will be broad in scope and must result in the satisfactory demonstration of competence in all aspects of the course. The nature of the remediation lies solely in the province of the course director in consultation with the course faculty. A student who successfully completes remediation for a “Failure” grade is eligible only for a grade of “Pass.”

### **Criteria for Continuation in the Academic Program**

In the event a student fails one or two courses, or after permitted remedial work the student fails re-examination, the student, if authorized to do so by the Committee on Promotion and Graduation, must, in the following year, attend and pass the previously failed course(s) prior to promotion to the next academic year. Students who repeat an academic year will repeat all failed courses and, in the remaining time, may pursue a special program approved by the Office of Medical Education.

Students who fail three of the required courses in the first year, and receive the authorization of the Committee on Promotion and Graduation, will have to repeat the first year courses. Such students may not eliminate the failing grades by remedial work and re-examination during the summer. Students who fail all of the first year courses will be dismissed from the Medical College without opportunity for remediation.

In the second year, students who fail two of the required courses may, with the authorization of the Committee on Promotion and Graduation, repeat the second year, but may not eliminate the failures with remedial work and re-examination during the summer. Second-year students who fail all of the required courses may be dismissed from the Medical College without opportunity for remediation.

Students who fail three of the required third year clerkships will be dismissed from the Medical College without opportunity for remediation.

A student who repeats a required academic course or clerkship, and fails to pass that course or clerkship upon repetition, will receive a grade of “Fail.” Remedial work and re-examination will not be offered if a course or clerkship is repeated and failed. A student who fails a course or clerkship twice will be dismissed from the Medical College.

Students are also required to complete a series of elective courses, subinternships, and to fulfill the advanced biomedical science requirement. Successful completion of 16 weeks of clinical elective courses in the third and fourth years is necessary for graduation from the Medical College. Students who fail an elective course may repeat that course or, with the approval of the Associate Dean for Medical Education, substitute another course(s) of equivalent hours. A student may not take elective courses concurrently with any other courses to satisfy the 16-week requirement.

Students who accumulate three or more Marginal grades may be at risk for unsatisfactory overall academic performance. The performance of students who receive three or more Marginal grades over the course of their study, even if those grades have been remediated, shall be reviewed at the next scheduled meeting of the Committee on Promotion and Graduation to determine if a formal review of the student’s suitability for the practice of medicine or if some other

appropriate intervention is necessary for continued study in the Medical College. The Committee on Promotion and Graduation reserves the right to specify the nature of the intervention(s) recommended based on its evaluation of the student's performance.

Students may repeat no more than two academic years and must complete the academic work of the first three years in five academic years. Students must complete the entire Medical College curriculum in six academic years.

### **Unsatisfactory Academic Progress**

In addition to the academic performance standards that lead to dismissal from the Medical College described in the previous section, unsatisfactory overall academic performance will also be grounds for dismissal from the Medical College. Unsatisfactory overall performance is defined as failure grades (even if remedied), multiple marginal grades, or withdrawal in a significant number of courses, clerkships, or the subinternship, (generally a total of six of the courses, clerkships or subinternship designated in the curriculum) and will result in dismissal. Similarly, failure to complete the curriculum within six years will be deemed unsatisfactory performance, resulting in dismissal.

The faculty of the Medical College takes the position that an overall failing performance as described above documents a quality of work unsatisfactory for admission to the medical profession.

### **Leave from Academic Program**

Consequences of unsatisfactory academic performance can include, but need not necessarily be limited to, dismissal from M.D. program, involuntary leave of absence, and/or other remedial work, at the discretion of the Associate Dean for Medical Education and/or Committee on Promotion and Graduation.

### **Involuntary Leave of Absence**

A student may be required by the Associate Dean for Medical Education to take a leave of absence for up to one year, depending upon the needs of the student and the demands of the curriculum. The Associate Dean for Medical Education may renew this leave of absence for a total leave of absence not longer than two years, and shall specify the terms for re-entry to the Medical College, which shall include an evaluation of the student.

If a student objects to a required leave of absence, or if the Associate Dean for Medical Education decides against re-entry after a required leave, the student can appeal to the Committee on Promotion and Graduation through the appeals process outlined in these policies.

### **Appeals Process and Related Procedures**

When a student's academic performance and progress is under review, the Medical College is committed to providing a fair process of review and, when requested, appeal. Determinations are based on the record as a whole before the decision-making entity and the standard of proof that underlies a decision is a preponderance of the credible information or evidence. A decision regarding a student's dismissal, required leave of absence or repetition of a course year is final unless overturned after an appeal.

A student can appeal a decision of a required leave of absence, repetition of a course or year, or dismissal. The student must make the appeal in writing within ten academic calendar days (excluding weekends and Medical College holidays) from written notification to the student of the decision that the student is appealing and delivered by hand to the office of the Associate Dean for Medical Education. If the appeal is submitted by Qatar mail, U.S. mail, or a delivery company (such as Federal Express), it must be postmarked by the date it is due to be submitted by hand to the Office of Medical Education.

The Committee on Promotion and Graduation handles the appeal. In cases that are appealed, the WCMC-Q Dean may appoint an alternate individual to chair the Committee in place of the regular chair. The Committee on Promotion and Graduation will provide the student with at least seven business days' advance written notice of the date, time, and place of the meeting of the Committee on Promotion and Graduation, which will consider the appeal. Prior to the meeting, the student may submit a written response and evidence to the Committee. The student may attend the Committee meeting and may be accompanied by an advisor or counsel. Any such advisor or counsel shall be an observer of the proceeding but may not expect to be able to participate in or speak at the Committee meeting. The student or the Committee may invite other persons to appear and provide information. Prompt written notice of the Committee's decision will be sent to the student. The student will have access, upon request, to the written minutes of the meeting with the Committee on Promotion and Graduation that pertain to the student appeal.

The report of the Committee on Promotion and Graduation will be presented to the Executive Committee, chaired by the WCMC-Q Dean. The Executive Committee will review all relevant documents and will implement a decision as necessary. Prompt written notice of the final decision will be sent to the student.

### **Reserved Rights/Changes to Policy**

The Medical College reserves the right to determine whether existing policies and procedures address a particular situation. It is recognized that the Executive Committee reserves the authority to intervene in the application of these standards and procedures, although it is not anticipated that the Executive Committee will exercise this inherent authority unless the Executive Committee determines that existing policies and procedures do not address the situation; or circumstances are of such magnitude as to require the action of the Executive Committee.

### **Academic Counseling and Tutoring**

WCMC-Q provides academic counseling and/or tutoring to students who have academic difficulty. Some students need to tune up their study skills in general; others benefit from one-on-one tutoring sessions on specific course material. Students may request these services by contacting the Office of Student Affairs or the Office of Curriculum. Alternatively, course directors or faculty may refer students for academic counseling or tutoring. Participation is confidential and has no adverse effects on a student's record. WCMC-Q also provides referral as appropriate for other concerns that may impact performance. Students may request these services by contacting the Office of Student Affairs.

# **Technical Standards: Admission and Retention**

## **Requirement of the Student for a General Medical Education**

The education of a physician encompasses the following components: a preparatory phase in college; a rigorous professional education leading to the M.D. degree; postgraduate or residency training; and "lifelong" continuing education after the conclusion of formal training. Unlike most other professions, medicine awards its degree midway through the educational process and the degree certifies that the individual has acquired a broad base of knowledge and skills requisite for the practice of medicine. It must be emphasized that good patient care requires that the medical education process prepares an individual to be a broadly capable physician, irrespective of his or her career plans for later specialization. A broad medical education is, therefore, a prerequisite for entry into specialized postgraduate training programs that in turn require a common body of knowledge, skills, and behaviors.

Medical education requires that the accumulation of scientific knowledge be accompanied by the simultaneous acquisition of skills and professional attitudes and behavior. It is in the care of patients that the physician learns the application of scientific knowledge and skills. Faculties of medicine have immediate responsibilities to students and patients and ultimate responsibilities to society to graduate the best possible physicians. Admissions standards for medical school must be rigorous and exacting and admission must be extended only to those who are best qualified to fulfill the performance standards of medical schools.

## **Fulfillment of the Requirements for the M.D. Degree**

Because the M.D. degree signifies that the holder is a physician prepared for entry into the practice of medicine within postgraduate training programs, it follows that graduates must have the knowledge and skills to function in a broad variety of clinical situations and to render a wide spectrum of patient care. Candidates for the M.D. degree must possess the requisite skills and abilities to satisfy the overall and course-specific requirements of the curriculum. The overall and course-specific requirements for the Weill Cornell Medical College in Qatar are delineated on our website.

Candidates for the M.D. degree must have somatic sensation, the functional use of the senses of vision and hearing, sufficient sensory and motor function, intellectual, and interpersonal skills to permit them to carry out the activities described in the sections that follow. They must be able to integrate consistently, quickly, and accurately all information received by whatever sense(s) employed, and they must have the intellectual ability to learn, integrate, analyze and synthesize data.

A candidate for the M.D. degree must have abilities and skills in five areas: observation, communication, motor, intellectual (conceptual, integrative and quantitative), and behavioral and social. Technological compensation can be made feasible for some disabilities in certain of these areas but a candidate should be able to perform in a reasonably independent manner. The use of a trained intermediary, a person trained to perform essential skills on behalf of the candidate, or a

person used such that a candidate's judgment must be mediated by someone else's power of selection and observation, is not permitted.

### **Observation**

The candidate must be able to observe required demonstrations and experiments in the basic sciences, including but not limited to anatomic dissection, microscopic studies, and patient demonstrations. A candidate must be able to observe a patient accurately at a distance and close at hand. Observation necessitates the functional use of the sense of vision, hearing, and somatic sensation.

### **Communication**

A candidate must be able to speak, to hear, and to observe patients in order to elicit information, describe changes in mood, activity, and posture, and perceive nonverbal communication. A candidate must be able to communicate effectively and sensitively with patients. Communication includes not only speech, but also reading and writing in English. The candidate must be able to communicate effectively and efficiently in oral and written form with all members of the health care team.

### **Motor**

A candidate must have sufficient motor function to carry out the basic laboratory techniques and to elicit information from patients by palpation, auscultation, percussion, and other diagnostic maneuvers, perform a dissection of a human cadaver, and have sufficient motor ability to use a microscope. A candidate should be able to perform a complete physical examination (including pelvic examination) and diagnostic procedures (e.g., venipuncture and basic laboratory tests (e.g., urinalysis)). A candidate must be able to execute motor movements reasonably required to provide general care and emergency treatment to patients. Examples of treatment reasonably required of physicians are cardiopulmonary resuscitation, the administration of intravenous medication, the application of pressure to stop bleeding, the suturing of simple wounds, assisting in surgical operations, and the performance of simple, general obstetrical and gynecological procedures. Such actions require coordination of both gross and fine muscular movements, equilibrium and functional use of the senses of touch, vision, and hearing.

### **Intellectual (Conceptual Integrative and Quantitative) Abilities**

Problem solving, the critical skill demanded of physicians, requires that a candidate be able to learn, retrieve, analyze, sequence, organize, synthesize and integrate information efficiently, and reason effectively. Additionally, a candidate should possess the ability to measure and calculate accurately, to perceive three-dimensional relationships and to understand the spatial relationships of structures.

### **Behavioral and Social Attributes**

A candidate must possess the emotional health required for full utilization of his intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the diagnosis and care of patients, and the development of mature, sensitive and effective relationships with patients and their family members, staff, and colleagues. Each candidate must be able to work effectively as a member of a health-care team. Candidates must be able to tolerate physically taxing workloads and to function effectively under stress. They must be able



to adapt to changing environments, to display flexibility and to learn to function in the face of uncertainties inherent in the clinical problems of many patients. Compassion, integrity, concern for others, interpersonal skills, collegiality, interest, and motivation are all personal qualities that are assessed during the admission and education processes.

In addition to the abilities above, applicants and enrolled medical students must possess the general physical health necessary for performing the duties of a medical student and physician in training without endangering the lives of patients and/or colleagues with whom the student might have contact.

### **Process for Assessing the Applicant's Compliance with Technical Standards**

Applicants to the Medical College will be informed of the College's required technical standards so that an informed judgment can be made by the applicant, and the Medical College, about whether the applicant is otherwise qualified and can meet the technical standards with or without accommodation. The technical standards will be included in material provided to prospective applicants.

Acceptance into the Medical College shall take into account the candidate's ability to satisfy the technical standards.

As part of the application process, applicants are required to state whether they believe that they meet or do not meet the Medical College's technical standards.

All candidates will be considered using the same standards and criteria of the admissions policy of the Medical College.

In the case of an interviewed applicant with a disability who has met the academic standards for admission to the Medical College, and in whom there is a question as to the student's ability to meet the Medical College's technical standards, a subcommittee appointed by the Chair of the Admissions Committee, in consultation with the Associate Dean of Student Affairs will assess the applicant's acceptability for admission based on the applicable technical standards.

The subcommittee will request that the applicant have submitted on his or her behalf appropriate documentation in regard to the disability from a qualified health professional. The subcommittee may ask that the health professional respond to one or more questions regarding the meeting of technical standards.

The subcommittee may, at its option, ask that the candidate himself or herself respond to one or more questions in regard to the meeting of the technical standards.

The subcommittee, at its option, may ask for a review of the supporting documentation by an appropriate specialist of the faculty of the Medical College and for that faculty member's comment about the applicant's meeting the technical standards.

All commenters will be asked to identify what accommodations, if any, the Medical College would need to make in order that the applicant might be able to meet the technical standards.

The subcommittee may communicate with the appropriate course directors, facilities managers, etc., concerning the feasibility of any needed accommodation.

The subcommittee will review the information received from all parties to determine if the applicant is able to meet the technical standards with or without reasonable accommodations.

The subcommittee will recommend acceptance of the candidate to the Committee on Admissions, if it is determined that the candidate meets the technical standards or will recommend rejection of the candidate, if it is determined that he or she does not meet the technical standards.

If an accepted applicant believes he or she will require an accommodation, he or she must contact the Associate Dean for Student Affairs immediately upon accepting the offer of admission, so that arrangements for accommodations may begin promptly. Appropriate current documentation should accompany a request for accommodation. Before matriculation, accepted students must assert in writing that they believe they can meet the college's technical standards.

### **Process for Assessing a Matriculated Student's Ability to Continue to Satisfy Technical Standards**

Medical students must continue to meet the Medical College's technical standards throughout their enrollment.

A student who develops or manifests a disability after matriculation may be identified to the Office of Medical Education through a variety of sources, e.g. self-report, a report of accident or illness, or faculty observations of special aspects of poor academic performance.

If the degree to which the student has become disabled raises questions related to meeting the technical standards, the matter will be referred to the Associate Dean for Student Affairs. The Associate Dean for Student Affairs may request that the applicant have submitted on his or her behalf appropriate documentation in regard to the disability from a qualified health professional.

If a lack of compliance with the technical standards is not resolved by an informal administrative consultation and determination, it is referred to the Promotion and Graduation Committee, which will apply the policy for Suitability for the Practice of Medicine as a guideline for making decisions.

The ad hoc committee reviewing the student's suitability for the practice of medicine will develop a recommendation as to the student's ability to continue in the medical school based on his or her ability to meet the technical standards of the Medical College. Proposed educational accommodations will be discussed with the appropriate course directors to be certain that there is agreement on how the student's accommodation will be managed. If facilities accommodations are recommended, the committee will discuss these with the appropriate individuals to be certain that the needs for the disabled student can be provided. The ad hoc committee's recommendations will be discussed with the student or his or her representative in the event the student cannot attend.

The Promotion and Graduation Committee will review the recommendation of the ad hoc committee and make a decision about the student's status in the Medical College. The student will be given the opportunity to appeal to the full Committee if he or she disagrees with the ad hoc committee's recommendation.

When the Promotion and Graduation Committee recommends that the disabled student can meet the Medical College's technical standards, the ad hoc committee will develop a report on any educational program accommodations necessary.

Should the decision of the Promotion and Graduation Committee be to recommend to the WCMC-Q Dean that the student's enrollment in the Medical College be terminated, the appeals process discussed above in the section entitled Promotion and Graduation Standards and Procedures, will apply. The Office of Medical Education will work with the student as appropriate on potential alternative academic and/or career options.

## **Honors Designation**

### **Honors in Research**

The goal of the M.D. with Honors in Research Program is to encourage and recognize achievements in biomedical research by medical students of the Medical College. In order to obtain the honors designation, the student must complete successfully a clinical or laboratory research project undertaken at WCMC-Q, one of its affiliates, or another approved site. The research project may be undertaken at any time during the student's tenure in the medical college. The student's time commitment to the research may vary from elective periods undertaken during the academic years, to research performed during summer vacations, to full-time involvement in research undertaken during a one or two year academic leave of absence (see Policy on Leave of Absence). The project must have approval of a faculty mentor, as well as the WCMC-Q Coordinator of Student Research. Research performed to satisfy the Advanced Biomedical Science Requirement should be considered for this award.

The M.D. with Honors in Research program will be administered by the WCMC-Q Graduation Research Award Committee, which is appointed by the WCMC-Q Dean. The Committee will have final authority in recommending students to the Dean for the degree of M.D. with Honors in Research. The determination of the WCMC-Q Graduation Research Award Committee in recommending students to the WCMC-Q Dean for this award is final.

Awarding of the degree of M.D. with Honors in Research will be based upon the quality of the research project completed by the student. The student should complete a body of work that will comprise a scientific paper of quality suitable for publication in a peer reviewed major scientific journal. The student will submit their application for the Biomedical Research Award & Honors Designation to the Office of Student Affairs by January 1 of the year of the expected degree. The faculty mentor and/or supervisor of the research project must endorse the student's application. Student Affairs will then submit the application and supporting documents to the chair of the WCMC-Q Graduation Research Award Committee. If awarded, the student's diploma and transcript will indicate that the student achieved an "M.D. with Honors in Research."

## **Honors in Service**

The goal of M.D. with Honors in Service designation encourages students with an interest in, and commitment to, community service to develop their interest and abilities in service to the community and to recognize excellence in their achievement. The Honors designation will appear on the student's diploma and transcript. The requirement for the designation of MD with Honors in Service has 2 components including a time and commitment component and an original scholarly paper component. The time commitment component is based on the student's activity as a volunteer in the community service program. The paper must be intellectually rigorous and of similar length to a scientific paper submitted for publication.

The M.D. with Honors in Service program will be administered by the WCMC-Q Graduation Service Award Committee, which is appointed by the WCMC-Q Dean. The Committee will have final authority in recommending students to the Dean for the degree of M.D. with Honors in Service. The determination of the WCMC-Q Graduation Service Award Committee in recommending students to the WCMC-Q Dean for this award is final.

Students who wish to be considered for the M.D. with Honor in Service should submit an application to the Office of Student Affairs by January 1 of the year of the expected degree. The Office of Student Affairs will then forward the application to the Graduation Service Award Committee. If awarded, the student's diploma and transcript will indicate that the student achieved an "M.D. with Honors in Service."

## **Attendance Standards**

Students at the Medical College are physicians-in-training who are expected to carry out all academic responsibilities in a professional manner. The Medical College has a duty to establish criteria for professional comportment as an important component of its mission to train students to become effective physicians. Students must handle absences from required Medical College activities in a manner that reflects a standard of professional responsibility for practicing physicians. When a student does not attend a required session, and has not provided in advance an appropriate request for permission or explanation of the absence, as described below, the student is in violation of the standards of conduct required for students at the Medical College. This policy on student absences sets out the criteria and process for handling absences from academic duties; it also applies to students taking courses at the Medical College who are from other medical schools.

The integrated curriculum of the Medical College in the first two years uses many kinds of learning formats, including lectures and collaborative formats. Unless specified otherwise, attendance at all small group activities in a course is mandatory. Attendance at lectures is strongly encouraged but not mandatory. Several of the formats promote active learning by requiring students to work collaboratively in the educational process. In collaborative learning formats, student attendance will often contribute to the student's academic mastery of that component. The course director has the discretion to determine which learning sessions, including lectures, large groups, or recitations, are mandatory or optional, and the course director will inform the students of any such exceptions in the course syllabus.

The clinical phase of the curriculum mandates the full time commitment of the students in all patient-care and didactic activities. The student's presence on the clinical floors of the hospital is critical to the learning experience because it provides opportunities to observe and to participate in acute medical management decisions. Students are required to attend all lectures, rounds, case presentations, conferences, clinics, on-call periods, and other experiences as designated by the course director.

## **Types of Absences**

Generally, the Medical College recognizes that emergent absences due to illness, personal emergency, or family emergency are not under the control of students and that it may be impossible for students to consult with course directors prior to being absent for these reasons. Nevertheless, it is incumbent upon the student to notify the course director or the Director of Students Affairs and Academic Counseling as soon as possible when these events occur so that the Medical College may be assured of the student's well-being and may make plans with the student regarding the resumption of regular activities. Such events are not to be confused with other absences that can be anticipated and planned for in advance (e.g., major family events or celebrations, professional off-campus events, residency interviews). Only through proper notification and/or permission (see below) will these types of absences be considered "excused" absences by the Medical College.

Absences without proper notification, including planned absences without prior request for permission, are considered "unexcused absences." Such absences may result in sanctions that may include, but are not limited to, receiving a zero grade for the activity missed, receiving a marginal grade in the course, or if serious, receiving a failing grade in the course.

Some voluntary absences are not considered reasonable by the Medical College. Actions such as purchasing tickets for travel or engaging in other elective activities on course instruction days are not acceptable practice. Students who engage in such conduct must assume full responsibility for whatever ramifications in their performance assessment result from their actions, as described above, since these actions result in unexcused absences. Course directors are not required to administer make-up examinations, equivalent or extra sessions to accommodate these voluntary unexcused absences. (Note that watching videotapes of required course activities is not a substitute for live attendance for students who do not have an excused absence. Videotapes are considered adjunctive learning resources.)

## **Duration**

Generally, the time frame for an absence is expected to be no more than two consecutive days (including a Thursday-Sunday sequence). Emergent absences expected to last more than two days require that the student notify the Associate Dean for Student Affairs. Planned absences of more than two days require that the student first obtain the permission of the Associate Dean for Medical Education, or if unavailable, the appropriate Assistant Dean for Curriculum, before requesting permission of the course director. When a student is uncertain about whether an absence will be considered potentially excusable, he or she should consult one of the assistant deans (student affairs, curriculum) for advice.

## **Request and Notification**

Generally, absences are excused at the discretion of the course director, and prior permission to be excused from a scheduled activity is to be sought by the student in writing (e-mail is acceptable). Students must ask for permission individually for themselves; students may not request permission for absences on behalf of other students. Emergent absences require notification and planned absences require both permission and notification in order to be considered excused.

Students who will be absent emergently (or are absent for reasons beyond the student's control) are expected to notify the course director, or, in the case of planned or voluntary absences, are expected to request permission of the course director in order to have the absence considered to be excused. In the notification or permission discussion with the student, the course director will determine how the appropriate faculty or administrators are to be notified and the role of the student in this process. In any discussion of a requested absence, the student must include an explicit discussion of:

- The reason for the absence;
- The student's plan to acquire the information missed;
- The arrangement by the student for coverage of all clinical or course responsibilities;
- The student's arrangements to identify and notify all faculty, house staff, and students affected by the absence; and
- The duration of the absence.

If the appropriate individuals to be notified are not available in a timely fashion, are on vacation, or are away from the Medical College for other professional duties, the student should notify the Office of Medical Education in writing.

## **Categories of Absences**

### **Illness**

In the case of an individual's illness, the student must notify the course director or a designated faculty member as soon as the student feels the illness will interfere with attendance and must discuss the points included under Request and Notification. If the student is unable to reach the course director or designated faculty member, the student must notify the Office of Curriculum Support and Student Affairs. If the student is too ill to attend scheduled educational activities, the faculty member may recommend that the student consult with the Associate Dean for Student Affairs, or be seen in student health. This is to ensure proper diagnosis and treatment and to avoid cases of under-treatment for serious illness. Making up the missed work to the satisfaction of the course director is mandatory.

### **Personal/Family Emergency**

In the case of personal or family emergency, the student must notify the course director or a designated faculty member as soon as the student is aware of the emergency. The student must discuss the anticipated length of the absence as fully as possible with the course director, and

must arrange for a way to be in communication with the Medical College to monitor the course of events. As noted above, if the absence exceeds or is expected to exceed two days the student must notify the Associate Dean for Student Affairs. In cases where the time frame is not clear, the student must discuss a plan to provide periodic updates on the situation. Making up the missed work to the satisfaction of the course director is mandatory.

### **Major Family Events**

Absences from class to attend major family events (which are scheduled by others without consideration of the student's schedule) require permission of the course director as soon as the student is aware of the date. If the activity extends for two or more days, the student must consult with the Associate Dean for Medical Education or the relevant Assistant Dean for either Basic Science or Clinical Curriculum. Making up the missed work to the satisfaction of the course director is mandatory and the course director's decision is final.

### **Professional Off-Campus Events**

Academic activities (professional meetings, paper/research presentations) that interfere with course instruction days must be discussed with the course director as soon as the date of the activity is known. The discussion, which is a request for permission to attend the academic activity, must include a statement of the student's exact role in the academic activity, the mechanism for making up missed course content, the student's plan for covering all responsibilities, and notifications as discussed above. In the case of professional conferences, the student should describe how the conference would provide added value above that of the required curriculum to the student's learning and/or career plans. After discussion with the course director, the student must also obtain permission from any module leaders or small group leaders that will be impacted by the absence. The course director may take into account the student's academic standing in the course in the decision to grant permission for the absence. If the activity extends for two or more days, the student must consult with the Assistant Dean for Medical Education. Making up the missed work to the satisfaction of the course director is mandatory and the course director's decision is final.

### **Residency Interviews**

It is not recommended that students schedule required course work during the time that they will be interviewing for residency programs. Any absences attributed to interviews for residency programs must be discussed with and approved by the course/clerkship director prior to their occurrence. Absences due to residency interviews that constitute more than ten percent of the days in the course or rotation are considered a significant loss of course/rotation time. The course/clerkship director will determine the scope of any work that needs to be addressed or completed as a result of absences related to travel for interviews for residency programs.

### **Subinternships**

Because of the high level of responsibility on subinternships, subinterns are expected to work each day for the entire rotation. They are not excused on Medical College holidays. If the student must miss clinical responsibilities for any reason, the student must help in making covering arrangements. The course director has full discretion to determine if the work performed by the student satisfies the course requirements.

### **Personal Commitments**

Activities relating to major personal commitments should be scheduled so that they do not conflict with Medical College academic and clinical responsibilities. Students should check the academic calendar well in advance of making any major plans so that these activities are not scheduled during mornings and afternoons on days when courses are in session. If there is a potential that they will interfere with academic activities, the student must request permission from the appropriate course director, even if the course involved falls in the next academic year. Discussion and a request for permission from the course director must occur as soon as the date of the personal activity is known, and students should obtain prior permission to be excused from the academic activity. Absences in this category must be limited in number and any course work missed due to these personal events must be made up to the satisfaction of the course director. Course directors are not required to administer make-up examinations or special sessions to accommodate students who are absent for these kinds of personal activities.

### **Religious Holidays**

The Medical College recognizes that the members of its community, including students, observe a variety of religious faiths and practices. Few of the various religious days of observance are part of the Medical College's holiday calendar. However, the Medical College recognizes and respects the religious beliefs and practices of its students and seeks to accommodate them reasonably within the requirements of the academic schedule. As a result, the Medical College will not penalize a student who is absent from a class, examination, study, or work requirement for religious observance. Students who anticipate being absent because of religious observance must, as early as possible and in advance of an anticipated absence of a day, days or portion of a day, request permission for the absence from their faculty.

Whenever feasible, faculty should avoid scheduling examinations and assignment deadlines on religious holidays. A student absent from a class because of religious observance shall not be penalized for any class, examination, or assignment deadline missed on that day or days.

In the event an examination or assignment deadline is scheduled on a day of religious observance, a student unable to attend class shall be permitted the opportunity to make up an examination or to extend any assignment deadline missed. No fees of any kind shall be charged by the Medical College for making available an opportunity to make up an examination or assignment.

No adverse or prejudicial effect shall result to any student who takes advantage of the provisions of this policy. If a student believes that he or she is not being granted the full benefits of the policy, and has not been successful resolving the matter with the course director, the student may confer with the Associate Dean for Medical Education. In the event a student continues to believe that he or she is not receiving the benefits of this policy, the student may file an appeal under the appeal provision of the policy on Promotion and Graduation.

### **Notification of Student Absences**

Faculty members should notify either the course director or curriculum office (in the first two years) or the clerkship director (in the clinical years) of any student who has an unexcused absence, as soon as the absence is known. The course director, in turn, should notify the Office of Medical Education of any unexcused absences of more than one day's duration.



## **Making up Absences**

Generally, the work or activities that are missed from academic programs, *regardless of the reason for the absence*, must be made up. The course director has full discretion to guide the content and the nature of the work that needs to be addressed or completed. If there is an issue with resolving an absence or with the process for making up missed course work that is not resolved with the course director, the student may confer with the Associate Dean for Medical Education or the relevant Assistant Dean for either Basic Science or Clinical Curriculum.

## **Leaves of Absence**

A leave of absence is defined as “a temporary period of non-enrollment,” and may take four forms: research, academic, personal, and medical. Students may apply for a leave of absence as detailed below. The leave of absence does not relieve the student of the obligation to comply with the policies and procedures of the Medical College, including but not limited to, those standards governing course remediation and repetition, completion of academic work and time frames for completion of the Medical College curriculum. *All leaves of absence will be entered on Transcript as “Leave of Absence” with no distinction among the different types of leave.*

Taking a leave of absence also may have implications for housing, health coverage, scholarship, student loan deferment/repayment status, or financial aid eligibility. Prior to applying for a leave of absence, students must investigate these implications as they may pertain to their personal situations. The Associate Dean for Student Affairs has discretion regarding the continuation of Medical College benefits or services, such as housing, medical coverage, and utilization of medical college facilities. The Associate Dean for Medical Education is responsible for reviewing and approving the requests for a research and academic leaves of absence. The Associate Dean for Student Affairs is responsible for reviewing and approving the requests for medical and personal leaves of absence. All students who are approved for any type of leave of absence will be charged a fee in order to continue their student status with the Medical College. Students on leave may also be charged other fees to continue to receive Medical College benefits or services. Some types or duration of leave may require the consent of the WCMC-Q Dean. Leaves generally are granted for a defined period. Students may request an extension of their leave of absence by writing to the relevant Associate Dean. Students who do not return to full-time status at the end of an approved leave, and who have not applied for and been approved for continuation of their leave of absence status, will be considered to have withdrawn from the Medical College. Under certain circumstances, a student who wishes to return from a leave may have to satisfy previously set conditions for readmission.

## **Types of Leaves**

### **Research**

The Associate Dean for Medical Education, upon the recommendation of the Coordinator of Student Research, grants a research leave of absence so that students may have a defined period during which to pursue an approved research project. While the terms of research leaves are generally for one academic year, approval may be given for a longer period of time that may not exceed two academic years. The procedure for securing a research leave is by formal application, which may be obtained in the Office of Student Affairs. The application requires the student to

submit an outline of the proposed research project that will be completed during the course of the leave and supportive correspondence from the faculty member who will be overseeing the project. It is recommended that applications for research leaves of absence be submitted at least 45–60 days before the research leave is due to begin. If students wish to engage in research prior to the submission of their formal application for a research leave, this work must be done either in accordance with elective guidelines or, if the student has unscheduled time, on a not-for-credit basis. If work is begun before the application is submitted, approval of the leave will recognize the date that the application was submitted as the start date of the leave.

### **Academic**

Students who have been granted admission to pursue a different course of study or degree at another institution may request an academic leave of absence. To apply for an academic leave, a student must submit a copy of the letter of admission to the degree program, along with a written request for a leave, to the Associate Dean for Medical Education. The request must include the beginning and ending dates of the program to which the student has been admitted. Academic leaves will not exceed two academic years.

### **Medical**

The Associate Dean for Student Affairs grants a medical leave of absence upon the recommendation of the student's treating physician and/or an administrative physician consultant appointed by the Medical College. The purpose of the medical leave is to enable students to seek treatment for a health-related condition that interferes with the student's ability to undertake the curriculum or that poses a threat to the health and safety of the student or others. The term of the leave is for a period up to one year, based upon the recommendation of the treating physician and/or administrative physician consultant. The leave may be extended for up to a second and final year based upon the recommendation of the treating physician and/or an administrative physician consultant. To apply for a medical leave, a student must meet with the Associate Dean for Student Affairs who can provide the student with the name of an administrative physician consultant as needed.

### **Personal**

The Associate Dean of Student Affairs may grant a personal leave of absence. A personal leave enables a student to take time off, in extenuating circumstances, to address issues of a personal nature, including those related to the health and well-being of a family member or partner. Ordinarily, personal leaves may not exceed one year; however, requests by students to extend their personal leave into a second year will be considered under exceptional circumstances. To apply for a personal leave of absence, students are required to discuss their needs with the Associate Dean for Student Affairs.

### **Leaves Initiated by the Medical College**

Under certain circumstances, a student experiencing difficulty in the medical school program may be permitted, or required, to take a leave of absence. The process for the leave is explained in the Promotion and Graduation Standards and Procedures.

### **Return to Medical Studies from Leaves of Absence**

At the time a leave of absence is granted, the Medical College determines the length of the leave and the conditions, if any, for a return from the leave of absence. Extensions of a leave of absence are not automatic, even if within the time frame permitted for the category of leave. A student who determines that he or she is not returning at the time scheduled for a leave to end should consult with the appropriate Associate Dean as early as possible before the scheduled return date. This will enable a student to learn whether or not an extension of the leave of absence can be granted, or if the student needs to make other arrangements. Similarly, if conditions have been set for a student's eligibility to return from a leave, the student should demonstrate, in a timely fashion to the relevant Associate Dean, that he or she has satisfied the readmission requirements.

If a student does not return from a leave at the conclusion of the set time period, and has not received an extension in writing, the individual will be deemed to have withdrawn from the Medical College. Similarly, if a student has not satisfied the criteria to return, if any, and has not received an extension in writing, he or she will be deemed to have withdrawn. No further action will be necessary to finalize the withdrawal. A student who has been classified as withdrawn after a leave of absence generally may apply for readmission.

## **Office of Curriculum Support**

The Office of Curriculum Support (OCS) serves as the primary curriculum resource for the basic science courses and clinical courses/clerkships in the Medical Education Program.

OCS staff members work collaboratively with the curriculum deans, course/clerkship directors, module leaders, library, ITS and other staff, to provide students with all of the necessary support and resources needed to succeed. This includes liaison with the Office of Curriculum and Educational Development at WCMC, Hamad Medical Corporation and other affiliated health cares sites in Qatar to plan and deliver the curriculum.

In addition to the provision of course/clerkship schedules, syllabi, hand-outs, manuals, textbooks and medical equipment etc., OCS is also responsible for administering all exams and quizzes; collating student assessment data, exam/quiz results and preparation of final grade forms; planning for and preparing the students for their clinical work at HMC which includes arranging for IDs, access to the hospital medical records, and providing pagers and scrubs; providing information relating to all off-site activities, e.g. public health fieldtrips and office preceptor sessions; arranging transportation and other logistical aspects (e.g. audio-visual services) for live video-conferences at HMC, or with WCMC in NYC, and Weill Bugando Medical College in Tanzania.

### **Course/Clerkship Materials**

The majority of student course/clerkship material such as the schedules and lecture handouts is available via the Canvas Learning Management System (LMS). Students receive instructions about how to access this on-line resource using their college iPad or laptop provided during orientation week. However, at the start of each course/clerkship, students are expected to collect some materials (e.g. textbooks and scrubs etc.) from OCS. For the basic science courses, material

is uploaded on Canvas LMS every Thursday for the following week. For the clinical courses and clerkships, students will be notified when any new information is available to access.

### **OCS Numbers**

During orientation week, students will be assigned a four-digit OCS number that they will use throughout their medical studies. This number is used for anonymous grading of quizzes, exams, and other papers. Students should memorize their assigned OCS number and keep it strictly confidential, as a replacement number cannot be issued.

### **Methods of Communication with Students**

It is very important that students check their WCMC-Q e-mail on a regular basis to ensure that they have the latest updates with regard to schedule changes, room assignments, exam information, and other course announcements. For any last minute schedule or other course updates (e.g. change of venue), OCS may contact students by their mobile telephone.

### **Access to Examination Answers, Grades, and Student Assessment Forms**

Unless otherwise notified, results of weekly quizzes are posted on Canvas LMS usually within 48-72 hours after the exam date. Students will only have access to view their individual quiz grade and a histogram that will depict the overall performance of the class. Exam answer keys will be posted on the notice board outside of OCS, and displayed for a maximum period of two working days, and only available to view during the regular office hours of 7:30am to 3:30pm.

Students are allowed to review their quiz, exams and other assessment forms with narrative feedback within OCS by prior appointment only. This review must take place in the presence of OCS staff and students are not permitted to photocopy the material or leave the room with it. Students also have the right to contact their faculty members or course and clerkship directors directly should they have any questions about their grades and/or narrative assessments.

OCS is responsible for collating all assessment forms for each of courses/clerkships (e.g. quiz results, small group sessions such as problem-based learning and journal clubs, and other clinical assessment forms). Course/clerkship directors use this information to calculate a final grade. At the end of each course/clerkship, final grade forms are provided to the Registrar's office for release to students.

### **Student Transportation**

OCS coordinates the transport to off-campus locations through shuttle buses and/or car services. For the 3<sup>rd</sup> and 4<sup>th</sup> year medical students, specific arrangements are in place to arrange for transportation to and from Hamad Medical Corporation and its affiliated health care sites.

## **Standards of Conduct**

The Medical College requires that faculty, students, and staff abide by fundamental standards of conduct expected of the members of the medical college community in their interactions with each other. Membership in the Medical College community for students is more than an academic commitment; it connotes a willingness by the student to act as a responsible medical professional. Participation in the medical college community by faculty is more than instructing

the next generation of medical professionals; it is a commitment to serve as mentor and role model of the standards of the medical profession. Inherent in the concept of a medical professional is an underlying integrity and ethical foundation that defines the tone and culture of the teacher-learner environment at the Medical College.

The Medical College's standards of conduct also enable students to begin to encounter and wrestle with the difficult moral and ethical questions that arise continuously throughout one's medical career. In this capacity the standards of conduct promote expected behaviors, challenge unprofessional behaviors, and educate students, as well as faculty, to confront these challenges.

It shall be the responsibility of the students and faculty of the Medical School to uphold the integrity and ethical standards of the community to the fullest extent possible. The standards of conduct listed below set forth general responsibilities of students and faculty in a teacher-learner environment. The full range of responsible conduct cannot be set forth in any policy document. Accordingly, students and faculty should view these enumerated responsibilities as an illustration and should strive to comply with both the letter and the spirit of these standards of conduct.

This section also describes the guidelines and policies that will apply when there has been a failure to comply with the standards.

## **Student Responsibilities**

In order for students to be permitted to continue their studies at the Medical College, students must demonstrate a range of skills and abilities, such as, good judgment, a sense of responsibility and morality, sensitivity and compassion for individual needs, the ability to synthesize and apply knowledge, and evidence that they are capable of becoming safe and effective physicians. Two values of particular importance that must be upheld by the entire college community are *professionalism* and *academic integrity*. Although these terms are often used interchangeably, they are distinct in nature and have broad application. For the purposes of this document, professionalism covers expected attitudes, behaviors and characteristics. Academic integrity includes the quality and honesty of all academic course submissions.

The following are examples of conduct that is not suitable for students at the medical college. The list below includes examples of breaches in professionalism and academic integrity. It is the student's responsibility to know what is expected and when in doubt, to discuss the concern with the course/clerkship director or curriculum dean.

Example of unprofessional conduct include:

- Repeatedly or egregiously failing to fulfill the professional requirements and responsibilities of a course or clinical clerkship such as, but not limited to:
  - Being repeatedly absent or unexcused from required courses, clerkships, sub-internships and related activities.
  - Failing to attend any assigned clinical activity.
  - Failing to report absences in a timely manner (excused or unexcused that could potentially affect course/clerkship activities).
  - Being consistently late for scheduled course/clerkship activities and exams.

- Failing to submit assignments on time.
- Failing to adhere to the appropriate dress code.
- Failing to respond in a timely way to communications (phone calls, emails or other correspondence) from the administration, faculty, course leadership or their representatives.
- Breaking patients' confidentiality or posting of confidential or inappropriate information (including but not limited to photos, images, text or video) on the internet (including but not limited to Facebook, blogs, LinkedIn and other social media), including any breach of HIPPA or FERPA regulations.
- Being disruptive in class, especially if repeated.
- Breaching exam conditions, which includes failing to respond to an examiner's or proctor's instructions, being disruptive, communicating with another examinee, or bringing unauthorized materials into the exam room.
- Failing to provide information or complete the necessary paperwork required for courses, clerkships on any curricular activity, such as the activation of clinical privileges at HMC.
- Committing an act of verbal or physical abuse of any kind.
- Failing to maintain high ethical and moral standards of conduct.
- Failing to maintain a professional boundary with peers, staff, faculty, healthcare staff and patients.

Examples of breaches in academic integrity include:

- Knowingly or carelessly representing the work of others as one's own; examples include copying text, graphs, PowerPoint presentations or other materials from a reference book, the internet, solution manuals, and fellow students, as well as using any sources without proper citation (plagiarism).
- Submitting the same work for a different course without permission from all faculty involved (self plagiarism).
- Receiving or giving unauthorized assistance in any academic work.
- Cheating in an exam or course assignment by any means, including but not limited to purposely copying answers from a co-examinee or using unauthorized material
- Restricting the use of material used to study in a manner prejudicial to the interest of other students.
- Purposely misleading or giving false information.
- Fabricating data in support of laboratory or fieldwork.
- Forging a signature, for example, to certify completion of a course assignment or signing an attendance sheet on behalf of another student.
- Providing assistance for any of the above.
- Otherwise committing a breach of academic integrity.
- Failing to report or take action in the case of a breach of academic integrity by others in your academic community.

A student or a group of students, knowing of any situation in which a violation of any of the standards of conduct set forth above may have occurred is responsible for providing any such information in writing to the Associate Dean for Medical Education or Student Affairs. Faculty

is similarly required to report a violation to the Associate Dean for Medical Education. Each student matriculated at the Medical College shall be bound by standards of conduct described above and shall be presumed to be familiar with the above provisions.

When a student's conduct while matriculated at the Medical College raises a question about his or her suitability for the practice of medicine, the matter is directed to the Committee on Promotion and Graduation for consideration. On a request by the Committee on Promotion and Graduation, the Associate Dean for Medical Education or his or her designee, shall appoint an ad hoc committee of faculty to review the matter. The student involved shall receive notice of the Committee on Promotion and Graduation's request for the appointment of the ad hoc committee, the membership of the ad hoc committee once constituted, and the details of the concerns under consideration by the ad hoc committee regarding the student's suitability for the practice of medicine.

The ad hoc committee will determine the scope, manner and extent of its review, consistent with the information provided by the Committee on Promotion and Graduation. The student shall have the right to appear before the ad hoc committee in order to present his or her position on the claims raised and his or her continued suitability. The student may be accompanied by an advisor (such as a family member, faculty member and/or counsel) who may assist the student but will not be a participant in the proceeding before the ad hoc committee; the student will remain responsible for acting on his or her behalf in the process. The ad hoc committee will forward its determination as to the student's suitability to the Promotion and Graduation Committee.

When the recommendation of the ad hoc committee to the Committee on Promotion and Graduation is to permit a student to continue with his or her studies based on a finding that the student continues to meet the standards of suitability for the practice of medicine, the Committee on Promotion and Graduation may accept the recommendation and conclude the process or the Committee on Promotion and Graduation may seek further review by forwarding the matter for further action to the Executive Committee and the WCMC-Q Dean. The Committee on Promotion and Graduation retains the right to add its own recommendation to the recommendation of the ad hoc committee if it forwards the decision of the ad hoc committee for additional consideration.

When the recommendation of the ad hoc committee is that the student does not satisfy the Medical College's standards of suitability for the practice of medicine and should not be permitted to continue studies at the Medical College, then the recommendation, together with the academic records, factual determination, including any recommendations for sanctions (which shall include a brief statement explaining the sanctions), as well as any other materials the ad hoc committee deems appropriate, shall be forwarded to the Committee on Promotion and Graduation. The Committee on Promotion and Graduation shall then follow its own procedures for reviewing the recommendation, and formulating its own position on the matter. The Committee on Promotion and Graduation has the discretion to rely on the record created by the ad hoc committee or to reopen the process to gather additional information. The student shall have an opportunity to submit whatever information he or she believes is relevant to the consideration. The recommendations of the ad hoc committee, and the Committee on Promotion and Graduation, shall be forwarded to the Executive Committee and the WCMC-Q Dean for final action.

## Teacher-Learner Environment

The Medical College is committed to providing an environment that fosters mutual respect and the values of professionalism, ethics, and humanism in the practice of medicine. An environment conducive to learning requires that faculty, students and administrative and support staff treat each other with civility. Faculty must treat students fairly and with respect in all settings where students are educated and maintain an academic environment conducive to the pursuit of free inquiry, academic integrity and the advancement of patient care. The standards of conduct set forth below are intended to prohibit teaching and other practices that are discriminatory, generally offensive and that undermine professionalism, without limiting appropriate teaching techniques and styles that advance and stimulate the educational environment.

Examples of conduct that is *not* appropriate include:

- Verbally abusing a student, including belittling and/or humiliating a student, or speaking disparagingly about a student's economic or cultural background, gender, sexual orientation or preference, race or religion;
- Exploiting students in any manner, including requesting that students perform personal errands or directing students to perform a large number of routine hospital procedures on patients not assigned to the student, particularly where performing the procedures interferes with a student's attendance at educational activities such as teaching rounds and classes;
- Intentionally singling out a student for arbitrary or selective treatment;
- Pressuring a student to perform medical procedures for which the student is insufficiently trained;
- Interfering with a student's need to attend properly to a potentially serious health problem, including not permitting a student to leave a hospital unit or operating room to seek attention for a needle stick injury or a splash with bodily fluids; or
- Committing an act of physical abuse or violence of any kind.

Faculty shall educate and advise students about the specific standards that govern professional conduct in a clerkship, a course or in a hospital setting, and, by his or her own conduct, set an example of the standards expected of the student.

If a student believes that a faculty member has violated the standards of conduct, the student may file a written request for an investigation with the Associate Dean for Medical Education. The Associate Dean for Medical Education will notify the Associate Dean for Student Affairs, who shall serve as the student's advocate. The Director for Medical Education at Hamad Medical Corporation (HMC) or the WCMC-Q Dean, as well as the appropriate Assistant Dean for Curriculum together with the Associate Dean for Admission and Student Affairs will investigate any such complaints. The Director for Medical Education at HMC or the WCMC-Q Dean and the Associate Dean for Medical Education are committed to establishing the facts fairly and promptly and will respect the rights and confidentiality of the involved parties. Students who wish to come forward and report inappropriate behavior on the part of a faculty member may do so without fear of retaliation or reprisal. The Associate Dean for Medical Education, appropriate



Assistant Dean for Curriculum, Director for Medical Education at HMC or the WCMC-Q Dean, and the Associate Dean for Student Affairs will take prompt action, normally within ten days from the written request for an investigation, in resolving the matter.

Faculty members are also required to inform the Associate Dean for Medical Education, in writing, of any alleged violation by a faculty member of the standards of conduct outlined above. Faculty members, upon appointment to the Faculty, shall be bound by the standards of conduct set forth in this section and shall be presumed to be familiar with its provisions.

## **Student Duty Hours Policy**

The Accreditation Council for Graduate Medical Education (ACGME) has established limits on the work hours of interns and residents. In addition, the Institute of Medicine, acting at the request of Congress, has issued a slightly more restrictive report regarding intern and resident work hours. The report, entitled **Resident Duty Hours: Enhancing Sleep, Supervision, and Safety**, was published in December 2008. The Liaison Committee on Medical Education (LCME) has established the following standard for all medical schools: “The committee responsible for the curriculum, along with medical school administration and educational program leadership, must develop and implement policies regarding the amount of time students spend in required activities, including the total required hours spent in clinical and educational activities during clinical clerkships.” The following policy, drafted by the Clinical Curriculum Committee, considered the issue of student duty hours and voted unanimously, at its January 2009 meeting, to adopt the following policy. This committee, along with the Core Basic Science Committee, determined that the policy as outlined below would not result in any major alteration in the time commitment required of students enrolled in any of the College’s required basic science, preclinical courses or clinical clerkships as they are currently configured. The policy was approved by the Medical Education Council in February 2009. The policy used the recommendations of the IOM as a guide, modified to apply to students rather than residents.

In keeping with the WCMC Policy on Student Duty Hours, WCMC-Q adopts the following policy, adapted only with regards to the local organizational structure.

### **Policy for Student Duty Hours\***

The maximum number of hours that a student may be on duty in one week is 80 hours, averaged over 4 weeks. The maximum shift length is 30 hours, with 5 hours protected sleep time between required shifts; or a maximum of 16 hours without protected sleep time. The maximum frequency of in-hospital call is every third night. The minimum time off between scheduled shifts is 10 hours after a day shift, 12 hours after a night shift, and 14 hours after any extended duty of 30 hours [and residents should not return to service earlier than 6 a.m. the next day]. The maximum frequency of in-hospital night shifts is 4 nights sequentially. After 3 or 4 nightshifts, a student must have at least 48 continuous hours off before the next shift. As a minimum, a student must have the following days off duty: 5 days per month; 1 day (24 hours) per week; one continuous 48 hour period off per month. In exceptional circumstances, the time on duty can be increased to 88 hours for select programs with a sound educational rationale. In the emergency department, the maximum shift limit is 12 hours, with at least an equivalent time between shifts. The maximum number of shift hours per week is 60 hours, with an additional 12 hours permitted

for education. Students are asked to report violations of the Student Duty Hours policy, and such reporting may be done in several ways. In the case of clerkships, where residents, attending physicians, or other hospital team members create the violation of the Student Duty Hours policy, students may make a direct report to the course/clerkship director. Students may also make a direct report to the Assistant Dean for Clinical Curriculum, an Associate Dean (Medical Education or Student Affairs). In addition, all students will be asked about course or clerkship compliance with the Student Duty Hours Policy via a question on the course/clerkship evaluation form. Although student reporting on the course evaluation is anonymous, the evaluation survey is reviewed by course leaders and will allow them to identify whether a potential violation may be occurring during the course. If a student reports the violation directly to the course or clerkship director, the course or clerkship director is required to investigate the situation and attempt to remedy it. If the situation is not remedied, the student must report the situation to an Assistant or Associate Dean. Evidence of violation of the Student Duty Hours policy by direct student report to an Assistant or Associate Dean will be brought to the attention of the course or clerkship director. The course or clerkship director will be required to investigate the situation and provide a report to the Associate Dean for Medical Education) indicating how the situation has been remedied.

\*“Duty hours” refers to time when a student is scheduled to participate in patient care or educational events, such as seminars, lectures, and rounds. It does not refer to study time

## **Prohibited Discrimination and Harassment**

### **Policy**

WCMC-Q does not discriminate against or permit harassment of its students, employees or applicants for employment on the basis of their protected status. Accordingly, WCMC-Q will not accept, tolerate or condone actions of discrimination and/or harassment by any employee, student, patient, vendor, or visitor. In compliance with applicable U.S. federal, New York state laws, and college policy, WCMC-Q maintains processes for individuals or groups to seek redress and remediation if they believe they have been the victims of these acts.

### **Purpose**

WCMC-Q’s commitment to diversity and inclusiveness is grounded in providing an environment that is free from all prohibited discrimination, protected status harassment, sexual assault/violence, and bias activity, in particular when such actions are directed at a member or group of the WCMC-Q community because of that individual’s or group’s actual or perceived age, color, creed, disability, ethnicity, gender, gender identity or expression, marital status, national origin, race, religion, sexual orientation, pregnancy or recovery from childbirth or any combination of these or related factors protected by law.

### **Applicability**

Applies to all members of the faculty, staff, and students of WCMC-Q.

## Definitions

Prohibited discrimination occurs when an academic or employment decision results in negative and/or different treatment of an individual based upon his or her protected status. Prohibited harassment occurs when an individual is targeted because of his or her protected status that unreasonably interferes with their academics or work and creates an intimidating, hostile or offensive learning or working environment. Examples of such misconduct can be found in Appendix D of Cornell University Policy 6.4.

All students and employees must comply with this policy and take appropriate measures to ensure that such conduct does not occur. Violations of this policy will be deemed gross misconduct.

Students and employees of WCMC-Q must also familiarize themselves with Cornell University's Policy 6.4 on Prohibited Discrimination, Protected Status Harassment, Sexual Harassment and Sexual Assault and Violence. The principles stated in University Policy 6.4 apply to WCMC-Q.

Acts of prohibited discrimination and protected-status including sexual harassment and sexual violence constitute violations of U.S. federal and New York state laws. In addition, WCMC-Q will not tolerate sexual abuse, rape, sexual assault, domestic violence, intimate-partner violence, stalking, sexual coercion, or other forms of sexual violence by or against students, staff members, faculty, alumni, or visitors.

Sexual harassment is discrimination and is therefore illegal under U.S. federal and New York state laws. Sexual harassment is unwelcome unsolicited conduct of a sexual nature or because of one's sex that is offensive and undesirable to the receiver. It includes unwelcome sexual advances, requests for sexual favors, and other verbal, non-verbal or physical conduct of a sexual nature.

Unwelcome conduct of a sexual nature or related to one's sex can unreasonably interfere with work and learning performance and creates an intimidating, hostile, and offensive work and/or academic environment, which has no place at WCMC-Q. No one should tolerate such behavior in the course of his or her employment or academic status. Employment or academic decisions cannot be based on either submission to, or rejection of such behavior.

Forms of Sexual Harassment - Sexual harassment can take many forms including, but not limited to the following:

- Verbal - sexual innuendo, suggestive comments, humor or jokes about sex or gender related traits, sexual propositions, insults or threats;
- Nonverbal - suggestive or insulting sounds, gestures, or looks that convey an inappropriate sexual innuendo, act or threat;
- Physical - touching of the body (i.e. brushing, patting, pinching, grabbing), coerced sexual intercourse or other sexual acts;
- Visual - displaying or attributing non work-related materials that depict or describe a sexual act or sexually provocative image.

Any person, male or female may be subject to sexual harassment. Sex-based harassment - that is, harassment not involving sexual activity or language (i.e. if a male supervisor regularly berates only female employees) - may also constitute discrimination if it is severe or pervasive and directed at employees because of their sex.

Sexual Assault - Sexual harassment, which constitutes sexual assault, will be reported to the proper authorities. Immediate action will be taken by WCMC-Q to protect the safety of victims of sexual assault.

Acts of prohibited discrimination or harassment undermine WCMC-Q's commitment to inclusion and diversity and threaten the careers, educational experience, patient services and well-being of all associated with WCMC-Q.

## **Administration**

### **Reporting of Allegations**

If a student, employee or other member of the WCMC-Q community believes that he/she has experienced such prohibited treatment at WCMC-Q, the individual should report this to any of the following:

Assistant/Associate Dean, Student Affairs (Students only)	4492-8506
Director, Student Affairs (Students only)	4492-8517
Assistant Director, Student Affairs (Students only)	4492-8518
Director, Human Resources (Faculty & Staff)	4492-8601

Complainants are assured that problems of this nature will be treated in a confidential manner.

### **Investigation and Corrective Action**

All complaints of harassment or discrimination reported to the Director or Assistant Director of Student Affairs, or to the Director of Human Resources, will be treated seriously and thoroughly investigated by WCMC-Q. Complaints may or may not be made in writing.

The investigation may include individual interviews with parties involved and, where necessary, with individuals who may have observed the alleged conduct or may have other relevant knowledge. The investigation will proceed with appropriate consideration given to the privacy of all involved. It must be recognized that WCMC-Q will take reasonable measures to protect the confidentiality of the complaint, testimony and witnesses throughout the investigatory process. However, WCMC-Q cannot and does not guarantee that confidentiality will be maintained. If a complaint is substantiated, employees or students who engage in such inappropriate behavior will be dealt with promptly and appropriately. Responsive action may include, for example, training, referral to counseling, monitoring of the offender and/or a corrective action, or other discipline up to and including termination of employment. At the conclusion of the investigation, the complainant and respondent will be provided with a general overview of findings.

### **Responsibility of Employees and Students**

In order for WCMC-Q to ensure that it provides a working and learning environment free from harassment and discrimination, it is imperative that each person who believes he/she has been subject to or witnessed harassment or discrimination immediately notify any of the offices above so that an investigation can be conducted.

It is expected that all employees of WCMC will cooperate fully with WCMC-Q investigating

complaints of harassment or discrimination. The mere fact that an investigation is being conducted by WCMC-Q does not suggest that WCMC-Q has ground to substantiate the allegations of the complaint.

### **Responsibility of Supervisors, Administrators, and Faculty Members**

Supervisors, administrators and faculty members are expected to maintain a work environment that does not tolerate or condone any form of harassment or discrimination. If a supervisor, administrator, faculty member, or counselor receives a complaint or inquiry about illegal harassment or discrimination that is alleged to have occurred on WCMC-Q property or involves a WCMC-Q employee or student, he/she is to immediately contact WCMC-Q's Director of Human Resources, or any of the others listed above, and report that action. Failure to immediately notify any of the above listed persons may impede the ability of the investigators to conduct an impartial, timely, and thorough review of the complaint and inhibit the Medical College's ability to adhere to their obligations under the law.

### **Investigative Process**

Complaints brought forward by a student or an employee will be thoroughly reviewed by one of the offices noted above. All complaints that implicate the prohibited acts under this policy, including complaints of retaliation, will be investigated. The investigation will include interviews of the complainant, the accused, and all others involved or may have knowledge of the facts and circumstances. The investigation will proceed with appropriate consideration given to the privacy of all involved. At the conclusion of the investigation, the complainant and accused will simultaneously receive a written summary of findings. Any employee found to have engaged in illegal harassment and/or discrimination will be subject to remediation, which may include retraining and/or corrective action, up to and including termination of their employment.

### **Retaliation**

Retaliation and/or threats of retaliation or retribution against employees who raise concerns or make complaints or assist in providing information (e.g., as witnesses) about discriminatory practices, including harassment, is prohibited and must be reported to Human Resources Division. Retaliation may also violate New York state and U.S. federal laws as well as WCMC-Q policies.

### **False Claims**

Deliberately false or malicious accusations of harassment or other discriminatory conduct - as opposed to complaints that, even if erroneous, are made in good faith - may be subject to appropriate disciplinary action.

## **Drug and Alcohol Abuse**

### **Policy**

U.S. Federal, New York State, and Qatar laws as well as Cornell University policies prohibit the illegal possession, use and distribution of illicit drugs and alcohol.

The unlawful manufacture, distribution, dispensation, possession, or use of an illicit drug or alcohol by any member of the Weill Cornell Medical College in Qatar (WCMC-Q) community, including employees, faculty members, students and visitors, is prohibited at all WCMC-Q, Qatar Foundation, and Cornell facilities (including student residences) and activities. Appropriate action, including termination and/or dismissal, will be taken for violations of the foregoing prohibition.

WCMC-Q will not condone criminal conduct on its property, or at WCMC-Q or student sponsored activities, and will take appropriate action whenever such conduct is discovered to enforce the law and its own internal regulations. Violators of U.S. Federal, New York State and Qatar laws may also be referred to appropriate authorities for prosecution.

### **Purpose**

WCMC-Q will not condone criminal conduct on its property, or at WCMC-Q or student sponsored activities, and will take appropriate action whenever such conduct is discovered to enforce the law and its own internal regulations. Violators of U.S. Federal, New York State and Qatar laws may also be referred to appropriate authorities for prosecution.

### **Applicability**

Applies to all members of the faculty, staff, and students.

### **Administration**

#### **WCMC-Q Sanctions**

Violations of WCMC-Q policies can result in termination, suspension or expulsion from the College.

Faculty and non-academic staff can be subject to disciplinary action up to and including termination of employment.

Student violators can be subject to disciplinary action up to and including dismissal. Any drug or alcohol abuse violation may become part of a student's permanent record and may impact on a student's fitness or suitability for advancement.

#### **Qatar Laws Related to Drugs and Alcohol Use**

(Legal sanctions include severe criminal penalties such as capital punishment, corporal punishment, imprisonment, deportation and fines. The severity of the penalty depends on the nature of the criminal act.)

- Possession, dealing, distribution and trafficking narcotic drugs are criminal offenses in Qatar.
- It is illegal to import alcohol or drugs into Qatar.
- Non-Qatari employees, in certain circumstances, may obtain liquor permits for personal consumption.
- Major hotels are allowed to serve alcohol to guests in restricted areas.
- The manufacture of alcohol and drugs is illegal.
- There is a zero tolerance for drunken behavior in public, or driving under the influence of alcohol or drugs. Qatar law does not have a blood alcohol threshold.

### Health Risks

WCMC-Q recognizes the convincing medical evidence that alcohol abuse and the use of illegal drugs and substances pose a significant threat to health and condemns alcohol abuse and the use of such drugs and substances as harmful to the physical and psychological well-being of the user and the well-being of the Cornell community.

The following list by category is only a short sampling of potential risks involved with using alcohol or drugs:

- **Narcotics:** Slow and shallow respiration, clammy skin, convulsions, coma, and death.
- **Stimulations:** Increased pulse rate, blood pressure and body temperature, insomnia, agitation, convulsions, possible death.
- **Cannabis:** Disorientated behavior, fatigue, paranoia, possible psychosis.
- **Alcohol:** Drowsiness, impairment of judgment and coordination, liver and heart damage, respiratory depression and death. Mothers who drink during pregnancy risk giving birth to infants with fetal alcohol syndrome, which can include irreversible physical abnormalities and mental retardation.

### Counseling and Treatment

The Employee Assistance Program (EAP) is a short-term counseling and referral service for drug and alcohol abuse as well as other concerns. Through the contracted counseling company “LifeSolutions”, eligible employees and their dependents, as well as students, may obtain free counseling (up to six sessions) for substance and alcohol abuse issues that affect them and their families. EAP counselors will assess each case and may make a referral to an appropriate program or outside agency best suited to address the rehabilitation needs.

A LifeSolutions counselor can be contacted in Doha by calling **+974 4492-8646 and the call will be forwarded automatically**; if outside of Qatar, students, employees and their families can reach assistance at any time by calling +44 208 987 6550 (by calling and reversing charges, or call direct and someone will call back); contact via email: [globaleap@workplaceoptions.com](mailto:globaleap@workplaceoptions.com); or via the Life Solutions website: <http://www.lifesolutionsforyou.com>, company code: WCMC-Q.

### Institutional Review

Weill Cornell Medical College will conduct a biennial review of its drug and alcohol abuse policies and programs to determine the effectiveness of such policies and programs, implement any necessary changes, and ensure consistent enforcement of required sanctions.

### Policy

## Computers, Network Systems and Electronic Communications Guidelines

The Medical College’s computers, network systems equipment, data, and software are a critical portion of the Medical College’s infrastructure and are to be treated accordingly.

Students and faculty are responsible for their actions when using the Medical College's computers, electronic communications and network systems, whether or not their transgressions are intentional, accidental and/or can be corrected.

Users of Medical College computers and network systems shall respect:

- The privacy of other users' information, whether or not the information is securely protected;
- The ownership and intellectual property rights of proprietary and commercial software, including not using unauthorized copies of software even where the software may not be copy protected;
- The finite capacity of a computer system and limitations of use so as not to interfere unreasonably with the activity of other users;
- Procedures (posted in computer facilities and/or online) established to manage use of the computer system;
- The rights of others not to be harassed, intimidated, or otherwise receive intrusive or inflammatory information through the computer system; and
- The Medical College's policies regarding the use of computers as specified by the Information Technologies Services (ITS). These policies can be viewed in Redbench (<https://redbench.qatar-weill.cornell.edu>) under "Policies and Forms".

### **Piracy**

Piracy, or unauthorized distribution of copyright materials, including by means of peer-to-peer file sharing programs, is illegal, and may subject students to civil and criminal penalties. At the Medical College, piracy is also a violation of the standards of conduct, and may result in disciplinary action up to and including expulsion.

## **Student Health and Immunizations**

The Medical College is dedicated to providing medical care to its students through its affiliated hospital and health centers. All students have comprehensive health care coverage and WCMC-Q provides national health card for all international students. Local students should receive the national health card from their parents or guardians.

### **Pre-Registration Requirements:**

- Completed Student Identification Form
- Completed Health and Physical Examination Form signed by a licensed physician (Performed within 12 months of entry)
- Completed Immunization History Form signed by a licensed physician
- Copies of all records/forms documenting immunizations received should be attached to the Immunization History Form as supporting documentation
- Copies of all laboratory results documenting titers (namely for Measles, Mumps, Rubella, Varicella, Hepatitis B Surface Antibody) and antigens (namely Hepatitis B Surface antigen and Hepatitis B e antigen).



## **Required Immunizations**

### **Measles, Mumps and Rubella**

Our institution requires demonstration of proof of immunity by serologic titer for Measles, Mumps and Rubella (Student should be IgG positive for Measles, Mumps and Rubella). Any student who is not immune by titer (e.g. negative, inconclusive or equivocal) will require boosters. If you have had titers drawn previously, provide copies of the lab reports to the Student Health, Wellness and Activity Coordinator in addition to your immunization record. Neither, documentation of being “immune” without actual lab reports; nor clinical history of disease is sufficient proof of immunity.

### **Hepatitis B**

Three immunization series AND post-immunization Hepatitis B surface Antibody titer or if post-immunization titer is negative Hepatitis B Surface antigen and Hepatitis B e antigen. Students who are not found to be immune may need to undergo additional testing to exclude chronic infection with Hepatitis B, and/or repeat of the three-dose series.

### **PPD (Mantoux Test)**

The test must be performed within the last 90 days unless there is a prior history of positive PPD. If the PPD is positive, Chest x-ray must be performed. Chest x-ray report and documentation of prior treatment must also be attached. Previous history of BCG vaccination is not a contraindication to performing a PPD.

### **Tetanus–diphtheria (Td) or tetanus toxoid–diphtheria–acellular pertussis (Tdap):**

Completion of the childhood series, and a booster within the last 10 years. Tdap is recommended, particularly for clinical students.

### **Meningitis**

New York State Public Health Law requires all college and university students to complete a meningitis information response form. It acknowledges that you have received information about meningococcal meningitis and the availability of a vaccination. Vaccinations must have been done within 10 years.

### **Varicella**

A positive titer indicating immunity or two doses of vaccine at least 30 days apart with a follow-up titer. Clinical history of disease is not sufficient proof of immunity for our campus. Copies of lab report will have to be provided as supporting documentation of the student being IgG positive for Varicella.

The above stated immunization/titer/PPD test requirements meet the WCMC-Q and WCMC-New York/CPM requirements. However, for some entering students who have not undergone serological (IgG) titer tests, valid documentation of immunizations will be accepted as presumptive evidence of immunity as described below.

### **Measles, Mumps and Rubella**

Measles: Please provide a record of 2 doses of measles vaccine at least 30 days apart (or two doses of MMR)

Mumps: Please provide a record of one dose of mumps vaccine (or one dose of MMR)

Rubella: Please provide a record of one dose of rubella vaccine (or one dose of MMR)

### **Varicella**

Please provide a record of 2 doses of varicella vaccine at least 30 days apart OR Date of Clinician Verified Disease (chicken pox)

### **Hepatitis B immunization**

3 immunizations of HBV series

### ***Td or Tdap***

Tetanus toxoid – Diphtheria (Td) or Tetanus toxoid – Diphtheria-Acellular Pertussis (Tdap) within 10 years.

### **Meningococcal Disease**

Meningitis vaccination is recommended for students who will be living in the residence halls, but not required.

Please note that all students must demonstrate proof of immunity by serological titers for Measles, Mumps, Rubella, Varicella and Hepatitis B Surface Antibody as indicated above prior to start of their clinical duties.

### **Other Health Requirements:**

#### **Periodic health assessments**

A completed history and physical examination should have been performed and submitted. Clinical students will undergo a pre-rotation health assessment at the end of their pre-clinical years in preparation for rotations at New York Presbyterian Hospital and its affiliates.

#### **Influenza Vaccination**

It is strongly encouraged for students in the health professions.

#### **Additional Important Information**

WCMC-Q does not provide immunizations for students

It is each student's professional responsibility to verify that all required documentation is received by WCMC-Q no later than the deadline date provided on their admission letter

There is no "moral objection" permissible for vaccination of health workers. If there is a contraindication to any of the vaccines or vaccine components, you will need to provide documentation from a physician not related to you confirming such a contraindication to the vaccine or vaccine component

Students who do not comply with the above stated health and immunization requirements would not be allowed to register for classes

Students will not be allowed to register for classes if they fail to submit their health and immunization records in a timely manner

We will notify you of any additional changes in WCMC-Q's health and immunization requirements

If you have any questions, please contact the Student Health and Wellness Coordinator at +974 4492 8524.

### **Useful Information**

The student may contact one of the following facilities for vaccinations, titers and healthcare related services:

- Services available at Qatar Foundation Clinic (QF Care Clinic) and Dental Clinic can be utilized by the students. For details of location, operation timings and services available please contact: +974 4454 1244
- Supreme Council of Health: Preventive Health Department, Mesaimeer Health Center +974 4406 4222

## **Distributed eLibrary**

### **Basics**

The physical location of the eLibrary is located by the North Entrance of the WCMC-Q building. The eLibrary can be found at <http://qatar-weill.cornell.edu/elibrary/index.html>. Standard operating hours are:

Sunday to Wednesday	7:30am to 11:00pm
Thursdays	7:30am to 7:00pm
Friday & Saturday	11:00am to 7:00pm

### **Reading Room**

The Reading Room houses all the Distributed eLibrary's resources that may be checked out including books, DVDs and other resources. Remember to bring your WCMC-Q ID to borrow library materials. At the Information Desk you may request in-person assistance with searches, interlibrary loans and other library related services. Assistance from librarians can also be obtained via chat by visiting our [Ask-a-Librarian](#) page or by email at [reflib@qatar-med.cornell.edu](mailto:reflib@qatar-med.cornell.edu) or by phone at 4492-8100. The Reading Room is open seven days a week.

### **Interlibrary Loan**

If the Distributed eLibrary does not have access to a book, book chapter, or an article you are looking for, interlibrary services will obtain the item free of charge for you from another library. Requested books need ten days to be received, unless the item is available in Qatar; however, journal articles can usually be obtained within three working days. To place an interlibrary loan request, go to <https://ill.qatar-weill.cornell.edu/illiad/>. Note that only five interlibrary loan requests per patron will be processed each day.

### **DeLib Discovery**

The DeLib discovery tool is an online catalog of all holdings at the Distributed eLibrary. This tool lists not only the print and multimedia holdings but also has direct links to electronic books and journals that are available. Additionally, DeLib Discovery will run a simple search of articles from a few select databases.

### **Public Access**

All electronic resources are accessible to the general public and non-affiliated patrons in the Reading Room. Ask a staff member for a guest login. Print materials are not available for checkout.

### **Desktops**

All the Reading Room computers are Apple Macs and are fully networked and have EndNote, Microsoft Word, PowerPoint, and Excel installed.

### **Wireless Networks**

Personal laptops and tablet devices are welcome. If you are not affiliated with WCMC-Q and need to login to the wireless network, please ask library staff for a guest login for our network.

### **Printing, Photocopying & Scanning**

Printing, photocopying & scanning are available at no cost during regular opening hours. Please ask for assistance at the Information Desk if you need assistance.

### **Library Etiquette**

Cell phones should be switched to silent and calls should be taken outside the Reading Room. To protect the resources at DeLib and to promote an atmosphere of quiet study, no food or drink is allowed.

### **Workshops**

Free workshops are offered each semester, on topics such as Database Searching, Mobile Resources, Evidence Based Practice and EndNote Basics.

### **Request a consultation**

We provide customized orientations, Reading Room tours, help with literature searching as well as clinical & community outreach services.

### **House Calls**

If you are studying or working in an area outside of the Reading Room, librarians can come to your location in the College and assist you at your point of need. House calls are subject to librarian availability and it is helpful to make an appointment for a house call in advance.

### **Citation Service**

Librarians will show you how to maintain a citation database using bibliographic software such as EndNote or RefWorks. They also will demonstrate how to change the citation styles to suit your needs.

### **Electronic Resources**

The Distributed eLibrary offers access to a wide variety of databases for your research and clinical information needs. Connect to PubMed and other frequently used tools under the Quick Tools tab located in the center of the [DeLib's website](#). Access other databases on the [DeLib Databases page](#). Most databases, when accessed from outside of the WCMC-Q campus, will require authentication with a WCMC-Q username and password.

## Popular Databases

**PubMed** - This is the premier medical literature database, and provides links to a host of bio-molecular resources from NCBI.

**UpToDate** - Is a practical clinical reference that contains the equivalent of 40,000 pages of original, peer-reviewed text. It provides specific, practical recommendations for diagnosis and treatment.

**AccessMedicine** - This is a suite of resources for clinical practice and education. It includes sub-sites for Medicine, Pharmacy, Surgery, Anesthesiology, Emergency Medicine, Pediatrics, Physiotherapy, and Science.

## Other Databases

**MD Consult** - MD Consult provides full-text access to selected medical texts, medical journals, practice guidelines, drug information, patient handouts, and CME materials.

**MICROMEDEX** - This in-depth drug information resource includes the PDR, POISINDEX and Lab Advisor.

**Scopus** - Scopus is the largest abstract and citation database. It contains peer-reviewed titles from international publishers, Open Access journals, conference proceedings, trade publications, and quality web sources.

**USMLEasy** - is a resource that allows the user to prepare for the USMLE.

**VisualDX** - This diagnostic tool allows the user to enter patient findings and create a differential diagnosis.

## E-Books

The Distributed *eLibrary* has access to more than 16,000 titles, including *Current Medical Diagnosis and Treatment* and *Harrison's*. Search for e-books by limiting to e-books in DeLib Discovery.

## E-Journals

Over 8,000 titles are available through the Distributed *eLibrary*. Locate these by limiting search results in DeLib Discovery to ejournals or by clicking on the eJournals tab on our website.

## Remote access

Connect off-campus to almost all of our online services and e-resources by authenticating with your WCMC-Q username and password.

## GET IT button

Click on the GET IT button that appears on the articles listed in many of our databases to connect to full text, see our print holdings, or request an interlibrary loan.

## Bibliographic Management Tools

Distributed *eLibrary* provides support and instruction for the bibliographic management programs RefWorks and EndNote. EndNote is provided on the desktop computers in the Reading Room, while RefWorks can be used on any computer anywhere after the user creates an account.

## Research at WCMC-Q

In line with the national vision of Qatar and Qatar Foundation, the goal of the research program at WCMC-Q is to establish a Center of Excellence in Basic, Translational and Clinical biomedical research with a world-class infrastructure and outstanding scientists to target the most pressing health needs in Qatar and the region.

WCMC-Q offers excellent research opportunities for students who are completing the research option of the Advanced Biomedical Science (ABS) requirement, wishing to graduate with Honors in Research or who are otherwise interested in developing their scientific investigation and clinical research skills. These experiences introduce students to approaches and tools used in research.

Students may engage with individual faculty members to develop or assist with projects. Students may also apply to participate in structured programs, namely the WCMC-Q funded Summer Student Research Program (SSRP) and the Qatar National Research Fund's (QNRF) Undergraduate Research Experience Program (UREP). Students also have opportunities to work with physicians and scientists from other organizations in Qatar and abroad.

Researchers commit significant time, effort and resources to their work. Students wishing to gain research experience should carefully consider their ability to commit their own time and effort.

It is also important to remember that students are bound by WCMC-Q's commitment to the principles of truth, integrity and credibility in research. Adherence to these principles is essential for scientific progress, fostering public trust in science and complying with the laws and regulations of Qatar and the United States.

WCMC-Q designates a faculty member as the Coordinator of Student Research. The Coordinator helps students explore research opportunities and understand and meet their responsibilities.

While student research is highly recommended by WCMC-Q, it is important to know that only students with good academic standing are allowed to participate in research activities. Therefore, pre-medical students are required to obtain approval from their advisor indicating that their participation in research will not impact their academic progress. The following are *required* to consult with and obtain approval from the Coordinator before engaging in research activity:

- Medical Students planning to fulfill the ABS requirement via research
- Medical Students intending to apply to graduate with Honors in Research
- Medical Students wishing to take a research leave of absence

All other students interested in research are strongly encouraged to review the policy on Student Research Eligibility (<https://redbench.qatar-weill.cornell.edu/policies/Pages/Research.aspx>) as well as consult with the Coordinator, Dr. Nayef Mazloum, Assistant Research Professor of Microbiology and Immunology, +974 4492-8477, [nam2016@qatar-med.cornell.edu](mailto:nam2016@qatar-med.cornell.edu).

For more information about the research program, please see the provided links:

**WCMC-Q Research Division**

<http://qatar-weill.cornell.edu/research/index.html>

**WCMC-Q Ethical Compliance Program**

<http://qatar-weill.cornell.edu/research/compliance/researchCompliance.html>

**Research Training Programs**

<http://qatar-weill.cornell.edu/research/researchPrograms.html>

**WCMC Research Integrity Policy**

<http://qatar-weill.cornell.edu/research/compliance/researchIntegrity.html>