# SCHOOL OF MEDICINE

Visit program website. (https://medschool.ucsf.edu/)

## Summary Description

### About the School of Medicine

Consistently ranked among the nation's top medical schools (https://www.ucsf.edu/news/2019/03/413571/ucsf-school-medicine-ranks-us-news-best-graduate-schools-top-five-ten-years/?utm_source=SoM&utm_medium=SoM&utm_campaign=2019_bestgradschools&utm_term=), the UCSF School of Medicine earns its greatest distinction from its outstanding faculty – among them are five Nobel laureates, 101 National Academy of Medicine members, 64 American Academy of Arts and Sciences members, 51 National Academy of Sciences members, and 17 Howard Hughes Medical Institute investigators.

## Mission

The UCSF School of Medicine strives to advance human health through a fourfold mission of education, research, patient care and public service.

## History

Founded in 1864 as Toland Medical College, the school joined the University of California in 1873, and in 1898, moved to its present Parnassus Heights campus. The first UC hospital opened here in 1907, eventually growing into Moffitt-Long Hospitals and later Benioff Children's Hospital. These facilities, together with Mount Zion Hospital, now comprise the UCSF Medical Center.

UCSF faculty have also treated patients and trained students at Priscilla Chan and Mark Zuckerberg San Francisco General Hospital and Trauma Center since 1873 and at the San Francisco VA Medical Center for over 50 years. UCSF is affiliated with a number of other hospitals in the Bay Area and Fresno, including Children's Hospital Oakland.

### Recent Accomplishments and Innovations

- **2021:** School of Medicine ranked (https://www.ucsf.edu/news/2021/03/420146/us-news-best-grad-school-rankings-2022/) #4 in research and #2 in primary care by *U.S. News & World Report*.
- **2019:** School of Medicine ranked (https://www.ucsf.edu/news/2019/03/413571/ucsf-school-medicine-ranks-us-news-best-graduate-schools-top-five-ten-years/) #5 in research and #3 in primary care by *U.S. News & World Report*.
- **2018:** UCSF Fresno established (https://www.ucsf.edu/news/2018/07/411066/ucsf-establishes-ucsf-fresno-branch-campus-ucsf-school-medicine/) as a branch campus of the UCSF School of Medicine.
- **2017:** Fifteen UCSF researchers named to the first cohort of Chan Zuckerberg Biohub Investigators.
- **2016:** The new Priscilla and Mark Zuckerberg San Francisco General Hospital and Trauma Center opens.
- **2015:** UCSF Medical Center opens new women's, children's and cancer hospitals at Mission Bay.
- **2015:** UCSF ranks second again in clinical medicine (https://www.ucsf.edu/news/2015/08/131306/ucsf-ranks-among-top-world-universities-2015-rankings/) in the annual Academic Ranking of World Universities.
- **2012:** Nobel Prize awarded to UCSF's Shinya Yamanaka (https://www.ucsf.edu/news/2012/10/104393/shinya-yamanaka-wins-2012-nobel-prize-medicine/) for the discovery of how to transform ordinary adult skin cells into stem cells.
- **2011:** Opening of the UCSF Teaching and Learning Center (https://edtech.ucsf.edu/teaching-learning-center/) including the Kanbar Simulation Center (https://meded.ucsf.edu/kanbar-center-simulation-and-clinical-skills/).
- **2010:** UCSF educators release *Educating Physicians: A Call for Reform of Medical School and Residency*.
- **2009:** Nobel Prize awarded to UCSF's Elizabeth Blackburn (https://www.ucsf.edu/news/2009/10/410881/ucsfs-elizabeth-blackburn-receives-nobel-prize-physiology-or-medicine/) for the discovery of the key enzyme telomerase.

**Comprehensive list of UCSF achievements and milestones (https://www.ucsf.edu/about/achievements/) going back to 1914.**

Find out more at medschool.ucsf.edu/about-school (https://medschool.ucsf.edu/about-school/).

## Policies

The Guidelines and Policies for medical students at UCSF can be found online at Medical Student Policies (https://meded.ucsf.edu/about-us/guidelines-policies/medical-student-policies/). The Policies section features the regulatory mandates that students need to follow for institutional and/or compliance reasons. Unless otherwise indicated, all UCSF Medical Student Policies also apply to UCSF medical students who are conducting their learning at regional campuses. The Guidelines represent the deans' recommended approaches to the items below based on their years of experience. Each Guideline also includes instructions for how to request a different approach based on individual circumstances. For your convenience, links to policies of particular relevance to the following areas of interest are given below.

### Absences

#### Foundations 1
**Overview**

The Foundations 1 (F1) phase of the Bridges Curriculum evaluates student competency and progress through a range of assessments, a number of which involve complex logistics for faculty, staff, and facilities. This policy takes into account:

- The desire to provide flexibility where possible for students with personal exigent life events (e.g., religious observance, family obligations, professional commitment) that coincide with scheduled assessments.
- Consideration of students' need for assessment preparation.
- The availability of faculty, staff, and facilities for assessments.
- The importance of maintenance of assessment security.

**Principles**

a. Predictable and unpredictable personal and professional events can arise for individual students that conflict with scheduled assessments. UCSF SOM policy and procedures allow for students to request to reschedule assessments, for faculty and staff to consider the requests on a case-by-case basis, and for decisions about rescheduling, where possible, to be made that are fair and consistent across students and the curriculum.

b. To minimize academic risk, assessments should not be rescheduled to times that overlap with ongoing curricular activities, or at times that would significantly reduce student ability to prepare for the assessment.

c. Students are accountable for:
- Completing all required assessments.
- Communicating professionally in advance about the perceived need to reschedule an assessment.
- Monitoring their on-time attendance.
- Accurately managing their schedules.

## Policy

a. Students may request the rescheduling of an F1 assessment activity for exigent non-emergency reasons. Requests are considered on a case-by-case basis and decisions made based on precedent and circumstances unique to the student, the time point in the curriculum, and the logistics of the assessment.

b. A student who is unable to complete an assessment because of an unforeseen illness or personal/family issues must notify the relevant faculty director and staff member as soon as possible, preferably before the assessment begins and, if not possible before, within 24 hours after the scheduled exam start time, using the contact information available on the Bridges Faculty (https://meded.ucsf.edu/md-program/current-students/curriculum/bridges-faculty/) page.

c. A student with a pattern of recurrent assessment rescheduling requests may be counseled by a faculty member or dean and may receive a Professionalism/Physicianship (https://meded.ucsf.edu/policies-procedures/physicianship-policy/) evaluation.

d. CMC clinical skills standardized patient examinations generally cannot be rescheduled.

e. Exam viewings will not be held for individual students outside of the time scheduled in advance for the entire class, except in cases described below.

**Foundations 1 Policy on Assessment Absence and Rescheduling (https://meded.ucsf.edu/policies-procedures/foundations-1-policy-assessment-absence-and-rescheduling/)**

## Foundations 2
### Purpose
To outline the attendance policy for each of the components of F2 (clinical and classroom-based), including how to give notice of an absence (either in advance or emergently), and what make-up work is expected for absences.

**Note:** Students requesting an absence from components of F2 should submit their request here (https://ucsf.co1.qualtrics.com/jfe/form/SV_8dfouJ4OU19XZWd/).

### Overview
Foundations 2 is the second phase of the Bridges curriculum when students will complete core clinical clerkships as well as revisit foundational science concepts and learn about diagnostic testing in a recurring educational day (IDS 113). Students will also have the opportunity to enroll in short clinical electives (CIExes) to explore a variety of clinical specialties beyond the core clerkships. In this phase of the curriculum, the student assumes new and central roles as a provider of patient care and a member of a clinical team. In addition, students will form new learning communities in IDS 113 (Foundational Sciences in Foundations 2) as well as participate in learning and assessment activities in ARCH weeks 5&6.

To fulfill these important responsibilities, attendance and punctuality become markers for the core competency of professionalism. It is recognized there may be circumstances that will require students to miss entire days or parts of a day.

### Definitions
IDS 113 or FS in F2: Foundational Sciences day in Foundations 2 is one day every other week students take a day out of their clinical clerkships to participate in classroom sessions to revisit core foundational science concepts relevant to their clinical experiences.

CIExes: Clinical Immersive Experiences are primarily 2-week electives which give students an opportunity to explore areas of interest outside of the core clerkships.

ARCH: The Assessment, Reflection, Coaching and Health weeks are required weeks where students reconvene on the main campus to participate in assessment activities, sessions to help them reflect and focus on their overall progress and well-being, and meetings with their coach.

Excused Absences: Approved absences for one of the following circumstances:

- Emergent Absences: absences of at least one full day that result from significant healthcare issue or family events (family emergency, etc.)
- Planned Absences: absences of at least one full day that are requested in advance to participate in planned activities such as attendance at a national meeting or family celebratory event.
- Planned Absences because of Accommodations for Protected Disabilities: Institutionally approved alterations in the conduct of a rotation to allow students with protected disabilities to fulfill their educational requirements, including the need to excuse oneself from the clinical environment for ongoing health care needs.
- Preventive/Routine Care Absences: absences of less than ½ a day to address preventive or routine health care issues.

### Principles

a. The primary responsibility of the students during the Foundations 2 phase of the curriculum is to successfully master the material required to earn a passing grade in all core and elective clerkships as well as in the IDS 113 course and ARCH weeks.

b. Student wellbeing and professional development are interdependent with competency development and professional identity formation.

c. Unforeseen, emergent issues and planned absences and preventive/healthcare brief absences will be accommodated within reason to support students' needs, mindful of the importance of continuity of learning, achievement of required competencies for the curriculum and minimizing disruption to patients and the clinical care delivery team.

d. Learning to optimize personal health and manage personal illness within the confines of a clinical care environment based on teamwork is a critical aspect of professional identity formation and patient care skills.

e. Institutionally sanctioned accommodations should be respected in the clinical learning environment, to the extent desired by the student.

### Policy

a. During the Core Clerkships:
   i. One day of excused absence is allowed in 4 weeks of a clinical clerkship.
   ii. At the discretion of the clerkship Director and on a case-by-case basis, make-up activity may be required for any missed days.

iii. Students whose absences interfere with their learning and demonstration of necessary competencies will be required to make up lost time and possibly repeat all, or part of, the clerkship.

b. During the Clinical Immersive Experiences:
   i. One excused absence is allowed for every 4 weeks of CIExes.
   ii. For absences exceeding 1 day/4 weeks, the CIEx will need to be repeated.

c. During IDS 113: Foundational Sciences in Foundations 2 (FS-in-F2):
   i. One excused absence is allowed during the course in addition to the days missed during scheduled vacation (2 days).
   ii. Make-up activity will be required for absences exceeding the allowed number (i.e., more than 3 total absences).

d. During the Family and Community Medicine (FCM) longitudinal core clerkship:
   i. Two excused absences are allowed (one day of clinic and one day of FCM seminar) in addition to the 2 days of scheduled vacation.
   ii. Make-up activity will be required for absences exceeding the allowed number (i.e., 3 or more total absences).

e. During the ARCH Weeks 5 and 6:
   i. One excused absence is allowed in either ARCH week but not in both.
   ii. No absence will be pre-approved for when a student is scheduled for an assessment.
   iii. Make-up activities for any missed assessment activity due to emergency circumstances will be required and other missed activities may require make up.

f. Absences for routine scheduled health care appointments of less than 2 hours do not need approval but do require notification of the clinical care delivery team. No more than one routine health care appointment should be scheduled during any element of F2 (i.e. each core clerkship, electives, IDS 113, Longitudinal FCM, ARCH week). Students who require absences for health care appointments at greater frequency than this should consult with the Associate Dean for Students for guidance.

g. Students are responsible for notifying clinical care delivery teams about planned and health care absences in advance of the absence and for informing their clerkship director about emergent absences as soon as practical.

h. Accommodations for protected disabilities will be provided during the clerkships if requested in advance by the student, in accordance with UCSF procedures on informing faculty about accommodations. Accommodations for protected disabilities cannot be applied retroactively.

**Foundations 2 Attendance Policy (https://meded.ucsf.edu/policies-procedures/foundations-2-attendance-policy/)**

## Career Launch
### Purpose
To outline the attendance policy for each of the components of Career Launch (clinical and classroom-based), including how to give notice of an absence (either in advance or emergently), and what make-up work is expected for absences.

**Note:** Students requesting an absence from classroom-based components of Career Launch (IDS 119: Introduction to Career Launch, IDS 120: Designing and Conducting Research, ARCH weeks 7&8, and IDS 115: Coda), should submit their request here. For clinical components of Career Launch, students should discuss any absence requests with their clerkship director and/or clinical team.

### Overview
Career Launch is the final, highly individualized phase of the Bridges curriculum, lasting 61 weeks. Students have dedicated time to complete scholarly projects while they pursue advanced clinical training (Advanced Core Skills, Advanced Electives, and a longitudinal outpatient preceptorship or SPAN). In this phase of the curriculum, students will become central providers of care in their sub-internships and their SPAN outpatient preceptorship, as well as pursue electives that will enhance their clinical skills. They will form learning communities with their inquiry advisor, complete the IDS 120 (DCR), IDS 119 (ICL), and IDS 115 (Coda) courses, as well as participate in learning and assessment activities in ARCH weeks 7&8. Most students will also be finalizing their career choices and interviewing for residency positions.

To fulfill these important responsibilities, attendance, punctuality and time management continue to be markers for the core competency of professionalism. It is recognized there will be circumstances that will require students to miss entire days or parts of days.

### Principles
a. The primary responsibility of students during the Career Launch (CL) phase of the curriculum is to successfully complete CL requirements in preparation for their chosen career pathway.

b. Student professional development and wellbeing are interdependent with competency development and professional identity formation.

c. Learning to optimize and manage personal health within the confines of the learning and clinical care environments is a critical aspect of professional identify formation and patient care skills.

d. Allocating time and managing planned absences are important skills that students must learn to deploy to successfully fulfill both curricular goals and personal career planning.

e. Institutionally sanctioned accommodations should be respected in the CL learning environments.

### Policy
a. The primary responsibilities of the students during the Career Launch phase of the curriculum are to successfully master the material required to earn passing grades in all clinical rotations (Advanced Core, Elective Skills, SPAN), the curricular components, (IDS 119 or ICL, IDS 120 or DCR and IDS 115 or Coda) and ARCH Weeks. Students are also required to meet the inquiry project requirements.

b. Students' professional development and well-being will require planned absences including absences for interviews, meetings, and scheduled health care appointments. In addition, unexpected absences may be necessary. These absences will be accommodated within reason to support students' needs, mindful of the importance of continuity of learning, achievement of required competencies for the curriculum and minimizing disruption to patients and the clinical care delivery team.

c. Students will be responsible to manage their personal schedules and health care needs to fit within the confines of their learning environments and to comply with the reporting requirements.

d. Course and rotation directors will respect Institutional sanctioned accommodations to the extent desired by the student.

**Career Launch Attendance Policy (https://meded.ucsf.edu/policies-procedures/career-launch-attendance-policy/)**

## Leaves

### Temporary or Permanent Separation of Students from the School of Medicine

A. Temporary Separation of Students from the School of Medicine: Leaves of Absence
   i. Voluntary Leaves of Absence: a temporary separation of a student from the School of Medicine, with the expectation that the student will return to the School of Medicine within an assigned timeframe, subject to the approval of a designated UME Associate Dean.
      1. Voluntary Leaves of Absence may be granted in accordance with School of Medicine policies under the following circumstances:
         1. Programmatic Leaves of Absence may be granted to allow students to participate in educational experiences at UCSF or other institutions or to appropriately time their graduation.
         2. Personal Leaves of Absence may be granted if a student requests time off for personal issues.
   ii. Involuntary Leaves of Absence: An involuntary leave of absence is a separation of a student from the School of Medicine for reasons related to performance, with the expectation that a student will return to School of Medicine within an assigned timeframe having addressed performance issues.
      1. Mandated Leaves of Absence
         1. The Committee on Academic Standards may mandate a leave of absence for a student whose academic progress is unsatisfactory, as described in the UCSF Academic Senate Bylaws Appendix VII: 4.0 Step 2: In-Depth Review and Dismissal Action.
         2. In exigent circumstances, a designated associate dean may mandate a leave of absence for a student whose academic progress is unsatisfactory.
      2. Administrative Leave of Absence
         1. The Dean or designee may place a student on Administrative Leave of Absence if a student has engaged in or is alleged to have engaged in behavior that is dangerous or deleterious to the educational, research, clinical, or community environment.
   iii. Return to the School of Medicine Following a Leave of Absence
      1. The School of Medicine may require that a student on a leave of absence meet specific criteria to reenter the curriculum. The Committee on Academic Standards or a designated associate dean may identify these criteria. Such criteria may include but are not limited to:
         1. The requirement that a licensed professional attest that the student is able to meet the UCSF Technical Standards.
         2. The requirement for the student to meet specific academic readiness criteria.
      2. Failure to meet required criteria may result in discontinuation without notice.
      3. Regardless of the nature of the leave, all students must return from one or more leaves of absence in time to meet the School of Medicine time to graduation requirements.

**See section VIII.A of the Academic Senate Regulations of the Faculty of the School of Medicine (https://senate.ucsf.edu/appendix-IV/ #regulations)**

## Withdrawals

Withdrawal is a voluntary action taken by a student that results in permanent separation from the School of Medicine.

a. Students may request a Withdrawal in Good Academic Standing if they would otherwise be eligible to continue in the curriculum.
   iv. Students who withdraw in good academic standing are eligible to apply for readmission in accordance to School of Medicine readmission policy.
b. Students who are eligible for dismissal may only request a Withdrawal Not in Good Academic Standing.
   v. Students who withdraw Not in Good Academic Standing are ineligible for readmission.
c. Withdrawal decisions are voluntary and thus are not eligible for appeal.

**See section VIII.B.4 of the Academic Senate Regulations of the Faculty of the School of Medicine (https://senate.ucsf.edu/appendix-IV/ #regulations)**

## Readmission

### Purpose
To clarify the eligibility of and procedures for a student who requests readmission to the UCSF School of Medicine.

### Overview
UCSF prides itself in its recruitment of talented and passionate students who exemplify the characteristics and qualities necessary to become outstanding physicians. The standard UCSF MD program is a four-year, three-phase curriculum. Medical students also have the opportunity to combine their MD program with other degree-based or research activities that increase the time-span of their time to the MD degree in a predicable amount. In some instances, due to academic or personal difficulties; a student may request to withdraw from the program. UCSF recognizes extenuating circumstances and supports readmission of eligible students to complete their degree.

### Principles
a. The criteria for readmission to the School of Medicine should mirror the standards applied to all applications for admission to the School, including in particular:
   i. evidence of outstanding academic performance; and
   ii. personal attributes required for the practice of medicine.
b. There should be evidence, if there were patterns of academic performance and behavior that led to the withdrawal, that they have been addressed and resolved.

### Policy
a. Eligibility for Readmission
   • Only those who voluntarily withdraw from the UCSF School of Medicine while on good academic standing are eligible to apply for readmission.
b. Petitioning for Readmission
   • Any student desiring readmission must discuss this plan with the Associate Dean for Students prior to submitting a petition for readmission
   • Petitions for readmission will be accepted no earlier than one full academic quarter after the date of the withdrawal and no later than four quarters following withdrawal, unless previously agreed upon by the School.

- A student seeking readmission must submit a letter requesting readmission to the  Associate Dean for Students. The petition letter should:
    - Request readmission
    - Describe the rationale for the decision to withdraw, including an assessment of any academic, health, or personal challenges present leading up to or at the time that the student decided to withdraw.
    - Outline, in detail, all activities since leaving medical school, emphasizing those that the former student has undertaken in preparation for a return to the medical curriculum.
    - Describe how the former student has addressed any academic issues that contributed to the decision to withdraw and how the student's approach to medical school will differ upon readmission in contrast to the approach that the student used prior to withdrawing from school.
    - Describe the resolution or status of any personal or health issues that may have affected medical school performance or how the student will meet technical standards with or without accommodations for any protected disability.
  - In addition to the letter, the following documents may be submitted in support of the student's application for readmission.
    - If course work is completed during the time away from medical school, transcripts of grades will be required.
    - Up to two letters of recommendation in support of readmission will be accepted, but not required.
- c.  Procedures for evaluating the petition for readmission
  - An ad hoc Committee on Readmission will be constituted. The Committee membership is as follows; all have voting rights and all (or a designee approved by the Vice Dean for Education) must be present to participate in the decision-making process.
    - Associate Dean for Admissions (chair of the Committee)
    - Associate Dean for Curriculum
    - Chair of the Faculty Council's Committee on Academic Standards
    - One faculty member in a curriculum leadership role
    - One faculty member at large
  - The  ad hoc Committee on Readmission will consider the following information:
    - The student's letter requesting readmission, along with any other documents submitted by the student.
    - A report summarizing the student's academic history during the time of their previous enrollment. This report will be prepared by the Medical Education Assessment team.
    - The committee may decide to interview the student in person; this is not a mandatory component of the readmissions process.
  - The Committee will, by simple majority, decide on one of the following recommendations to the Vice Dean for Education:
    - Readmission to the curriculum without conditions
    - Readmission to the curriculum on academic probation, with required remediation including repetition of elements of the curriculum.
    - Deferred decision pending resolution of ongoing issues
    - Denial of readmission
  - The final decision about readmission resides with the Vice Dean for Education. That decision will be communicated to the student

in writing by email or other method. The decision may not be appealed.

- d.  Conditions in the event of readmission
  - A student who is offered the opportunity for readmission cannot defer the readmission to another quarter or academic year.
  - Students who are readmitted following a withdrawal must complete the curriculum that is operational at the time of their readmission. This may require that the student repeat previous coursework.
  - Stipulations for academic progress will be outlined for any student who is readmitted following a withdrawal. This may require that the student repeat previous coursework.
  - A student is only eligible for readmission with advanced standing following a withdrawal once.

**Readmissions Policy (https://meded.ucsf.edu/policies-procedures/ readmissions-policy/)**

## Academic Probation
### Student Academic Standing
- a.  There are three categories of student academic standing:
  - d.  Good Academic Standing
    1. A student is considered to be in good academic standing if eligible to return to or continue in the curriculum.
  - e.  Good Academic Standing on Academic Probation
    1. A student whose performance is described in one of the following ways is on Academic Probation:
        1. A student has earned E or F grade(s) in coursework totaling six or more credit units in any quarter.
        2. A student has earned E or F grade(s) in coursework totaling 10 or more credit units in 3 consecutive quarters.
        3. A student has received Physicianship Evaluation Forms in excess of the number allowed by UCSF School of Medicine Policy.
    2. Students on Academic Probation are eligible to continue in the curriculum and are considered to be in good academic standing.
    3. The status of Academic Probation will remain in effect until removed by definitive action of the Committee on Academic Progress, under the following circumstances:
        1. A student on academic probation resulting from E or F grades who successfully repeats all educational experiences in which a grade of E or F was received and who then earns P or H grades in all coursework in a subsequent quarter of school.
        2. A student on academic probation resulting from excessive Physicianship Evaluation Forms who completes a subsequent three quarters of enrollment without additional Physicianship Evaluation Forms

**See section VII.D.1.b of the Academic Senate Regulations of the Faculty of the School of Medicine (https://senate.ucsf.edu/appendix-IV/ #regulations)**

## Dismissal
5. Dismissal is an academic action taken by the School of Medicine that permanently separates the student from the School of Medicine.

i. Dismissal may occur for any of the following reasons:
   1. Student receives a non-passing grade while on academic probation.
   2. Student meets criteria for dismissal due to a pattern of unprofessional behavior as evidenced by excessive physicianship evaluation forms.
   3. Student is unable to meet the Technical Standards of the School of Medicine with or without institutionally approved accommodations.
      1. Failure to seek or to use institutionally approved accommodations will not be accepted as sufficient grounds for circumventing this adverse academic action.
   4. Student's pace of progress in the MD curriculum precludes the completion of all required coursework for the degree of Doctor of Medicine within the maximum time to graduation designated by UCSF School of Medicine policy.

ii. Students are entitled to appeal a dismissal decision in accordance with the UCSF Academic Senate Bylaws Appendix VII Section 5.0 Appeal.

iii. Students dismissed from the School of Medicine are not eligible for readmission.

**See section VIII.B.3. of the Academic Senate Regulations of the Faculty of the School of Medicine (https://senate.ucsf.edu/appendix-IV/ #regulations)**

## Grading
### Foundations 1
#### Overview

The approach to assessment of student performance in the Bridges Curriculum is a program of assessment that is integrated across the curriculum beyond any one subject or course and which embraces the philosophy of *assessment for learning.* Integrated courses along with integrated assessments and grades encourage students to connect all of the knowledge and skills they are learning in the classroom and in clinical settings, just as a physician integrates knowledge and skills in patient care. The Bridges Curriculum program of assessment promotes each student's individual path toward competence in the unique knowledge, skills, and attitudes that characterize the Bridges physician. In the *assessment for learning* philosophy, assessment activities contribute significantly to student learning by giving each student ongoing information (data and other feedback) about performance that is key to guiding their individual next steps in the UCSF MD competencies and milestones (https://meded.ucsf.edu/md-program/current-students/ curriculum/md-competency-milestones/).

Seven core competencies and associated milestones define the expectations for students throughout the curriculum. Frequent formative assessments will guide students' future learning, promote reflection, and help shape students' values about continuous improvement of their practice of medicine.

The School has developed several key resources to support student learning and professional development:

- **Coaches:** Learning and professional development is supported throughout medical school by mentorship and guidance from Coaches (https://meded.ucsf.edu/md-program/current-students/ curriculum/bridges-faculty/coaching-program/). Each student is assigned a clinician educator Coach who provides advising and mentoring, teaches foundational clinical skills, and supports the student in reviewing individual progress and setting learning goals.

- **Dashboard:** The Bridges Student Dashboard houses performance data for each student and provides space for students to reflect on progress with their Coach and to generate individual learning plans. Students take responsibility for the mastery of skills and knowledge with frequent receipt of information in their dashboard, regularly reflecting on ways to improve, and seeking additional practice.

- **ARCH Weeks:** Assessment, Reflection, Coaching, and Health (ARCH) Weeks (https://meded.ucsf.edu/md-program/current-students/ curriculum/foundations-1/arch-weeks/) are four weeks in the Foundations 1 phase of the Bridges Curriculum that provide students dedicated time for reflection on competency development, enable learning planning with Coaches, and provide opportunities for consolidation and integration of learning.

- **Frequent formative assessment activities:** Weekly Checkpoints for medical knowledge throughout Foundations 1 promote learning and self-assessment. Weekly, students complete multiple choice questions (MCQs) and open-ended questions (OEQs) designed to confirm if students have achieved the expected level of competency with the material for the week. The Weekly Checkpoints have additional benefits because the act of testing has a positive direct impact on learning. Numerous studies suggest the active process of retrieving information from memory strengthens memory more and leads to longer retention than re-studying or reviewing material: this phenomenon is called "the testing effect."

#### Principles

Student assessment in the Bridges Curriculum is designed to meet multiple goals:

a. Provide ongoing feedback to students about their learning
b. Promote deep learning, critical thinking, retention of knowledge, and habits of inquiry aligned with the Bridges Curriculum mission
c. Provide opportunities for frequent formative feedback
d. Determine that students have attained by graduation the knowledge, skills, and attitudes at a level of mastery necessary to provide high-quality care
e. Prepare students to excel on USMLE licensing exams
f. Provide timely grades within 6 weeks of the end of each course.

#### Policy

a. **Weekly Checkpoints:** Students are required to complete the required number of weekly checkpoint MCQs and OEQs assigned by the course, as requirements in the Practice-Based Learning and Improvement competency.

b. **Small Group Evaluations:** Each F1 course includes assessments by small group leaders of students' performance in multiple competency domains in Foundational Science and Core Inquiry Curriculum (CIC) groups. Faculty assess students using a performance rubric with numerical scores and a narrative description of the student's performance.

c. **Summative Medical Knowledge Assessments:** Summative assessments of medical knowledge will occur at the end of each Foundations 1 Foundational Science (FS) block and in some cases at mid-point in an FS block. These summative assessments will consist of open-ended questions (OEQs). The OEQs on the summative assessments are similar in format to the Weekly Checkpoint OEQs and emphasize application of knowledge (rather than recall of facts alone), critical thinking, and written communication skills.

d. **Grading:** In Foundations 1, students receive one grade for each of the Interdepartmental Studies (IDS) courses (https://meded.ucsf.edu/ current-students/). This grade integrates student performance in all

elements within the IDS course, including the Clinical Microsystem Clerkship (CMC), Foundational Science (FS) block(s), the Core Inquiry Curriculum (CIC), and ARCH Weeks.

e. All grades are returned to students within six weeks of the end of the course.

**Foundations 1 Grading and Assessment Policy (https://meded.ucsf.edu/ policies-procedures/foundations-1-grading-and-assessment-policy/)**

## Foundations 2 and Career Launch Grading and Assessment Policy
### Purpose
To outline student assessment in courses/clerkships in the clinical setting in Foundations 2 and Career Launch phases of the Bridges Curriculum.

### Overview
UCSF students are expected to achieve competence on the graduation milestones by the time they complete medical school. For each UCSF competency, UCSF has developed milestones that students are expected to achieve by defined time points in the four-year curriculum. In Foundations 2 and Career Launch clerkships, students' progress in particular competency domains is assessed through a variety of methods within each clerkship or course and longitudinally. Criteria for achievement of competence within each clerkship or course and competency domain are defined by the faculty.

### Principles
a. The standard of achievement is a "Pass." Passing a clerkship clinically demonstrates working knowledge and application of that knowledge in patient care. Passing performance is demonstrated on clerkship evaluations submitted in the electronic evaluation system by supervising residents and attendings, written examinations, other assignments, assessment of professional behavior, and any other required learning activities including makeup work for missed sessions.

b. Students must demonstrate mastery of core medical knowledge in core clerkships as demonstrated on clerkship examinations.

c. Students in longitudinal integrated clerkships must make satisfactory progress over Foundations 2.

### Policy
**Assessment and Grades**
- All core clerkships (as of January 2019; see information on core clerkship grading change here (https://meded.ucsf.edu/md-program/ current-students/curriculum/foundations-2/core-clerkships-assessment-and-grading/)), two-week clinical electives, and non-clinical electives are graded Pass/Incomplete/Provisional Non-Pass/ Fail; Honors is not available in these courses.
- Most four-week advanced clinical courses in Career Launch are graded Honors/Pass/Incomplete/Provisional Non-Pass/Fail (H/P/I/E/ F).
- Off-campus clerkships are graded as Pass/Fail only, and are not eligible for Honors.
- Supervising faculty and residents complete evaluations of students including numerical ratings and narrative comments.
- Summary evaluations of student performance in all required clerkships include numerical ratings and narrative comments about performance across competencies, compiled by the clerkship director working with the grading committee.
- The Incomplete "I" grade is assigned when a student's work is of passing quality, but incomplete for a valid reason. The provisional non-passing "E" grade is assigned when a student's work is

below passing quality. Remediation is required for a non-passing performance. Requirements to convert an I or E grade to a "P" grade are established by the course director.

- Students in longitudinal integrated clerkships (LICs) meeting the standard of achievement receive "In Progress" (IP) grades in the Registrar's system during the LIC. At the conclusion of the LIC, students are assigned a grade for each clerkship completed within the LIC. For any student whose work is below passing quality in one or more disciplines during the year, the LIC course directors assign a provisional non-passing grade that is equivalent to 6 or more units of the "Provisional Non-Passing" (E) grade for that quarter and has the same academic consequences as receiving an E grade in non-LIC courses.

- For details about associated academic consequences, please see the Satisfactory Academic Progress Policy (https://finaid.ucsf.edu/ application-process/eligibility/satisfactory-academic-progress-medicine/) and Academic Senate School of Medicine bylaws (https:// senate.ucsf.edu/appendix-IV/) (section VII. **School of Medicine Student Progress Requirements**).

### Clerkship Exams
- Students who do not pass a core clerkship examination on the first attempt but otherwise pass the clerkship clinically receive an I (incomplete) grade for the clerkship.
- Students who do not pass a core clerkship examination on the second attempt but otherwise pass the clerkship clinically receive an E (provisional non-passing) grade for the clerkship.

### Grade Timeliness
- It is the clerkship director's responsibility to return all clerkship summary evaluations and grades to students within 38 days of the end of the clerkship.

### Assessments Outside of Individual Clinical Rotations and Courses
- All students are required to take 2 standardized patient (SP) clinical performance exams during Foundations 2/Career Launch: the Mini-CPX and CPX (https://meded.ucsf.edu/clinical-performance-exam-cpx/). Passage of the CPX is a graduation requirement.
- Students who have not yet taken the USMLE Step 1 examination are required to take the CBSE (Comprehensive Basic Science Examination) during an ARCH Week.

### Accommodations for Students with Disabilities
- Clerkship directors are committed to providing academic accommodations for students with disabilities. To be eligible for accommodations for clerkship or assessment activities on the basis of a disability, students must provide documentation from Medical Student Disability Services well in advance of the clerkship.

**Foundations 2 and Career Launch Grading and Assessment Policy (https://meded.ucsf.edu/policies-procedures/foundations-2-and-career-launch-grading-and-assessment-policy/)**

## Conduct
### Professional Behavior Expectations for UCSF Medical Students
### Purpose
To outline professional expectations for medical students

### Principles
- Students must demonstrate professional behavior expected of a medical student and physician in training.
- Students deserve timely and specific feedback about areas for improvement in the professionalism competency.

- Faculty discussing professionalism feedback need to understand the professional expectations for students.
- Students must achieve the UCSF professionalism milestones.

## UCSF School of Medicine Professional Expectations

Students are expected to demonstrate the professional and personal attributes for meeting the standards of professionalism inherent in being a physician, as outlined in the UCSF MD competency milestones (https://meded.ucsf.edu/md-program/current-students/curriculum/md-competency-milestones/) and detailed below.

a. Meet professional responsibilities
- The student can be relied upon to communicate effectively.
- The student fulfills responsibilities that are essential to being a medical student at UCSF without repeated reminders (ie: responding to emails, completing immunization or USMLE exams by the required dates.)
- The student completes essential responsibilities and assigned tasks by the prescribed deadline.
- The student represents actions and information accurately and truthfully.

b. Effort toward self-improvement and adaptability
- The student accepts criticism.
- The student demonstrates awareness of their own inadequacies.
- The student considers and makes needed changes.
- The student accepts blame for failure and responsibility for errors.
- The student is professional and respectful during times of stress.
- The student demonstrates humility.

c. Relationships with administrators, faculty, staff, colleagues, patients, or families.
- The student behaves in an appropriate manner with administrators, faculty, staff, colleagues, patients, and families.
- The student respects professional boundaries in interactions with administrators, faculty, staff, colleagues, patients, and families.
- The student functions effectively within a healthcare team.
- The student is sensitive to the needs, feelings, and wishes of the healthcare team members.
- The student demonstrates sensitivity to the needs and wishes of patients and families.
- The student adequately establishes rapport with patients or families.
- The student avoids using their professional position to engage in inappropriate romantic or sexual relationships with patients and members of their families.
- The student demonstrates empathy.

d. The student upholds the Medical Student Statement of Principles:

### Honesty
- I will maintain the highest standards of academic honesty.
- I will neither give nor receive aid in examinations or assignments unless such cooperation is expressly permitted by the instructor.
- I will be truthful with patients and will report accurately all historical and physical findings, test results, and other information pertinent to the care of the patient.
- I will conduct research in an unbiased manner, report results truthfully, and credit ideas developed and work done by others.

### Respect for Others
- I will uphold a classroom atmosphere conducive to learning.
- I will treat patients and their families with respect and dignity both in their presence and in discussions with other members of the health care team.
- I will interact with patients in a way that ensures their privacy and respects their modesty.
- I will interact with all members of the health care team in a considerate and cooperative manner.
- I will not tolerate discrimination on the basis of race, gender, religion, sexual orientation, age, disability, or socioeconomic status.
- I will judge my colleagues fairly and attempt to resolve conflicts in a manner that respects the dignity of every person involved.

### Confidentiality
- I will regard confidentiality as a central obligation of patient care.
- I will limit discussions of patients to members of the health care team in settings removed from the public ear (e.g. not in elevators, hallways, cafeterias).
- I will uphold all privacy policies and laws including but not limited to those in accordance with the Health Insurance Portability and Accountability Act (HIPPA).

### Responsibility
- I will set patient care as the highest priority in the clinical setting.
- I will recognize my own limitations and will seek help when my level of experience is inadequate to handle a situation on my own.
- I will conduct myself professionally--in my demeanor, use of language and appearance--in the presence of patients, in the classroom, and in health care settings.
- I will not use alcohol or drugs in any way that could interfere with my clinical responsibilities.
- I will not use my professional position to engage in romantic or sexual relationships with patients or members of their families.

### Expectations of Faculty, Residents, and Fellows
- I have the right to expect clear guidelines regarding assignments and examinations, as well as to have testing environments that are conducive to academic honesty.
- I cannot be compelled to perform procedures or examinations which I feel are unethical or beyond the level of my training.
- I have the right to not be harassed and to not be subjected to romantic or sexual overtures from those who are supervising my work.
- I have the right to be challenged to learn, but not abused or humiliated.
- I have the right to expect prompt, frequent and constructive feedback from housestaff and attending physicians that will enhance my training in medicine.

**Professional Behavior Expectations for UCSF Medical Students (https://meded.ucsf.edu/about-us/guidelines-policies/medical-student-policies/professional-behavior-expectations-ucsf-medical-students/)**

# Doctoral

- Doctor of Medicine (MD) (https://catalog.ucsf.edu/programs/medicine-md/)

# Master's

- UCSF/UC Berkeley Joint Medical Program (https://catalog.ucsf.edu/programs/ucsf-ucb-jmp/)