Ponce Health Sciences University

School of Medicine

Student Policy Manual

2026 - 2027

PHSU

PONCE HEALTH SCIENCES UNIVERSITY

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INTRODUCTION

GENERAL INFORMATION

The Ponce Health Sciences University School of Medicine is an institution of academic excellence located in Ponce, a city on the southern coast of the tropical island of Puerto Rico. The institution was founded in 1977. Ponce School of Medicine graduated from its first class of 23 students in 1981. Since then, it has operated uninterruptedly and has graduated more than 2,000 physicians, biomedical scientists, and master's in medical sciences.

SCHOOL OF MEDICINE MISSION

To educate bilingual ethical professionals who provide compassionate, culturally competent health care and generate high impact research to reduce health disparities in the populations we serve in Puerto Rico and the US, through high-quality education in a diverse environment.

PROGRAMMATIC ACCREDITATION

The Medicine Doctoral (MD) Program is accredited by the Liaison Committee on Medical Education (LCME).

Contact Information

Liaison Committee on Medical Education
American Medical Association
330 North Wabash Avenue Suite 39300
Chicago, IL 60611—5885
Phone: (312) 464-4933

Liaison Committee on Medical Education

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655 K Street, NW Suite 100
Washington, DC 20001-2399
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SCHOOL OF MEDICINE STUDENT POLICIES MANUAL

This is the Student Policies Manual of the Ponce Health Sciences University School of Medicine. It contains the policies that apply only to the students of the academic programs of the School of Medicine: Doctor in Medicine, PhD in Biomedical Sciences, and the Master of Science in Medical Sciences (MSMS).

For the policies that apply to all PHSU students, including the students of the School of Medicine please refer to Ponce Health Sciences University Catalog and Student Policies.

SCHOOL POLICIES
(Academic/Student Policies)

This policy is tied to LCME Element 12.8	**BLOODBORNE PATHOGEN EXPOSURE POLICY**	Implementation Date/ Effective Date	~July 2001
		Last Reviewed/Update	July 19, 2023
		Approved by	--
		Initially Approved	~2001

Purpose

To establish a uniform system to report and manage people sustaining exposure to blood or other body fluids via needle stick, percutaneous injury, mucous membrane, or contact with non-intact skin while involved in a scheduled clinical clerkship, research activity, or during any curricular or extracurricular activities sponsored by Ponce Health Sciences University (PHSU)

Policy

Student(s) sustaining exposures should immediately flush the exposed area with water.

If at an Affiliated Hospital, an immediate evaluation must be requested through the corresponding Emergency Room (ER). If at a community clinic or extra-curricular activity sponsored by PHSU, the student must request an immediate evaluation at Ponce Health Sciences University Outpatient Clinics during regular hours or an Affiliated Hospital ER after hours, indicating his/her status as a medical student. Immediate prophylaxis (within two hours of exposure) must be instituted following the CDC guidelines.

The student must report the incident to the immediate supervisor as soon as possible. In the case of an Affiliated Hospital, the student will notify the Clerkship Director or Attending Physician. Attending Physicians must be notified in case of exposure during a community clinic rotation or extra-curricular activity sponsored by PHSU. The Clerkship Director and/or the Attending Physician are responsible for notifying the Office of Student Affairs so that the student is provided with appropriate care and follow-up. The notification must be immediately or within the next 24 hours after the incident.

Students who have been exposed to potentially infectious body fluid during extracurricular activities are responsible for obtaining demographic data of the source such as the complete name, physical address, phone number, and related illnesses, and submitting an incident report with the patient's information to the Office of Student Affairs. The Office of Student Affairs will handle this information confidentially.

In case of exposure in an affiliated hospital, the student will fill out the appropriate incident report as required by the hospital. This will be done after the student has received emergency care. The name and medical record number of the patient involved in the exposure must be

documented in the incident report. A copy of the incident report must be filed at the Student Affairs Office by the next working day.

The Office of Student Affairs will coordinate the follow-up on the incident through the PHSU Outpatient Clinic or Medical Facility/affiliate Hospital to ensure that the student receives the appropriate evaluation, treatment, and follow-up services and for identification of other possible needs such as counseling and health insurance coordination.

The student and/or his/her medical insurance are responsible for all payments and co-payments related to the medical care of the incident.

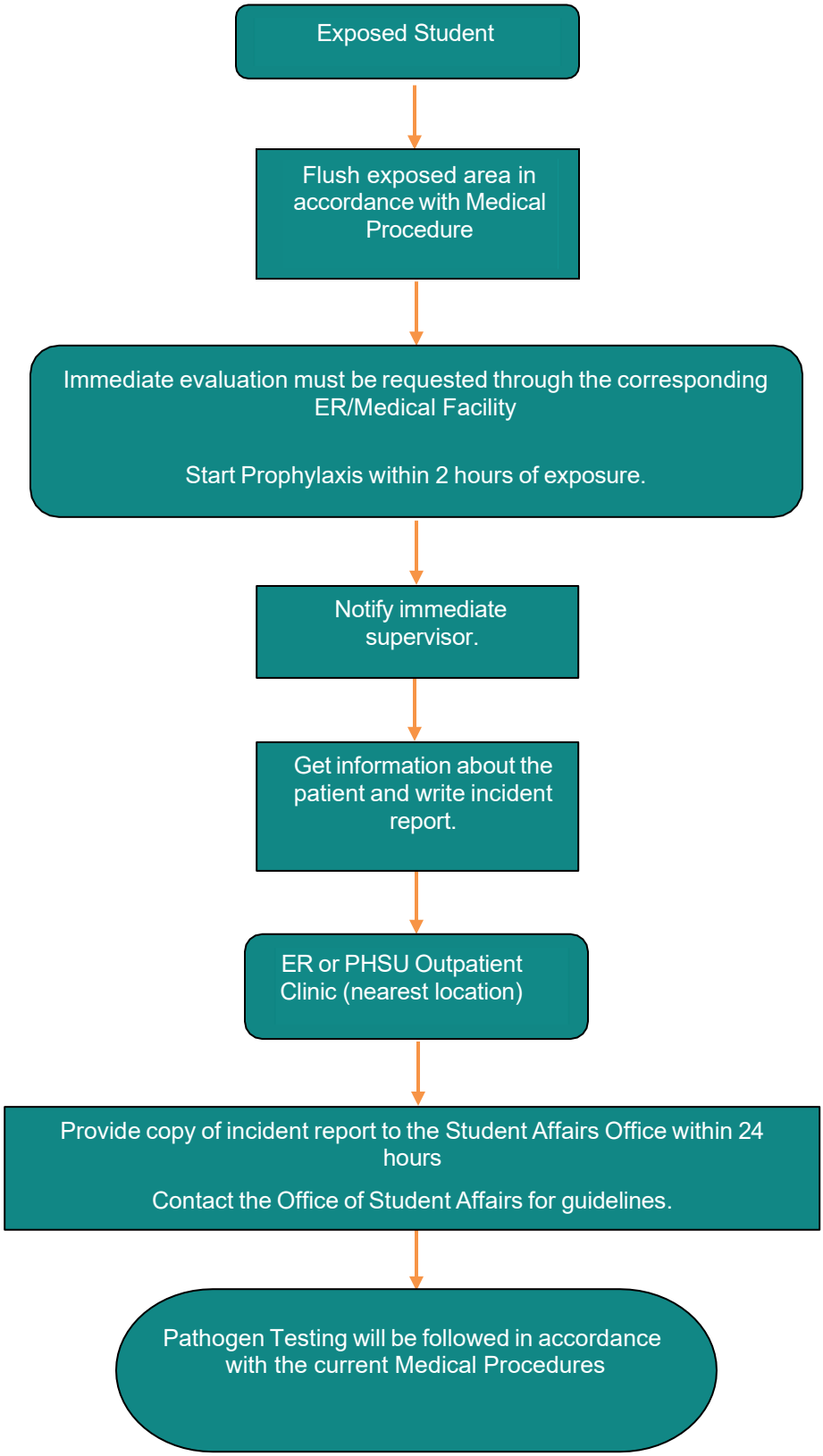
All HIV testing and information processing will adhere to applicable Federal law regarding the Confidentiality of HIV-related Information.

The student will continue regular clinical activities unless excused from patient contact by the health care provider. The student will be responsible for completing the time lost by coordinating with the Chair of the Department where the exposure occurred.

PHSU is committed to offering students ample information and education regarding methods of prevention of infections.

Ponce Health Sciences University
Procedures in Case of Needle Stick Injury

Ponce Health Sciences University
Procedures in Case of Needle Stick Injury



	CLASS RANKING POLICY	Implementation Date/ Effective Date	AY 2020-2021/ Class MD2021
		Last Reviewed/Update	September 30, 2019
		Approved by	SOM Executive Policy Committee
		Initially Approved	September 30, 2019

Purpose

The purpose of this policy is to establish clear guidelines on how to consider the medical student grades in remedial courses for calculating student ranking.

Policy

When a student is retaking a course that previously failed (repeating a course during summer or the regular academic year or part of the year) and passes the course, the numerical score used to determine class rank will be 70%, the minimum passing grade for the course. The Registrar's Office will use this procedure to rank the medical students. The Registrar's Office will provide the class rank to the PHSU officials, as requested, for the following purposes: Medical Student Performance Evaluation (MSPE), determination of academic graduation honors, Alpha-Omega-Alpha nomination, scholarships selection committees, or other legitimate purposes.

The student's academic transcript will record all the grades of the courses the students have taken for the first time and the grades of the courses the students have repeated, as reported by the professors to the Registrar, thus the minimum passing grade for the course will only be used for ranking purposes.

Medical students accepted on transfer from other institutions will not be ranked.

This policy will be effective for class MD2021, the academic year 2020- 2021.

This policy is tied to LCME Element 9.4	**CLINICAL PRACTICE EXAMINATION**	Implementation Date/ Effective Date	~2021
		Last Reviewed/Update	2021
		Approved by	MPCC
		Initially Approved	~2001

All medical students are required to take and pass a Clinical Practice Examination (CPX) to be given at the end of their first clinical academic year.

Written feedback concerning individual performance will be provided to each student.

Students not meeting the acceptable level of performance will receive guided learning to overcome areas of low performance during one or more of the fourth year required clinical rotations. A modified version of the exam will be given after the completion of the guided learning experience.

Satisfactory completion of this additional guided learning fulfills the requirement to pass this examination.

This policy is tied to LCME Element 12.5	**CONFLICT OF INTEREST IN THE STUDENT-FACULTY RELATIONSHIP**	Implementation Date/ Effective Date	~AY 2010-2011
		Last Reviewed/Update	March 18, 2024
		Approved by	--
		Initially Approved	~2009

Policy Statement

The health professionals and faculty/staff who provide psychiatric/psychological/personal counseling or other sensitive medical and healthcare services to University (PHSU) students will have no involvement in the academic, professional, or disciplinary evaluation, promotion, or dismissal of students receiving those services.

Purpose of Policy

It is essential to have a separation of roles to assure confidentiality in the provision of health and counseling services to PHSU students and the absence of conflict of interest in PHSU student evaluation, promotion, and dismissal.

Procedure

Members of the PHSU faculty assigned to evaluate students or to make decisions regarding the promotion or possible disciplinary action of students for whom they have provided psychiatric/psychological/personal counseling or other sensitive health services are obliged to report the conflict of interest to the block or clerkship director so that the student or faculty/staff can be reassigned to preclude any conflict of interest, real, perceived, or potential.

Students who have been assigned to a course, preclinical experience, or clinical clerkship rotation in which they would be evaluated by a member of the faculty or staff who has provided them with psychiatric/psychological counseling or other sensitive medical or health services, should report the real, perceived, or potential conflict of interest to the block or clerkship director as soon as they receive the assignment so that there will be no involvement of said faculty/staff in the academic evaluation or promotion of the student.

In the event that the student or faculty has not been re-assigned after reporting the conflict, the student should report the matter to the Vice President of Students Affairs for resolution. Similarly, if faculty or students are involved in a hearing for a possible adverse action related to academic, professionalism, or disciplinary matters, they should notify the Chairperson of the Student Promotion Committee or the Vice President of Students Affairs if one or more members of the hearing committee have provided a student with any psychiatric/psychological counseling or other sensitive medical or health services so that the faculty can be excused from the committee.

Evaluation instruments shall include a disclaimer in which faculty members attest that they have not had a professional relationship with students that could affect their judgment upon evaluation of the students.

This policy is tied to LCME Element 11.6	**COURSE OR CLERKSHIP FINAL GRADE/NARRATIVE ASSESSMENTS APPEAL POLICY**	Implementation Date/ Effective Date	January 8, 2020
		Last Reviewed/Update	December 17, 2019
		Approved by	SOM Executive and Policy Committee
		Initially Approved	December 17, 2019

Upon completion of a course or clerkship, a student may initiate an appeal process for a final grade or narrative assessment if he or she understands the grade was not assigned according to the evaluation criteria stated at the beginning of the course of the narrative assessment is inaccurate. According to the Change of Grade Policy in the Student Catalog 2017-2020, the student may initiate an informal conversation with the course/clerkship coordinator within 30 days (calendar) of receiving the final grade. This procedure should be the initial step the student should follow as part of the appeal process. During the conversation, the faculty member should incorporate a detailed explanation of the evaluation components and the student's performance in each of them.

If the student is not satisfied with the explanation, he or she may submit a written appeal to the Department Chairperson within one week after the meeting with the coordinator. The letter must include the main reason why the student is not satisfied with the final grade or narrative assessment. After receiving the student's written claim, the Department Chairperson will have up to one week to respond to the student's claim and include a copy to the Associate Dean of Medical Education.

The student will have one calendar week after receiving the chairperson's decision to appeal it in writing to the Associate Dean of Medical Education. After receiving the student appeal, the Associate Dean of Medical Education will have up to one calendar week to issue a written decision to the student and copy the Department Chairperson. The Associate Dean for Medical Education may appoint an ad-hoc committee to evaluate the appeal and submit recommendations. The decision made by the Associate Dean for Medical Education is final.

Effective January 8, 2020
Approved by SOM Executive and Policy Committee on December 17, 2019

This policy is tied to LCME Element 12.8	**EFFECTS OF INFECTIOUS AND/OR ENVIRONMENTAL DISEASE OR DISABILITY ON MEDICAL STUDENT LEARNING ACTIVITIES POLICY**	Implementation Date/ Effective Date	January 17, 2024
		Last Reviewed/Update	January 17, 2024
		Approved by	Executive and Policy Committee
		Initially Approved	January 17, 2024

Purpose

This policy is intended to describe the process when a student is identified with a condition under which there should be limited or no patient contact until the student is well. In the case of a chronic blood-borne illness, it describes the process that should be followed for the protection of the patient and student. It requires confidential reporting of certain conditions to the Office of the Vice-President for Student Affairs to allow for proper steps to be taken. It attempts to balance protection of the patient and the rights of the student to continue their education when possible.

This policy complements the infectious diseases and environmental hazards policy.

Scope

This policy is intended for all students enrolled at the PHSU-SOM.

Policy

If a medical student contracts an infectious and/or environmental disease or disability after matriculation, whether or not it is a direct result of their training, the medical school will assist the student in completing their MD requirements, as long as the student is able to still meet the technical standards as outlined in the technical standards policy. The School of Medicine will work with the affected students to provide reasonable accommodation where needed. Accommodation is not considered reasonable if it alters the fundamental nature or requirements of the educational program, imposes an undue hardship, or fails to eliminate or substantially reduce a direct threat to the health or safety of others. Students will be excused from all learning activities to address the potential risks or effects of such infections, environmental disease, or disability.

In certain situations, students with communicable diseases or conditions may not be allowed to have patient contact. This restriction may be necessary to protect the health and safety of both patients and coworkers. Individuals with the following medical conditions will not be allowed to have patient contact without a medical clearance:

1. Active chickenpox, measles, rubella, herpes zoster (shingles), hepatitis A, hepatitis B, hepatitis C, HIV/AIDS, tuberculosis
2. Oral herpes with draining lesions
3. Group A streptococcal disease (i.e., strep throat) until 24 hours of treatment received.
4. Diarrhea lasting over three days or accompanied by fever or bloody stools.
5. Draining or infected skin lesions
6. Conjunctivitis
7. Influenza
8. COVID-19
9. Others infectious diseases that may emerge and/or that are deemed contagious through respiratory, skin, and or oral-fecal contact.

Medical students infected with HCV, HBV, or HIV have a professional responsibility to report their serostatus to the Student Health Service Office Coordinator (School's Nurse) at the Office of the VP for Student Affairs. Confidentiality will be maintained pursuant to state and federal laws. Faculty who are providing modifications in the student's educational program will be informed that the individual has a blood-borne infectious disease but will not be notified of the particular disease. In accordance with the Americans with Disabilities Act (ADA) and the Rehabilitation Act of 1973, Section 504, no qualified student (see the Technical Standards Policy) will be denied access to, participation in, or the benefits of, any program or activity operated by the PHSU-SOM because of disability.

If a student anticipates or experiences physical or academic barriers based on the effects of infectious and/or environmental disease or disability on medical student learning activities, it is the responsibility of the student to make their disability status and subsequent need for accommodation known. The student should be directed to contact the Associate Dean for Students Affairs of the School of Medicine and the VP of Student Affairs. In that case the request for accommodation will be addressed by the institutional reasonable accommodation policy and the corresponding committee.

All registered medical students (including visiting students) are informed of this policy.

This policy is tied to LCME Element 12.8	**INFECTIOUS AND ENVIRONMENTAL HAZARDS EXPOSURE POLICY**	Implementation Date/ Effective Date	AY 2020-2021
		Last Reviewed/Update	December 17, 2019
		Approved by	SOM Executive and Policy Committee
		Initially Approved	December 17, 2019

Purpose

To establish procedures and strategies to reduce risks and complications associated with exposure to infectious and environmental hazards involving direct contact with contaminated tissues, fluids, surfaces, or objects, or to places with some risk of physical injury, for medical students participating in courses and clerkships. This policy will complement PHSU SOM current policy on Blood Borne Pathogen Exposure and will also assure compliance with LCME element 12.8 Student Exposure Policies/Procedures.

Policy

Prevention Education

During the orientation period, students must receive information on strategies to minimize exposure to infectious and environmental hazards during courses or laboratories on campus, community health fairs, clerkships, and other academic activities. They must be oriented to the process in place for removing used gloves, redirecting people needing health assistance in the field, and reporting incidents of exposure and financial responsibility in such cases, among other topics.

Before beginning third-year clerkships and during the Introduction to Clinical Practice course, students should receive training about personal equipment needed to protect themselves from potential contamination in a clinical workplace, including how to avoid exposure to infectious and environmental hazards. Occupational Safety and Health Administration training certification is required before beginning the clinical rotations.

During any clinical academic activity, students must also follow the Centers for Disease Control and Prevention, Standard Precautions for all Patient Care described below.

1. Perform hand hygiene.
2. Use personal protective equipment (PPE) whenever there is an expectation of exposure to infectious material.
3. Follow respiratory hygiene/cough etiquette principles.
4. Properly handle, clean, and disinfect patient care equipment and instruments/devices.
5. Handle textiles and laundry carefully
6. Follow safe injection practices.
7. Follow healthcare worker safety regulations including proper handling of needles and other sharps.
8. Is aware of the potential for transmission of infectious agents in patient-placement settings (isolation, single-patient room, etc.)

Exposure to Infectious and Environmental Hazards

Medical students are expected to be exposed to pathogens and environmental hazards during their medical education program-related activities in clinical and community sites. They should demonstrate knowledge about the recommended precautions to avoid contamination with pathogens in body fluids, mucous membranes, or contaminated materials. Students must also know the preventive measures to avoid suffering slips or falls in different academic sites and control measures to handle these incidents. Slips and falls are the top three work-related injuries keeping workers out of work and cuts, lacerations and punctures are the most common work-related injuries. Medical students are exposed to these types of injuries while visiting different settings.

Reporting Incidents with Infectious and Environmental Hazards

If medical students are exposed to infectious agents or in some way injured in a clinical or community setting, they must report the incident to their immediate supervisor and receive medical assistance as soon as possible as established in the PHSU Emergency Preparedness Plan. Students who were exposed via needlestick, percutaneous injury, mucous membrane, or contact with non-intact skin with a potentially contaminated fluid must follow the procedures in place as described in the PHSU SOM Blood-borne Pathogen Exposure Policy included in the Student Policies Manual. In case of an accidental spill of material considered hazardous faculty must notify the Safety Officer to determine the following steps.

Financial Responsibility

Students' medical insurance is responsible for all payments and co-payments related to incident care. The Office of Student Affairs will collaborate in the coordination of follow-up services and insurance as established in the PHSU SOM Blood-borne Pathogen Exposure Policy included in the Student Policies Manual.

References

Standard Precautions for all Patient Care. (2016). Centers for Disease Control and Prevention. Retrieved October 24, 2019, from https://www.cdc.gov/infectioncontrol/basics/standard-precautions.html

Workplace Injuries. (2019). National Safety Council

Approved by SOM Executive and Policy Committee on December 17, 2019

This policy tied to LCME Element 3.6	**LEARNING ENVIRONMENT AND STUDENT MISTREATMENT PREVENTIION POLICY**	Implementation Date/ Effective Date	AY 2001-2002
		Last Reviewed/Update	January 17, 2024
		Approved by	Executive and Policy Committee
		Initially Approved	~_2_0_0_1

Purpose

The Ponce Health Sciences University School of Medicine has a responsibility to foster in medical students, postgraduate trainees, faculty, and other staff the development of professional and collegial attitudes needed to provide caring and compassionate healthcare. To nurture these attitudes and promote an effective learning environment, an atmosphere of mutual respect and collegiality among teachers and students is essential. While such an environment is extremely important to the academic mission of the School of Medicine, the diversity of members of the academic community, combined with the intensity of interactions that occur in the health care setting, may lead to incidents of inappropriate behavior or mistreatment. The victims and perpetrators of such behavior might include students, pre-clinical and clinical faculty, administrators, fellows, residents, nurses, and other staff.

The purpose of this policy is to outline the PHSU-SOM commitment to a learning environment that is conducive to learning, describe the mistreatment of medical students, and list the steps for reporting mistreatment.

Policy

Preparation for a career in the healthcare profession demands the acquisition of a large fund of knowledge and a host of special skills. It also demands the strengthening of those virtues that are expected in the health provider/patient relationship and that sustain the health profession as a moral enterprise. This policy statement serves both as a pledge and as a reminder to teachers and learners that their conduct in fulfilling their mutual obligations is the medium through which the profession inculcates its ethical values.

PHSU-SOM strives to create a learning environment that is safe for patients and welcoming to learners, where all individuals involved in the healthcare endeavor are treated with respect and are made to feel that they belong.

A positive learning environment for medical students includes the following features:

1. Treat students with respect. Example behaviors include, but are not limited to, calling the student by name, calling attention to micro-aggressions as a bystander, and apologizing for lapses in professionalism.
2. Include students in the team. Example behaviors include, but are not limited to, giving meaningful work, and include in clinical discussions.
3. Help students learn. Example behaviors include, but are not limited to, giving real-time feedback, imparting clinical knowledge, and providing learning goals at the beginning of a session/rotation.

Mistreatment includes sexual harassment; discrimination based on race, color, gender, national origin, age, religion, creed, disability, veteran's status, sexual orientation, gender identity or gender expression; purposeful humiliation, verbal abuse, threats, or other forms of psychological mistreatment; and physical harassment, physical endangerment and/or physical harm.

The following are specific examples of types of mistreatments and are not inclusive

1. to speak insultingly or unjustifiably harshly to or about a person
2. to ask for sexual favors
3. to belittle or humiliate
4. to threaten with physical harm
5. to physically attack (e.g., hit, slap, kick)
6. to require performing personal services (e.g., shopping, babysitting)
7. to deliberately and repeatedly be excluded from reasonable learning experiences
   i. (faculty, residents, or staff)
8. retaliation for making an allegation of mistreatment
9. to make a person uncomfortable with respect to age, gender, race, religion, ethnicity, sexual orientation, appearance, or any other personal attribute

Communication and Training on Learning Environment and Student Mistreatment

Education of the medical school community concerning mistreatment serves several purposes. First, it promotes a positive environment for learning, characterized by attitudes of mutual respect and collegiality. Second, it informs people who believe they have been mistreated about the avenues for reporting incidents. Third, it enables a structure and process for responding to allegations of mistreatment.

Training on Policies and Procedures on Learning Environment and Mistreatment include:

1. Medical Students are made aware of policies and procedures at MS1 and MS2 orientations, ongoing class meetings, Introduction to Clinical Practice course before starting clinical phase rotations, and orientations for each core clinical clerkship (MS3 and MS4). Policies and procedures are accessible on each clinical course's learning management system site and the school's website, along with an online link through which a student can submit a report of mistreatment anonymously.
2. Residents are made aware of the policies and procedures through an annual module
    a. coordinated through the Office of the Associate Dean of Medical Education.
3. Clinical Department Chairs and Faculty are made aware of policies and procedures annually during meetings with the Dean.

Reporting Mistreatment

Any student, faculty member, or resident who sees or experiences incidents of mistreatment or unprofessional behavior in their learning environment can report the incidents to their immediate supervisor, an associate or assistant dean, the dean, or the vice president for Student Affairs (VPSA). The reporting person is considered the complainant in the case. These reports can be made by email, telephone, or direct conversation, and the person who witnesses or is subject to the alleged offense is invited to submit a written report. There is also an anonymous reporting form available on the website, the student services canvas shell, and the My Campus Portal.

Mistreatment Investigation Procedure

The VPSA investigates reports of students engaging in or being subjected to mistreatment. The allegation is evaluated and categorized as (1) Title IX related, (2) Unprofessional Behavior1, or (3) Mistreatment Complaint. The first two categories are referred to be addressed by the Title IX Coordinator or the Professionalism Committee, respectively. Cases categorized under mistreatment are managed by the Office of Student Affairs and follow the mistreatment complaint protocol, which includes notification of allegations to the involved parties, investigation process of allegations, the presentation of a resolution proposal, implementation of the resolution proposal, and monitoring of retaliatory actions after the implementation.

Direct supervisors such as residency program directors, clerkship directors, department chairs, or others may be contacted during the investigation of mistreatment incidents. If the reported behavior is against a direct supervisor, for example, a supervising faculty member, a new supervisor may be assigned to the student.

Once the VPSA's investigation is concluded, a description of the alleged incident will be kept in writing and will include a description of any necessary action plan. Cases deemed as dismissed due to being found without merit are kept in the student complaint log as part of the case documentation.

The action plan is presented to the complainant to ensure it is deemed sufficient to present as a resolution plan. If the complainant does not agree with the proposed resolution, then a three-member Investigation Committee, with faculty, administration, and student representation, is appointed by the VPSA to review the resolution proposal presented and offer further recommendations.

All parties involved will be informed of the committee's composition and will have the opportunity to present any disagreement regarding the membership of the committee and the reasons for the challenge. The Investigation Committee will review the information and recommend the VPSA for further action. The VPSA will inform the students of the recommendations of the Ad-Hoc Committee and revise determination, if applicable. The whole process should be addressed within three months.

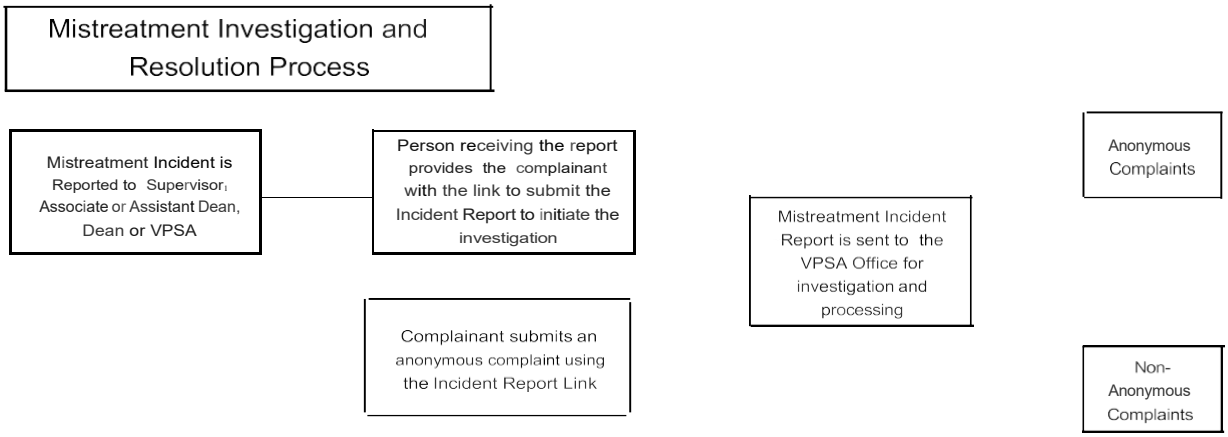
At that point, if the incident is deemed to be resolved, no further action will be taken.

After receiving the notification from the VPSA, if the student or complainant is unsatisfied with the outcome, the complainant has the right to appeal the decision in writing to the Vice President of Academic Affairs within seven working days. The VP of Academic Affairs will evaluate the appeal and the investigation report, and if the VP of Academic Affairs rejects the appeal, that decision is final. However, if the VP of Academic Affairs does not reject the appeal, an ad hoc committee (with members selected from the faculty, the student body, and/or the administration) is appointed to reevaluate all evidence. That committee has seven working days to submit its report to the VP of Academic Affairs—who will then make a final decision within 48 hours. The decision will be submitted to the parties in writing and considered final.

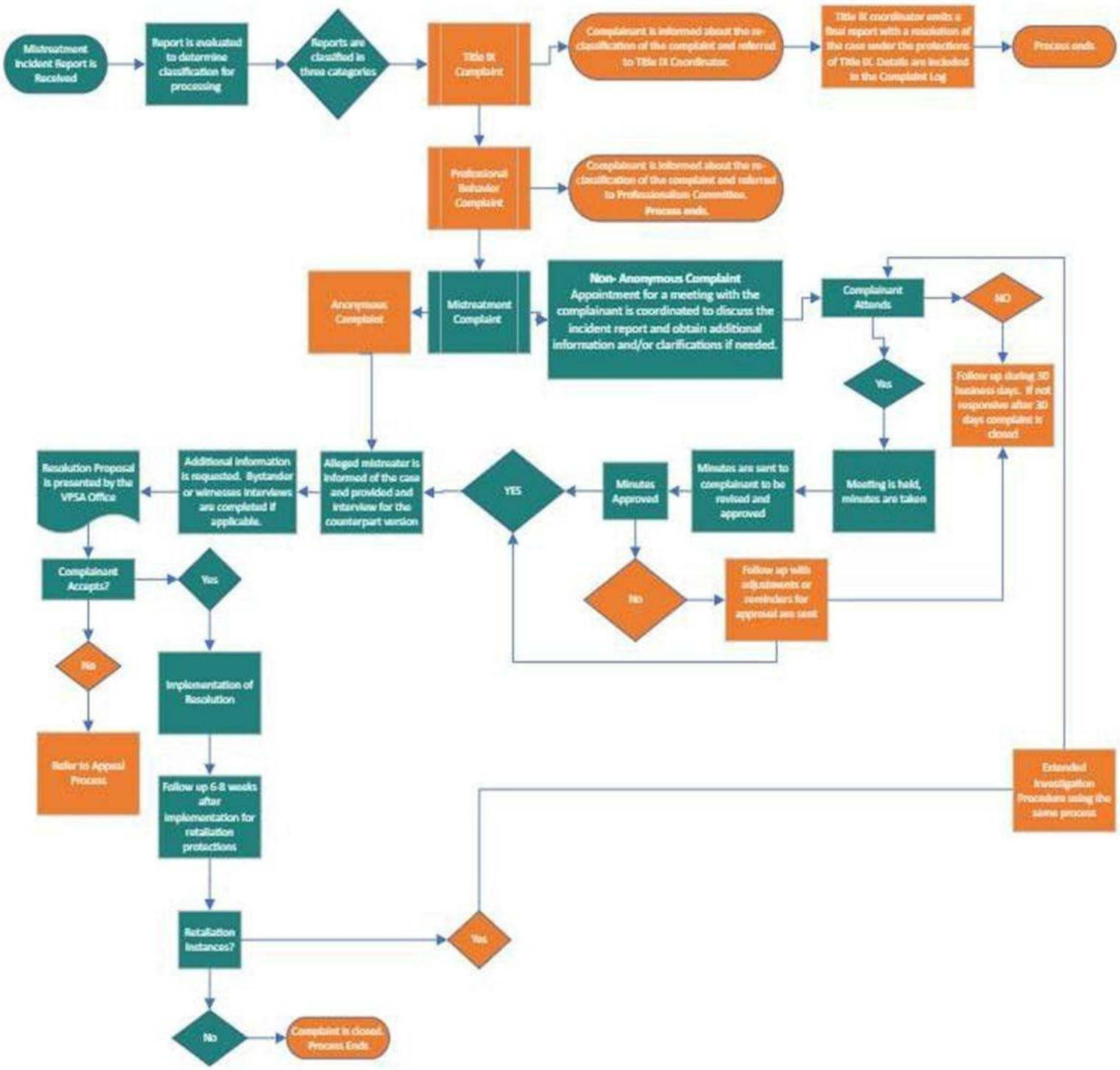
Once an incident is considered resolved and closed, the VPSA will make a follow-up on the incident during the next six or eight weeks to ensure that there has been no retribution as a consequence of the report.

1 For this policy, unprofessional behavior policy applies when a student undergoes mistreatment against another student.

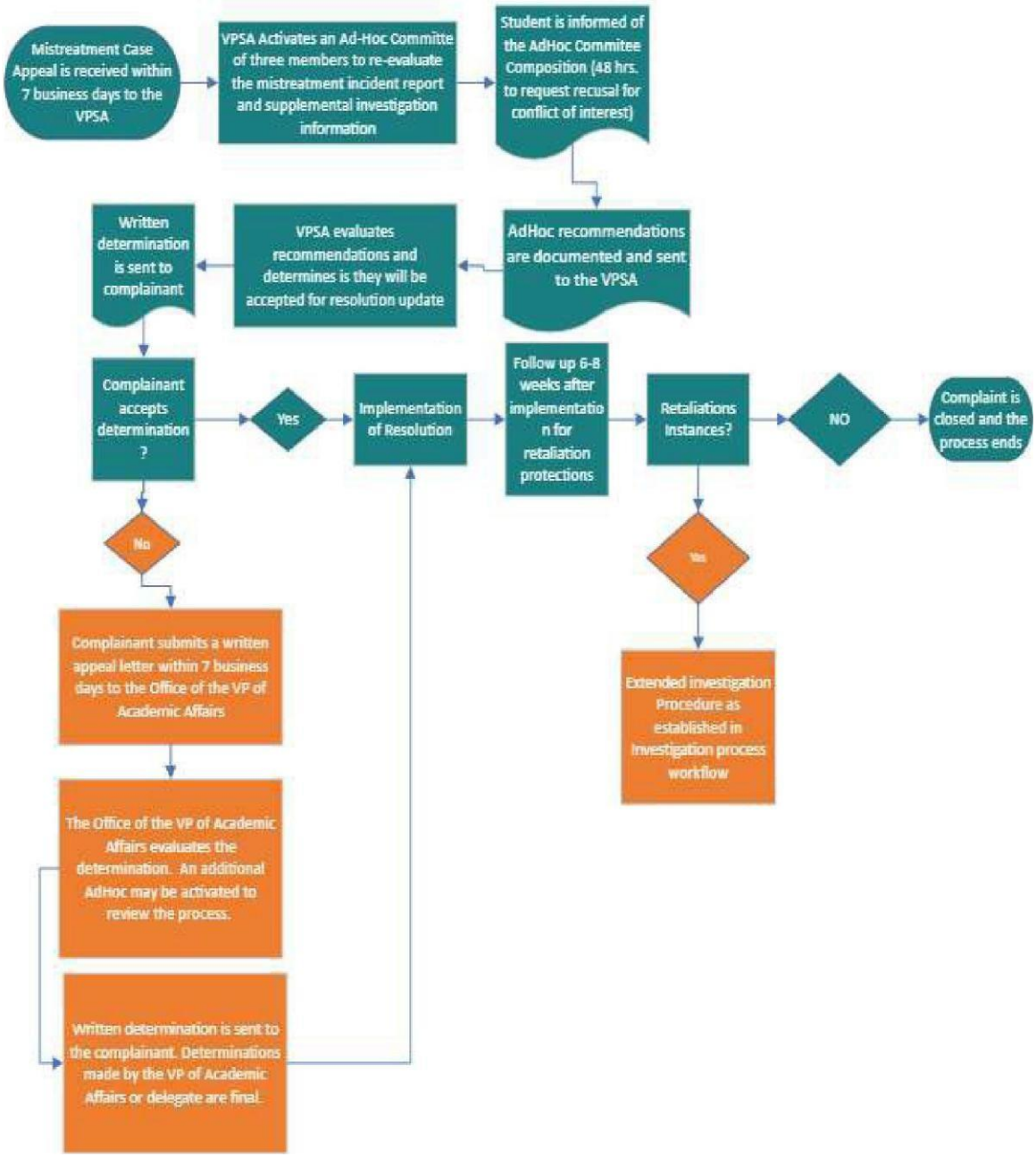
Process Flowchart



Flowchart- Procedure for Investigation



Appeal Process Flowchart



This policy tied to LCME Element 10.5	**MD Program Technical Standards**	Implementation Date/ Effective Date	3/8/2024
		Last Reviewed/Update	3/8/2024
		Approved by	SOM Executive and Policy Committee
		Initially Approved	SOM MD Admissions Committee

Purpose

The delineation of technical standards for the M.D. program in the Ponce Health Sciences University School of Medicine is intended to ensure graduates will be able to provide patient care across a broad spectrum of medical situations and settings.

Background

Ponce Health Sciences University (PHSU) intends for its MD program graduates to become highly skilled and competent doctors who can provide compassionate, culturally competent health care in accordance with its mission, who can satisfy PHSU-SOM academic and performance requirements, and who are eligible for graduate medical education and medical licensure. Medical students are expected to develop a robust medical knowledge base and clinical skills, with the ability to appropriately apply their knowledge and skills, effectively interpret information and contribute to patient-centered decisions. Furthermore, patient safety and wellbeing are major factors in establishing requirements involving the physical, cognitive, and emotional abilities of candidates for admission, promotion, and graduation.

PHSU is committed to fostering a diverse and accessible environment for its community by supporting medical students with access to the facilities, technology, and information needed for an equal opportunity to succeed in their medical education. PHSU-SOM provides reasonable accommodations to students on a nondiscriminatory basis consistent with legal requirements as outlined in the Americans with Disabilities Act (ADA) of 1990, the Americans with Disabilities Act Amendments Act (ADAAA) of 2008, and the Rehabilitation Act of 1973.

The essential abilities and characteristics described herein are also referred to as technical standards. They are described below in several broad categories including observation; communication; motor function; intellectual-conceptual, integrative, and quantitative abilities; and social and behavioral skills. These technical standards are based upon, and adhere to, the standards set forth by the Association of American Medical Colleges (AAMC).

All candidates accepted to the MD Program in the PHSU School of Medicine must be able to meet the school's technical standards. Candidates are asked to review the standards and sign a form certifying that they have read and understood them and can meet them with or without reasonable accommodation. Reasonable accommodation is available in accordance with PHSU's Reasonable Accommodation Policy. However, candidates should be able to perform in a reasonably independent manner all skill levels described in the technical standards, which PHSU holds as mandatory for the safe and effective practice of medicine.

The term "candidates" refers to individuals who are seeking admission to the MD program at Ponce Health Sciences University School of Medicine as well as current students who are candidates for retention, promotion, or graduation.

Policy

The following abilities and characteristics, defined as "technical standards", are requirements for admission, retention, promotion, and graduation. These technical standards were reviewed and approved by the School of Medicine Admissions Committee and the Executive and Policy Committee:

1. Observation: Candidates must be able to obtain information from demonstrations and participate in experiments in the basic sciences, including but not limited to, dissection of cadavers, examination of specimens in anatomy, pathology, microbiology, and neuroanatomy laboratories. Candidates must be able to accurately acquire information from patients and perform a complete physical examination to develop an appropriate diagnostic or treatment plan encompassing their relevant health, behavioral, and medical information. They must be able to observe a patient accurately at a distance and close at hand. These skills require the use of vision, hearing, and touch or the functional equivalent.
2. Communication: A candidate must be able to communicate with patients to elicit information, detect changes in mood and activity, and establish a therapeutic relationship.
   Candidate should be able to communicate effectively and sensitively with patients, their families, colleagues, faculty, staff, members of the healthcare team, and all other individuals with whom they come into contact, both in person and in writing form, in English for St. Louis Campus candidates, and English and Spanish for Ponce Main Campus candidates. Candidates must be able to record information clearly and accurately and accurately interpret verbal and nonverbal communication.
3. Motor: A candidate should be able to execute reasonable motor movements required to provide general care and emergency treatment to patients and respond to emergency situations in a timely manner. Candidates must, after a reasonable period of training, possess the capacity to perform physical examinations and diagnostic maneuvers. They must be able to respond to clinical situations in a timely manner and provide general and emergency care. Some examples of emergency treatment are cardiopulmonary resuscitation, the administration of intravenous medication, the opening of obstructed airways, and psychiatric emergencies, among others. Candidates must be able to carry out basic laboratory techniques and to elicit information from patients by palpation, auscultation, percussion, and other diagnostic maneuvers. They must

perform anatomical dissections; must be able to use a microscope; be able to do basic laboratory tests, carry out diagnostic procedures, and interpret EKG's and X-rays. Candidates must meet safety standards appropriate for healthcare settings and adhere to universal precautions procedures. These actions require coordination of both gross and fine muscular movements, equilibrium, and some physical mobility.

4. Intellectual-Conceptual, Integrative, and Quantitative Abilities: Candidates must be able to effectively interpret, assimilate, and understand the detailed and complex information required to function within the medical curriculum, including but not limited to: the ability to comprehend three-dimensional relationships and to understand and draw conclusions about the spatial relationships of structures and logical sequential relationships among events. Candidates are expected to possess the abilities to measure, memorize, calculate, reason, analyze and synthesize, and transmit information both in person and via remote technology. They must be able to correctly interpret diagnostic representations of patients' physiologic data and engage with detailed and complex information presented through both the didactic curriculum and clinical coursework, as well as formulate and test hypotheses that enable effective and timely problem solving in diagnosis and treatment of patients in a variety of clinical and health care system settings.
5. Behavioral and Social Attributes: Candidates must possess and demonstrate the physical and emotional stability and maturity required for full utilization of their intellectual abilities, the exercise of good judgment, and the prompt completion of all responsibilities inherent to their studies and to the diagnosis and care of patients. Candidates are expected to develop mature, sensitive, and effective relationships with patients and to interact with patients and their families, health care personnel, colleagues, faculty, staff, and all other individuals with whom they come in contact in a courteous, professional, and respectful manner. Candidates must have the physical and emotional stamina to be able to adapt to changing environments, to display flexibility, to tolerate taxing workloads, to function in a competent and professional manner under highly stressful situations and learn to function with the uncertainties inherent to clinical problems of many different patients. Compassion, integrity, service orientation, interpersonal skills, ethical responsibility, and motivation are personal and professional attributes that are assessed during the admission process and must be kept and/or improved during the educational process. Candidates should understand and function within the legal and ethical aspects of the practice of medicine and maintain and display ethical and moral behaviors commensurate with the role of a physician in all interactions with patients, faculty, staff, students, and the public. Interest and motivation throughout the educational processes are expected of all candidates.

Procedures

1. All candidates accepted to the MD Program in the PHSU School of Medicine must be
    a. able to meet the school's technical standards. All candidates receive a copy of the Technical Standards Policy with their acceptance and enrollment documentation. Candidates are asked to review the standards and sign a form certifying that they have read and understood them and can meet them with or without reasonable accommodation. Candidates are also oriented about the Technical Standards during orientation and are required to sign the Technical Standards Acknowledgement prior to enrollment.
2. Prior to the enrollment period, any candidate who may require reasonable
    a. accommodation to meet the technical standards must contact PHSU's designated coordinator, Grace M. Morales, LRC, Rehabilitation Counselor, gracemorales@psm.edu to be confidentially oriented and evaluated so the appropriate accommodation may be provided, in accordance with the school's Reasonable Accommodation Policy. The role of the designated coordinator facilitates compliance with the Americans with Disabilities Act of 1990 and all its amendments.
    b. of 2008 which became effective January 1, 2009. Also, with Section 504 of the Rehabilitation Act of 1973.
3. All candidates are required to re-certify and sign the Technical Standards Acknowledgement prior to the start of each academic year and upon returning from any leave of absence.
4. Reasonable accommodation to meet the technical standards are provided in accordance with PHSU's Reasonable Accommodation Policy. Candidates are responsible for requesting re-evaluation and approval of reasonable accommodations prior to medical school enrollment, as well as prior to the start of clinical years (3 and 4) to ensure that partner hospitals and clinical sites are equipped to meet the accommodations required by the candidate. PHSU is not
    a. responsible for the Reasonable Accommodation Policies established by each of the affiliated
    b. hospitals.
5. Once matriculated, if a candidate cannot meet these technical standards with approved reasonable accommodation, the student may not be able to meet the requirements of a medical degree successfully.

Approved by SOM Executive and Policy Committee on March 2024
Appendix: MD Program Technical Standards Attestation Form

Rev 03/2024

This policy tied to LCME Element 6.5	**MEDICAL PROGRAM ELECTIVES POLICY**	Implementation Date/ Effective Date	July 1st 2016
		Last Reviewed/Update	July 19, 2023
		Approved by	MPCC
		Initially Approved	November 30, 2015

The medical program curriculum of Ponce Health Sciences University School of Medicine required fourth-year medical students to complete five elective courses or clerkships, and one selective, of four weeks' duration each. The electives give the student the opportunity to gain exposure to careers of interest and widen the students' career options.

1. At the third-year mid-clerkship feedback session in each clerkship, career counseling must be offered to help students be aware of the diversity of career options and the electives offered in each clinical department.
2. The PHSU-SOM Electives Manual must contain a description of all elective clerkships and courses offered under the auspices of PHSU-SOM departments at the affiliated clinical sites or developed by the Basic Sciences Department. The Manual must be available to the student when selecting his/her electives.
3. Other elective preceptorships may be authorized by directors of the departments, if the student provides clear objectives for the elective and the CV and specialty board certification of the elective supervising physician, for evaluation. Students are not allowed to do any required or elective rotation with a family member. (See Conflict of Interest in Student-Faculty Relationship Policy)
4. Students must be oriented about the resources available to apply for electives at other LCME-accredited institutions (AAMC Visiting Student Application Service (VSAS) website).
5. Students are not allowed to do more than one elective rotation under the supervision of the same physician unless the student presents a rationale such as ongoing research participation.
6. Students are encouraged to use the six elective periods in the 4th year to gain experience in more than one specialty which allows them to diversify their options and explore other fields in addition to their chosen specialty.
7. Credit for a past experience (research, clinic participation, etc.) is not allowed.
8. Students must complete a 4-week selective course in one of the following primary care specialties: Family Medicine, Internal Medicine, Pediatrics, or Ob-Gyn.

This policy tied to LCME Elements 11.4 and 11.6	**MEDICAL STUDENT EVALUATION PERFORMANCE (MSPE) POLICY STATEMENT**	Implementation Date/ Effective Date	April 19, 2019
		Last Reviewed/Update	March 18, 2024
		Approved by	SOM Executive and Policy Committee
		Initially Approved	November 20, 2018

The Medical Student Performance Evaluation (MSPE) is a document written by a medical school officer to provide an assessment of a student's academic performance and professional attributes in medical school. Graduate medical education program directors use this document as a component of their evaluation of candidates during the residency application process.

Purpose of Policy

This policy was developed in compliance with LCME Standard 11: elements 11.4 and 11.6.

11.4 Provision of MSPE:
A medical school provides a Medical Student Performance Evaluation required for the residency application of a medical student to align with the AAMC/ERAS residency application timeline.

11.6 Student Access to Educational Records:
A medical school has policies and procedures in place that permit a medical student to review and to challenge his or her educational records, including the Medical Student Performance Evaluation, if he or she considers the information contained therein to be inaccurate, misleading, or inappropriate.

Procedure

1. Development of the MSPE is the responsibility of the Office of the Dean of Medicine. The Associate Dean for Student Affairs (ADSA) is the individual responsible for authoring the document.
2. Ponce Health Sciences University-School of Medicine (PHSU-SOM) will follow the structure for the MSPE described in the AAMC publication, “Recommendations for Revising the Medical Student Performance Evaluation (MSPE)”.
3. During their third year of medical school and no later than summer before their senior year each student is scheduled for an individual meeting with the ADSA.
4. Beginning in the month of May before the student’s senior year, the ADSA begins to prepare an initial MSPE draft for each graduating student that includes identifying information, and available information of the student’s academic history, and clerkship evaluation summaries.
5. Each student will receive an MSPE Worksheet with instructions to provide information about undergraduate education, personal preference of addressing their name, and noteworthy characteristics.

6. Based on the documents provided and discussion during the MSPE interview, the ADSA will develop the final version of the MSPE, including final information of the students' academic records and clinical rotation evaluations.
7. After the class rank is determined in August by the Registrar's Office, the ADSA will add this information to the MSPE.
8. Each student will have the opportunity to review the final version of the MSPE for errors before the ADSA signs the document.
9. Students will be required to submit a written release before the ADSA uploads the document to the Electronic Residency Application Service (ERAS) system. If, after reviewing the MSPE and meeting the ADSA, a student is not satisfied with the final version of his MSPE, he may ask the Associate Dean of Medical Education or the Dean of Medicine to review the document and write the final version.
10. A student may need a copy of the MSPE to apply to a residency program that has decided to process its applications outside of the ERAS system. In this case, a copy of the MSPE will be printed and sent by regular mail to the residency program.
11. If a student wants to have a copy of his or her MSPE, a printed copy of the document will be provided to the student.
12. In the event that either the student or the ADSA believes there is a conflict of interest in the development of the MSPE, the Associate Dean for Medical Education or the Dean of Medicine will be the author of the MSPE.
13. A copy of the MSPE will become part of the Academic Record of the student upon graduation from PHSU.
14. A graduate of PHSU-SOM may request their MSPE if he or she needs to apply to a residency program for whatever reason after graduation. In that case updates will be made to the MSPE in order to include grades in medical school that were not yet available at the time of writing the original MSPE.

This policy tied to LCME Element 8.8	**ATTENDANCE/ PARTICIPATION POLICY**	Implementation Date/ Effective Date	June 15, 2026
		Last Reviewed/Update	May 18, 2026
		Approved by	MPCC
		Initially Approved	May 5, 2023

REASON FOR POLICY

Participation in the curriculum is vital for training, assessment, and patient care. Participation and punctuality are expected and considered critical components of a student's educational experience and commitment to professionalism.

POLICY

Per the PSHU Institutional Attendance Policy, Ponce Health Sciences University does not require mandatory attendance to class sessions. Attendance is defined as participation in academic activities registered by the instructor.

No-Show Policy (as per policy PHSU-ADM-20230531-3)

No Shows (NS) are students with no academic activity certified for the first two weeks of a course (included in the Census for No Show determination).

The faculty members will enter the session attendance module in My Campus only during the first two weeks of each term. The Registrar's Office will generate a report on the date established as the No Show Determination Date. Students who do not comply with attendance during the first two class sessions will be processed as No Shows.

Administrative Withdrawal (as per policy PHSU-ADM-20230531-2)

An Administrative Withdrawal (AW) may occur when a student is not in compliance with at least 50 % of the course criteria, as specified in the syllabus, or when students do not comply with the fees and payment arrangements made upon enrollment. Administrative withdrawals due to non-compliance with at least 50 % of the course criteria will be granted up to the last day for total/partial withdrawal as stipulated in the Academic Calendar.

The lead faculty member of the course, the Course Director in the Ponce Campus, and the Assistant Course Director in the STL Campus must complete the administrative form and submit it to the Registrar's office. The faculty member must notify the student about the Administrative Withdrawal.

Incomplete Policy (as per Policy PHSU-ADM-20230531-4)

Students with satisfactory work in a course but who, due to extenuating circumstances, cannot complete the required coursework during the session may, as approved by the professor, receive a grade of "I" (Incomplete) together with a provisional letter grade or score indicating the level of performance on the work completed to date and the work due to be completed.

Acceptable reasons to be considered by the professor for awarding grades of "I" include, but are not limited to, serious illness, accidents or hospitalization of the student, their dependents, spouse or significant other, natural disasters, military mobilization, or a court-ordered appearance. Any other hardship circumstances must be approved by the Vice President of Academic Affairs or the Associate Dean for Academic Affairs in the St. Louis Campus.

The Incomplete grade reported may be assigned under the following circumstances:

- The student has a pending score report (e.g., USMLE (United States Medical Licensing Examination) Step 1 as a requirement of SKD 091).
- The student needs to repeat a standardized written exam or a practical exam (e.g., NBME's examinations, OSCE's).
- The student does not complete the required activities log in the schools/program digital platform (e.g., patient log in Med Hub).
- External practicum/internship sites are delayed in the submission of students' feedback or evaluation reports to the schools or programs

Excused Absence Policy (as per Excused Absence Policy for Academic Activities)

The Office of Academic Affairs will determine if a student will be excused.

Students may be eligible for an excused absence if they can provide proper evidence for the following circumstances:

- Serious accidents, emergencies, or illnesses make in-person attendance impossible. PHSU reserves the right to consider any other emergency that is not listed here.
- Acute illness (e.g., viruses, infections, or injuries that require urgent care)
- Attend preventive care appointments (e.g., regular checkups and screenings, medical or dental, vaccination, and counseling, among others).
- Medical procedures (scheduled or emergency)
- Treatments for pre-existing medical conditions
- Accidents, death, or hospitalization of the student's next of kin, like their dependents, spouse, parents, or significant other
- Natural disasters or consequences affecting the living environment outside of the officially declared emergencies

- Military obligations
- Participation in extracurricular activities (previously approved)
- Court or government-ordered appearances
- Religious observances

Students are responsible for all work missed during their excused absence. Schools and Programs will determine alternative remediation methods (e.g., video conferences, assignments, and others at their discretion). Students must notify the corresponding course faculty about their absence.

Students are requested to provide all necessary evidence to be considered for an academic excuse for situations that can be anticipated in advance (e.g., military obligations, court or government-ordered appearances, medical procedures, and preventive care appointments). In the case of preventive care appointments, these should be coordinated whenever possible on dates that do not conflict with exams, laboratories, standardized patient exercises, simulations, clinical activities, or other academic activities requiring physical presence.

In the case of illness, emergency, or hospitalization, the student must submit a medical certificate or emergency room paperwork if the latter is an extraordinary situation. In the case of the death of a student's next of kin, like a dependent, spouse, parents, or significant other, a death certificate or funeral letter must be submitted. If the hospitalization involves a next of kin, like a dependent, spouse, parents, or significant other, the student must submit the same documents as requested for their case. If signs and symptoms of an illness require quarantine, the student must adhere to quarantine recommendations until the disease is confirmed, and the guidelines are met. The Student Health Service Coordinator will execute and guide the quarantine order through the Office of Student Affairs.

For weather conditions (e.g., storm, snow, heavy rain), technology issues (e.g., iClicker problems), or religious observances affecting student participation, students must communicate directly with the School or Program Director/Coordinator. Schools and Programs will follow the PHSU Attendance Policy and all its sections accordingly.

Evidence supporting the request for an academic excuse must be submitted to the Office for Academic Affairs within 48-72 hours of the request. Excuses will be granted for up to five (5) working days, regardless of the person. No more than five (5) excused absences will be given in one term. However, if an excruciating situation requires an excuse above five (5) working days (e.g., 6 to 10 days), a remediation plan developed by the School or Program will be required and approved in a meeting with the Office of Academic Affairs.

Excuses for Participation in Conferences (as per Excuses for Participation of Students in Extracurricular Activities institutional policy)

Ponce Health Sciences University (PHSU) supports students' participation in activities outside their educational schools and programs that contribute to their professional development. These activities include attending conventions or specialty meetings, continuing education activities, professional organization meetings, community activities, and voluntary service activities. However, students must be aware that their academic performance remains a priority, and they are expected to meet all the academic requirements of their curriculum. Students must maintain good academic standing to be eligible to request participation in extracurricular activities. These activities require authorization from the Office of Academic Affairs and the corresponding School or Program Department Director/Coordinator

Procedures to be followed

- Any student interested in participating in an extracurricular activity when the student has scheduled academic activities must request written authorization from the School or Program Department Director/Coordinator by submitting an "Application to Participate in Extracurricular Activities during Academic Periods"
- The request must explain the extracurricular activity, its purpose, expected time commitment, and potential student development benefits. The authorization must be requested at least two weeks before initiating the extracurricular activity.
- Students must provide all the evidence available to support the request. The student must abide by the determination of the School or Program Department Director/Coordinator and will accept responsibility for the material covered and learning activities missed during the absence period.
- Students will be responsible for providing a plan to cover missed activities while participating in the requested extracurricular activity. It will be the responsibility of the School or Program Department Director/Coordinator to evaluate the paperwork submitted by the student and make the recommendation to the VP for Academic Affairs (Ponce/San Juan) or the Assistant VP for Academic Affairs (St. Louis Branch Campus), who will make the final authorization.
- Documents submitted by students must be complete and have all signatures before requesting approval from the Office of Academic Affairs.

Authorization from the Office of Academic Affairs to attend extracurricular activities does not obligate a school or program to make special arrangements or to organize additional activities to substitute for the missed period by excused students. Authorized absences to participate in extracurricular activities will be counted as "excused absences" for the **Excused Absence Policy for Academic Activities**. Also, it will follow the **PHSU Attendance** policy. Attendance is defined as participation in academic activities registered by the faculty. Participation in the courses will be measured based on the involvement in the academic activities included in the syllabus as part of the course requirements.

Preclinical Years (Phase 1)

In the PSHU SOM during preclinical years, the course directors will list all course activities in the syllabus, which will be available on Canvas. Active participation in all course activities is encouraged. The course director may require students to engage in in-person activities. It is at the course director's discretion to award points for participation in in-class session activities.

Some of these activities, listed in the syllabus, may require a signature to demonstrate in-person participation. Students are required to sign only for themselves in these activities, and any violations will be reported to Student Affairs or the Promotions Committee. Such activities include, but are not limited to, exams, presentations, small-group activities, problem-based learning, team-teaching activities, think/pair/share, laboratories, question-and-answer sessions, and any other teaching activity in which student participation may be required.

All courses are encouraged to record video lectures and use in-class sessions for activities that require the application of course content. These formative activities may ensure that each medical student is assessed and provided with formative feedback early enough during each required course to allow sufficient time for remediation. If the course has recorded lectures, participation in in-person lectures should not be required, nor should participation points be given.

Clinical Years (Phase 2)

Participation in all the clerkship academic and clinical activities is required in person. Each clinical clerkship will determine whether points for participation will be awarded.

Excused absences for any prolonged period that the student cannot make up during the rotation time may result in an incomplete grade, and the student will be required to make up for missed clinical activities. The remediation plan may vary according to individual circumstances.

The student must notify the course coordinator if they will be absent from the inpatient or outpatient rotation. Asking another student to inform the team or the outpatient site is unacceptable and will be considered unprofessional behavior.

Absence due to attending a conference:

During all clerkships, advanced permission to participate in research presentations or conferences must be obtained from the clerkship director and the VP for Academic Affairs at least two weeks in advance. (See institutional policy above.) Proof of attendance will be required.

Absence due to medical residency interviews

During all clerkships, students must obtain advanced permission from the clerkship director to attend a residency interview. The student is expected to inform the attending physician of the interview dates

so that remediation activities can be scheduled accordingly. In the event of scheduling difficulties, the clerkship director will identify alternatives for remediation. Students should not exceed 5 days per clerkship and electives for interviews.

For no reason should the clerkship director request or accept any information regarding the medical services of a student. The student should be referred to the Vice President for Academic Affairs. (See institutional policy above.) Students exceeding five excused absences per semester will be referred for evaluation by the Vice President for Academic Affairs.

Students with extended absences due to illness or other circumstances may require remediation of their clerkship, a leave of absence, or adjustments to their regular academic schedule. They will be referred to the Vice President for Academic Affairs.

This policy is tied to LCME Element 9.4	**MINIMUM PASSING SCORES IN CLINICAL SUBJECT EXAMINATIONS**	Implementation Date/ Effective Date:	August 1st, 2020
		Last Reviewed/Update	July 20, 2023
		Approved by	MPCC
		Initially Approved	July 28, 2020

As recommended by the Clinical Curriculum Subcommittee and approved by the Medicine Program Curriculum Committee on July 28, 2020, a minimum score is required in the National Board of Medical Examiners clinical subject examinations (Shelf) to pass the third-year clerkships. As determined by MPCC on December 15, 2014, the clinical shelf will continue to account for 30% of the final grade for third-year clerkships.

Each academic department will determine the required minimum score for each clerkship shelf based on PHSU students' performance in previous years and NBME guidelines for that discipline.

If the student does not obtain the minimum passing score the first time taking the shelf, an Incomplete (I) grade will be reported to the Registrar's Office. The student will be offered a second opportunity to take and pass the shelf with the same minimum score. If the student does not obtain the minimum passing score the second time, the student fails the clerkship. If the student passes the shelf on the second attempt, the first and second attempts will be averaged to calculate the final grade.

Students who fail the NBME shelf examinations in the first 8 weeks of the semester must take the make-up shelf examinations at week ten of the academic calendar of each semester. Those who fail after the first 8 weeks of the semester must take the make-up shelf examinations upon return from the winter holidays for the fall courses and after completing the spring semester.

Academic departments must inform the students of the minimum passing scores on the shelf required to pass the clerkships, and how their final grades will be calculated if they need to repeat the clerkships.

Issued July 28, 2020
Revised June 12, 2026

	OPT-OUT MASTER'S DEGREE FOR MD STUDENTS (This policy applies to students in the entering class of 2025 and all preceding classes.)	Implementation Date/ Effective Date	January 8, 2019
		Last Reviewed/Update	October 30, 2018
		Approved by	SOM Executive and Policy Committee
		Initially Approved	October 30, 2018

PHSU students enrolled in the medical education program who cannot continue or complete medical studies and comply with the requirements of the MSMS program could apply to the Registrar's Office for the Master of Science in Medical Sciences degree. The following are the requirements for MD students to qualify for the MSMS degree:

Requirements

1. Time Frame for completion of the Academic Program

A medical student will be allowed a maximum of three years after the satisfactory completion of the last course or clerkship of the medical education program to apply for the MSMS degree.

The total number of credits for completion of the MSMS degree includes the courses of the first year of the medical program; the students will have a maximum time frame of two years to pass all first-year medical courses in order to be eligible for the MSMS opt-out option.

2. Completion of Program Requirements

a. Course Requirement

Students must pass all courses in the first year of the medical program within the established time frame.

b. Comprehensive Qualifying Examination Requirement (CQX)

A CQX or USMLE Step 1 must be passed to qualify for the MSMS degree. The medical student who has not passed the USMLE Step 1 should apply for the MSMS degree to be eligible to take the CQX. The students will be allowed a maximum of three attempts to take and pass one of these examinations. The students will have one year after taking the last medical course or clerkship to complete this requirement.

c. Professional Behavior Requirement

The students must conduct themselves in accordance with the norms for professional conduct set forth by the Ponce Health Sciences University and the corresponding accreditation agencies.

	OPT-OUT MASTER'S DEGREE FOR MD STUDENTS **(Applies to students entered 2026 and after)**	Implementation Date/ Effective Date	January 8, 2019
		Last Reviewed/Update	**June 11, 2026**
		Approved by	SOM Executive and Policy Committee
		Initially Approved	October 30, 2018

Purpose and Scope

The purpose of this policy is to establish clear guidelines for PHSU medical students who are unable to continue or complete their medical education, whether due to dismissal or voluntary withdrawal in good academic standing, and who may qualify for the Master of Science (MS) in Medical Sciences (MSMS) degree.

This policy applies to:

- All students enrolled in the Doctor of Medicine (MD) program at PHSU.
- Academic and administrative offices involved in student progression, including the Office of the Associate Dean for Medical Education, Medical Sciences, the Registrar's Office, and Student Affairs.

PHSU is committed to supporting student success by providing an academic pathway for MD students who cannot complete the program but demonstrate satisfactory progress in the foundational sciences. Eligible students may apply to reclassify into the MSMS Program and be awarded the MSMS degree upon successful submission of the requirements listed in this policy.

Eligibility Pathways:

1. Dismissal from the Academic Program
   Students who are dismissed from the MD program may qualify to apply for the MSMS degree. The dismissal letter will include a disclosure of the student's opportunity to apply for the MSMS degree.
   The Associate Dean for Medical Sciences will be notified of the student's eligibility. The Registrar's Office will inform the student of the applicable fee required to request reclassification into the MSMS program.

2. Voluntary Withdrawal in Good Academic Standing
   Students in good academic standing who choose to voluntarily withdraw from the MD program may also qualify to apply for the MSMS degree, provided they have satisfied all applicable MSMS requirements.
   Students considering this option are often referred by Student Counseling Services, Student Success, or other academic support personnel, who may provide guidance regarding eligibility and the degree application process. The Associate Dean for Medical Sciences will be notified of the student's eligibility. The Registrar's Office will inform the student of the applicable fee required

to request reclassification into the MSMS program.

Requirements for MD students to Quality for the MSMS degree

1. **Time Frame for completion of the Academic Program**

A medical student will be allowed a maximum of three (3) years after the satisfactory completion of the last course or clerkship of the medical education program to apply for the MSMS degree.

The total number of credits for completion of the MSMS degree includes the courses of the first two years of the medical program. Students must complete and pass the pre-clinical courses within a maximum of two (2) years to remain eligible for the MSMS opt-out option.

Completion of Program Requirements

a. Course Requirement
   Students must pass all courses in the preclinical years of the medical program within the established
   time frame.
b. Comprehensive Qualifying Examination Requirement (CQX)
   A CQX or USMLE Step 1 must be passed to qualify for the MSMS degree. The medical student who has not passed the USMLE Step 1 should apply for the MSMS degree to be eligible to take the CQX. The students will be allowed a maximum of three attempts to take and pass one of these examinations.
   The students will have one (1) year after taking the last medical course or clerkship to complete this requirement.
c. Professional Behavior Requirement
   The students must conduct themselves in accordance with the norms for professional conduct set forth by the Ponce Health Sciences University and the corresponding accreditation agencies.

Effective January 8, 2019
Approved by SOM Executive and Policy Committee on October 30, 2018

This policy is tied to LCME Element 9.3	**PATIENT AND STUDENT SAFETY, CLINICAL SUPERVISION, AND DELEGATION OF RESPONSIBILITIES AT CLINICAL TEACHING SITES**	Implementation Date/ Effective Date	AY 2015-2016
		Last Reviewed/Update	November 7, 2022
		Approved by	MPCC
		Initially Approved	April 11, 2015

The Ponce Health Sciences University School of Medicine and its affiliated sites are committed to the well-being of medical students and the welfare and safety of patients.

To ensure that medical students are appropriately supervised during required clinical clerkships and other required clinical experiences and to safeguard student and patient safety:

1. All patient care will be supervised by qualified faculty members.
2. The level of responsibility delegated to the student must be appropriate to his or her level of training according to each clerkship or elective learning objectives.
3. Department and clerkship directors must orient supervising faculty and residents about the responsibilities that can be delegated to medical students to comply with the learning objectives and the list of required clinical experiences and procedures. The list includes the level of responsibility expected from the medical student to observe, perform, or assist. No healthcare management, or medical or procedures can be carried out by the students without the direct in- person supervision of the supervising faculty or resident. Medical students are not allowed to write/ put medical orders and is a restrictive area in the electronic health record.
4. The activities supervised must be within the scope of practice of supervising health professionals.
5. Students must be oriented to the expectations for their participation in each clerkship or elective. Faculty and residents must be informed of these expectations.
6. The clinical departments will monitor that appropriate supervision of medical students is always in place.
7. Students will be provided with rapid, reliable communication systems with the supervising faculty.
8. Faculty and student schedules will be structured to provide students with continuous supervision and easy access to faculty consultation.
9. All students must comply with the academic, health, and legal requirements and regulations set by Ponce Health Sciences University School of Medicine and the clinical sites they are assigned.
10. Ponce Health Sciences University School of Medicine policy regarding managing a student with blood and/or body fluids exposure must be followed at all clinical sites and affiliated hospitals. Immediate evaluation at the affiliated hospital Emergency Room must be provided in cases of hazardous exposure.

11. Before authorizing students' elective rotations, the chairs of the clinical departments must review the credentials of the health professionals who will supervise the student and review with the student the potential risks to the health and safety of patients and themselves.
12. Students must participate in each of the required educational activities of the Introduction to Clinical Practice course (Patient Safety conference, CPR certification, Universal Precautions-Risk Management during accidents (OSHA) training, etc.) before they are allowed to be enrolled in the required clerkships and clinical electives.
13. To minimize the possibility of medical errors, students must follow all the policies of the affiliated clinical sites related to patient safety.
14. To regulate students' working hours and avoid fatigue that can result in medical errors, department chairs and/or clerkship coordinators must ensure compliance with the Ponce Health Sciences University School of Medicine On-Duty Hours Policy.

This policy must be distributed to the students in the course syllabi and School Policies Manual. It must also be distributed to supervising faculty. Department chairs and/or clerkship directors must oversee compliance with this policy.

Students must inform department chairs and/or clerkship coordinators of any concerns about the adequacy and availability of supervision. If no action is taken, the concern should be informed to the Associate Dean for Clinical Affairs for the corresponding investigation and appropriate action.

Issued April 11, 2015,
Revised November 7, 2022

	PROCEDURE FOR STUDENTS TO REQUEST CHANGES IN EXAMINATION DATES	Implementation Date/ Effective Date	January 1st, 2019
		Last Reviewed/Update	October 29, 2018
		Approved by	MPCC
		Initially Approved	October 29, 2018

Sometimes students request changes to the examination dates. The Medicine Program Curriculum Committee (MPCC) approved a procedure to be followed when students request these changes.

1. The MPCC representatives of the medicine class requesting the change in the examination dates contact the course director for the initial authorization. If the course director denies the request, no further action is needed. If the course director has the resources for proctoring, verifies available classroom space and support of the technological education staff for the examination, and authorizes the initial request, the course director notifies the chair of the department.
2. The medical students should submit the authorization of the course director and a written request with the signatures of at least 90% of the students who are scheduled to take the examination (including MSMS and Ph.D. students in cases it applies) to the Dean of Curriculum and Academic Affairs. If the students do not submit the written request with the required signatures, the change will not proceed, and no further action is needed.
3. The Dean of Curriculum and Academic Affairs verifies there is no conflict in the academic schedule for the proposed change, the availability of classrooms, and the support of
4. technological education staff. If the Dean of Curriculum and Academic Affairs denies the request, no further action is needed. If the change is authorized, the Associate Dean for Medical Education will be informed.
5. The Associate Dean for Medical Education will inform the final decision of the course director and chair of the department involved.
6. The administrative assistant responsible for supporting the corresponding course will notify all the students that the change was approved and will provide details of the change: date, time, classrooms, and any other relevant information.

Effective January 1st, 2019
Approved by the MPCC on October 29, 2018
Academic Policy #29 School of Medicine

This policy is tied to LCME Element 10.9	**PROCEDURE TO REQUEST AN ALTERNATE CLINICAL SITE ASSIGNMENT**	Implementation Date/ Effective Date	AY 2016-2017
		Last Reviewed/Update	July 21, 2023
		Approved by	MPCC
		Initially Approved	November 30, 2015

Policy

The Ponce Health Sciences University School of Medicine allows medical students with an appropriate rationale to request an alternative clinical assignment when circumstances allow for it.

Purpose

This procedure was developed to provide guidelines about how students must proceed to formally request an alternate educational site or clinical assignment.

Procedure

The procedure for students to formally request an alternate educational site or assignment during the clinical years is as follows:

1. Students who believe that they have circumstances that would warrant a particular clerkship sequence of the ten available for the first clinical year (third year), or the nine in the last clinical year (fourth year), can make a request directly to the Vice-President of Student Affairs or the Clinical Coordinator, in advance of the student group assignments, or fourth-year student academic schedule.
2. Once assigned to a clinical clerkship site (e.g., a hospital), for a justified reason, the student can request an alternate site assignment from the chair of the department. Changes may only be made to sites students are routinely assigned to in this clerkship. Students are requested to inform them about any potential conflict as soon as they are informed of the faculty and site assigned.
3. For students with extenuating circumstances that justify the request for a particular clerkship sequence or clerkship site assignment, the request must be provided in writing to the Office of Clinical Affairs with the specific details and explanations for the request.
4. All requests are reviewed by the Vice President of Students Affairs and the Clinical Coordinator who make a recommendation to the Associate Dean for Faculty and Clinical Affairs (ADFCA) as a collective, with the final determination being made by the ADFCA.
5. Requests are accepted, and schedule assignments are given based upon:
    a. whether the reason for the request is deemed valid; and
    b. whether there will be adequate comparable sites to meet the students' request.
    c. Reported conflict of interest in the student-teacher relationship is a major reason to accept a change.

6. Notification of this procedure is provided to the students via:
   a. e-mail distribution messages to the entire class
   b. orientation conducted by the Vice President of Student Affairs or the Clinical Coordinator.
   c. This policy will also be available in the Outlook Public Folders and in the Student Policies Handbook.

7. Notification of this procedure is provided to the faculty via e-mail distribution by the clinical department chairs.

	PUNCTUALITY AND TOTAL TIME ALLOCATED FOR EXAMINATIONS	Implementation Date/ Effective Date	October 3, 2016
		Last Reviewed/Update	October 20, 2025
		Approved by	MPCC
		Initially Approved	October 3, 2016

It is the responsibility of all students to arrive on time for all educational activities, especially the examinations. To ensure fair procedures when exams are offered, the following rules will be enforced:

1. Instructions for examinations shall be given at the time the examination is scheduled.
2. The faculty member in charge of the examination will inform the students of the maximum time allocated to answer all the questions, which is usually one to one and a half minutes per question. Students will have adjusted time limits according to approved accommodations.
3. As soon as technical issues are addressed for computer-based exams, examinations must begin, and the exam start time is noted by exam proctors.
4. To minimize disturbances to other students, no student will be admitted to an examination room more than 10 minutes after the time the examination is scheduled.
5. Students arriving less than 10 minutes late to the examination room will be permitted to take the examination.
6. For students arriving late, but within the 10-minute window, only the time remaining from the exam start time (point 3 above) will be allowed to complete the exam; no additional working time will be allowed.
7. The faculty in charge of the examination will indicate to the student who arrives late, the time she/he has lost and the time remaining.
8. If a student is not admitted to the exam due to late arrival, they must present their reason for late arrival to the Academic Affairs Office following the Excused Absence Policy. If the reason for late arrival is considered an excused absence, the course director will reschedule the exam at a mutually agreeable time without penalty. If the reason for late arrival is regarded as an unexcused absence, the student may reschedule the exam; however, a 20% penalty will be deducted from their exam grade.
9. When the time assigned to the student is over, the student must upload the examination at the request of the faculty. Failure to do so will be considered a violation of professional conduct, may result in a score of 0 in the examination, and will be reported to the Student Affairs Office.

   Students with a personal, health, or family emergency must report the situation and submit relevant documentation to the Office of Academic Affairs.

APPROVED BY MPCC
Issued Oct. 3, 2016
Revised October 20, 2025

This policy is tied to LCME Element 9.9 and 10.3	**SATISFACTORY ACADEMIC PROGRESS (SAP) POLICY-MEDICAL EDUCATION PROGRAM**	Implementation Date/ Effective Date	~AY 2001-2002
		Last Reviewed/Update	June 8, 2026
		Approved by	SOM Executive and Policy Committee
		Initially Approved	~July 2001

Satisfactory Academic Progress (SAP) Policy – MD Program

Purpose of Policy

The Satisfactory Academic Progress (SAP) Policy establishes the standards for evaluating academic progress within the time frame for students enrolled in the MD program. SAP is used to determine eligibility for Title IV federal financial aid and to determine promotion and graduation requirements. This policy is equally applied to all MD program students, regardless of financial aid status.

Scope and Key Principles

- SAP includes:
  1. A qualitative measure (grade-based standard)
  2. A quantitative measure (pace of completion)
  3. Maximum timeframe measure
  4. Academic Probation
  5. Student Appeal Process
  6. Financial Aid Appeals
  7. Enforcement
  8. Addendum – PHSU Institutional Policies and Procedures for appeals for non-academic or pacing dismissals
- SAP is evaluated at the end of each academic term (payment period)
- A student is either meeting SAP for all Title IV programs at PHSU or not meeting SAP (PHSU does not apply different SAP outcomes for different Title IV funds).

1. Qualitative Standard (Academic Performance)

- The MD Program is primarily graded on a Pass/Fail basis; successful course completion serves as the qualitative measure equivalent to a cumulative GPA requirement.
- Student Promotions Committee evaluates academic performance and decides which students advance to the next academic period.
- The Doctor in Medicine degree is granted to students who have been recommended by the Student Promotions Committee as having achieved the educational program objectives. To graduate, a student must have successfully completed the required curriculum of the MD program. A student must:
  - Successfully complete (Pass) all required courses, clerkships, and electives.
  - Pass USMLE Step 1 (must attain a passing score in three or fewer attempts)

- Pass USMLE Step 2 CK.
- Pass the Clinical Practice Examination (CPX)
- Meet professional conduct standards.

- Any student placed on academic probation by the Student Promotions Committee is not considered in good academic standing and does not meet the qualitative SAP standard.
- Qualitative standards are evaluated cumulatively at each official SAP review.

2. Quantitative Standard (Pace of Completion)

Students must progress at a sufficient pace to complete the MD program within the maximum timeframe. The pace will be determined by the cumulative credits successfully completed divided by the cumulative attempted credits

Pace = Cumulative Credits Successfully Completed ÷ Cumulative Attempted Credits

Pace is evaluated cumulatively at the end of each academic term (payment period).

Students must maintain a minimum cumulative pace of 67% to ensure completion within the maximum timeframe.

A student becomes ineligible for financial aid when it becomes mathematically impossible to complete the program within the maximum timeframe.

Treatment of Special Grades

- **Incomplete Grades**
  - An "I" (Incomplete) must be resolved within the timeframe specified by the PHSU Incomplete Policy.
  - Unresolved Incompletes convert to "F" and affect SAP
  - Incompletes count as attempted but not completed credits in pace calculations until resolved.
- **Withdrawals (W)**
  - The medical program does not allow individual course withdrawals; only complete program withdrawals are allowed.
- **Repeated Coursework**
  - Repeated courses count as attempted each time enrolled.
  - Only successfully completed credits count toward pace.

3. Maximum Timeframe

The MD program is designed to be completed in four (4) academic years.
Students may not exceed the maximum timeframe of six years established for program completion.

Program	Standard Length	Maximum Timeframe
Doctor of Medicine	4 Years	6 Years

The maximum timeframe includes:

- All periods of enrollment
- Summer terms, and
- Transfer credits accepted toward the degree.

At each official SAP review, PHSU evaluates whether the student can still complete the program within the maximum time frame. The School of Medicine Student Promotions Committee may grant an exception for students in good academic standing.

4. Academic Probation

Any student failing to meet Ponce Health Sciences University's medical program academic performance or pace of completion requirements will be referred to the School of Medicine Students Promotion Committee and placed on academic and financial aid probation. The following guidelines will be applied:

1. If the student fails one course, he/she should remediate the deficiency during the summer.
2. In these cases, an associate dean will notify the student that he/she is under academic probation and authorize summer enrollment.
3. If the student fails two or more courses or fails a course a second time, he/she may be considered for either repetition of courses or dismissal by the Students Promotion Committee (SPC) .
4. If the SPC determines that the student must repeat one or more courses during the summer or the next academic year, the student is considered on academic probation.
5. If the Students Promotion Committee determines to dismiss the student from the medical program, the student must be informed about his/her right to appeal.
6. If the dismissal decision is reversed by due process, the student will be considered on academic probation.

Students referred to the Student Promotions Committee (SPC) will be notified of the reasons for the referral and informed of their right to be heard or to provide information to the SPC. Course or clerkship directors should recuse themselves if the student being considered had an unsuccessful outcome in their course. Any Committee member who has a conflict of interest, such as having personal relations or providing health care to the students, must also recuse themselves.

5. Appeal Process

Students who have been notified of a decision of the SPC that they must repeat an entire year of study or are dismissed from the medical program have the right to appeal the decision to the Dean of Medicine. The appeal must be submitted in writing within five working days of receiving the notification. The Dean

of Medicine will evaluate the appeal and the student's academic record. The Dean can appoint a three-member Ad-Hoc Committee to re-evaluate all evidence. Rejection of the appeal by the Dean is final.

The Ad Hoc committee will notify the student of the date and time when the case will be heard. The student has the right to attend and provide information about their case to the Ad- Hoc Committee. The Dean of Medicine will consider the Ad-Hoc Committee recommendation and make the final decision.

If the Dean of Medicine elects to review the appeal without appointing an Ad Hoc Committee, the Dean will provide the student with an opportunity for a hearing prior to making a final decision.

Any decision will be reported to the student in writing. The decision made by the Dean of Medicine is final. During the appeal process, the student has the right to withdraw from the school at any time up to the point when the Dean makes the final decision.

The same process described above will be followed if the Committee's adverse decision is for non-academic reasons, such as unacceptable professional behavior. The Department Chairperson, the Associate Dean for Medical Education, or the Vice-President of Student Affairs will refer the case to the SPC. If the SPC recommends dismissing the student, the appeal process described above may be activated.

If an adverse decision is made for non-academic reasons and the Dean of Medicine sustains the decision after the appeal process, the student may appeal to the Vice President of Academic Affairs and then to the President. Please see the Addendum below for the PHSU policies and procedures for the appeal process for non-academic dismissals at the Vice President of Academic Affairs and the President's offices.

7. Financial Aid Appeals

SAP Appeal Eligibility

A student on Financial Aid Suspension may appeal. Other financial aid statuses are not eligible for appeal unless PHSU publishes an exception.

Appeal Requirements

A SAP appeal must include:

1. Why the student failed to make SAP, and
2. What has changed that will allow the student to meet SAP at the next evaluation, and

3. Supporting documentation
   If the student must follow a plan to regain SAP, the appeal must include an approved Academic Plan authorized by the Associate Dean of Medical Education.

Appeal Outcomes

If approved and the student can meet SAP by the next evaluation point, the student is placed on Financial Aid Probation for one payment period.

Consequences of Not Meeting SAP

- **Financial Aid Warning**
- If a student fails to meet any SAP component (, pace, and/or maximum timeframe) at an official evaluation, the student is placed on Financial Aid Warning for the next payment period and remains eligible for Title IV aid during that warning period.
- If a student on Warning interrupts studies, withdraws from all courses within the add/drop period of a session, or takes an approved leave of absence, the student returns in the same SAP status held at departure.

- **Financial Aid Suspension**
- A student is placed on Financial Aid Suspension (ineligible for Title IV aid) if:
  - The student does not meet SAP after the Warning period, or
  - The student fails to meet SAP under program rules that result in dismissal or non-progression (e.g., excessive unsuccessful attempts), or
  - The student fails the maximum timeframe standard, including the mathematical impossibility rule.
- **Academic Dismissal (Academic Standing)**
  - PHSU may apply academic standing actions such as, Academic Dismissal, per catalog rules. Academic standing decisions and financial aid eligibility decisions are related but may follow different processes; Title IV eligibility is determined under SAP status rules above.

8. Enforcement

The Office of the Vice President of Student Affairs shall have primary responsibility for overseeing this policy and will provide all medical students with a copy of this document upon admission to the Ponce Health Sciences University School of Medicine.

The President, the Vice President of Academic Affairs, the Vice President of Student Affairs, the Dean of Medicine, the Associate Dean for Medical Education, the Registrar, and the Financial Aid Director will receive all pertinent data to ensure proper enforcement of the policy here set forth.

9. Addendum

INSTITUTIONAL POLICY & PROCEDURES

Appeal Process for Non-Academic Dismissals

Policy Area	**Administering Office**	**Applies To**
Student Affairs	Office of the VP of Academic Affairs / Office of the President	All enrolled students

PURPOSE

This procedure establishes a fair, transparent, and consistent two-tier process through which students who have been subject to non-academic dismissal may formally appeal that decision. The first tier is reviewed by the Vice President of Academic Affairs; the second and final tier is reviewed by the President of the institution. The process ensures due process and provides independent review at each level.

PHASE 1 — Appeal to the Vice President of Academic Affairs

Steps 1 through 6 govern the initial appeal reviewed by the VP of Academic Affairs.

Step 1: Student Appeal Submission	
Responsible Party	Student
Timeframe	Within 5 business days of dismissal notice
Procedure	The student must file a formal written appeal to the Vice President of Academic Affairs within five (5) business days of receiving the non-academic dismissal notice from the Dean. The appeal must clearly state the grounds for contesting the dismissal and include any supporting documentation or statements the student wishes to present.

Step 2: Evidence Review by VP of Academic Affairs	
Responsible Party	Vice President of Academic Affairs
Timeframe	Upon receipt of student appeal
Procedure	Upon receiving the student's appeal, the Vice President of Academic Affairs shall request and obtain a complete copy of all evidence previously presented during the original evaluation of the case. This includes, but is not limited to, incident reports, witness statements, prior correspondence,

	and any disciplinary records relevant to the non-academic dismissal.

Step 3: Appointment of Ad Hoc Committee	
Responsible Party	Vice President of Academic Affairs
Timeframe	Within 5 business days of receiving

Procedure	The Vice President of Academic Affairs shall appoint an Ad Hoc Committee consisting of at least three (3) members to conduct an independent and impartial reevaluation of all available evidence. Committee members shall be selected to ensure objectivity and shall have no prior direct involvement in the original dismissal decision.

Step 4: Student Hearing Before Ad Hoc Committee	
Responsible Party	Ad Hoc Committee
Timeframe	As scheduled by the Ad Hoc Committee
Procedure	The Ad Hoc Committee shall notify the student in writing of the scheduled date and time of the hearing. The student shall be provided a formal hearing opportunity before the Committee to present their case, respond to the evidence, and submit any relevant statements or supporting documentation.

Step 5: Ad Hoc Committee Report and Recommendations	
Responsible Party	Ad Hoc Committee
Timeframe	48 hours after completion of the hearing
Procedure	Upon conclusion of the hearing and deliberation, the Ad Hoc Committee shall prepare a written report summarizing its findings and recommendations. This report shall be submitted to the Vice President of Academic Affairs for final review and determination.

Step 6: Notification of Appeal Outcome	
Responsible Party	Vice President of Academic Affairs
Timeframe	Following receipt of the Committee report
Procedure	The Vice President of Academic Affairs shall review the Ad Hoc Committee's report and recommendations, render a determination, and notify the student in writing of the outcome of the appeal. The notification shall include the basis for the decision and information regarding the student's right to further appeal.

PHASE 2 — Appeal to the President

Steps 7 through 14 govern the final-tier appeal reviewed by the President. Presidential determinations are final.

Step 7: Student Appeal to the President	
Responsible Party	Student
Timeframe	Within 5 working days of VP of Academic Affairs Determination
Procedure	The student has the right to appeal the Vice President of Academic Affairs' determination to the President of the institution within five (5) working days of receiving written notice of the outcome. The appeal must be submitted in writing and must clearly specify the grounds for contesting the prior determination.

Step 8: Evidence Review by the President	
Responsible Party	Office of the President
Timeframe	Upon receipt of student appeal
Procedure	Upon receiving the student's appeal, the President shall request, obtain, and review a complete copy of all evidence previously presented during all prior evaluation cycles of the case, including materials considered during the original dismissal decision and the subsequent appeal to the Vice President of Academic Affairs.

Step 9: Appointment of Ad Hoc Committee by the President	
Responsible Party	President
Timeframe	At the President's discretion- if appointed occurs within 3 business days of receipt of the case file
Procedure	The President may, at their discretion, appoint an Ad Hoc Committee to conduct an independent review of the evidence. The Committee shall be composed of qualified members who have had no prior involvement in the case and are capable of rendering an objective assessment.

Step 10: Student Notification and Presentation of Additional Evidence	
Responsible Party	Ad Hoc Committee
Timeframe	As scheduled by the Ad Hoc Committee

Procedure	The Ad Hoc Committee shall notify the student in writing of the scheduled date and time of the evaluation meeting. The student shall be afforded the opportunity to present any additional evidence relevant to the case that has not been introduced during any prior evaluation cycle. This ensures that all pertinent information is considered before a final determination is rendered.

Step 11: Hearing at the Presidential Level	
Responsible Party	Ad Hoc Committee / President
Timeframe	As determined by the Committee or President
Procedure	A formal hearing may be provided to the student if deemed necessary or relevant by the Ad Hoc Committee or the President. The decision to hold a hearing at this stage is at the discretion of the reviewing authority, based on the nature of the evidence and the circumstances of the case.

Step 12: Ad Hoc Committee Report to the President	
Responsible Party	Ad Hoc Committee
Timeframe	Following deliberation
Procedure	The Ad Hoc Committee shall prepare a comprehensive written report detailing its findings, analysis of the evidence, and recommendations. This report shall be submitted directly to the President for final review.

Step 13: Presidential Notification of Final Outcome	
Responsible Party	Office of the President
Timeframe	Following receipt of Committee report
Procedure	The Office of the President shall notify the student in writing of the final outcome of the appeal. The notification shall include the President's determination and the rationale supporting the decision.

Step 14: Presidential Determination — Final	
Responsible Party	President
Timeframe	Upon issuance of written notification

Procedure	Determinations rendered by the President are final and binding. No further institutional appeal shall be available once the President has issued a written determination. The student is advised to retain all correspondence and documentation related to the appeal process for their records.

IMPORTANT NOTES

- Appeals submitted after any applicable deadline will not be considered unless the student can demonstrate extraordinary circumstances that prevented timely filing.
- The student has the right to be informed of the identity of all Ad Hoc Committee members at each tier and may request the recusal of any member with a demonstrated conflict of interest.
- All proceedings and documentation related to the appeal are strictly confidential and shall be handled in accordance with applicable privacy regulations.
- Written notification of outcomes shall be provided to the student at each phase of the process.
- Determinations rendered by the President are final and binding. No further institutional appeal is available after the presidential determination has been issued.

This procedure is subject to periodic review and revision by the Office of the Vice President of Academic Affairs.

This policy is tied to LCME Elements 9.9 and 10.3	**SATISFACTORY ACADEMIC PROGRESS (SAP) POLICY- PhD IN BIOMEDICAL SCIENCES PROGRAM**	Implementation Date/ Effective Date	AY 2001-2002
		Last Reviewed/Updated	June 11, 2026
		Approved by	SOM Executive and Policy Committee
		Initially Approved	July 2001

Satisfactory Academic Progress (SAP) Policy – PhD in Biomedical Sciences Program

Purpose of Policy

The Satisfactory Academic Progress (SAP) Policy establishes the standards for evaluating academic progress within the time frame for students enrolled in the Doctor of Philosophy (PhD) in Biomedical Sciences Program. SAP is used to determine eligibility for Title IV federal financial aid and to determine promotion and graduation requirements.
This policy is equally applied to all PhD in Biomedical Sciences Program students, regardless of financial aid status.

Scope and Key Principles

- SAP includes:

  1. A qualitative measure (grade-based standard)
  2. A quantitative measure (pace of completion)
  3. Maximum timeframe measure
  4. Academic Probation
  5. Student Appeal Process
  6. Financial Aid Appeals
  7. Enforcement
  8. Addendum – PHSU Institutional Policies and Procedures for appeals for non-academic or pacing dismissals

- SAP is evaluated at the end of each academic term (payment period)
- A student is either meeting SAP for all Title IV programs at PHSU or not meeting SAP (PHSU does not apply different SAP outcomes for different Title IV funds).

1. Qualitative Standard (Academic Performance)

- The PhD in Biomedical Sciences Program is primarily graded on a letter grade basis (A,B,C,F); this is used to calculate GPA.
- The Student Promotions Committee evaluates academic performance and decides which students advance to the next academic period.

- The Doctor of Philosophy (Ph.D.) degree is awarded upon the attainment of a high level of scholarship and the successful completion of an original research project that makes a significant contribution to scientific knowledge in a specific field.
- To graduate, a student must have successfully completed the required curriculum of the PhD in Biomedical Sciences Program. A student must:
    a. Successfully complete all required courses with a minimum GPA of 3.0. The PhD in Biomedical Sciences requires a minimum of 70 credits.
    b. Pass the Qualifying Exam
        - The Qualifying Exam is composed of a written and an oral component that must be completed by the end of the first semester of the student's third year in the Program.
        - In the written part, the student must develop a research proposal (by April 15th, second year), which will be evaluated by a Pre-Advisory Committee composed of the student's dissertation advisor and two faculty members whose interests are related to the student's research. The committee will evaluate and score (scores 1-9) the written document based on the clarity of writing and scientific merit (significance, innovation, and approach). The student requires a score of ≤ 3 to pass the written exam. First-time takers receiving a score >3 will need to revise the proposal and re-submit for review.
        - The student who passes the written exam will progress to the second part of the Qualifying Exam, which is an oral proposal defense (by October 15th, third year). The student will defend the thesis proposal before the Thesis Committee. The Thesis Committee consists of the student's dissertation advisor, three PHSU faculty members whose interests are related to the student's research, and a member from another institution (usually from the continental U.S.) with expertise in the field. Immediately following the oral proposal defense, the Thesis Committee will evaluate and score the student's performance. Students that pass the proposal defense become a Ph.D. candidate.
        - The student has a maximum of two attempts each to pass the written and oral component of the Qualifying Exam. After two attempts for either part, the student will be referred to the Student Promotion Committee for dismissal from the Ph.D. Program and reclassification as a candidate for a Master of Science in Biomedical Sciences.
    c. Engage in a research program under the supervision of a qualified research mentor and prepare an acceptable dissertation.
    d. Complete the doctoral dissertation and oral defense according to the established guidelines.

e. Publish or have accepted for publication at least one primary research article as a co-author, based on any part of the dissertation research, in a peer-reviewed scientific journal.

Meet professional conduct standards.

- Any student placed on academic probation by the Student Promotions Committee is not considered in good academic standing and does not meet the qualitative SAP standard.
- Qualitative standards are evaluated cumulatively at each official SAP review.

2. Quantitative Standard (Pace of Completion)

Students must progress at a sufficient pace to complete the PhD in Biomedical Sciences Program within the maximum timeframe. The pace will be determined by the cumulative credits successfully completed divided by the cumulative attempted credits

Pace = Cumulative Credits Successfully Completed ÷ Cumulative Attempted Credits

Pace is evaluated cumulatively at the end of each academic term (payment period).

Students must maintain a minimum cumulative pace of 63% to ensure completion within the maximum timeframe.

A student becomes ineligible for financial aid when it becomes mathematically impossible to complete the program within the maximum timeframe.

Treatment of Special Grades

- Incomplete Grades
  - An "I" (Incomplete) must be resolved within the timeframe specified by the PHSU Incomplete Policy.
  - Unresolved Incompletes convert to "F" and affect SAP
  - Incompletes count as attempted but not completed credits in pace calculations until resolved.
- Withdrawals (W)
  - The PhD in Biomedical Sciences Program does not allow individual course withdrawals; only complete program withdrawals are allowed.
- Repeated Coursework
  - Repeated courses count as attempted each time enrolled.
  - Only successfully completed credits count toward pace.

3. Maximum Timeframe

The PhD program is designed to be completed in one (1) academic year.
Students may not exceed the maximum timeframe of two years established for program completion.

Program	Standard Length	Maximum Timeframe
PhD in Biomedical Sciences	5 Year	8 Years

The maximum timeframe includes:

- All periods of enrollment
- Summer terms, and
- Transfer credits accepted toward the degree.

At each official SAP review, PHSU evaluates whether the student can still complete the program within the maximum time frame. The School of Medicine Student Promotions Committee may grant an exception for students in good academic standing.

4. Academic Probation

Any student failing to meet Ponce Health Sciences University's PhD in Biomedical Sciences Program academic performance or pace of completion requirements will be referred to the School of Medicine Students Promotion Committee and placed on academic and financial aid probation. The following guidelines will be applied:

1. If the student fails one course, he/she should remediate the deficiency during the summer. In these cases, an associate dean will notify the student that he/she is under academic probation and authorize summer enrollment.
2. If the student fails two or more courses or fails a course a second time, he/she may be considered for either repetition of courses or dismissal by the Students Promotion Committee (SPC).
3. If the SPC determines that the student must repeat one or more courses during the summer or the next academic year, the student is considered on academic probation.
4. If the Students Promotion Committee determines to dismiss the student from the PhD in Biomedical Sciences Program, the student must be informed about his/her right to appeal.
5. If the dismissal decision is reversed by due process, the student will be considered on academic probation.

Students referred to the Student Promotions Committee (SPC) will be notified of the reasons for the referral and informed of their right to be heard or to provide information to the SPC. Course directors should recuse themselves if the student being considered had an unsuccessful outcome in their course. Any Committee member who has a conflict of interest,

such as having personal relations or providing health care to the students, must also recuse themselves.

5. Appeal Process

Students who have been notified of a decision of the SPC that they must repeat an entire year of study or are dismissed from the PhD in Biomedical Sciences Program have the right to appeal the decision to the Dean of Medicine. The appeal must be submitted in writing within five working days of receiving the notification. The Dean of Medicine will evaluate the appeal and the student's academic record. The Dean can appoint a three-member Ad-Hoc Committee to re-evaluate all evidence. Rejection of the appeal by the Dean is final.

The Ad Hoc committee will notify the student of the date and time when the case will be heard. The student has the right to attend and provide information about their case to the Ad-Hoc Committee. The Dean of Medicine will consider the Ad-Hoc Committee recommendation and make the final decision.

If the Dean of Medicine elects to review the appeal without appointing an Ad Hoc Committee, the Dean will provide the student with an opportunity for a hearing prior to making a final decision.

Any decision will be reported to the student in writing. The decision made by the Dean of Medicine is final. During the appeal process, the student has the right to withdraw from the school at any time up to the point when the Dean makes the final decision.

The same process described above will be followed if the Committee's adverse decision is for non-academic reasons, such as unacceptable professional behavior. The Associate Dean for the PhD in Biomedical Sciences and Research, the Associate Dean for Medical Education, or the Vice-President of Student Affairs will refer the case to the SPC. If the SPC recommends dismissing the student, the appeal process described above may be activated.

If an adverse decision is made for non-academic reasons and the Dean of Medicine sustains the decision after the appeal process, the student may appeal to the Vice President of Academic Affairs and then to the President. Please see the Addendum below for the PHSU policies and procedures for the appeal process for non-academic dismissals at the Vice President of Academic Affairs and the President's offices.

6. Financial Aid Appeals

SAP Appeal Eligibility

A student on Financial Aid Suspension may appeal. Other financial aid statuses are not eligible for appeal unless PHSU publishes an exception.

Appeal Requirements

A SAP appeal must include:

1. Why the student failed to make SAP, and
2. What has changed that will allow the student to meet SAP at the next evaluation, and
3. Supporting documentation

If the student must follow a plan to regain SAP, the appeal must include an approved Academic Plan authorized by the Associate Dean for the PhD in Biomedical Sciences and Research.

Appeal Outcomes

If approved and the student can meet SAP by the next evaluation point, the student is placed on Financial Aid Probation for one payment period.

Consequences of Not Meeting SAP

- Financial Aid Warning
- If a student fails to meet any SAP component (pace, and/or maximum timeframe) at an official evaluation, the student is placed on Financial Aid Warning for the next payment period and remains eligible for Title IV aid during that warning period.
- If a student on Warning interrupts studies, withdraws from all courses within the add/drop period of a session, or takes an approved leave of absence, the student returns in the same SAP status held at departure.
- Financial Aid Suspension
- A student is placed on Financial Aid Suspension (ineligible for Title IV aid) if:
    - The student does not meet SAP after the Warning period, or
    - The student fails to meet SAP under program rules that result in dismissal or non-progression (e.g., excessive unsuccessful attempts), or
    - The student fails the maximum timeframe standard, including the mathematical impossibility rule.
- Academic Dismissal (Academic Standing)
    - PHSU may apply academic standing actions such as, Academic Dismissal, per catalog rules. Academic standing decisions and financial aid eligibility decisions are related but may follow different processes; Title IV eligibility is determined
    - under SAP status rules above.

4. Enforcement

The Office of the Vice President of Student Affairs shall have primary responsibility for overseeing this policy and will provide all PhD in Biomedical Sciences students with a copy of this document upon admission to the Ponce Health Sciences University School of Medicine.

The President, the Vice President of Academic Affairs, the Vice President of Student Affairs, the Dean of Medicine, the Associate Dean for the PhD in Biomedical Sciences and Research, Associate Dean for Medical Education, the Registrar, and the Financial Aid Director will receive all pertinent data to ensure proper enforcement of the policy here set forth.

5. Addendum

INSTITUTIONAL POLICY & PROCEDURES

Appeal Process for Non-Academic Dismissals

Policy Area	**Administering Office**	**Applies To**
Student Affairs	Office of the VP of Academic Affairs / Office of the President	All enrolled students

PURPOSE

This procedure establishes a fair, transparent, and consistent two-tier process through which students who have been subject to non-academic dismissal may formally appeal that decision. The first tier is reviewed by the Vice President of Academic Affairs; the second and final tier is reviewed by the President of the institution. The process ensures due process and provides independent review at each level.

PHASE 1 — Appeal to the Vice President of Academic Affairs

Steps 1 through 6 govern the initial appeal reviewed by the VP of Academic Affairs.

Step 1: Student Appeal Submission	
Responsible Party	Student
Timeframe	Within 5 business days of dismissal notice
Procedure	The student must file a formal written appeal to the Vice President of Academic Affairs within five (5) business days of receiving the non-academic dismissal notice from the Dean. The appeal must clearly state the grounds for contesting the dismissal and include any supporting documentation or statements the student wishes to present.

Step 2: Evidence Review by VP of Academic Affairs	
Responsible Party	Vice President of Academic Affairs
Timeframe	Upon receipt of student appeal
Procedure	Upon receiving the student's appeal, the Vice President of Academic Affairs shall request and obtain a complete copy of all evidence previously presented during the original evaluation of the case. This includes, but is not limited to, incident reports, witness statements, prior correspondence, and any disciplinary records relevant to the non-academic dismissal.

Step 3: Appointment of Ad Hoc Committee	
Responsible Party	Vice President of Academic Affairs
Timeframe	Within 5 business days of receiving
Procedure	The Vice President of Academic Affairs shall appoint an Ad Hoc Committee consisting of at least three (3) members to conduct an independent and impartial reevaluation of all available evidence. Committee members shall be selected to ensure objectivity and shall have no prior direct involvement in the original dismissal decision.

Step 4: Student Hearing Before Ad Hoc Committee	
Responsible Party	Ad Hoc Committee
Timeframe	As scheduled by the Ad Hoc Committee
Procedure	The Ad Hoc Committee shall notify the student in writing of the scheduled date and time of the hearing. The student shall be provided a formal hearing opportunity before the Committee to present their case, respond to the evidence, and submit any relevant statements or supporting documentation.

Step 5: Ad Hoc Committee Report and Recommendations	
Responsible Party	Ad Hoc Committee
Timeframe	48 hours after completion of the hearing
Procedure	Upon conclusion of the hearing and deliberation, the Ad Hoc Committee shall prepare a written report summarizing its findings and recommendations. This report shall be submitted to the Vice President of Academic Affairs for final review and determination.

Step 6: Notification of Appeal Outcome	
Responsible Party	Vice President of Academic Affairs
Timeframe	Following receipt of the Committee report
Procedure	The Vice President of Academic Affairs shall review the Ad Hoc Committee's report and recommendations, render a determination, and notify the student in writing of the outcome of the appeal. The notification shall include the basis for the decision and information regarding the student's right to further appeal.

PHASE 2 — Appeal to the President

Steps 7 through 14 govern the final-tier appeal reviewed by the President. Presidential determinations are final.

Step 7: Student Appeal to the President	
Responsible Party	Student
Timeframe	Within 5 working days of VP of Academic Affairs Determination
Procedure	The student has the right to appeal the Vice President of Academic Affairs' determination to the President of the institution within five (5) working days of receiving written notice of the outcome. The appeal must be submitted in writing and must clearly specify the grounds for contesting the prior determination.

Step 8: Evidence Review by the President	
Responsible Party	Office of the President
Timeframe	Upon receipt of student appeal
Procedure	Upon receiving the student's appeal, the President shall request, obtain, and review a complete copy of all evidence previously presented during all prior evaluation cycles of the case, including materials considered during the original dismissal decision and the subsequent appeal to the Vice President of Academic Affairs.

Step 9: Appointment of Ad Hoc Committee by the President	
Responsible Party	President
Timeframe	At the President's discretion- if appointed occurs within 3 business days of receipt of the case file
Procedure	The President may, at their discretion, appoint an Ad Hoc Committee to conduct an independent review of the evidence. The Committee shall be composed of qualified members who have had no prior involvement in the case and are capable of rendering an objective assessment.

Step 10: Student Notification and Presentation of Additional Evidence	
Responsible Party	Ad Hoc Committee
Timeframe	As scheduled by the Ad Hoc Committee

Procedure	The Ad Hoc Committee shall notify the student in writing of the scheduled date and time of the evaluation meeting. The student shall be afforded the opportunity to present any additional evidence relevant to the case that has not been introduced during any prior evaluation cycle. This ensures that all pertinent information is considered before a final determination is rendered.

Step 11: Hearing at the Presidential Level	
Responsible Party	Ad Hoc Committee / President
Timeframe	As determined by the Committee or President
Procedure	A formal hearing may be provided to the student if deemed necessary or relevant by the Ad Hoc Committee or the President. The decision to hold a hearing at this stage is at the discretion of the reviewing authority, based on the nature of the evidence and the circumstances of the case.

Step 12: Ad Hoc Committee Report to the President	
Responsible Party	Ad Hoc Committee
Timeframe	Following deliberation
Procedure	The Ad Hoc Committee shall prepare a comprehensive written report detailing its findings, analysis of the evidence, and recommendations. This report shall be submitted directly to the President for final review.

Step 13: Presidential Notification of Final Outcome	
Responsible Party	Office of the President
Timeframe	Following receipt of Committee report
Procedure	The Office of the President shall notify the student in writing of the final outcome of the appeal. The notification shall include the President's determination and the rationale supporting the decision.

Step 14: Presidential Determination — Final	
Responsible Party	President
Timeframe	Upon issuance of written notification
Procedure	Determinations rendered by the President are final and binding. No further institutional appeal shall be available once the President has issued a written

	determination. The student is advised to retain all correspondence and documentation related to the appeal process for their records.

IMPORTANT NOTES

- Appeals submitted after any applicable deadline will not be considered unless the student can demonstrate extraordinary circumstances that prevented timely filing.
- The student has the right to be informed of the identity of all Ad Hoc Committee members at each tier and may request the recusal of any member with a demonstrated conflict of interest.
- All proceedings and documentation related to the appeal are strictly confidential and shall be handled in accordance with applicable privacy regulations.
- Written notification of outcomes shall be provided to the student at each phase of the process.
- Determinations rendered by the President are final and binding. No further institutional appeal is available after the presidential determination has been issued.

This procedure is subject to periodic review and revision by the Office of the Vice President of Academic Affairs.

	SATISFACTORY ACADEMIC PROGRESS POLICY- MASTER OF SCIENCES IN MEDICAL SCIENCES PROGRAM	Implementation Date/ Effective Date	~AY 2001 - 2002
		Last Reviewed/Update	June 8, 2026
		Approved by	SOM Executive and Policy Committee
		Initially Approved	~July 2001

Satisfactory Academic Progress (SAP) Policy – MSMS Program

Purpose of Policy

The Satisfactory Academic Progress (SAP) Policy establishes the standards for evaluating academic progress within the time frame for students enrolled in the MS in Medical Sciences program. SAP is used to determine eligibility for Title IV federal financial aid and to determine promotion and graduation requirements.
This policy is equally applied to all MS program students, regardless of financial aid status.

Scope and Key Principles

- SAP includes:
  1. A qualitative measure (grade-based standard)
  2. A quantitative measure (pace of completion)
  3. Maximum timeframe measure
  4. Academic Probation
  5. Student Appeal Process
  6. Financial Aid Appeals
  7. Enforcement
  8. Addendum – PHSU Institutional Policies and Procedures for appeals for non-academic or pacing dismissals
- SAP is evaluated at the end of each academic term (payment period)
- A student is either meeting SAP for all Title IV programs at PHSU or not meeting SAP (PHSU does not apply different SAP outcomes for different Title IV funds).

1. Qualitative Standard (Academic Performance)

- The MS Program is primarily graded on a letter grade basis (A, B, C, F); this is used to calculate GPA.
- Student Promotions Committee evaluates academic performance and decides which students advance to the next academic period.
- The Master of Science in Medical Sciences degree is granted to students who have been recommended by the Student Promotions Committee as having achieved the educational program objectives. To graduate, a student must have successfully completed the required curriculum of the MSMS program. A student must:
  - Successfully complete (Pass) all required courses.
  - Pass the Comprehensive Qualifying Examination (CQX)
  - Meet professional conduct standards.

- Any student placed on academic probation by the Student Promotions Committee is not considered in good academic standing and does not meet the qualitative SAP standard.
- Qualitative standards are evaluated cumulatively at each official SAP review.

2. Quantitative Standard (Pace of Completion)

Students must progress at a sufficient pace to complete the MS program within the maximum timeframe. The pace will be determined by the cumulative credits successfully completed divided by the cumulative attempted credits

Pace = Cumulative Credits Successfully Completed ÷ Cumulative Attempted Credits

Pace is evaluated cumulatively at the end of each academic term (payment period).

Students must maintain a minimum cumulative pace of 50% to ensure completion within the maximum timeframe.

A student becomes ineligible for financial aid when it becomes mathematically impossible to complete the program within the maximum timeframe.

Treatment of Special Grades

- Incomplete Grades
  - An "I" (Incomplete) must be resolved within the timeframe specified by the PHSU Incomplete Policy.
  - Unresolved Incompletes convert to "F" and affect SAP
  - Incompletes count as attempted but not completed credits in pace calculations until resolved.
- Withdrawals (W)
  - The MS program does not allow individual course withdrawals; only complete program withdrawals are allowed.
- Repeated Coursework
  - Repeated courses count as attempted each time enrolled.
  - Only successfully completed credits count toward pace.

1. Maximum Timeframe

The MS program is designed to be completed in one (1) academic year.
Students may not exceed the maximum timeframe of two years established for program completion.

Program	Standard Length	Maximum Timeframe
Master of Science in Medical Sciences	1 Year	2 Years

The maximum timeframe includes:

- All periods of enrollment
- Summer terms, and
- Transfer credits accepted toward the degree.

At each official SAP review, PHSU evaluates whether the student can still complete the program within the maximum time frame. The School of Medicine Student Promotions Committee may grant an exception for students in good academic standing.

2. Academic Probation

Any student failing to meet Ponce Health Sciences University's Master of Science in medical sciences program academic performance or pace of completion requirements will be referred to the School of Medicine Students Promotion Committee and placed on academic and financial aid probation. The following guidelines will be applied:

a. If the student fails one course, he/she should remediate the deficiency during the summer. In these cases, an associate dean will notify the student that he/she is under academic probation and authorize summer enrollment.
b. If the student fails two or more courses or fails a course a second time, he/she may be considered for either repetition of courses or dismissal by the Students Promotion Committee (SPC) .
c. If the SPC determines that the student must repeat one or more courses during the summer or the next academic year, the student is considered on academic probation.
d. If the Students Promotion Committee determines to dismiss the student from the medical program, the student must be informed about his/her right to appeal.
e. If the dismissal decision is reversed by due process, the student will be considered on academic probation.

Students referred to the Student Promotions Committee (SPC) will be notified of the reasons for the referral and informed of their right to be heard or to provide information to the SPC. Course or clerkship directors should recuse themselves if the student being considered had an unsuccessful outcome in their course. Any Committee member who has a conflict of interest, such as having personal relations or providing health care to the students, must also recuse themselves.

5. Appeal Process

Students who have been notified of a decision of the SPC that they must repeat an entire year of study or are dismissed from the MSMS program have the right to appeal the decision to the Dean of Medicine. The appeal must be submitted in writing within five working days of receiving the notification. The Dean of Medicine will evaluate the appeal and the student's academic record. The Dean can appoint a three-member Ad-Hoc Committee to re-evaluate all evidence. Rejection of the appeal by the Dean is final.

The Ad Hoc committee will notify the student of the date and time when the case will be heard. The student has the right to attend and provide information about their case to the Ad-Hoc Committee. The

Dean of Medicine will consider the Ad-Hoc Committee recommendation and make the final decision.

If the Dean of Medicine elects to review the appeal without appointing an Ad Hoc Committee, the Dean will provide the student with an opportunity for a hearing prior to making a final decision.

Any decision will be reported to the student in writing. The decision made by the Dean of Medicine is final. During the appeal process, the student has the right to withdraw from the school at any time up to the point when the Dean makes the final decision.

The same process described above will be followed if the Committee's adverse decision is for non-academic reasons, such as unacceptable professional behavior. The Associate Dean for MSMS, the Associate Dean for Medical Education, or the Vice-President of Student Affairs will refer the case to the SPC. If the SPC recommends dismissing the student, the appeal process described above may be activated.

If an adverse decision is made for non-academic reasons and the Dean of Medicine sustains the decision after the appeal process, the student may appeal to the Vice President of Academic Affairs and then to the President. Please see the Addendum below for the PHSU policies and procedures for the appeal process for non-academic dismissals at the Vice President of Academic Affairs and the President's offices.

6. Financial Aid Appeals

SAP Appeal Eligibility

A student on Financial Aid Suspension may appeal. Other financial aid statuses are not eligible for appeal unless PHSU publishes an exception.

Appeal Requirements

A SAP appeal must include:

1. Why the student failed to make SAP, and
2. What has changed that will allow the student to meet SAP at the next evaluation, and
3. Supporting documentation

If the student must follow a plan to regain SAP, the appeal must include an approved Academic Plan authorized by the Associate Dean of MSMS.

Appeal Outcomes

If approved and the student can meet SAP by the next evaluation point, the student is placed on Financial Aid Probation for one payment period.

Consequences of Not Meeting SAP

- Financial Aid Warning
    - If a student fails to meet any SAP component (pace, and/or maximum timeframe) at an official evaluation, the student is placed on Financial Aid Warning for the next payment period and remains eligible for Title IV aid during that warning period.

- If a student on Warning interrupts studies, withdraws from all courses within the add/drop period of a session, or takes an approved leave of absence, the student returns in the same SAP status held at departure.

- Financial Aid Suspension
- A student is placed on Financial Aid Suspension (ineligible for Title IV aid) if:
    - The student does not meet SAP after the Warning period, or
    - The student fails to meet SAP under program rules that result in dismissal or non-progression (e.g., excessive unsuccessful attempts), or
    - The student fails the maximum timeframe standard, including the mathematical impossibility rule.
- Academic Dismissal (Academic Standing)
    - PHSU may apply academic standing actions such as, Academic Dismissal, per catalog rules. Academic standing decisions and financial aid eligibility decisions are related but may follow different processes; Title IV eligibility is determined under SAP status rules above.

7. Enforcement

The Office of the Vice President of Student Affairs shall have primary responsibility for overseeing this policy and will provide all Master of Science in medical sciences with a copy of this document upon admission to the Ponce Health Sciences University School of Medicine.

The President, the Vice President of Academic Affairs, the Vice President of Student Affairs, the Dean of Medicine, the Associate Dean for Master in Medical Sciences, Associate Dean for Medical Education, the Registrar, and the Financial Aid Director will receive all pertinent data to ensure proper enforcement of the policy here set forth.

8. Addendum

Appeal Process for Non-Academic Dismissals

Policy Area	Administering Office	Applies To
Student Affairs	Office of the VP of Academic Affairs / Office of the President	All enrolled students

PURPOSE

This procedure establishes a fair, transparent, and consistent two-tier process through which students who have been subject to non-academic dismissal may formally appeal that decision. The first tier is reviewed by the Vice President of Academic Affairs; the second and final tier is reviewed by the President of the institution. The process ensures due process and provides independent review at each level.

PHASE 1 — Appeal to the Vice President of Academic Affairs

Steps 1 through 6 govern the initial appeal reviewed by the VP of Academic Affairs.

Step 1: Student Appeal Submission	
Responsible Party	Student
Timeframe	Within 5 business days of dismissal notice
Procedure	The student must file a formal written appeal to the Vice President of Academic Affairs within five (5) business days of receiving the non-academic dismissal notice from the Dean. The appeal must clearly state the grounds for contesting the dismissal and include any supporting documentation or statements the student wishes to present.

Step 2: Evidence Review by VP of Academic Affairs	
Responsible Party	Vice President of Academic Affairs
Timeframe	Upon receipt of student appeal
Procedure	Upon receiving the student's appeal, the Vice President of Academic Affairs shall request and obtain a complete copy of all evidence previously presented during the original evaluation of the case. This includes, but is not limited to, incident reports, witness statements, prior correspondence, and any disciplinary records relevant to the non-academic dismissal.

Step 3: Appointment of Ad Hoc Committee	
Responsible Party	Vice President of Academic Affairs
Timeframe	Within 5 business days of receiving

Procedure	The Vice President of Academic Affairs shall appoint an Ad Hoc Committee consisting of at least three (3) members to conduct an independent and impartial reevaluation of all available evidence. Committee members shall be selected to ensure objectivity and shall have no prior direct involvement in the original dismissal decision.

Step 4: Student Hearing Before Ad Hoc Committee	
Responsible Party	Ad Hoc Committee
Timeframe	As scheduled by the Ad Hoc Committee
Procedure	The Ad Hoc Committee shall notify the student in writing of the scheduled date and time of the hearing. The student shall be provided a formal hearing opportunity before the Committee to present their case, respond to the evidence, and submit any relevant statements or supporting documentation.

Step 5: Ad Hoc Committee Report and Recommendations	
Responsible Party	Ad Hoc Committee
Timeframe	48 hours after completion of the hearing
Procedure	Upon conclusion of the hearing and deliberation, the Ad Hoc Committee shall prepare a written report summarizing its findings and recommendations. This report shall be submitted to the Vice President of Academic Affairs for final review and determination.

Step 6: Notification of Appeal Outcome	
Responsible Party	Vice President of Academic Affairs
Timeframe	Following receipt of the Committee report
Procedure	The Vice President of Academic Affairs shall review the Ad Hoc Committee's report and recommendations, render a determination, and notify the student in writing of the outcome of the appeal. The notification shall include the basis for the decision and information regarding the student's right to further appeal.

PHASE 2 — Appeal to the President

Steps 7 through 14 govern the final-tier appeal reviewed by the President. Presidential determinations are final.

Step 7: Student Appeal to the President	
Responsible Party	Student

Timeframe	Within 5 working days of VP of Academic Affairs Determination
Procedure	The student has the right to appeal the Vice President of Academic Affairs' determination to the President of the institution within five (5) working days of receiving written notice of the outcome. The appeal must be submitted in writing and must clearly specify the grounds for contesting the prior determination.

Step 8: Evidence Review by the President	
Responsible Party	Office of the President
Timeframe	Upon receipt of student appeal
Procedure	Upon receiving the student's appeal, the President shall request, obtain, and review a complete copy of all evidence previously presented during all prior evaluation cycles of the case, including materials considered during the original dismissal decision and the subsequent appeal to the Vice President of Academic Affairs.

Step 9: Appointment of Ad Hoc Committee by the President	
Responsible Party	President
Timeframe	At the President's discretion- if appointed occurs within 3 business days of receipt of the case file
Procedure	The President may, at their discretion, appoint an Ad Hoc Committee to conduct an independent review of the evidence. The Committee shall be composed of qualified members who have had no prior involvement in the case and are capable of rendering an objective assessment.

Step 10: Student Notification and Presentation of Additional Evidence	
Responsible Party	Ad Hoc Committee
Timeframe	As scheduled by the Ad Hoc Committee
Procedure	The Ad Hoc Committee shall notify the student in writing of the scheduled date and time of the evaluation meeting. The student shall be afforded the opportunity to present any additional evidence relevant to the case that has not been introduced during any prior evaluation cycle. This ensures that all pertinent information is considered before a final determination is rendered.

Step 11: Hearing at the Presidential Level	
Responsible Party	Ad Hoc Committee / President
Timeframe	As determined by the Committee or President
Procedure	A formal hearing may be provided to the student if deemed necessary or relevant by the Ad Hoc Committee or the President. The decision to hold a hearing at this stage is at the discretion of the reviewing authority, based on the nature of the evidence and the circumstances of the case.

Step 12: Ad Hoc Committee Report to the President	
Responsible Party	Ad Hoc Committee
Timeframe	Following deliberation
Procedure	The Ad Hoc Committee shall prepare a comprehensive written report detailing its findings, analysis of the evidence, and recommendations. This report shall be submitted directly to the President for final review.

Step 13: Presidential Notification of Final Outcome	
Responsible Party	Office of the President
Timeframe	Following receipt of Committee report
Procedure	The Office of the President shall notify the student in writing of the final outcome of the appeal. The notification shall include the President's determination and the rationale supporting the decision.

Step 14: Presidential Determination — Final	
Responsible Party	President
Timeframe	Upon issuance of written notification
Procedure	Determinations rendered by the President are final and binding. No further institutional appeal shall be available once the President has issued a written determination. The student is advised to retain all correspondence and documentation related to the appeal process for their records.

IMPORTANT NOTES

- Appeals submitted after any applicable deadline will not be considered unless the student can demonstrate extraordinary circumstances that prevented timely filing.
- The student has the right to be informed of the identity of all Ad Hoc Committee members at each tier and may request the recusal of any member with a demonstrated conflict of interest.
- All proceedings and documentation related to the appeal are strictly confidential and shall be handled in accordance with applicable privacy regulations.
- Written notification of outcomes shall be provided to the student at each phase of the process.
- Determinations rendered by the President are final and binding. No further institutional appeal is available after the presidential determination has been issued.

This procedure is subject to periodic review and revision by the Office of the Vice President of Academic Affairs.

This policy is tied to LCME Element 8.5	**STUDENT COURSE AND CLERKSHIP EVALUATIONS**	Implementation Date/ Effective Date	June 15, 2026
		Last Reviewed/Update	June 1, 2026
		Approved by	MPCC
		Initially Approved	July 28, 2020

Introduction

One of the quality measures of its medical education that the Ponce Health Sciences University School of Medicine uses is the evaluations students complete of courses, clerkships, and faculty. The response rates for these evaluations have been variable, and several measures have been taken to improve them with limited success.

The Liaison Committee on Medical Education, in the 8.5 element of accreditation, requires that "in evaluating medical education program quality, a medical school has formal processes in place to collect and consider medical student evaluations of their courses, clerkships, and teachers, and other relevant information."

Rule

To promote more accurate input from the student body on their medical education evaluations, students will be required to complete the course and clerkship evaluations for all courses and clerkships.

The following strategies should be employed to promote the implementation of this norm:

- During the orientation period, the course and clerkship directors should share examples of changes made to the course based on student feedback collected through student course evaluations.
- Remind the students that their responses will be shared with the faculty in aggregate.
- Students who do not respond must receive automatic reminders via Canvas and Med-Hub. Please encourage participation.
- Announce to students a few days before the evaluation period begins that the course and clerkship evaluations will open.
- Take 10 minutes from last semester's small-group discussion, laboratory, or lecture time to request that the student complete the evaluation.
- Failure to complete the evaluations by the established deadline will result in a registration hold for the following term, which may delay registration and related administrative processes, including the timing of financial aid processing and access to Canvas courses for the incoming semester.

- The student course evaluation outcomes must be reviewed by the course and clerkship directors every semester. The course director and clerkship director must present the average results for each area, strengths, weaknesses, and recurring comments during the annual course evaluation presentations by the curriculum subcommittees. The action plan to be presented to the MPCC must include changes deemed appropriate to improve the course/clerkship in response to the students' concerns.

  This norm should be included in the syllabi of all courses and clerkships and will be effective beginning academic year 2026-2027.

This policy is tied to LCME Element 8.8	**STUDENTS' DUTY HOURS POLICY FOR CLINICAL ROTATIONS**	Implementation Date/ Effective Date	AY 2015-2016
		Last Reviewed/Update	May, 5 2025
		Approved by	MPCC
		Initially Approved	March 10, 2015

The Ponce Health Sciences University School of Medicine (PHSU-SOM) adheres to the recommendations of the ACGME, AMA, and the Puerto Rico Legislature regarding Residents' Duty Hours and is dedicated to regulating and monitoring students' working hours. This commitment will lead to less fatigue, more effective healthcare delivery, enhanced patient safety, a reduced likelihood of medical errors, and sufficient time for self-study and relaxation.

DUTY HOURS DEFINITION

Duty hours are defined as all clinical and academic activities related to the clinical clerkships or clinical rotations. This includes patient care (both inpatient and outpatient), administrative duties associated with patient care, the provision for transfer of patient care, time spent in-house during call activities, and scheduled academic activities such as conferences, small group sessions, seminars, ward rounds, quizzes, and other assessment and evaluation exercises. Duty hours do not include time spent reading, studying, or preparing presentations away from the duty site.

GENERAL POLICIES THAT APPLY TO ALL MEDICAL STUDENTS

1. Duty hours are limited to 80 hours per week, averaging over four weeks, inclusive of all in-house call activities for fourth-year medical students and 60 hours per week for third-year medical students.
2. All students will be provided with at least one 24-hour period per calendar week, free from all educational and clinical responsibilities, averaged over a 4-week period.
3. Adequate time for rest and personal activities will be provided. The students must have at least 14 hours of free time from clinical work and education after completing 24 hours of in-house call.

DUTY HOURS FOR THIRD-YEAR MEDICAL STUDENTS

1. Students in the third-year clinical clerkships are expected to abide by the working hours as specified in the clerkship syllabus and the policies of the teaching site to which they are assigned.
2. These working hours should be no more than 10 hours per day. Students not assigned to
   a. "in-house on-
   b. call" activities who have already been in the hospital for 10 hours should be discharged.
3. Students may be "on call" no later than Midnight. Exceptions to allow continuity of care are acceptable if they fall within the following regulations:
   a. Students will be "on call" no more than two (2) times per week and no more often than every third
   b. (3) night.

ON-CALL ACTIVITIES- FOURTH YEAR MEDICAL STUDENT

On-call activities are scheduled to provide fourth-year students with continuity of patient care experiences throughout a 24-hour period. An in-house call is defined as those duty hours beyond the regular workday when students, with adequate supervision (from residents or faculty), are required to be immediately available at the assigned institution.

1. In-house calls must occur no more frequently than every third night, averaging over a four-week period.
2. Continuous on-site duty, including in-house calls, must not exceed 24 consecutive hours. An at-home call is defined as a call taken from outside the assigned institution.

3. The frequency of at-home calls is not subject to the every-third-night limitation. An at-home call must not be so frequent as to preclude rest and reasonable personal time for each student.

OVERSIGHT

1. Each clinical department will have procedures to ensure consistent compliance with this policy.
2. This policy must be distributed to students in the course syllabus and the Moodle e-learning portal for each clerkship site. It must also be distributed to supervising faculty and residents at all instructional sites. It is published in the PHSU Catalog, the PHSU Student Policies Manual, and is available through the Public Folders of the Outlook Public Folders.
3. Medical student duty hour data is collected by the supervising faculty at each instructional site through attendance logs and reported to clerkship coordinators and department chairs.
4. The students can submit violations of this policy to the clinical department chair for immediate resolution. If a student is not satisfied with the resolution, the student can submit a letter detailing the violation to the Associate Dean of Faculty and Clinical Affairs, the Associate Dean for Medical Education, or the Dean. If the violation persists, the student can submit a grievance to the Vice President of Student Affairs.
5. The Medicine Program Curriculum Committee monitors medical student duty hours through clerkship evaluation performed by the Clinical Curriculum Subcommittee.

Backup support systems must be provided when patient care responsibilities are unusually difficult or prolonged, or if unexpected circumstances create student fatigue sufficient to jeopardize patient care.

Revised and approved by: Medical Program Curriculum Committee
May 5, 2025

	TRANSFER OF CREDITS POLICY (MSMS)	Implementation Date/ Effective Date	May 5, 2016
		Last Reviewed/Update	~ 2017
		Approved by	SOM Executive and Policy Committee
		Initially Approved	May 5, 2016

Purpose

Some students of the master's in sciences in Medical Science (MSMS) complete all graduation requirements but are unable to fulfill the minimum 3.0 GPA required for graduation. This is the result of a high credit load in several of the MSMS courses and a "C" in a major course may result in non-compliance with the required GPA. These students have to repeat courses to obtain higher grades so that their GPA increases to the required levels. However, some of them are accepted to continue post-graduate higher education training, such as medical education, and are unable to repeat courses in our institution.

The purpose of this policy is to establish a mechanism so that these students complete their MSMS degree while enrolled in another postgraduate higher education program.

Policy

MSMS students that comply with all graduation requirements, except the minimum 3.0 GPA, and are accepted in a medical education program or another doctoral program within two years after completion of the courses of the MSMS program may be eligible to get credit towards the MSMS degree from courses taken at another higher education institution.

The procedure to achieve this is the following:

1. The student must submit the MSMS Transfer of Credits Request Form to the Registrar's Office after completion of the courses of medical education or doctoral training within the established time.
2. The student must be enrolled in an LCME accredited medical school, a foreign medical school that has been appropriately accredited according to ECFMG standards, or a doctoral program in an institution of higher education with regional accreditation (such as the Middle States Commission on Higher Education).
3. After the student completes the course/s for which transfer credit is requested, the student must request that an official transcript be sent to Ponce Health Science University Registrar's Office.
4. The Associate Dean for Medical Education and the Assistant Dean for MSMS Program will evaluate the courses and grades in the transcript. A special analysis needs to be done for those students in medical schools where they have an "integrated" or "system-based" curriculum.

5. Only courses with A's and B's may be cross transferred to substitute former courses with a C. If the GPA increases to or above 3.0, the student will be certified as eligible for the MSMS degree.
6. The Student Promotion Committee will evaluate the results and confirm to the Registrar if the student is a candidate for graduation.
7. Students admitted to the MSMS prior to the creation of this policy are eligible and will
    a. be notified about this policy.
8. The PHSU Registrar may establish an administrative fee for the time and efforts this entails.
9. The policy is effective May 5, 2016, and will be in effect for two years, after which it will be revised by the Executive and Policy Committee.

This policy is tied to LCME Element 8.4	**USMLE REQUIREMENTS**	Implementation Date/ Effective Date	July 7, 2026
		Last Reviewed/Update	July 7, 2026
		Approved by	MPCC
		Initially Approved	~2001

United States Medical Licensing Examination (USMLE) Policy

This policy states the requirements and timeline established for Ponce Health Sciences University medical students for the USMLE examinations. The Satisfactory Academic Progress (SAP) policy for the MD Program establishes that six-years is the maximum time frame to complete the entire academic program.

Comprehensive Basic Sciences Examination

1. All medical students must take the Comprehensive Basic Science Examination (CBSE), developed by the National Board of Medical Examiners (NBME), as a USMLE Step 1 performance indicator at the end of each semester.
2. The test score will be used to assess the readiness of the student to pass the USMLE Step 1. A minimum score in the CBSE is required to be authorized to take the USMLE Step 1. The required minimum score is revised annually and announced to second-year students at the beginning of each academic year.

USMLE Step 1

The student applies to take the USMLE Step 1 through the Licensing Examination Services at the USMLE website and selects the eligibility period.

1. Students who pass all pre-clerkship courses and obtain the required minimum score in the NBME CBSE must take and pass the USMLE Step 1 before beginning the clerkship phase of the curriculum.
2. The student must take the USMLE Step 1 no later than July 10 to have the results before starting third-year clerkships. If a student fails the USMLE Step 1, the student must enroll in the PHSU Basic Science Review Course (SKD 091) to prepare to pass the USMLE Step 1 exam.
3. The student can only enroll to begin the clerkships during the official dates published by the Registrar's Office.
4. Students have a maximum of three opportunities to pass the USMLE Step 1.
5. Students cannot be enrolled for more than one year on remedial courses in preparation to pass the USMLE Step 1 or out of the regular medical program curriculum unless for an approved medical LOA.
6. Students who fail the USMLE Step 1 for the third time or have been one year or more out of the regular medical program curriculum program will be referred to the Students Promotion Committee for consideration of dismissal from the Medicine Program.

USMLE- Step 2

1. All medical students must pass the USMLE Step 2-CK component as a requirement for graduation.
2. It is strongly recommended that the students take the USMLE Step 2-CK no later than August 30 of the year they apply to residency programs so that the score is available when the Electronic Residency Application System (ERAS) opens, and the interviews for residency programs begin.
3. Students must receive passing scores on the USMLE Step 2 CK by the annual deadline for their rank order lists to be verified by PHSU and be able to participate in the National Resident Matching Program (NRMP). Without verification of graduation credentials by the medical school, students will not be able to participate in the match process.
4. The last opportunity to take and pass the USMLE 2-CK examination to complete this graduation requirement with the May graduating class will be the last week of April of the corresponding graduation year.

Approved by MPCC: April 17, 2023,
Effective: July 1st, 2023