The SOMA Catalog (Catalog) provides students with important information about policies, procedures, requirements, and services. Students are required to read, understand, and adhere to the provisions of the Catalog. An updated version of the Catalog is published each academic year. The yearly update (and any subsequent updates during the academic year) supersedes all prior editions and provides the latest rules, policies and procedures to create the most up-to-date student reference. The provisions of the Catalog do not constitute an irrevocable contract between SOMA and its students since plans, policies, requirements, and services may be altered from time to time. Therefore, SOMA reserves the right to amend modify, add, or delete information within the Catalog at any time without advance notice.

Students are also required to thoroughly review the A.T. Still University Student Handbook for important additional policies, procedures, requirements, and services. For A.T. Still University's policy prohibiting discrimination, harassment, and retaliation (90-210), please see: www.atsu.edu/prohibition-of-discrimination-harassment-and-retaliation. The policy in its entirety is printed later in this document.

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MESSAGE FROM THE DEAN

Welcome to the 2015 - 2016 Academic Year!

Whether you are an entering student, a returning student, or an applicant who is looking for more information about SOMA, you will find that SOMA is a unique osteopathic medical school with an important purpose: *To prepare excellent osteopathic physicians to serve the healthcare needs of society through high-quality undergraduate and graduate medical education programs.*

SOMA’s innovative program combines our clinical presentation curriculum with contextual learning by embedding our osteopathic medical students (OMS) within one of our community health center (CHC) partner sites in years two through four (OMS II - IV). This early clinical exposure, working with underserved patients as part of the healthcare team, provides SOMA students with an enriched learning experience during the didactic portion of the OMS II curriculum and increases their level of confidence as they move into the clinical training portion of years three and four.

From the beginning, SOMA’s focus has been to train students who have demonstrated an interest in primary care and a passion to work with underserved populations. Although SOMA’s program is relatively new, we are already seeing significant success with 100% residency match rates with greater than 65% of graduates entering primary care specialties and nearly 90% entering “specialties of need” as identified by the National Association of Community Health Centers (NACHC). SOMA’s creation, in partnership with the Wright Center for Graduate Medical Education, of an innovative national network CHC-based family medicine residency program at multiple locations across the country is further evidence of our commitment to this focus.

SOMA’s 2015 - 2016 Catalog contains information about the school, its curriculum, policies, procedures, requirements, and services. The SOMA Catalog in combination with the University Student Handbook, provides answers to many questions that may arise for you during this academic year. Please read these two documents thoroughly and be sure to refer to them frequently. The most current versions of each can be found on the ATSU website.

As you begin this academic year, be sure to remember that you are the future of medicine and will play a critical role in being part of the solution to our nation’s healthcare needs. I wish you all the best for both personal and professional success this year!

Jeffrey W. Morgan, DO, MA, FACOI
Acting Dean
School of Osteopathic Medicine in Arizona
A.T. Still University of Health Sciences
SECTION I
Administration and Organization

ORGANIZATION
A.T. Still University of Health Sciences is incorporated under laws of the state of Missouri as a not-for-profit corporation. The governing body is the Board of Trustees, which holds title to the properties of the University and establishes policies for its operation. Responsibility for administration and day-to-day operations is delegated to the University President and through him/her to other officers of the University. The School of Osteopathic Medicine in Arizona (SOMA) is one of six health professions colleges within the University. SOMA’s sister school, Kirksville College of Osteopathic Medicine (KCOM) is the founding school of osteopathic medicine.

SOMA ADMINISTRATION
Acting Dean: Jeffrey W. Morgan, DO, MA, FACOI
Acting Associate Dean for Academic Affairs: John George, PhD
Associate Dean for Preclinical Education: Ray Pavlick, PhD
Associate Dean for Graduate Medical Education (GME): Thomas McWilliams, DO, FACOFP
Professor and Senior Advisor to the Dean: Frederic Schwartz, DO, FACOFP

ATSU ADMINISTRATION
President: Craig M. Phelps, DO, FAOASM
Senior Vice President for Academic Affairs: Norman Gevitz, PhD
Senior Vice President for Strategic Initiatives: Ted Wendel, PhD
Vice President for University Partnerships: Gary Cloud, PhD, MBA,

ATSU BOARD OF TRUSTEES
G. Scott Drew, DO, FAOCD, Chair
Dorothy M. Munch, DO, Secretary
Daniel L. Biery, DO, FACOI, FACP
C. Lisette Dottavio, PhD, CPA
Clyde H. Evans, PhD
Tisha Kice-Briggs, DDS
Paulina Vazquez Morris, JD, MBA, MHSA
Ann Thielke, RN, JD
Gary Wiltz, MD
James D. Cannon, DHA, PA-C, MS, Vice Chair
Manuel C. Bedoya, DMD
Reid W. Butler, JD
Chester W. Douglass, DMD, PhD, MPH
Stanley E. Grogg, DO, FACOP, FAAP
Robert L. King, JD
Robert W. Uhl
Ronald W. Winkler
SECTION II
General Information

ACCREDITATION AND LICENSURE
A.T. Still University of Health Sciences (ATSU) is accredited by the Higher Learning Commission, a commission of the North Central Association of Colleges and Schools (NCA), 230 S. LaSalle St., Suite 7-500, Chicago, IL 60604, phone 800.621.7440 and licensed by the Arizona State Board of Private Postsecondary Education to operate the program of Doctor of Osteopathic Medicine in the State of Arizona.

ATSU is approved by the U.S. Department of Veterans Affairs (DVA) for the training of students entitled to receive veterans’ educational benefits and qualified for purposes of appointment of its graduates as commissioned medical officers in the Armed Forces and the Public Health Service.

ATSU-SOMA is accredited by the Commission on Osteopathic College Accreditation (COCA) of the American Osteopathic Association, 142 East Ontario Street, Chicago, IL 60611. COCA is recognized by the United States Department of Education (USDE) as the only accrediting agency for pre-doctoral osteopathic medical education.

ATSU-SOMA has a Private School License from the State of Alabama Department of Postsecondary Education pursuant to the Alabama private license law, code of Alabama, Title 16-46-1 through 10. The Alabama Center for Postsecondary Education, P.O. Box 302130, Montgomery, AL 36130-2130. Alabama Commission of Higher Education granted non-resident institution certificate of approval to offer Doctor of Osteopathic Medicine in the state of Alabama. Alabama Commission on Higher Education, 100 North Union Street, Montgomery, AL 36104-3758.

ATSU-SOMA has been granted a Certificate of License to Operate an Institution of Higher Education from the District of Columbia Education Licensure Commission in accordance with the provisions of Title 38, Chapter 13, of the District of Columbia Official Code (D.C. Official Code §38-1301 et seq.) and applicable regulations of the DC Education Licensure Commission. D.C. Higher Education Licensure Commission, 810 First Street, NE, 2nd Floor, Washington, DC 20002.

ATSU-SOMA is a nonprofit corporation authorized by the State of Oregon to offer and confer the academic degree described herein, following a determination that state academic standards will be satisfied under OAR 583-030. Inquiries concerning the standards or school compliance may be directed to the Office of Degree Authorization, 1500 Valley River Drive, Suite 100, Eugene, Oregon 97401.

ATSU-SOMA is authorized by the Washington Higher Education Coordinating Board (HECB) and meets the requirements and minimum educational standards established for degree-granting institutions under the Degree-Granting Institutions Act. This authorization is subject to periodic review and authorizes A.T. Still University/School of Osteopathic Medicine at Arizona to offer the following degree program: Doctor of Osteopathic Medicine. Authorization by the HECB
does not carry with it an endorsement by the board of the institution or its programs. Any person desiring information about the requirements of the act or the applicability of those requirements to the institution may contact the HECB at P.O. Box 43430, Olympia, WA 98504-3430.

A.T. Still University of Health Sciences is authorized by the Washington Student Achievement Council and meets the requirements and minimum educational standards established for degree-granting institutions under the Degree-Granting Institutions Act. This authorization is subject to periodic review and authorizes A.T. Still University of Health Sciences to offer specific degree programs. The Council may be contacted for a list of currently authorized programs. Authorization by the Council does not carry with it endorsement by the Council of the institution or its programs. Any person desiring information that the requirements of the act or the applicability of those requirements to the institution may contact the Council at P.O. Box 43430, Olympia, WA 98504-3430.

A.T. Still University has been granted Operating Authority in the Chicago Region by the Illinois Board of Higher Education under the “Private College Act” (110 ILCS 1005) and “The Academic Degree Act” (110 ILCS 1010). This authorization is subject to implementation and maintenance of the conditions presented in the institution’s application and that form the basis upon which the authorization is granted.

The Ohio Board of Regents – University System of Ohio has granted ATSU-SOMA the authorization to offer clinical and practicum experience in Ohio to fulfill program requirements for the Doctor of Osteopathic Medicine degree.

**ATSU MISSION**

A.T. Still University of Health Sciences serves as a learning-centered university dedicated to preparing highly-competent professionals through innovative academic programs with a commitment to continue its osteopathic heritage and its focus on whole person healthcare, scholarship, community health, interprofessional education, diversity, and underserved populations.

**SOMA PURPOSE, VALUES, AND GOALS AND OBJECTIVES**

**Purpose:**
To prepare excellent osteopathic physicians to serve the healthcare needs of society through high-quality undergraduate and graduate medical education programs.

**Values:**
As an osteopathic medical school devoted to excellence, we value:

- Scholarship
- Professionalism
- Learning-centeredness
- Compassion
- The whole person (Body, Mind and Spirit)
- Teamwork
Innovation

Vision:
We are the preeminent medical school meeting societal needs through innovation in education.

We aspire to be recognized in the communities we serve as:
- A community of medical educators who established a learning centered model of medical education
- Creating life-long, meaningful relationships with students and serving their educational needs throughout their career
- The innovative leader in the development of a contextual medical education curriculum
- Establishing a successful partnership with Community Health Centers (CHCs) that fosters medical education and results in an increase in the number of osteopathic physicians in CHCs
- A model of interprofessional healthcare education and practice

Goals and Objectives: The School of Osteopathic Medicine-Mesa (SOMA) will strive to accomplish goals in the areas of teaching, research, and service.

Teaching
1. Use Best Evidence Medical Education (BEME) to pursue innovative approaches to learning.
2. Model the knowledge, skills and behaviors of successful osteopathic physicians.

Research and Scholarship
1. Engage in medical education research.
2. Investigate innovative strategies for health care delivery including a focus on interdisciplinary and interprofessional team practice.
3. Collaborate with the Kirksville College of Osteopathic Medicine (KCOM) to advance knowledge in the biomedical sciences, clinical medicine, and osteopathic principles and practices.

Service
1. Work with all clinical affiliates to promote and provide distinctive osteopathic health care including osteopathic manipulative medicine.
2. Will seek to improve health in underserved communities through its partnership with its community campuses.

Graduate Medical Education
1. Form partnerships with existing residency programs to increase the number of training slots through alternative funding mechanisms.
2. Identify opportunities for new residency program development in community-based settings to meet the needs of our graduates in a changing healthcare environment.
FACILITIES
Mesa Campus
SOMA’s learning spaces on the Mesa campus include:

1. An innovative 110-seat learning suite equipped with multiple viewing screens, along with an ECHO360 lecture-capture system that records learning activities for later review.
2. Multi-use classrooms for activities such as medical skills, simulated patient encounters, small group learning activities, and examination administration.
3. An upgraded osteopathic principles and practice (OPP) laboratory outfitted with multiple cameras enabling students to see osteopathic manipulative medicine (OMM) demonstrations; modern OMM tables; and the BIOPAC system.
4. A state-of-the-art Virtual Anatomy Laboratory (VAL) equipped with a three-dimensional projection system and 56 individual computer stations supplied with several high-resolution anatomical software programs.
5. A newly updated dissection anatomy laboratory supplied with computer projection screens placed over downdraft tables for improved viewing and dissection of cadaveric specimens; whole and disarticulated skeletons; anatomical models; and biologic tissues.

In addition to these instructional facilities, SOMA students have access to the A.T. Still Memorial Library containing an extensive, integrated online collection of evidence-based resources. The Library’s collection includes tens of thousands of full-text journals, over 160,000 e-books, and several of the most popular point-of-care resources including UpToDate and 1st Consult. The Library's Still OneSearch is an integrated tool that searches much of the Library's online resources in a single search. Its BrowZine smart device app enables ATSU faculty staff to easily access the able of contents of Library journals for quick browsing. In July the Library will launch a clinical app to enable our students quick access to Library resources at the point of care to efficiently answer clinical questions.

Additionally, the Mesa campus has multiple study spaces, a cafe, and an on-site YMCA.

Community Health Center (CHC) Learning Partnerships
A unique feature of SOMA’s education program is its emphasis on contextual learning in community healthcare settings. Beginning in the second year (OMS II year), students are stationed at one of the Community Health Centers (CHCs) listed below. Each of these locations has dedicated classroom space for didactic instruction, OPP training, and clinical skills application and practice. These classrooms are equipped with internet connectivity and video conferencing capabilities so that academic interaction can occur with the Mesa campus faculty and with the other CHC sites. SOMA’s CHC partnerships include:

Adelante Healthcare: Mesa, Arizona
Beaufort-Jasper-Hampton Comprehensive Health Services: Ridgeland, South Carolina
El-Rio Community Health Center: Tucson, Arizona
Family Healthcare Network: Visalia, California
HealthPoint: Renton, Washington
HealthSource: Mt. Oreb, Ohio
Near North Health Service Corporation: Chicago, Illinois
North Country Healthcare: Flagstaff, Arizona
Northwest Regional Primary Care Association: Portland, Oregon
Sunset Park Family Health Center: Brooklyn, New York
Unity Health Care: Washington, DC
Waianae Coast Comprehensive Health Center: Waianae, Hawaii
SECTION III
Student Information

ADMISSIONS
The admissions process is dedicated to recruiting and selecting outstanding students from around the United States who have demonstrated commitment to working with underserved populations. Selection is based on the applicant’s academic achievement, letters of recommendation, life experiences, volunteer service, Medical College Admission Test (MCAT) scores, and interpersonal interactions during the admissions interview.

Application Procedure
SOMA uses the American Association of Colleges of Osteopathic Medicine Application Service (AACOMAS). AACOMAS provides centralized services including data collection, analysis, and distribution of the online primary application to osteopathic medical schools the applicant designates. Please visit www.aacom.org or contact AACOMAS, 5550 Friendship Boulevard, Suite 310, Chevy Chase, MD 20815-7231, phone: 301.968.4100.

The deadline for submission of the AACOMAS application is March 1; however due to SOMA’s rolling admissions process and early admission decisions, applicants are strongly encouraged to apply early.

Upon review of the AACOMAS application, SOMA will send qualified applicants a secondary (supplemental) application. A non-refundable application fee, at least one letter of recommendation (LOR) from a science faculty member (or from the pre-medical committee), and at least one LOR from a physician (strong preference for a letter from a D.O.) must be submitted with the secondary application.

The deadline for submission of the secondary (supplemental) application is April 1. Again, due to SOMA’s rolling admissions process and early admission decisions, applicants are strongly encouraged to apply early.

General Admission Requirements
Applicants for admission must meet the following general requirements prior to matriculation:

1. Completed a Bachelor of Arts or Science from a U.S. regionally accredited college or university or equally accredited Canadian institution
2. Achieved a minimum 2.8 cumulative grade-point average (GPA) and a minimum 2.8 science GPA on a 4.0 scale.
3. Medical College Admission Test (MCAT) score within three years of application.
4. Basic computer literacy
5. U.S. citizen or permanent resident
6. Fluent in the oral and written use of English

Academic Requirements
**Pre-requisite courses:**
Applicants must have successfully completed one full academic year (or equivalent) with a grade (or equivalent) of “C” or better in each of the following courses prior to matriculation:

1. English
2. Biology/Zoology (with laboratory)
3. Inorganic/General Chemistry (with laboratory)
4. Physics (with laboratory)
5. Organic Chemistry (with laboratory)

**Additionally, SOMA recommends the following elective courses:**

1. Anatomy
2. Behavioral Science
3. Biochemistry
4. Genetics
5. Immunology
6. Microbiology
7. Molecular Biology
8. Multicultural Studies
9. Physiology
10. Public Health/Epidemiology

**Evaluation and Selection of Applicants**
The SOMA Admissions Committee seeks individuals who will be a good match to SOMA’s mission and are capable of meeting SOMA’s academic and professionalism standards. Applicants are screened for academic achievement, clinical involvement, interpersonal skills, leadership qualities, service, perseverance, maturity, motivation, and knowledge of the osteopathic profession. Applicants who pass this screening will be invited for an interview. The interview day is designed to be a two-way process to help the SOMA Admissions Committee determine if the applicant is a good fit for SOMA while enabling the applicant to determine if SOMA is a good fit for him/her. Attendance at an interview day is mandatory for admission.

Following the interview day, the Admissions Committee will review the applicant’s entire packet and determine the disposition of the application. The Admissions Committee will accept (with or without contingencies), reject, or place candidates on an alternate list. Applicants are notified of the Committee’s decision as soon as possible (usually within two weeks of the interview day).

An offer of acceptance is accompanied by assignment to a specific Community Health Center Contextual Learning Site (informally known as “community campus”). Successful applicants are granted a specified time period to notify the Office of Admissions of their intention to enroll. This letter of intent must be accompanied by payment of a non-refundable acceptance fee.

Admission after acceptance is subject to the satisfactory completion of all academic requirements. Complete official transcripts from each school attended must be on file with the ATSU Registrar’s Office prior to matriculation. Admission to SOMA may be revoked for fraud, misrepresentation, or other violation of University standards.
**Hometown Scholar Program**
The National Association of Community Health Centers has a hometown scholar program that identifies potential applicants who match the mission and values of SOMA. Please visit [www.atsu.edu](http://www.atsu.edu) for more details on the Hometown Scholar Program.

**Technical Standards for Admission**
Technical standards are the non-academic skills and abilities necessary for the successful completion of the course of study in osteopathic medicine. SOMA is committed to the admission of qualified applicants who are able to meet minimum technical standards (with or without accommodation) as set forth herein and met by all SOMA students. SOMA does not discriminate on the basis of race, color, religion, national origin, sex, gender, sexual orientation, age, disability or veteran status. SOMA’s minimum technical standards reflect what SOMA’s faculty have determined to be reasonable expectations of osteopathic medical students and physicians in performing common and important functions; keeping in mind the safety and welfare of the patients for whom our graduates will care.

Every SOMA student is expected to possess those intellectual, ethical, physical, and emotional capabilities required to undertake the full curriculum and to achieve the levels of competence required by the faculty. The holder of a doctor of osteopathic medicine degree must have the knowledge, skills, and attitudes to function in a broad variety of clinical situations and to render a wide spectrum of patient care.

SOMA’s minimal technical standards are as follows. The examples mentioned are not intended as a complete list of expectations, but only as samples demonstrating the associated standards.

1. **Observation:** Students must have sufficient vision to observe demonstrations, experiments and laboratory exercises. Students must have adequate visual capabilities for proper evaluation and treatment integration. They must be able to observe a patient accurately at a distance and up close.

2. **Communication:** Students should be able to hear, observe and speak to patients in order to elicit and acquire information, examine them, describe changes in mood, activity, and posture, and perceive their nonverbal communication. Students must also be able to communicate effectively in English, in oral and written form, with staff, faculty members, patients, and all members of the health care team.

3. **Motor:** Motor skills include reasonable endurance, strength and precision. Students should have sufficient motor function to execute movements reasonably required for general care and emergency treatment. Such movements require coordination of both gross and fine muscular activity, equilibrium, and functional use of the senses of touch and vision.

4. **Sensory:** Students need enhanced sensory skills including accuracy within specific tolerances and functional use for laboratory, classroom and clinical experiences. Students who are otherwise qualified but who have significant tactile sensory or proprioceptive disabilities must be evaluated medically. These disabilities include individuals who were injured by significant burns, have sensory motor deficits, cicatrix formation, or have malformations of the upper extremities.

5. **Strength and mobility:** Students must have sufficient posture, balance, flexibility, mobility, strength and endurance for standing, sitting and participating in the laboratory,
classroom and clinical experiences.

6. *Intellectual, conceptual, perceptual, integrative and quantitative:* These abilities include reading, writing, measurement, calculation, reasoning, analysis, and synthesis. In addition, students should be able to comprehend three-dimensional relationships and to understand the spatial relationships of structures. Problem solving, the critical skill demanded of physicians, requires all of these intellectual abilities.

7. *Behavioral, emotional, and social:* Students must possess the emotional health required for full utilization of their intellectual abilities; the exercise of good judgment; the prompt completion of assignments and other responsibilities, especially those attendant to the diagnosis and care of patients; and the development of mature, sensitive, and effective relationships. Students must be able to tolerate physically, intellectually, and emotionally demanding challenges and workloads and be able to adapt to changing environments, display flexibility, and function in the face of uncertainties inherent in patient care. Compassion, maturity, honesty, ethics, concern for others, interpersonal skills, interest, and motivation are all required personal qualities. Students must be able to successfully endure the physical, intellectual, and emotional demands of the medical education curriculum and process as well as the medical profession.

ATSU remains open to the possibilities of human potential and achievement, providing support for students with disabilities. The Vice President for Student Affairs is responsible for administration of and compliance with the Technical Standards through the Director-Learning Resources. Accepted students and matriculants who have disabilities and are otherwise qualified may request accommodations in writing at the following address:

Director-Learning Resources  
A. T. Still University of Health Sciences  
800 West Jefferson  
Kirksville, MO 63501

**Enrollment Requirements**

The following are required prior to enrollment and attendance on the first day of class at SOMA. Failure to comply with any of the listed requirements may lead to withdrawal of acceptance and will prevent a student from initially enrolling or remaining enrolled at SOMA.

**Successful completion of a Bachelor of Arts or Science (B.A., B.S.) degree and all SOMA prerequisite courses from a U.S. regionally accredited college or university or equally accredited Canadian institution:** This must be verified with submission of all final official transcripts to the ATSU Admission Office.

**Attendance at all SOMA osteopathic medical student, year 1 (OMS I) orientation activities:** These activities occur during the week prior to the first day of class.

**Criminal Background Check:** SOMA requires that entering students submit to and provide the results of background check prior to enrollment. Recognize that this is a minimum standard and that some clinical facilitates may have additional requirements that students must meet prior to
beginning clerkships (clinical rotations) at those sites. These requirements may include (but not be limited to) additional background checks and drug screening.

**Required Immunizations:** SOMA requires all entering students to provide proof of their immunizations in order to enroll in courses. This is necessary for the student’s protection, as well as the protection of any individuals with whom they come in contact. It is the responsibility of the student to maintain up-to-date immunization protection throughout the entire duration of enrollment. Non-compliance at any time during a student’s enrollment could result in suspension and/or dismissal. Documents related to immunizations and screenings will be maintained and monitored by SOMA administration. All testing is at the expense of the student.

- **Diphtheria/Tetanus/Pertussis**
  Students are required to receive either the primary series of Diphtheria/Tetanus/Pertussis or booster dose within ten (10) years prior to the beginning of the academic year. A single dose of Tdap (Tetanus, Diphtheria, acellular Pertussis) between ages 19 and 64 is required if the student has not previously received Tdap, or to replace one decennial Td booster.

- **Polio**
  Students are required to provide documentation that they have received the primary series of polio vaccine. If documentation cannot be produced, the student must receive the primary series of inactivated polio vaccine.

- **Measles, Mumps, and Rubella**
  Students born after 1956 are required to provide documentation of the MMR vaccine prior to matriculation. If the vaccination was given prior to 1975, evidence of a re-booster is recommended.

- **Hepatitis B**
  Students are required to initiate a series of Hepatitis B vaccine prior to matriculation. Students must complete the series according to the prescribed timeline (completed within 6 months of matriculation).

- **Tuberculosis Skin Test**
  Students must have had a tuberculosis skin test (PPD) or a Quantiferon blood test within the year prior to matriculation. In those individuals who have had a positive PPD test in the past, PPD testing is not advisable. The Quantiferon test, a negative CXR, or a record of INH treatment may provide evidence of absence of TB disease. In individuals who have had BCG vaccination, PPD testing or the Quantiferon should be performed as noted above. TB status must be updated annually.

- **Varicella immunization, serum titer, or physician documentation of date of contraction.**

**Recommended Immunizations (some clinical training sites may require some of all of these):**

- **Influenza**
- **Hepatitis A**
- **Meningococcal**
- **Pneumococcal**

**Titers**
Some clinical training sites require that students show proof of immunity (example: measles) before being allowed to train at the site. Therefore, it is recommended that students have this testing done in advance of their clinical training portion of the curriculum.

**Immunization Exemptions:**
Under certain religious or health circumstances, a request for exemption from preventive health requirements may be provisionally granted. However, SOMA cannot guarantee placement at a community campus or in clinical clerkships (rotations) when this exemption is granted. Consequently, students receiving an exemption from preventive health requirements may take longer to complete the curriculum and graduate, or the student may not be able to complete the curriculum and graduate.

**Proof of Health Insurance:** ATSU requires that all students maintain personal hospitalization/health insurance coverage. Proof of adequate coverage as defined by ATSU must be presented to the Registrar's Office. Coverage must be maintained throughout the duration of enrollment. Non-compliance at any time during a student's enrollment could result in suspension and/or dismissal. For coverage details, see the University Student Handbook.

**Proof of Disability Insurance:** All students enrolled in the residential programs at ATSU are required to carry disability insurance coverage. For Arizona, the University has contracted with Northwestern Mutual to provide group coverage. Students will be enrolled in the group policy with the option of opting-out provided they can provide verification that they have a current, comparable disability policy.

Graduate school is an expensive investment and ATSU is dedicated to helping students protect their financial well-being. Disability insurance helps protect students from financial hardships if their education is disrupted. Students will be enrolled in the group policy during orientation and coverage will continue through graduation. Students who withdraw from ATSU will be un-enrolled from the policy on the date of withdrawal but can continue the coverage privately by contacting the provider. Graduates will have the option of continuing the disability insurance coverage after graduation on an individual basis. Non-compliance at any time during a student's enrollment will result in suspension and/or dismissal.

The fees for the disability insurance policy are part of the university student fee structure and financial aid budget and are charged to all residential students (see below for fee structure).

**Basic Life Support (BLS) Certification:** SOMA requires that all students obtain and maintain BLS certification throughout the entire duration of enrollment. Proof of certification must be on file by the end of OMS I orientation. It is the student’s responsibility to renew certification prior to the expiration date. Proof of Advanced Cardiac Life Support (ACLS) certification must be obtained prior to reporting for clerkship duty in the OMS III year. These requirements may only be met using an online course if it is a certification renewal. First-time certification must be completed via a live course. Non-compliance at any time during a student's enrollment will result in suspension and/or dismissal.

**Transfers and Advanced Standing**
The curriculum model and structure of SOMA does not allow for the awarding of course credit, transfer, or advanced standing into the School.

**International Students**
All SOMA applicants must be U.S. citizens or permanent residents.

**COMMUNITY CAMPUS LOCATIONS, HOUSING AND TRAVEL**

**Assignment to Community Campus Location**
Assignment to a community campus involves the consideration of various factors including the student’s expressed desire concerning location. Campus assignments are ultimately under the purview of the School and SOMA reserves the right to make all campus and clinical assignments. Unauthorized trading or attempts to influence campus placements by bartering, coercion or offering goods or services are grounds for disciplinary action.

Placement at a community campus is considered a permanent assignment. It is only under extraordinary circumstances that transfer from one campus to another will be considered. Requests for transfer and questions about community campuses should be addressed to the Associate or Assistant Dean for Clinical Education and Services.

**Travel to Clinical Experiences**
Many of the courses required to complete the curriculum require travel to participate in clinical experiences. Unless otherwise published, travel is at the student’s expense and not paid for by SOMA or clinical agencies. Most students find having a car and valid driver’s license a necessity to complete the program of study. In particular, students are encouraged to consider the travel requirements associated with specific community campuses prior to their indication of interest in attending that campus.

**Housing**
Students are responsible for making arrangements for and payment of their housing needs. Please be advised that there are occasions when students will be assigned at a distance from their community campus. In very select cases some subsidies may be available at certain locations. However, housing costs remain the ultimate responsibility of the student. Students are encouraged to investigate housing costs prior to community campus selection.

**TUITION, FEES, AND EXPENSES**

**Tuition**
Current tuition and fees for attending SOMA may be found on the ATSU website. One-half is due at the beginning of the first and second semester. Tuition and fees are subject to change.

**Fees**
**Application Fee**: A non-refundable fee is due at the time the secondary application is submitted.
The application fee does not apply to tuition.

**Acceptance Fee (Deposit):** This non-refundable fee is an advance payment on the first year's tuition. It is due with submission of the Admission Agreement and applied to tuition at the time of enrollment. The applicant may cancel this agreement and receive a full refund of all monies (excluding the application fee) paid to date if cancellation is made in writing to the Admissions Office and mailed/delivered to the institution at the address stated herein within three (3) business days after the date of signature.

**Pre-Registration Fee (Deposit):** This non-refundable fee is payable by May 1 preceding registration to hold a place in the class and will be applied to tuition at the time of registration.

**Technology Fee:** This non-refundable fee is due every academic year and covers the cost of the technology support and services used by students.

**Medical Equipment (1st Year only):** All first year students are charged a fee for medical equipment. The equipment is distributed during the first course and becomes the personal property of the student.

**FINANCIAL ASSISTANCE**

A private medical school education is a significant investment. For this reason, great care is taken to counsel every applicant and every student in selecting a sound financial plan. Specific details of financial planning should be discussed with a representative in the Office of Financial Assistance.

ATSU encourages students to be creative in their search for financial assistance. Students may wish to check into securing a contract with a community in exchange for service, consider a military scholarship, or investigate special programs available through Federal (e.g. Public Health Service), State, and other agencies. For more information, go to the ATSU website, email at financialaid@atsu.edu, or call the Student Financial Assistance Office, 1.866.626.2878 ext. 2529.

**Scholarships**

SOMA continues to increase the number of student scholarships and awards due to gifts made over the past few years to the endowment fund. Scholarships and awards are presently awarded to students in recognition of academic achievement, leadership, and/or financial need. Students are encouraged to call the Office of Financial Assistance for more specific information or go to the ATSU website.

**Loans**

ATSU is a participant in several government loan programs. Information regarding available loans can be found at [www.atsu.edu/financial_aid](http://www.atsu.edu/financial_aid).

**Refund Policy**
A student who withdraws or is dismissed from SOMA prior to the end of an academic semester must complete an “Exit Process” form available in the office of Student Affairs. A student’s eligibility for a refund will be determined using the formula for the “Return of Title IV Funds”. See the University Student Handbook for information on the calculation for return of Title IV funds.

**Loan Defaults**
If ATSU has knowledge that a student or graduate is in default on a federal, state, outside agency, or institutional loan or service obligation, ATSU will withhold all official transcripts, National Board scores, and letters of recommendation for internships, residencies, employment, staff privileges, specialty certification, and licensing.

**ACADEMIC POLICIES**

**Grading Guidelines**
SOMA students are evaluated by a number of methodologies to insure they are meeting curricular goals and competencies. The following are examples of methods that may be used to provide either formative or summative evaluation of student performance.

- Examinations (either written or computer based), quizzes and assignments
- Observation of Head-To-Toe Physical Exam
- Observation of Problem-Specific Physical Exams
- Performance of Clinical Procedures
- Performance at Clinical Experiences
- Discussion with Preceptors at Clinical Sites
- Behavioral Performance Evaluation
- Comprehensive End-of-Year Examinations
- Faculty Advisory Reviews
- Evaluation of Medical Documentation
- Observation of Patient Presentations
- Objective Structured Clinical Examinations (OSCEs)
- Clinical Examination Exercise (Mini-Cex)

**Classes of 2017, 2018, and 2019**
Final pre-clinical course and system grades are reported as Honors (HON 90% and above), Pass (PASS 70-89%), or Fail (FAIL <70%). In addition to earning a cumulative grade above 70%, individual courses may also specify further requirements in order to successfully pass. A failed class that is remediated is reported as a Remediated Pass (RPASS). GPA is calculated using the final actual percentage score a student achieved in a course or system, weighted in proportion to the units of the course or system. Class rank is determined by ordering the GPA’s of the members of the class from highest to lowest.

**Classes of 2016, 2017, 2018, and 2019**
Grades for rotations and courses for students in OMS III & IV are reported on the transcript as Honors (HON), High Pass (HPass), Pass (Pass), Low Pass (LPass) or Fail (Fail). For OMS IV course Selective II- Academic Study Option, grades are reported as Pass/Fail only, and do not factor into a student’s rank. A failed rotation that is successfully remediated is designated as a Remediated Pass (RPASS) on the transcript. The following criteria are used to determine OMS III & IV grades:

For non-Core rotations, scores are based on the Clinical Performance Evaluation (CPE). See individual course syllabi for additional requirements.

For Core rotations, scores are based on the Clinical Performance Evaluation (50%), end-of-rotation exam (30%), and weekly assignments (20%). In addition, to receive a score of Honors for a Core rotation, a student must receive a score of Honors in all three components (CPE, exam, and weekly assignment). See individual course syllabi for additional requirements.

**Non-core rotations:**
Grade is based on the CPE scale:

- >4.75 = Honors
- 4.1-4.75 = High Pass
- 3.0-4.0 = Pass
- 2.1-2.9 = Low Pass
- < or equal to 2.0 = Fail

**Core rotations:**
The three components (CPE, end-of-rotation exam scores, weekly assignments) are combined to determine the final grade based on the following scale:

- 4.1-5.0 = Honors*
- 3.5-4.0 = High Pass
- 2.6-3.4 = Pass
- 2.0-2.5 = Low Pass
- 1.0-1.9 = Fail

*Student must receive HONORS in all three components to receive HONORS for the course.
Each component of the Core rotation grade has its own scale:

<table>
<thead>
<tr>
<th>CPE (50%)</th>
<th>Exam (30%) – “mean” refers to national mean</th>
<th>Weekly Assignment (20%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>&gt;4.75 = Honors</td>
<td>COMAT:</td>
<td>4.1-5.0 = Honors</td>
</tr>
<tr>
<td>4.1-4.75 = High Pass</td>
<td>&gt;1.0 SD above mean: Honors: 110+</td>
<td>3.5-4.0 = High Pass</td>
</tr>
<tr>
<td>3.0-4.0 = Pass</td>
<td>0.1-0.99 SD above mean: High Pass: 101-109</td>
<td>2.6-3.4 = Pass</td>
</tr>
<tr>
<td>2.1-2.9 = Low Pass</td>
<td>Mean to 0.99 SD below mean: Pass: 91-100</td>
<td>2.0-2.5 = Low Pass</td>
</tr>
<tr>
<td>≤2.0 = Fail</td>
<td>1.0 to 1.5 SD below mean: Low pass: 90-85</td>
<td>0.0-1.9 = Fail</td>
</tr>
<tr>
<td></td>
<td>More than 1.5 SD below mean: Fail: 84 or lower</td>
<td></td>
</tr>
<tr>
<td>Exam Master:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>95+: Honors</td>
<td></td>
<td></td>
</tr>
<tr>
<td>90-94: High Pass</td>
<td></td>
<td></td>
</tr>
<tr>
<td>80-89: Pass</td>
<td></td>
<td></td>
</tr>
<tr>
<td>75-79: Low Pass</td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt;75: Fail</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Should a student fail a post-rotation examination, a limit of two (2) retakes (for a total of three attempts) will be allowed. Any retake requires approval by the Associate or Assistant Dean for Clinical Education and Services. A failure of the rotation will occur if the student does not successfully pass on the third attempt.

For Family Medicine and Internal Medicine, the COMAT is taken at the end of the second rotation. Due to these courses being a total of 8 weeks each (two four-week experiences for Family Medicine and two four-week experiences for Internal Medicine), the COMAT is factored into both rotation grades (Family Medicine I and II for the Family Medicine COMAT, and Internal Medicine I and II for the Internal Medicine COMAT), even if the rotations are taken in different semesters.

Scores for Osteopathic Principles and Practice (OPP) in the OMS III year- first semester & OMS IV year are converted to a pass designation using the following criteria:

- 95-100: Honors
- 90-94: High Pass
- 75-89: Pass
- 70-74: Low Pass
- <69: Fail

Scores for OPP in the OMS III year- second semester are converted to a pass designation using the following chart:

<table>
<thead>
<tr>
<th>Fail</th>
<th>Low Pass</th>
<th>Pass</th>
<th>High Pass</th>
<th>Honors</th>
<th>OPP Score</th>
<th>COMAT</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>High Pass</td>
<td>High Pass</td>
<td>Honors</td>
<td>Honors</td>
<td>95-100</td>
<td></td>
</tr>
<tr>
<td>I</td>
<td>Pass</td>
<td>Pass</td>
<td>High Pass</td>
<td>Honors</td>
<td>90-94</td>
<td></td>
</tr>
<tr>
<td>I</td>
<td>Low Pass</td>
<td>Low Pass</td>
<td>Pass</td>
<td>High Pass</td>
<td>75-89</td>
<td></td>
</tr>
<tr>
<td>I</td>
<td>Low Pass</td>
<td>Low Pass</td>
<td>Low Pass</td>
<td>Pass</td>
<td>70-74</td>
<td></td>
</tr>
</tbody>
</table>
If the COMAT-OPP is failed on the first attempt, the student receives an INCOMPLETE, and the COMAT-OPP must be retaken to remove the INCOMPLETE. The maximum course grade would then be a Pass.

A grade of I (incomplete) indicates that course requirements have not been completed. A grade of IP (in progress) indicates the course spans more than one semester. Grades of I or IP are not replaced on the official transcript until all course requirements are met. Failure to complete course requirements may result in grades of I or IP being replaced with a failing grade.

A grade of I (incomplete) indicates that course requirements have not been completed. A grade of IP (in progress) indicates the course spans more than one semester. The grade is recorded after all requirements are met.

**Auditing a Course**
In general, the audit policy is designed for use by SOMA students who either need to review course content or are taking an extended course of study.

The conditions of an audit are as follows:
- Students are allowed to attend class and may participate in laboratory experiences only on a space available basis.
- Students are not allowed to take any of the course assessments offered in class.
- No tuition is charged for the audit(s).
- No record of the audit(s) appears on the transcript.

All audits are subject to the approval of the SOMA Dean or his/her designee.

**Program or Course Cancellation**
Should the institution cancel a program or course, each currently enrolled student will be permitted to complete such program or course before it is discontinued. No new students will be permitted to enroll in a program or course that the institution has cancelled.

**Grading Grievance Policy and Process**
A student who disagrees with an individual assessment grade or course grade should report his/her concern to the course director in writing. If a resolution cannot be reached with the course director, the student can submit his/her concern in writing to the Associate Dean for Pre-Clinical Education (if the grade pertains to OMS I or OMS II curricula) or the Associate or Assistant Dean for Clinical Education and Services (if the grade pertains to OMS III or OMS IV curricula) for consideration. The decision of the Associate or Assistant Dean is final. Any student who questions a grade on a Clinical Performance Evaluation (CPE) by initiating a discussion with a preceptor about the CPE will be considered to have violated standards of professionalism. Students may discuss their learning, conduct, and experiences with the preceptor, but may not question a grade that has been assigned in an assessment.

**Professionalism Guidelines**
An important aspect of any professional educational curriculum is the development of professional behaviors and role identity. Evidence shows that unprofessional behavior exhibited during training is a predictor of future referrals to state regulatory boards and/or the need for disciplinary actions. Since such behavior presents a potential danger to the provision of good patient care and issues for the credibility of the profession, they share equal importance to academic and manual skills. SOMA considers breaches of professional conduct as academic deficiencies. Recognizing the responsibility to display appropriate professional behaviors, SOMA sets expectations for professional conduct and evaluates students in this sphere to document satisfactory acquisition of these important behaviors.

Below is a list of expectations of professionalism adapted by SOMA from the Behaviors Reflecting Professionalism identified by the National Board of Medical Examiners. Each member of SOMA should model these behaviors to ensure quality patient care and growth of the profession.

**Altruism**
- Helps colleagues and team members who are busy.
- Takes on extra work to help the team.
- Serves as knowledge or skill resource to others.
- Advocates for policies, practices and procedures that will benefit patients.
- Endures inconvenience to accommodate patient needs.

**Honor and Integrity (honesty)**
- Admits errors and takes steps to prevent reoccurrence.
- Deals with confidential information appropriately.
- Does not misuse resources (i.e. school property).
- Attributes ideas and contributions appropriately for other’s work.
- Upholds ethical standards in research and scholarly activity.
- Requests help when needed.
- Assumes personal responsibility for mistakes.

**Caring and Compassion**
- Treats the patient as an individual, considers lifestyle, beliefs and support systems.
- Shows compassion to patients and maintains appropriate boundaries in professional relationships.
- Responds to patient’s needs in an appropriate way.
- Optimizes patient comfort and privacy when conducting history, physical examination and procedures.

**Respect**
- Respects institutional staff and representatives; respects faculty and colleagues during teaching sessions.
- Adheres to local dress code.
- Participates constructively as a team member.
- Adheres to institutional and departmental policies and procedures.
• Displays compassion and respect for all patients even under difficult circumstances.
• Discusses patients/faculty/colleagues without inappropriate labels or comments.

**Responsibility and Accountability**
• Presents self in an appropriate manner to patients and colleagues.
• Completes assignments and tasks in a timely manner.
• Responds promptly when called or when pages, emails or phone calls are sent.
• Intervenes when unprofessional behavior presents a clear and present danger.
• Uses resources effectively.
• Responds appropriately to an impaired colleague.
• Reacts to other’s lapses in conduct and performance.
• Makes valuable contributions to class, rounds and group interactions.
• Elicits patient’s understanding to ensure accurate communication of information.
• Facilitates conflict resolution.
• Remains flexible to changing circumstances and unanticipated changes.
• Balances personal needs and patient responsibilities.
• Provides constructive feedback.

**Excellence**
• Has internal focus and direction, sets goals to achieve excellence.
• Takes initiative in organizing, participating and collaborating with peer groups and faculty.
• Maintains composure under difficult situations.
• Inspires confidence in patients by proper preparation for clinical tasks and procedures.

In assuring compliance with the SOMA Assurances to DHHS and FDA regulations, SOMA requires that, prior to initiation, all research projects involving humans as subjects or human material be reviewed and approved by the Arizona Institutional Review Board (IRB) (note: subjects of research can include nurses, faculty members, physicians, staff employees, students, patients, as well as others). This policy applies, regardless of source of funding and location of the study, to such research conducted by faculty, staff, and students of SOMA. Whenever an investigator is uncertain as to whether the study falls under IRB aegis, an informal letter (or telephone call) describing the proposed activities will elicit an IRB response and benefit both the investigator and SOMA. As a general principle, research which will involve human subjects shall not be initiated until the IRB review process has been completed and approval has been provided.

**Electronic Postings**
Posting of pictures, videos, text or other material that violates the professionalism standards expected of SOMA students may be cause for disciplinary action, whether these materials appear on ATSU or non-ATSU platforms.

All SOMA students are required to respect curriculum content ownership, fair educational use and copyright rules. All SOMA faculty members include the following Fair Use and Copyright statement in their PowerPoint presentations, handouts, and other SOMA course materials:
"THE COPYRIGHTED MATERIALS AVAILABLE IN THIS MATERIAL ARE FOR EDUCATIONAL USE ONLY. ONE COPY PER STUDENT IS PERMITTED FOR EDUCATIONAL PURPOSES. REDISTRIBUTION IS NOT PERMITTED."

The distribution, posting and/or hosting of SOMA curricular content on internet sites (password protected and non-password protected) such as Quizlet.com, StudyBlue, Facebook and others, as well as blogs and various forms of social media is prohibited. Students who fail to comply with these statements and policies are subject to disciplinary action by the University, including dismissal.

Dress Code
While SOMA recognizes the importance of individuality in one’s attire, SOMA has adopted a dress code that reinforces our commitment to professionalism. Please follow the guidelines below.

Classroom Attire
Students are asked to use discretion with all aspects of their dress, remembering their visibility to the community and their role as professionals and healers. Students must be clean, well groomed, and in professional dress on non-clinic days. Facial hair, if present, should be appropriately trimmed. Skirts should be of modest length. Excessive piercing and exposed tattoos are not appropriate, except when required for religious or cultural reasons. Jeans are not appropriate. Approved scrubs in ATSU-SOMA colors (dark Caribbean blue) are allowed.

Clinical Experiences
Students should dress for simulated clinical experiences, such as those occurring in Medical Skills, as they would for live clinical interactions. Men should wear a button-down ironed dress shirt with tie, slacks, closed-toed shoes, and a white coat. Women should wear a modest top with professional slacks or a skirt/dress, closed-toed shoes, and a white coat. Make up and jewelry, if present, should be conservative. Low-cut tops are not acceptable. All students should refrain from using strong scents that may cause discomfort or allergies in other individuals.

Lab Classes
Some labs may require special dress for ease of working on techniques. Consult the syllabi for more details.

Community Campuses
Each community campus may make modifications to this dress code that conform to regional norms. Students are directed to check with the campus RDME with questions concerning dress code.

Classroom Etiquette
Activities that distract from the learning environment and interfere with the conduct of the educational process are prohibited. Such activities include emailing, instant messaging, cell phone usage or receiving calls when not on silent mode, headsets for music, surfing the internet
aside from direction by faculty as a part of the conduct of the classroom, bringing animals to class, bringing children in class (except as requested by faculty), conducting conversations outside of class participation, and distracting peers or faculty from the conduct of the learning process. Such activities are not consistent with the expectations of professionalism. Faculty have the responsibility to maintain the classroom environment and will ask those who engage in distracting activity to leave the room.

Frequent breaks are given during the day. Please make every attempt to limit your exit and re-entry to class by using break time to attend to needed activities.

**Class Schedules**
SOMA classes are generally scheduled between the hours of 8 a.m. and 5 p.m. Monday thru Friday. Please check individual course syllabi and class schedules for specific class times. When class times must be changed due to circumstances beyond the control of SOMA, every effort will be made to provide as much advanced notification as possible. Official ATSU holidays are published in the Academic Calendar; students are advised to check this calendar prior to making travel plans for holidays and time away from campus. Occasionally, it is necessary to schedule class activities on evenings or weekend days. Every attempt will be made to provide as much advanced notice as possible for these activities.

Occasionally classes may end early or run late or other circumstances may occur that will cause some lapse in the published schedule. Students are advised to maintain access to study materials during these periods so that time may be utilized productively. Please be advised that faculty are directed to begin and end classes on the published SOMA schedule.

**Examinations**
Examination content is derived from course goals and objectives. Rescheduling an examination or other assessment can be accommodated if a student receives an excused absence. If you cannot attend an examination or assessment, you are required to follow the Excused Absence Policy in the SOMA Catalog. SOMA reserves the right to assess students for the cost of reproducing examinations or assessments (i.e., pelvic exams) where the reproduction of said exam or assessment would be excessive (i.e., require special scheduling of standardized patients).

Students will be assigned seating for exams by a faculty member. All personal items (books, notebooks, food, etc.) must be placed at the front of the classroom or put away at the direction of the proctor. In examinations where the proctor will give permission for students to be excused, students who need to be excused from the exam may do so one at a time. The student's exam (or computer) must remain with the proctor until the student returns. Any student who arrives late for an examination will not be given extra time to complete the test.

SOMA students are expected to exhibit the highest degree of intellectual honesty in the writing of examinations and completion of assignments given by SOMA. Behaviors that are not consistent with this standard include (but are not limited to) having or seeking access to exam materials before the exam, impersonating an examinee or engaging someone else to take the exam by proxy, copying answers from someone else or allowing one's answers to be copied,
altering or misrepresenting scores, stealing exam materials, possessing unauthorized items during an exam (e.g. recording or photographic devices, phones, reference material, etc.).

The content of SOMA examinations and assignments is proprietary and strictly confidential. Unauthorized retention, possession, copying, distribution, disclosure, discussion, or receipt of any examination question, in whole or in part, by written, electronic, oral or other form of communication (including but not limited to e-mailing, copying or printing of electronic files and reconstruction through memorization and/or dictation) before, during, or after an examination, is strictly prohibited. Such behaviors are subject to disciplinary actions by the SOMA Student Performance Committee.

All assignments and projects submitted for any course are the property of SOMA and may not be available for return to the student. Students should maintain a copy of all work assignments submitted.

All work on exams, exercises and assignments are to be completed individually unless direction is given by the faculty member that said assignment may be completed as a group project or with the assistance of others.

**Students at Risk (Academic and/or Professionalism)**

**Background**
SOMA’s goal is to support students identified as being at academic or professionalism risk by providing appropriate resources to assist those students. An individualized student-centered approach will be used to provide needed support. This process is a partnership between the student and the school, however, it is ultimately the learner’s responsibility to use the resources made available so that the student can meet SOMA’s technical standards.

**Methodology:**
**A. Identification**
Students experiencing difficulty in academic and/or professionalism standards may be identified as “at risk.” Factors used to identify at-risk students may include one or more of the following:

- Failure of a SOMA course, OSCE, clinical rotation, and/or national board examination
- Consistent academic performance below the class mean on examinations, OSCEs, courses, clinical rotations, and/or national board examinations.
- Documentation of a professionalism issue(s) by faculty, staff, a dean, or the Student Performance Committee

**B. Process**
If a student is identified to be at-risk, the SOMA Administration, the Chair of the Student Performance Committee (SPC), and the student’s faculty advisor(s) will be notified. The student must meet with his/her faculty advisor as soon as possible, but at least within ten (10) academic days of notification of status. Failure to do so will be considered a professionalism violation.

The faculty advisor will gather more information from the student and will outline the next steps in the process with the student. In cases of low academic performance or failure, the advisor will
point the student to available resources and help the student to create an action plan. If an SPC meeting is required, the student’s advisor(s) will be invited to the meeting. In the case of a professionalism issue, the faculty advisor will review the SPC process and will be invited to the SPC meeting.

Meetings between the student and his/her advisor will be documented on the appropriate advising forms and forwarded to SOMA’s Curriculum Assessment Analyst to be noted in the student’s file.

Accommodations

Application Procedures for Accommodations
Students may find that disabilities diminish academic performance. ATSU can make accommodations for students with documented disabilities who are otherwise qualified. Students with disabilities are encouraged to contact Learning Resources. Requests for accommodations must be made in writing to the Director - Learning Resources. The contact information for the Director - Learning Resources is as follows:

Director - Learning Resources
800 W. Jefferson St.
Kirksville, MO 63501
660.626.2424
learningresources@atsu.edu

The Director - Learning Resources will confer with the student and may request documentation and may refer the student for individual assessment by qualified experts. The ATSU Technical Standards and Accommodations Committee will review any requests for accommodations. The Committee determines whether there are disabilities as protected by the Americans with Disabilities Act and/or Section 504 of the Rehabilitation Act and then decides if reasonable accommodations can be made without altering the fundamental nature of the school’s program or instruction.

The Committee makes recommendations for or against accommodations to the Director of Learning Resources who then notifies the student and the appropriate faculty and staff members who have an educational need to know. Within ten (10) days of receiving the Committee’s determination from the Director - Learning Resources, a student can appeal the decision in writing to the Dean of the appropriate school.

Advising
Each SOMA student is assigned a primary Mesa faculty advisor, a secondary Mesa faculty advisor, and an RDME faculty advisor(s). All of the student's advisors are associated with their assigned CHC.

- The Mesa primary faculty advisor is the student's main support and contact during the OMS I year and continues to provide guidance for the duration of the student's tenure at SOMA.
- RDME faculty advisors serve the primary advising role in OMS II-IV years (and are
additionally available for guidance as needed during the student's OMS I year).

- The secondary Mesa faculty advisor may provide additional student support and is selected based upon the student's CHC assignment.

The roles of a faculty advisor include:

- Assisting students with the policies and practices of ATSU-SOMA.
- Addressing questions or concerns regarding course requirements and expectations, performance criteria, academic standing, and professionalism.
- Providing feedback on student progress in course and/or clinical requirements, faculty expectations, graduate competencies and program goals.
- Providing support for student personal and professional growth. This support may include referrals to Student Affairs or external sources as needed.
- Discussing academic performance in an effort to optimize learner success
- Assisting students deemed to be at-risk by providing guidance and support

Students must meet with their faculty advisor at least once per semester in the first year (preferably mid-semester) to promote professional development and self reflection. Advisees are required to complete a self assessment prior to these once-per-semester mandatory advising meetings. Students must additionally meet with their faculty advisor following their first examination at SOMA to address their academic performance, receive support, and to promote the faculty advisor-advisee relationship. In the instance that a student is deemed to be performing below expectations, the student will be notified that they must meet with their faculty advisor to discuss their performance. Advisees will be notified by the Assessment Team of the time during which they are required to schedule their advisor/advisee meetings. Students are expected to contact their faculty advisor as soon as they are notified. Failure to do so may be considered a professionalism violation. It is the student’s responsibility to contact their advisor when issues need to be discussed at other times.

A student may request a change of advisors. Requests to change advisors must be made through the Director of Osteopathic Medical Student Academic Performance. Should another advisor be available, the student may be reassigned to promote a more productive mentoring experience.

**Student Performance Committee**

*Responsibilities and Membership*

SOMA’s Student Performance Committee (SPC) is a standing committee that evaluates the academic and professional performance and development of all SOMA students and forwards recommendations to the Dean based on its reviews. The SPC ensures that all students meet the standards to advance to each year of the SOMA curriculum and that each student has completed all graduation requirements. The voting members of the SPC include clinical and basic medical science faculty appointed by the Dean. Additional non-voting, *ex officio* members include the Associate or Assistant Dean for Clinical Education and Services; Associate Dean for Pre-Clinical Education; and the Associate Vice President for Student Affairs. The Chair of the SPC is appointed annually by the Dean.

*Referrals*
Referrals to the SPC are made by the SOMA Associate or Assistant Dean(s). An individual with a concern about a student’s academic or professional performance will refer the issue to the appropriate Associate or Assistant Dean(s). Examples include, but are not limited to the following:

- Failure of a course, rotation, COMLEX exam, or other required activity
- Overall poor performance in the academic program (even without an actual failure)
- Violation of professionalism standards
- Inability to meet SOMA technical standards
- Failure to abide by SOMA Catalog policies and procedures

The student is usually required to attend the SPC meeting (either in person or by videoconference) when his/her case is on the agenda for discussion. When a student is required to attend the SPC meeting, the student will be notified of the requirement to attend at least two (2) academic days before the meeting. The required dress code for meetings with the SPC is business attire. Each case is reviewed individually taking into account the student’s overall performance. Listed below are general guidelines the SPC will follow in review of student performance. Specific circumstances may require modification of these guidelines as determined during the Committee’s deliberation.

<table>
<thead>
<tr>
<th>Examples of SPC Recommendations</th>
<th>Issue</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic warning. Course remediation.</td>
<td>One course failure</td>
</tr>
<tr>
<td>Academic probation. Course remediation or extension of academic program.</td>
<td>Two course failures</td>
</tr>
<tr>
<td>Dismissal from SOMA</td>
<td>Three course failures</td>
</tr>
<tr>
<td>Academic probation. Repeat rotation. Extension of academic program</td>
<td>One clinical rotation failure</td>
</tr>
<tr>
<td>Dismissal from SOMA</td>
<td>Two clinical rotation failures</td>
</tr>
<tr>
<td>Academic warning, academic probation, suspension or dismissal from SOMA</td>
<td>Violation of professionalism standards or SOMA Catalog policies and procedures</td>
</tr>
</tbody>
</table>

As part of its recommendation, the SPC may also require consultation by an academic performance specialist, professional development specialist, physician, psychiatrist, or other professional.

After reviewing all pertinent information related to a student’s case, the SPC will submit a written recommendation to the appropriate Associate or Assistant Dean(s). The Associate or Assistant Dean(s) will affirm, modify, or send the recommendation back to the SPC for further consideration. Following this process, the SPC will notify the student regarding the decision.
In the case of a SPC recommendation for dismissal, suspension, or extension of the academic program affecting the student’s graduation, the final decision and notification to the student will come directly from the Dean of SOMA.

Right of Appeal
A notification to the student by the SPC regarding the decision concerning his/her case may be appealed, in writing, to the Dean of SOMA. A student’s appeal must be received no later than seven (7) academic days following receipt of the SPC letter. The appeal must include a statement of the reason(s) the action is unwarranted. The written appeal must be dated and signed by the student. Upon receiving the written appeal, the Dean may choose to meet with the student. The Dean will notify the student in writing of his/her decision concerning the appeal no later than seven (7) academic days following receipt of the student’s appeal. The decision of the Dean regarding the appeal is final.

A decision by the Dean for dismissal, suspension, or extension of the academic program affecting the student’s graduation date may be appealed, in writing, to the Senior Vice President, Academic Affairs (SVPAA) on the basis of one or more of the following criteria:
- New and significant material is brought to light that the SPC and the Dean did not review.
- There was a process error.
- Demonstrated bias affected the decision.

A student’s appeal must be received no later than seven (7) academic days following receipt of notification of the Dean’s decision. The appeal must include a statement of the reason(s) the action is unwarranted and which of the three elements above was present. The written appeal must be dated and signed by the student. The SVPAA may meet in person with the student, if indicated. The SVPAA will notify the student in writing of his/her decision concerning the appeal no later than seven (7) academic days following receipt of the student’s appeal. The decision of the SVPAA is final.

Remediation Policy
Remediation examinations for course failures in OMS I and OMS II begin two weeks following the conclusion of the final course in the academic year and must be successfully completed before a student can be advanced to the next stage of the curriculum. This minimum two-week period allows for students to focus their attention on remediation examination preparation.

For students needing to remediate course failures in the year 1 curriculum, an individualized remediation examination schedule will be developed by the Associate Dean for Pre-Clinical Education. Remediation examinations may occur at the main Arizona campus or at the student’s community campus location with the approval of the Associate Dean for Pre-Clinical Education.
For students needing to remediate course failures in the year 2 curriculum, an individualized remediation examination schedule will be developed by the Associate Dean for Pre-Clinical Education, in consultation with the Associate or Assistant Dean for Clinical Education and Services (or designee) and the appropriate Regional Directors of Medical Education (RDMEs). It may be necessary to delay the start of 3rd year clinical rotations and/or sitting for COMLEX-1 in order to successfully complete the remediation process. Remediation examinations will occur at the student’s community campus location.

For students wishing to take a remediation examination at one week following the conclusion of the final course in the academic year, a petition can be submitted to the Associate Dean for Pre-Clinical Education outlining the reason(s) for the request. If permission is granted to take an earlier remediation examination, the student will be required to sign a waiver acknowledging the potential risk of remediation failure with less preparation time than being advised.

All OMS I and II remediation examinations must be proctored by an ATSU-SOMA employee or designee as approved by the Associate Dean for Pre-Clinical Education. A student who fails a course remediation examination will be referred to the SPC and is subject to dismissal.

Failed clinical rotations (OMS III and IV) must be repeated and successfully completed. The course and preceptor must be approved by the Associate or Assistant Dean for Clinical Education and Services.

**Categories of Academic Standing**

**Good Standing**

Students meeting SOMA’s academic and professionalism requirements are considered to be in Good Standing. A student in Good Standing is eligible to be an officer in student organizations, be nominated for student awards, participate as a Student Ambassador, and may be eligible for an excused absence for certain pre-approved extracurricular activities.

**Academic Warning**

A student who fails to meet SOMA’s academic or professionalism standards will be issued an Academic Warning. The purpose of the Academic Warning is to alert the student, faculty, and administration that the student has experienced difficulty, and that special consideration may be given for consultation, referral, counseling, academic assistance, or other activities to help the student resolve academic or professionalism deficiencies.

**Academic Probation**

A student with multiple course failures, COMLEX failure(s), or a significant professionalism concern will generally be placed on Academic Probation. A student on Academic Probation is at high risk for potential suspension and/or dismissal from SOMA.

**Suspension**

Suspension is temporary removal of the student from all ATSU- and SOMA-related activities as a result of a serious academic or professionalism issue(s). The SPC and Dean will determine if
the student will be eligible for reinstatement, the terms of the reinstatement, or if the student is to be dismissed from SOMA.

Dismissal
Dismissal is a permanent separation from SOMA due to academic or professionalism deficiencies.

Academic Promotion Requirements
All SOMA students are required to read the SOMA Catalog and the ATSU Student Handbook annually. In addition, the OMS III and OMS IV students must also read the SOMA Clinical Education Manual annually. An attestation is sent via the E*Value system to all students annually. Each student must sign and submit the form, affirming that they have read the required items. Failure to do so may be considered a professionalism violation and may result in a delay in the student’s course work, and may result in the student appearing before the Student Performance Committee.

Students are promoted to each level of the curriculum (e.g., OMS I to OMS II) by the SPC (unless an exception is made by the Dean). Listed below are the requirements that must be met to formally progress through the curriculum.

Requirements for progression to OMS II
- Pass all OMS I coursework and maintain good academic standing.
- Comply with all professionalism standards of behavior and SOMA technical standards.
- Maintain health insurance, disability insurance, BLS certification and current immunization standards.

Requirements for progression to OMS III
Students are classified as OMS III upon completion of the following the requirements:

- Pass all OMS II coursework and maintain good academic standing
- Comply with all professionalism standards of behavior and SOMA technical standards
- Maintain health insurance, disability insurance, BLS certification and current immunization standards
- Obtain ACLS certification

Students are not permitted to begin OMS III required coursework until COMLEX, Level 1 has been taken.

Requirements for progression to OMS IV
- Pass all OMS III coursework and maintain good academic standing.
- Comply with all professionalism standards of behavior and SOMA technical standards.
- Maintain health insurance, disability insurance, BLS and ACLS certification, and current immunization standards.
MSPE, Residency and COMLEX, Level 3
The Medical Student Performance Evaluation (MSPE) is a document utilized in the residency application process. It serves as “an evaluation of a medical student’s performance” (rather than a recommendation or prediction of future performance). The MSPE describes, in a sequential manner, a student’s performance through 3 full years of medical school and, as much as possible, the 4th year. The MSPE includes an assessment of both the student’s academic performance and professional attributes.” (Association of American Medical Colleges-AAMC). The MSPE will include all of the student’s clinical evaluations as well as any of the student’s “Unique Characteristics”.

Once the MSPE draft has been created for each student, students will be provided the opportunity to review their MSPE and “correct factual errors in the MSPE, but not to revise evaluative statements in the MSPE.” (AAMC). The national release date for the MSPE to residency programs varies by year (usually October-November).

Once a graduate is placed in residency, he/she will be required to take and pass COMLEX 3. For information on SOMA COMLEX Level 3 pass rates and residency match rates, please refer to: http://www.atsu.edu/soma/prospective_students/postgraduatePlacement.html

Graduation Requirements
In order to graduate from ATSU-SOMA, a student must:

- have been a student in an accredited osteopathic medical school or equivalent for at least four academic years.
- have been enrolled in SOMA for at least his/her final two academic years.
- successfully complete all academic, administrative, and professional requirements for promotion.
- take and pass the National Board of Osteopathic Medical Examiners, Inc. (NBOME) Comprehensive Osteopathic Medical Licensing Examination (COMLEX) 1, COMLEX 2 Cognitive Evaluation (CE), and the COMLEX 2 Performance Exam (PE).
- have been approved by the faculty to receive his/her diploma.
- have discharged all financial obligations to ATSU-SOMA.
- attend the commencement program at which time the degree is conferred.

Completion of Degree
A student is expected to complete all D.O. degree requirements within SOMA’s usual four-year plan of study. However, a student may have his or her plan of study altered beyond the usual four-year timeframe due to academic or personal issues. Regardless of the circumstances, all D.O. degree requirements must be completed within seven (7) years of the original date of matriculation. Failure to complete all D.O. degree requirements within the specified time period will result in administrative withdrawal from SOMA.

COMLEX Policies
Passing Level 1 and Level 2 of the Comprehensive Osteopathic Medical Licensing Examination (COMLEX) from the National Board of Osteopathic Medical Examiners (NBOME) is a graduation requirement. These examinations are:
- COMLEX Level 1 (COMLEX 1)
- COMLEX Level 2 CE (COMLEX 2CE)
- COMLEX Level 2PE (COMLEX 2PE)

Students are required to take COMLEX during specific time-frames listed in the sections below. If a student is eligible to take COMLEX, and does not take it according to the scheduling requirements listed in this section (unless prior permission to deviate from the required schedule is granted by the Associate or Assistant Dean), it is a professionalism violation and the student will be removed from clinical rotations until a passing score on COMLEX is received. The student will be referred to the Student Performance Committee (SPC) at the discretion of the Associate or Assistant Dean.

COMLEX Level 1:
Students must take COMLEX 1 prior to the start of the OMS III rotations cycle for the class as published in the Academic Calendar. Exceptions must be approved in advance by SOMA’s Associate Dean for Pre-Clinical Education. The examination may be taken at any NBOME-approved testing center.

A student is eligible to take COMLEX 1 if he/she has:

- Passed all OMS I and OMS II courses
- Achieved a minimum score of 450 on the Phase 1 Comprehensive Osteopathic Medical Self-Assessment Exam Version D (COMSAE-D).*
  - If a student does not receive a minimum score of 450 on the Phase 1 COMSAE-D, he/she must submit the results of an alternative timed COMSAE (Form A, B or C) to SOMA’s Associate Dean for Pre-Clinical Education demonstrating a score of 450 or higher at least five (5) business days prior to his/her scheduled COMLEX 1 examination date.
  - However, if a student has not achieved a COMSAE score of at least 450 within five (5) business dates of his/her examination date, he/she must meet with the Associate Dean for Pre-Clinical Education or his/her designee to assist the student in creating an individualized preparation plan with benchmarks the student will be required to reach before being authorized to take COMLEX 1. It may be necessary to postpone the start of clinical rotations.
- Under certain circumstances, such as in cases of overall poor academic performance, the Associate Dean for Pre-Clinical Education may require the student to delay taking the COMLEX until readiness to take the exam is determined.

*The Phase 1 COMSAE-D is administered to OMS II students during the last week of the Integrative course.

COMLEX Level 1, First Failure:
Failure of COMLEX 1 may significantly impact a student’s clinical rotation schedule and progression through the curriculum.
A student who fails the first attempt of COMLEX 1 is required to inform the Associate or Assistant Dean for Clinical Education, his/her Regional Directors of Medical Education (RDMEs), and his/her Clinical Education Coordinator (CEC). The student will be placed on Academic Warning.

The Associate or Assistant Dean and/or faculty designee will work with the student to create an individualized remediation plan which may include time off clinical rotations, Directed Studies, a formal board preparation course, and documentation of an additional COMSAE score greater than 450. The SPC will be notified of the failure. Based on the student’s numeric COMLEX score and past academic record, he/she may be required to appear before the SPC.

Unless instructed otherwise by the Associate or Assistant Dean for Clinical Education, the student must re-take COMLEX 1 within eight (8) weeks of notification of failure.

**COMLEX Level 1, Second Failure:**
A student who fails the second attempt of COMLEX Level 1 is required to inform the Associate or Assistant Dean for Clinical Education, his/her RDMEs, and his/her CEC.

The student will be removed from clinical rotations at the conclusion of his/her current rotation, and placed on Directed Studies until a passing score is received. The student will be placed on Academic Probation.

The student is required to meet with the SPC to present evidence (such as a formal study plan) to support why he/she should be allowed a third attempt of COMLEX Level 1. If permission for a third (final) attempt is granted, the student will remain on Directed Studies pending a passing score.

The Associate or Assistant Dean and/or faculty designee will work with the student to create an individualized remediation plan (as listed above). A formal board preparation course will be required.

Unless instructed otherwise by the Associate or Assistant Dean for Clinical Education, the student is required to make the third (final) attempt of the COMLEX 1 within sixteen (16) weeks of notification of the failure.

**COMLEX Level 1 Third Failure:**
A student who fails COMLEX 1 three (3) times will meet with the SPC and is subject to dismissal from SOMA.

**COMLEX Level 1 Failure Summary:**

<table>
<thead>
<tr>
<th>FAILURE NUMBER</th>
<th>FORMAL BOARD PREP COURSE</th>
<th>TIME OFF ROTATIONS</th>
<th>SPC MEETING</th>
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<th>Assistant Dean</th>
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<td>2</td>
<td>Required</td>
<td>Required Directed Studies until passing score received</td>
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</tr>
<tr>
<td>3</td>
<td>N/A</td>
<td>Dismissal from SOMA</td>
<td>Yes</td>
</tr>
</tbody>
</table>

**COMLEX Level 2 CE:**

Students who are on-track with their OMS IV class are required to take COMLEX Level 2CE by September 1 of the OMS IV year. Exceptions to this deadline must be authorized in advance by the Associate or Assistant Dean for Clinical Education. The examination may be taken at any NBOME-approved testing center.

A student is eligible to take COMLEX Level 2 CE if he/she has:

- Successfully completed all OMS III Core curricular requirements including the Osteopathic Principles and Practice (OPP) course. The requirements for each course are listed in the course syllabus and may include, but are not limited to: completion of all patient logs, cases, quizzes, and passage of all post-rotation OMS III NBOME COMAT examinations, including the OPP NBOME COMAT examination.

- Submitted evidence of a minimum score of 450 on the Phase 2 timed Comprehensive Osteopathic Medical Self-Assessment Exam (COMSAE) to the Associate or Assistant Dean for Clinical Education at least five (5) business days prior to taking the COMLEX 2CE.
  - If a student has not achieved a Phase 2 timed COMSAE score of at least 450 within five (5) business dates of his/her examination date, he/she must meet with the Associate or Assistant Dean for Clinical Education or his/her designee to assist the student in creating an individualized preparation plan with benchmarks the student will be required to reach before being authorized to take COMLEX 2CE. During this time, the student may be taken off clinical rotations and placed on Directed Studies to prepare for the examination.

If a student is off-track with his/her OMS IV class for any reason, he/she is required to take the COMLEX 2CE within 60 days following successful completion of all OMS III curricular requirements (see above section for OMS III curricular and COMSAE requirements). Exceptions to this deadline must be authorized in advance by the Associate or Assistant Dean for Clinical Education.

Students are given a 24-hour excused absence from rotations to take COMLEX 2CE if a request is submitted to the Clinical Education Department at least 10 business days in advance of the examination.
COMLEX Level 2CE First Failure:
Failure of COMLEX Level 2CE may significantly impact a student’s clinical rotation schedule, progression through the curriculum, ability to match into residency, graduation, and eligibility to start residency.

A student who fails the first attempt of COMLEX 2CE is required to inform the Associate or Assistant Dean for Clinical Education, his/her RDMEs, and his/her CEC. The student will be placed on Academic Warning.

The Associate or Assistant Dean and/or faculty designee will work with the student to create an individualized remediation plan which may include time off clinical rotations, Directed Studies, and a formal board preparation course. The Student Performance Committee (SPC) will be notified of the failure. Based on the student’s numeric COMLEX 2CE score and past academic record, he/she may be required to appear before the SPC.

Unless instructed otherwise by the Associate or Assistant Dean for Clinical Education, the student must re-take COMLEX 2CE within eight (8) weeks of notification of failure.

COMLEX Level 2CE Second Failure:
A student who fails the second attempt of COMLEX Level 2CE is required to inform the Associate or Assistant Dean for Clinical Education, his/her RDMEs, and his/her CEC. The student will be removed from clinical rotations at the conclusion of his/her current rotation, and placed on Directed Studies until a passing score is received. The student will be placed on Academic Probation.

The student is required to meet with the SPC to present evidence (such as a formal study plan) to support why he/she should be allowed a third attempt of COMLEX Level 2CE. If permission for a third (final) attempt is granted, the student will remain on Directed Studies pending a passing score.

The Associate or Assistant Dean and/or faculty designee will work with the student to create an individualized remediation plan (as listed above).

Unless instructed otherwise by the Associate or Assistant Dean for Clinical Education, the student is required to make the third (final) attempt of the COMLEX 2CE within sixteen (16) weeks of notification of the failure.

COMLEX Level 2CE Third Failure:
A student who fails COMLEX 2CE three (3) times will meet with the SPC and is subject to dismissal from SOMA.

COMLEX Level 2CE Failure Summary:
<table>
<thead>
<tr>
<th>FAILURE NUMBER</th>
<th>FORMAL BOARD PREP COURSE</th>
<th>TIME OFF ROTATIONS</th>
<th>SPC MEETING</th>
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<tr>
<td>1</td>
<td>May be required by Associate or Assistant Dean</td>
<td>May be required by the Associate or Assistant Dean</td>
<td>May be required by Associate or Assistant Dean</td>
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<tr>
<td>2</td>
<td>Required</td>
<td>Required Directed Studies until passing score received</td>
<td>Yes, to determine if the student will be allowed a third attempt</td>
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<tr>
<td>3</td>
<td>N/A</td>
<td>Dismissal from SOMA</td>
<td>Yes</td>
</tr>
</tbody>
</table>

**COMLEX 2PE:**

Students who are on-track with their OMS IV class are required to take COMLEX Level 2PE by November 1 of the OMS IV year. Exceptions to this deadline must be authorized in advance by the Associate or Assistant Dean for Clinical Education. The examination must be taken at an NBOME-approved PE testing center.

A student is eligible to take COMLEX Level 2 PE if he/she has:

- Successfully completed all OMS III curricular requirements including the Osteopathic Principles and Practice (OPP) course. The requirements for each course are listed in the course syllabus and may include, but are not limited to: completion of all patient logs, cases, quizzes, and passage of all post-rotation OMS III NBOME COMAT examinations, including the OPP NBOME COMAT examination.

If a student is off-track with his/her OMS IV class for any reason, he/she is required to take the COMLEX 2PE within 120 days following successful completion of all OMS III curricular requirements (see above section for OMS III curricular requirements). Exceptions to this deadline must be authorized in advance by the Associate or Assistant Dean for Clinical Education.

Students are given a 72-hour excused absence from rotations to take COMLEX 2PE if a request is submitted to the Clinical Education Department at least 10 business days in advance of the examination.

**COMLEX Level 2PE First Failure:**

Failure of COMLEX Level 2PE may significantly impact a student’s clinical rotation schedule, progression through the curriculum, ability to match into residency, graduation, and eligibility to start residency.

A student who fails the first attempt of COMLEX 2PE is required to inform the Associate or Assistant Dean for Clinical Education, his/her RDMEs, and his/her CEC. The student will be placed on Academic Warning.
The Associate or Assistant Dean and/or faculty designee will work with the student to create an individualized remediation plan which may include time off clinical rotations, assigned clinical rotations, and/or Directed Studies. The student will be required to participate in a formal, individualized remediation plan including practice sessions under the direction of the Standardized Patient Program.

The Student Performance Committee (SPC) will be notified of the failure. Based on the student’s past academic record, he/she may be required to appear before the SPC.

Unless instructed otherwise by the Associate or Assistant Dean for Clinical Education, the student must re-take COMLEX 2PE within eight (8) weeks of notification of failure.

**COMLEX Level 2PE Second Failure:**
A student who fails the second attempt of COMLEX Level 2PE is required to inform the Associate or Assistant Dean for Clinical Education, his/her RDMEs, and his/her CEC.

The student will be removed from clinical rotations at the conclusion of his/her current rotation, and placed on Directed Studies until a passing score is received. The student will be placed on Academic Probation.

The student is required to meet with the SPC to present evidence (such as a formal study plan) to support why he/she should be allowed a third attempt of COMLEX Level 2PE. If permission for a third (final) attempt is granted, the student will remain on Directed Studies pending a passing score.

The Associate or Assistant Dean and/or faculty designee will work with the student to create an individualized remediation plan (as listed above). A formal board preparation course will be required.

Unless instructed otherwise by the Associate or Assistant Dean for Clinical Education, the student is required to make the third (final) attempt of the COMLEX 2PE within sixteen (16) weeks of notification of the failure.

**COMLEX Level 2PE Third Attempt Failure:**
A student who fails COMLEX 2PE three (3) times will meet with the SPC and is subject to dismissal from SOMA.

**COMLEX Level 2PE Failure Summary:**

<table>
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<tr>
<th>FAILURE NUMBER</th>
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<td>May be required by Associate or Assistant Dean</td>
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<tr>
<td></td>
<td>Required</td>
<td>Yes</td>
<td>Yes, to determine if the student will be allowed a third attempt</td>
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<td>2</td>
<td></td>
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<tr>
<td>3</td>
<td>N/A</td>
<td></td>
<td>Dismissal from SOMA</td>
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</tbody>
</table>

COMLEX Level 3:
Following graduation, the ATSU Registrar approves each graduate to take COMLEX Level 3 through the NBOME website. Generally, graduates take this examination at the completion of the first year of post-graduate training. However, requirements for taking this examination vary from state to state. Graduates should contact the osteopathic medical licensing board in the state where they will have post-graduate training for further information.

Attendance
Attendance is mandatory for all scheduled sessions. In the case of excused absences, make-up class, lab assignments and/or examinations are provided solely at the discretion of the course director responsible for that activity and are not automatic.

Request for Excused Absences/Excused Absence Policy

OMS I and OMS II students
SOMA’s faculty members recognize that occasionally a student must miss a curricular activity due to a required or unavoidable circumstance. If this occurs, the student must follow the following procedure:

Planned absences (known in advance of the curricular activity):
Requests for planned absences must be submitted as early as possible, but no less than two weeks in advance of the absence. Requests submitted less than two weeks in advance will not be considered. Examples: scheduled religious observances, conferences (invited presenters or officer requirements only), surgeries, or procedures that cannot be done during academic breaks, etc.

- Email SOMAabsences@atsu.edu with your Excused Absence Form properly filled out and supporting documentation. Documentation is required for the request to be considered (examples below). If the absence is excused, the Associate Dean of Pre-Clinical Education or designee will notify the student and the appropriate course directors that an excused absence has been granted. If the absence is not excused, the student will also be notified and will be responsible for attending the activity or receiving a penalty (as published in the course syllabi) for an unexcused absence.

Unplanned absences (known just prior to the curricular activity):
Examples: acute personal illness, acute illness or death of a family member, traffic accident, etc.

- Email SOMAabsences@atsu.edu with your Excused Absence Form properly filled out and supporting documentation. Documentation is required for the request to be considered (examples below). If the absence is excused, the Associate Dean of Pre-
Clinical Education or designee will notify the student and the appropriate course directors that an excused absence has been granted. If the absence is not excused, the student will also be notified and will be responsible for attending the activity or receiving a penalty (as published in the course syllabi) for an unexcused absence.

For all absences, documentation must be provided for the absence to be excused and eligible for make-up.

The nature of the documentation will be determined by the reason for the absence. Typical examples include:

1. Personal illness or medical procedure: Physician’s note stating the date(s) the student is required to be out of class AND the date the student is allowed to return to class.

2. Family member’s illness or medical procedure: Official document regarding the medical issue (ex. letter from physician, hospital record, etc.) PLUS a signed statement from the student explaining the necessity for him/her to be present with the family member during class time.

3. Death of a family member: Published announcement of the death (newspaper clipping or printout from a webpage, etc.) PLUS an original program from the funeral service.

4. Religious holidays: A program, bulletin, or other printed item from the religious observance held on the day of absence or a letter from the leader of the congregation or organization in which the student is a member verifying the necessity of the student’s participation in the activity.

Make-up for excused absences:
If the Associate Dean of Pre-Clinical Education determines that the absence is excused, the appropriate course directors will be notified that the student is authorized for make-up. A make-up is offered for all major examinations and must be scheduled within 72 business hours of the original examination. After receiving approval for an excused absence, a student should contact the Associate Dean of Pre-Clinical Education to schedule the make up examination. Students unable to make-up an examination within 72 business hours of the original examination must take an incomplete in the course and fulfill course requirements at the end of the academic year.

Some courses/activities have built-in leeway for missing class or a quiz (e.g. the lowest quiz grade is dropped) and no make-up is offered, even if the absence is excused. Due to expenses incurred in providing a make-up, some courses/activities must charge a fee to students in order to be able to provide the make-up, even if it is excused. Finally, sometimes a make-up is not possible due to the nature of the activity even if the student was granted an excused absence.

Additional requirements for community campus based OMS II students
1. Remember to report each day that you are absent to the Regional Director of Medical Education (RDME) at your community campus and electronically copy your RDME when sending excused absence requests to SOMAabsences@atsu.edu.

2. If an OMS II wishes to participate in any academic activity at a community campus other than his/her assigned site, an excused absence request must be submitted to SOMAabsences@atsu.edu no later than two weeks in advance of the planned absence from the assigned site. An OMS II is not permitted to participate in academic activities at another
community campus unless approved by the Associate Dean of Pre-Clinical Education. Failure to comply with this requirement may result in disciplinary action and/or referral to the Student Performance Committee.

Community campus based OMS III and OMS IV students
For an excused absence in OMS III or OMS IV, the student must complete the Excused Absence Request Form located on the E*Value homepage. The student then sends that completed form along with any accompanying documentation to their RDME for approval. Once the RDME has approved and signed the Excused Absence Request Form, the RDME or AA will forward the Excused Absence Request Form and the accompanying documentation to SOMAabsences@atsu.edu and copy the campus Clinical Education Coordinator. The Clinical Education Department will notify the student if their absence has been approved. These students should also follow any additional procedures delineated by their RDME or preceptor. For every 4-week rotation, the maximum allowable excused days of absence is 3. Any absence beyond 3 requires that the student repeat the rotation. For every two-week rotation, the maximum allowable excused days of absence is 2. Any absence beyond 2 requires that the student repeat the rotation. This final decision is at the discretion of the Associate or Assistant Dean for Clinical Education and Services (or designee).

Echo360
SOMA uses Echo360 for video and audio recording of many didactic presentations for later playback; however, as with any technology, the Echo360 system may not work at times. SOMA will notify students via ATSU e-mail when the Echo360 is unavailable. The student is always responsible for the material covered in a session, even if an Echo360 recording is not available.

ATSU Email Communication and Use
Students are responsible to have their contact information updated and on file with SOMA at all times. Changes are be made through the ATSU Portal and CampusVue Student-Portal. A name change request requires official documentation submitted directly to the Registrar’s Office.

It is required that students check their ATSU e-mail account at least once a day, including weekends. Students must reply to emails that require a response within 24 hours of receipt, including weekends. Many of the SOMA faculty and staff use e-mail as an important means for dispersing information among the class.

Emergency Contact
Students are required to submit an emergency contact on their CampusVue student information. It is critical that the University be able to contact someone in the event a student becomes incapacitated. The emergency contact is located in CampusVue under the address section.

Class Rank
Class ranks are calculated at the end of each academic year and are available to students upon request.

General Grievance Policy
Please refer to the University Student Handbook for the process of filing grievances relating to
For grievances related to a course grade, please refer to the Grading Grievance Policy and Process of this Catalog.

Student Conduct
Principles for Diversity
ATSU recognizes, values, and affirms that diversity contributes richness to the University community and enhances the quality of education and campus life for individuals and groups.

ATSU students, faculty, staff and administrators are valued for their diversity as reflected by gender, race, national origin, age, religious beliefs, social/economic background, sexual orientation, political beliefs, and disabilities.

ATSU is committed to creating and maintaining an environment where persons can work together in an atmosphere free of all forms of abusive or demeaning communication. ATSU acknowledges the individual right of expression within bounds of courtesy, sensitivity, and respect.

PROHIBITION OF DISCRIMINATION, HARASSMENT, AND RETALIATION
Purpose:
The purpose of this general order is to provide an employment and learning environment at A.T. Still University of Health Sciences (“ATSU” or “the University”) free from discrimination, harassment, and retaliation. Discrimination, harassment, or retaliation by anyone—managers, administrators, supervisors, co-workers, students, or non-University personnel including clients, vendors, and suppliers—on the basis of race, color, religion, ethnicity, national origin, sex (including pregnancy), gender, sexual orientation, gender identity, age, disability, veteran status, or any other status protected by applicable law is a violation of University policy and is prohibited by the University.

Policy:
ATSU does not discriminate on the basis of race, color, religion, ethnicity, national origin, sex (including pregnancy), gender, sexual orientation, gender identity, age, disability, or veteran status in admission or access to, or treatment or employment in its programs and activities. Dating violence, domestic violence, sexual assault (e.g. non-consensual sexual contact/intercourse), stalking, harassment, and retaliation are forms of discrimination prohibited
by ATSU. Any person who witnesses or has knowledge of incidents of discrimination, harassment, retaliation, or any other situation prohibited by this policy, should report such information to the persons listed in this general order. All reporting parties are protected from adverse action or retaliation under the provisions of this policy and by ATSU Policy No. 10-216: Whistleblower. Good faith reports, even if erroneous, will not result in punitive action. Deliberately false and/or malicious accusations of harassment are just as serious an offense as harassment and will be subject to appropriate disciplinary action.

To report violations of ATSU’s nondiscrimination policies, request information, or for assistance filing a police report, contact the following persons:

Employees, members of the public, or beneficiaries should contact:

**Arizona Campus**
Tonya Fitch  
Director of Human Resources  
Deputy Title IX Coordinator  
5850 East Still Circle  
Mesa, AZ 85206-3618  
480.219.6007  
tfitch@atsu.edu

**Missouri Campus**
Donna Brown  
Assistant Vice President of Human Resources  
Deputy Title IX Coordinator  
800 West Jefferson Street  
Kirksville, Missouri 63501  
660.626.2790  
dbrown@atsu.edu

Students should contact:

**Arizona Campus**
Beth Poppre  
Associate Vice President for Student Affairs  
Deputy Title IX Coordinator  
5850 East Still Circle  
Mesa, AZ 85206-3618  
480.219.6026  
bpoppre@atsu.edu

**Missouri Campus**
Lori Haxton  
Assistant Vice President for Student Affairs  
Deputy Title IX Coordinator  
800 West Jefferson Street  
Kirksville, Missouri 63501  
660.626.2236  
lhaxton@atsu.edu

Alternately, discrimination complaints, reports, or questions may be directed to the ATSU Title IX Coordinator:

Joe Vincent  
Title IX Coordinator  
800 West Jefferson Street  
Kirksville, MO 63501  
660.626.2113  
titleix@atsu.edu
ATSU Campus Security
Arizona Campus: Missouri Campus
Emergency - 911 (off-campus) Emergency - 911 (off-campus)
Emergency -911 (on-campus) Emergency -911 (on-campus)
Security Office - *7 (on-campus) Security Office - 33 (on-campus)
Non-Emergency Security - 480.341.9075 Non-Emergency Security -
Mesa Police Department - 480.644.2211, opt. 2 660.626.2380/660.349.9513
Kirksville Police Department - 660.785.6945

On-campus confidential resources are available for students through:

ATSU Counseling Services
Arizona campus - Art Matthews, 480.219.6170, amatthews@atsu.edu
Missouri campus - Thom Van Vleck, 660.626.2424, tvanvleck@atsu.edu

To anonymously and confidentially report situations or behavior that compromises the
University’s integrity, call our 24-hour service at 1-855-FRAUD-HL or use our secure online

Off-campus counseling and victim support is available through:

National Sexual Assault Hotline – 800.656.4673
Victim Support Services, Inc. (Missouri) – 660.665.1617
Mesa Victim Services Unit (Arizona) – 480.644.4075

Complaints regarding potential violations of Title IX, the Clery Act, or Title VII may be directed
to:

Title IX and Clery Act:
U.S. Department of Education
One Petticoat Lane
1010 Walnut Street, Suite 320
Kansas City, MO 64106
816.268.0550
816.268.0550 fax
ocr.kansascity@ed.gov

Title VII:
U.S. Equal Employment Opportunity Commission
Robert A. Young Federal Building
1222 Spruce Street, Room 8.100
St. Louis, MO 63103
800.669.4000
314.539.7894 fax
800.669.6820 TTY

A. Anti-Harassment
1. Prohibited conduct includes unwelcome conduct, whether verbal, non-verbal,
   physical, or visual, that is based on or relates to an individual’s race, color,
   religion, ethnicity, national origin, sex (including pregnancy), gender, sexual
   orientation, gender identity, age, disability, veteran status, or any other status
   protected by applicable law, and
   a. Has the effect of creating a hostile environment;
b. Has the effect of unreasonably interfering with an individual’s work or student’s performance; or
c. Otherwise adversely affects an individual’s employment or education opportunities.

2. A hostile environment is any situation in which there is harassing conduct sufficiently severe, pervasive, or objectively offensive to alter the conditions of employment or limit, interfere with, or deny educational benefits or opportunities, from both a subjective (the alleged victim’s) and an objective (a reasonable person standard) viewpoint.

3. The determination of whether an environment is “hostile” will be based upon the circumstances, including:
   a. The frequency of the conduct;
   b. The nature and severity of the conduct;
   c. Whether the conduct was physically threatening;
   d. Whether the conduct was humiliating;
   e. The effect of the conduct on the alleged victim’s mental or emotional state;
   f. Whether the conduct was directed at more than one person;
   g. Whether the conduct arose in the context of other discriminatory conduct;
   h. Whether the conduct unreasonably interfered with the alleged victim’s educational or work performance;
   i. Whether the statement is an utterance of an epithet which engenders offense in an employee or student, or offends by mere discourtesy or rudeness
   j. Whether the speech or conduct deserves the protections of academic freedom or the First Amendment of the U.S. Constitution.

4. Examples of prohibited conduct include but are not limited to: jokes, epithets, slurs, insults, negative stereotyping, written or graphic material (including emails), or any threatening or intimidating acts, that denigrate or show hostility toward an individual and that relate to race, color, religion, ethnicity, national origin, sex (including pregnancy), gender, sexual orientation, gender identity, age, disability, veteran status, or any other status protected by applicable law.

5. Prohibited behavior also includes any unwelcome behavior of a sexual nature such as sexual advances and propositions; requests for sexual favors; sexual jokes, comments, suggestions, or innuendo; foul or obscene gestures or language; display of foul, obscene, or offensive printed or visual material; unwelcome physical contact of a sexual nature, such as bodily contact with the breast, groin, or buttocks; patting, pinching, hugging, or brushing against another individual’s body; and any other unwelcome verbal, non-verbal, physical or visual conduct of a sexual nature where:
   a. Submission to such conduct is an explicit or implicit condition of employment or education; or
   b. Submission to or rejection of such conduct is used as a basis for employment-related or academic-related decisions such as a promotion, discharge, performance evaluation, pay adjustment, discipline, work
assignment, or any other condition of employment or career development or academic development; or

c. Such conduct has the effect of unreasonably interfering with an individual’s work or academic performance or creating an intimidating, abusive, or offensive working or educational environment.

6. Non-consensual sexual contact and non-consensual sexual intercourse are explicitly prohibited by this policy.
   a. Non-consensual sexual contact is any unwelcome intentional sexual touching, however slight, with any object, by a man or woman upon a man or woman.
   b. Non-consensual sexual intercourse is any unwelcome sexual intercourse, however slight, with any object, by a man or woman upon a man or woman, without consent and/or by force.
   c. Consent is clear, knowing, and voluntary. It may be given by words or actions, but silence itself cannot be interpreted as consent. Consensual words or actions create mutually understood, clear permission regarding willingness to engage in sexual activity.
   d. Force is the use of physical violence and/or imposing on someone physically to gain sexual access. Force also includes threats, intimidation, and coercion that overcome resistance or produce consent.
   e. Sexual activity with someone whom one knows to be, or based on the circumstances should reasonably have known to be, mentally or physically incapacitated, constitutes a violation of this policy.

7. This policy applies universally to all University employees and students in their dealings with each other and to all University employees and students in their dealings with third parties. Any University employee or student who violates this policy will be subject to corrective action up to and including termination or dismissal. University employees or students may be disciplined, up to and including termination or dismissal, for engaging in behavior that is disrespectful, disruptive, or otherwise prohibited by this policy, regardless of whether that behavior constitutes harassment prohibited by law.

B. Discrimination, harassment, and retaliation grievance procedures

1. Any individual who feels he/she has witnessed or experienced behavior prohibited by this policy, or who has questions, concerns, or information regarding violations of this policy, should immediately report the circumstance(s) or incident(s) to his or her supervisor or one of the contact persons described in this policy.

2. Upon receipt of a report of discrimination, harassment, or retaliation, the University will conduct a prompt, thorough, and impartial investigation, evaluating all relevant information and documentation relating to the report.
   a. If a report is made, an ATSU investigator will meet with the reporting party to discuss the allegations and/or circumstances. The objectives of this initial meeting will be to reduce the report to writing, stop the harassment, prevent its recurrence, and take steps to remedy its effects in the interim.
   b. If, following this meeting, it is determined no potential policy violations exist, the investigator will produce a report stating such conclusion,
including all elements of the initial meeting and interim remedial steps taken.

c. Interim remedial steps may include course or work adjustments, no contacts orders, temporary suspension of the alleged perpetrator, or any other reasonable measure to facilitate the end and prevention of harassment.

d. If, after an initial meeting between an ATSU investigator and a reporting party, it is determined any part of this policy may have been violated, a full investigation will be conducted. Investigators will be appropriately trained and will not have a conflict of interest or bias against the reporting party or respondent. Such investigation will be concluded promptly, typically within ten (10) business days of the receipt of the report by the appropriate personnel. Investigations may, however, take longer based on a number of factors and variables, such as: the nature and detail of the notice received, the complexity of the investigation, and the cooperation level of the parties and witnesses. In almost all cases, investigations will be completed within sixty (60) business days, though this timeline may be extended for appropriate cause as determined by the investigator.

e. The parties will be regularly updated as to the projected timeline for completion of the investigation. During the process, the reporting party and respondent will be given timely notice of any meetings at which either or both may be present, and will have equal opportunity to present witnesses, provide evidence, and have others present, including an advisor of their choice. The reporting party, respondent, and appropriate officials will be given timely and equal access to information to be used during informal and formal disciplinary meetings and hearings.

f. Investigators use the “preponderance of evidence” (more likely than not) standard when determining whether or not there is a violation.

g. Simultaneous written notice to the parties describing the findings of the investigation, including determination of responsibility and sanctions, and available appeal procedures, will occur within five (5) business days of the completion of the investigation.

1. Sanctions for employees may include a disciplinary warning to be added to the employee’s permanent file, probation, suspension with or without pay, and/or termination.

2. Sanctions for students may include reprimand, a disciplinary warning to be added to the student’s permanent file, probation, suspension, and/or dismissal.

h. The parties will have the right to appeal within five (5) business days of receiving the findings. If the appeal is not timely or substantively eligible, the original findings and sanctions will stand, and the decision will be final. If the appeal has standing, the documentation will be forwarded for consideration. The party requesting the appeal must show error as the original findings and sanctions are presumed to have been decided reasonably and appropriately. The only grounds for appeal are:
1. A procedural (or substantive) error that significantly impacted the outcome of the hearing (e.g. substantiated bias, material deviation from established procedures).
2. To consider new evidence, unavailable during the original hearing or investigation, that could substantially impact the original findings or sanctions. A summary of this new evidence and its potential impact must be included.
3. The sanctions imposed are substantially disproportionate to those previously imposed for similar violations. Right to appeal under this provision is for the responding party only. No other party has the right to appeal sanctions.

i. Upon receipt of a written appeal, an appellate panel consisting of three (3) members of the ATSU Equity Grievance Pool (EGP) will be selected to rule on the appeal.
   1. EGP members are appointed by the ATSU President.
   2. EGP members include the Title IX administration team, two (2) faculty members nominated by ATSU Faculty Senate, two (2) students nominated by the University Student Association, and two (2) staff members nominated by the University Staff Council.

j. The appellate panel will rule on the appeal within fifteen (15) business days. Any extension of time beyond fifteen (15) business days will be communicated to both parties along with an updated timeframe for the ruling.

k. Any sanctions imposed at the conclusion of an investigation will remain in effect during the appeals process.

l. In the event an appeal is upheld by the appellate panel, the panel’s report will be submitted to the investigators for redetermination based on the panel’s findings. Written notice to the parties describing the revised findings of the investigation, including determination of responsibility and sanctions, will occur within five (5) business days of receipt of the appellate panel report.

C. Anti-retaliation
   1. The University will not retaliate against, nor permit retaliation against, any individual who opposes discrimination or harassment, makes a complaint of discrimination or harassment, and/or participates or cooperates in a discrimination or harassment investigation, proceeding, or hearing.

2. Examples of retaliation:
   a. After a whistleblowing incident, an employee may suddenly find herself being assigned to different duties or even moved into a different position. The new role often involves duties that are below the employee’s capabilities or even demeaning in nature. The supervisor may make the new role as difficult as possible by harshly critiquing results or implementing unreasonable time constraints for completing projects. The supervisor may also limit access to resources the employee needs to complete her assigned tasks.
b. Employers may retaliate by excluding the employee from normal activities, attempting to create a sense of isolation. A supervisor may refuse to invite the employee to an important meeting or a social activity such as a group luncheon or outing. She may also exclude the employee from training sessions that could enhance the employee’s job performance or opportunity for advancement. Exclusion can occur by relocating the employee to an area where she has little contact with other workers.

D. Amnesty for drug/alcohol possession and consumption violations

1. ATSU strongly encourages students and employees to report potential violations of this policy. Therefore, good faith reporters to appropriate authorities regarding potential violations will not face University disciplinary action for their own drug/alcohol possession or consumption in connection with the reported incident.

2. Amnesty for persons making a report in good faith does not include substance abuse counseling and/or rehabilitation which may be necessary for employees or students with clinical responsibilities or patient contact.

Responsibility

A. The assistant vice president of human resources and the director of human resources are responsible for responding to and monitoring all complaints of discrimination, harassment, or retaliation from employees.

B. The vice president for student affairs and the associate vice president for student affairs are responsible for responding to and monitoring all complaints of discrimination, harassment, or retaliation from students, members of the public, or beneficiaries.

C. The Title IX coordinator is responsible for all sex- and gender-based harassment and discrimination awareness, prevention, training, monitoring, reporting, investigation, and resolution at ATSU.

SOMA STUDENT ORGANIZATIONS

SOMA has multiple opportunities for student participation, service, and leadership through a variety of student organizations. The Office of Student Affairs is responsible for oversight of all of the student organizations on campus. The most current list of official SOMA student organizations is available at [http://blogs.atsu.edu/azsga/rsos/somarsos/](http://blogs.atsu.edu/azsga/rsos/somarsos/) and a list of University-Wide student organizations is available at [http://blogs.atsu.edu/azsga/university-wide-organizations/](http://blogs.atsu.edu/azsga/university-wide-organizations/).

Students may only participate in clinical activities assigned as part of SOMA’s curriculum, pre-approved by ATSU or SOMA Administration as part of official student organization activities, assigned activities by RDMEs or clinical preceptors, or SOMA/ATSU campus outreach activities.

When a student participates in a clinical or non-clinical activity on his or her own (example: church mission trip during a vacation, after-hours soup kitchen not associated with a ATSU-SOMA student organization, etc.), he or she must represent him- or herself as an individual and not as a SOMA student.
COMMUNITY CAMPUS GENERAL POLICIES AND PROCEDURES

Injuries and Accidents

Any student who sustains an injury or bloodborne pathogen exposure while on his/her clinical experience must notify their RDME as soon as possible.

In the event that the injury involves exposure to bloodborne pathogens, notify the clinical site’s occupational medical staff immediately and follow their protocols for blood borne exposure. The student must also notify the RDME as soon as possible. A needle-stick protocol checklist and post exposure prophylaxis (PEP) guideline is provided on the E*Value homepage.

If you have a needlestick injury while on a rotation, there are a few important steps to follow.

1. Notify your supervising physician immediately
2. Follow the host hospital’s or clinic’s protocol for risk evaluation and post-exposure prophylaxis. This information can be obtained through the Emergency Department or the Risk Management Department.
3. Notify SOMA Administration and your RDME immediately or as soon as possible
4. Keep paper copies of your medical records, the incident report and accompanying date.
5. Keep one complete set for your personal records. Give the incident report and confirmation that you followed the host hospital and/or PEP post-exposure guidelines to your RDME and campus administrative assistant (AA). The PEP guidelines link can be found on the E*Value homepage. You do not have to provide personal medical information to the RDME or AA. However, we do require documentation that you sought medical advice and any required treatment following national health guidelines.

In the event you experience an injury other than a needle stick while on a rotation:

1. Notify your attending immediately
2. Seek medical attention as needed
3. Follow your host hospital or clinic’s risk management protocol for reporting and treatment
4. Notify your RDME as soon as possible
5. Provide documentation of the incident (again, no personal medical information is necessary, just proof that you were evaluated and/or treated after an injury) to your RDME and AA for your file.

It is important to recognize that as a student you are not covered by the health insurance of the community campuses as you are not an employee. You are also not covered by the University’s health insurance, as you are not an employee of the University. Therefore, as per University policy, you must carry your own insurance to cover any medical expenses incurred as a result of injury at clinical sites. SOMA has purchased accident insurance and needle-stick coverage that may help to defer the cost of needle-stick injury or exposure to blood-borne pathogens.

Safety Issues in Year 2

Every site should have a disaster plan directing individuals’ actions in the event of an emergency (i.e. tornado, violence at the site, etc). In the event of an emergency follow the site’s emergency
plan and the direction of your site supervisor. As soon as it is safe and feasible please notify the
SOMA Administration regarding your status.

Students are required to become familiar with the safety procedures that are established at each
of the community campuses. As in every situation, especially when one is in an unfamiliar
environment, it is prudent to maintain good situational awareness and to be cognizant of one’s
surroundings.

**Travel and Housing**
Students are responsible to provide their own transportation to fulfill expectations of SOMA in
regard to clinical assignments and coursework. Such transportation is at the student’s expense
and should be factored into any financial plan designed to meet obligations.

At each site the weather conditions may make travel hazardous. Students should take their cue
on travel from the site supervisor and follow local policy that may dictate procedures.
Ultimately the decision to travel or not travel should be made using the individual’s best
judgment based on the available information.

Obtaining suitable living arrangements is strictly the student’s responsibility and at the students’
expense. Proximity to clinical assignments should always be a consideration when obtaining
housing.

**Professional Conduct**
Students are under the supervision of, and responsible to, the Community Campus faculty,
including the RDME and clinical preceptors. The student may be subject to review and removed
from the community campus by the SOMA administration if his/her conduct is deemed unsafe or
inappropriate by the faculty at the Community Campus.

**Student Responsibilities at the Community Campus**
The student is expected to put a patient’s needs and safety as the top priority during all clinical
encounters.

The student is expected to adhere to the schedule provided by the community campus RDME for
both didactic courses and clinical courses. The student is expected to attend conferences, rounds,
and clinics assigned by the Community Campus faculty as part of their OMS II curriculum. It is
the student’s responsibility to review the curricular objectives and augment didactic and clinical
experiences with independent research and discussion with the Community Campus faculty.

**Community Campus Responsibility to the Student**
The Community Campus must organize an orientation at the start of OMS II year to provide
general information about the site, student requirements, and contact information for key
personnel. The Community Campus must ensure that on-site faculty guidance is available to
assist students in their concerns related to the OMS II curriculum. The student will be provided
with information and procedures to handle injuries and other health concerns sustained at the
Community Campus.
**International Rotations**
International rotations are Elective rotations defined as rotations occurring in any location outside the continental United States, Alaska, and Hawaii. US territories will be considered international rotations and will require international rotation documentation. International rotations may not be used as Core rotations, and typically may not be used as Selective rotations. DOCARE International and any other SOMA-sponsored international rotation may be used as a Selective rotation for OMS IV students. International rotations are typically only approved for OMS IV year students. However, an international rotation may be approved for an OMS III student if all Core and Selective rotations have been successfully completed. One exception to this rule is for the DOCARE International experience that may be approved on a case-by-case basis for OMS III students prior to completion of all Core and Selective rotations. International rotations must be a minimum of four weeks and a maximum of eight weeks total. To schedule an international rotation, students must follow the procedures outlined in the Clinical Education Manual.

**Medical Spanish**
A Medical Spanish Elective rotation may be taken once during the OMS III and IV years. This rotation may not be taken as a Core or Selective rotation. The rotation must be a minimum of 160 hours total, of which at least 80 must be clinical. If taken during the OMS III year, the Elective Medical Spanish rotation must be taken after all Core and Selective rotations have been successfully completed. The Medical Spanish rotation may be taken at any time during the OMS IV year.

**Flex-Time**
Flex-time is defined as the time during the OMS III and IV years when a student is not on clerkships (clinical rotations). Often, flex-time is used to fill in the gap between the end date of one rotation and the start date of the next rotation. Flex-time can also be used for a variety of other purposes including vacation, non-credit academic study, residency interviews, etc. Flex time may NOT be used to take additional clinical rotations. Depending on the academic calendar in a given year, students generally have 12 weeks of flex-time during the two clerkship years. Flex-time must be taken in increments of one-week blocks (no partial weeks) and can include multiple consecutive weeks.

Students wishing to schedule flex-time must discuss this with their RDME and if approved, submit a request to the Clinical Education Department (CED). If approved by the CED, the flex-time will be entered into the student’s schedule by the Clinical Education Coordinator (CEC).
SECTION IV
SOMA Curriculum and Academic Programs

INTRODUCTION
The SOMA curriculum is aligned with the American Osteopathic Association (AOA) Seven Osteopathic Core Competencies for Medical Students. Under each of these competency domains, there are measurable curricular goals which, upon student attainment and completion, indicate competence in the domain. These curricular goals broadly shape and define the courses and clerkships (clinical rotations) within the four-year SOMA curriculum. For each curricular goal, there are accompanying learning activities, whose purpose is to help students achieve the goal and learn course content. Each learning activity is guided by a set of specific, measurable learning objectives that state what the student will accomplish during the activity.

I. Osteopathic Principles & Practices
“Graduates must demonstrate knowledge of osteopathic principles and practice (OPP), and they must exhibit and apply knowledge of somatic dysfunction diagnosis and osteopathic manipulative treatment (OMT) in clinical settings.”
   1. Demonstrate and communicate knowledge of osteopathic principles and osteopathic manipulative therapy (OMT) including the scientific basis and physical findings of somatic dysfunction as well as the mechanism of action, indications, contraindications, and basic application of OMT.
   2. Perform and document a complete and appropriately focused osteopathic structural examination in a respectful, logical, and organized manner.
   3. Apply osteopathic principles and OMT consistently and appropriately into specific patient care plans.
   4. Demonstrate the knowledge and skills necessary to integrate osteopathic principles and practice into all aspects of whole person healthcare.

II. Clinical Skills & Osteopathic Patient Care
“Graduates must demonstrate effective use of motor and cognitive skills in diagnosis, management and prevention of common health problems encountered in patient care within a variety of clinical settings and across the lifespan.”
   1. Elicit a comprehensive and appropriately focused history and generate a list of a patient’s concerns in a respectful, rationale and organized manner.
   2. Perform a complete and appropriately focused physical examination in a respectful, rationale and organized manner; and correlate abnormal findings to clinical presentations and disease processes.
   3. Perform basic clinical procedures essential for general osteopathic medical practice.
   4. Utilize clinical reasoning strategies to accurately diagnose medical conditions originating from common clinical presentations.
   5. Determine and implement evidence-based clinical intervention plans and management strategies, while monitoring their effectiveness and adjusting appropriately.
   6. Incorporate health education counseling, preventive medicine approaches, and health promotion strategies during patient encounters.

III. Medical Knowledge
“Graduates must demonstrate knowledge and application of osteopathic, biomedical, clinical, epidemiological, biomechanical, social and behavioral sciences in the context of patient-centered care.”

1. Recognize and explain normal structure and function across the lifespan.
2. Identify and explain the molecular, biochemical and cellular mechanisms that support normal structure and function.
3. Distinguish between the mechanisms of disease pathogenesis, describe their impact on the body, and relate them to patient signs and symptoms.
4. Explain and apply principles of contemporary therapeutics, including osteopathic, surgical, pharmacologic, molecular, biologic, behavioral and contemporary/alternative.
5. Interpret diagnostic studies and correlate abnormal findings to disease states.
6. Describe the epidemiology of common disease states within a defined population, and the systematic approaches useful in reducing the incidence and prevalence of those disease states.

IV. Professionalism
“Graduates must demonstrate through knowledge, behavior and attitudes, a commitment to the highest standards of competence, ethics, integrity, and accountability to patients, society and the osteopathic profession.”

1. Demonstrate respect, altruism, compassion, interest, integrity, honesty, accountability and trustworthiness in all interactions with patients, their families, faculty, staff, peers and colleagues.
2. Apply ethical decision making in all aspects of professional practice.
3. Demonstrate awareness, sensitivity and responsiveness to culture, socio-economic status, religion, age, gender, sexual orientation, and mental/physical disabilities of patients, their families, faculty, staff, peers and colleagues.
4. Demonstrate professional work behaviors such as punctuality, appropriate appearance, accepting responsibility for errors, and maintaining professional boundaries.
5. Demonstrate a commitment to continuous professional development, learning, and internal & external assessment.

V. Interpersonal and Communication Skills
“Graduates must demonstrate the knowledge, behaviors and attitudes that facilitate accurate and efficient information gathering, empathetic rapport building, and effective information giving in interactions with patients, their families and colleagues of the inter-professional health care team.”

1. Document and record patient information in an accurate, organized, and confidential manner appropriate to the clinical situation and present relevant aspects of a patient’s case in a logical, articulate fashion both orally and in writing.
2. Work effectively and collaboratively with patients, their families and colleagues of the inter-professional healthcare team in providing whole person healthcare.
3. Demonstrate effective and appropriate active listening, verbal, non-verbal, and written and electronic communication skills when dealing with patients, their families, faculty, staff, peers and colleagues of the inter-professional health care team.

VI. Practice-Based Learning and Improvement
``Graduates must demonstrate the ability to apply scientific theory and methodology and exhibit the critical thinking skills essential for integrating evidence-based principles and practice into patient care."

1. Apply fundamental biostatistical and epidemiologic concepts to practice-based learning and improvement.
2. Conduct a systematic review of literature on basic and clinical science research and critically synthesize the results for relevance and validity.
3. Describe the clinical significance of and apply strategies for integrating best medical evidence into clinical practice.
4. Identify, describe and apply systematic methods relating to continuous evaluation of osteopathic clinical practice patterns, practice-base improvements, and the reduction of medical errors.
5. Integrate technology into the practice of medicine and the delivery of healthcare services.

**VII. Systems-Based Practice**
``Graduates must demonstrate awareness of and responsiveness to the larger context and systems of health care, and effectively identify system resources to advocate for and maximize the health of the individual and the community or population at large."

1. Demonstrate knowledge of health delivery systems that affect the practice of an osteopathic physician and how delivery systems influence the utilization of resources and access to health care.
2. Demonstrate knowledge of how patient care and professional practices affect other health care professionals, health care organizations, and society.
3. Demonstrate the ability to work effectively in a variety of health care systems (with an emphasis on community health care) and provide quality patient care while advocating for the best interests of patients.
4. Demonstrate the ability to implement safe, effective, timely, patient-centered and equitable systems of care in a team-oriented environment.

Several important pedagogical modalities are used to bring basic science into a clinical context. These modalities include: clinical presentation “schemes,” small group learning discussions, hands-on laboratories, demonstrations, and simulation activities.

**Year 1 (OMS I)**
The OMS I curriculum is conducted primarily on the Mesa, Arizona campus. Learning activities are usually scheduled between 8 a.m. and 5 p.m., Monday – Friday. Occasionally, there may be required off-site activities or required activities that begin at 7:00 a.m., end after 5:00 p.m., or occur on a weekend. The online OMS I master academic calendar contains information concerning holidays and examinations. Each course syllabus contains course requirements and due dates for course assignments.

**Year 2 (OMS II)**
The OMS II curriculum is conducted primarily at a student’s assigned CHC community campus. OMS II coursework consists of synchronous and asynchronous learning activities that include a combination of didactic, clinical, and patient care experiences which reinforce and enhance the
knowledge, skills, and attitudes acquired during the OMS I year. Learning activities are usually scheduled between 8 a.m. and 5 p.m., Monday – Friday. Occasionally, there may be required off-site activities or required activities that begin at 7:00 a.m., end after 5:00 p.m., or occur on a weekend. The online OMS II master academic calendar contains information concerning holidays, synchronous activities across all community campuses, and examinations. Each course syllabus contains course requirements and due dates for course assignments. Additionally, each community campus provides a weekly schedule of clinical experiences, medical skills, small group, OPP, and other assigned activities.

**Clinical Assignments and Responsibilities**

On occasion, students will be given the opportunity to perform clinical procedures. Students are authorized to perform procedures for which they have been trained, with the proviso that they are properly supervised. In all cases, the safety and comfort of the patient must come first. Should you have questions about your participation in any clinical procedure or activity, contact the local RDME or Clinical Education Department prior to proceeding.

The student will realize the importance of punctuality and fulfilling responsibility in completing clinical assignments given by the supervisor. It is recommended that students assure they are familiar with the location, personnel, practices and expectations of the sites they are assigned to. Punctuality and professional conduct are expected at all times. Should you have concerns that you are working to few or too many hours, contact your RDME as soon as possible.

**Year 3 (OMS III)**

Rotations are scheduled in four-week blocks, with the exception of the Elective II, which is a two-week experience. All rotations are required. In the OMS III year, eight are Core rotations. The remaining are a Primary Care Selective, Maternal and Child Health Selective (the selective may be distributed to either Obstetrics and Gynecology or Pediatrics or Maternal and Child Health as per the Clinical Education Manual), a four-week Elective and a two-week Elective. The student works directly with the RDME and the Mesa-based regional Clinical Education Coordinator in all matters related to the clerkship years. This is the student’s opportunity to explore their interest in clinical medicine and hone their skills in preparation of the OMS IV year. In addition to the study materials and expectations of the individual clerkship attending or preceptor, each Core rotation has a SOMA clerkship director who develops and oversees the clerkship didactic materials and academic objectives. The SOMA Clerkship Director posts and maintains all SOMA clerkship materials on the learning management system. The Clinical Education Department oversees the OMS III clerkship year.

**Year 4 (OMS IV)**

Rotations are scheduled in four-week blocks. This is the academic year where the student has four Core rotations, four Selectives and three Electives. This is the year to experience an International rotation, schedule audition rotations or spend more time in one area of practice. A maximum combination of three Electives/Selectives in one discipline may be taken in OMS IV. In addition to the study materials and expectations of the individual clerkship attending or preceptor, each Core rotation has a SOMA Clerkship Director who develops and oversees the clerkship didactic materials and academic objectives. The SOMA Clerkship Director posts and maintains all SOMA clerkship materials on the learning management system. Students work
directly with their RDME and the regional Clinical Education Coordinator in scheduling and maintaining their academic schedule. The Clinical Education Department oversees the OMS IV clerkship year.

ACADEMIC CALENDARS
The Academic Calendars represent curricular plans that may be altered from time to time. The provisions of the calendar do not constitute an irrevocable contract between A.T. Still University of Health Sciences and its students. The academic calendar may be altered for students requiring remediation work to progress through their training. Students are advised to carefully consult with this calendar prior to making end of course or vacation travel plans.

<table>
<thead>
<tr>
<th>Orientation</th>
<th>Year 1 (Class 2019)</th>
<th>Date</th>
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<tbody>
<tr>
<td>OPP I, Medical Skills I</td>
<td>Basic Structural Foundations</td>
<td>July 13-17, 2015</td>
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<td>Foundations of Health</td>
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<td>Aug 10-14, 2015</td>
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<td>Aug 17-21, 2015</td>
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<td>Foundations of Health</td>
<td>Aug 24-28, 2015</td>
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<td>Neuromusculoskeletal A</td>
<td>Aug 31-Sept 4, 2015</td>
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<td></td>
<td>Neuromusculoskeletal A</td>
<td>Sept 7-11, 2015 (7th holiday)</td>
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<td>Neuromusculoskeletal B</td>
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<td>Cardiopulmonary I</td>
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<td>Cardiopulmonary I</td>
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<td>Cardiopulmonary I</td>
<td>Dec 14-18, 2015</td>
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<td>Renal &amp; Endocrine I</td>
<td>Mar 28-Apr 1, 2016</td>
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<tr>
<th>Year 2 (Class 2018)</th>
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<tbody>
<tr>
<td>Community Campus Orientation</td>
<td>Aug 17-21, 2015</td>
</tr>
<tr>
<td>OPP III, Medical Skills III, Epidemiology</td>
<td>Genito-urinary I</td>
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<td>Genito-urinary I</td>
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<tr>
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<td>Nov 23-27, 2015</td>
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<td>OPP III, Medical Skills III, Epidemiology</td>
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<tr>
<td>Winter Break</td>
<td>Dec 21, 2015-Jan 1, 2016</td>
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<tr>
<td>OPP IV, Medical Skills IV, Biostatistics &amp; Preventive Medicine</td>
<td>Hematology</td>
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<td>Spring Break</td>
<td>Mar 14-18, 2016</td>
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<tr>
<td>OPP IV, Medical Skills IV, Biostatistics &amp; Preventive Medicine</td>
<td>Dermatology</td>
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<tr>
<td>Weekend Dates</td>
<td>Description</td>
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<td>May 2-6, 2016</td>
<td>May 2-6, 2016</td>
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<td>May 9-13, 2016</td>
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<td>May 16-20, 2016</td>
<td>May 16-20, 2016</td>
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<td>June 6-10, 2016</td>
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<td>June 13-17, 2016</td>
<td>June 13-17, 2016</td>
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<tr>
<td>June 27-Jul 1, 2016</td>
<td>June 27-Jul 1, 2016</td>
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**Year 3 (Class 2017) Orientation Dates**

<table>
<thead>
<tr>
<th>Rotation</th>
<th>Date</th>
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<tbody>
<tr>
<td><strong>Orientation</strong></td>
<td>Jun 29-July 3, 2015</td>
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<tr>
<td><strong>Rotation 1</strong></td>
<td>July 6-10, 2015</td>
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<tr>
<td></td>
<td>July 13-17, 2015 <strong>(Semester begins)</strong></td>
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<td></td>
<td>July 20-24, 2015</td>
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<td></td>
<td>July 27-31, 2015</td>
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<tr>
<td><strong>Rotation 2</strong></td>
<td>Aug 3-7, 2015</td>
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<td></td>
<td>Aug 10-14, 2015</td>
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<td>Aug 17-21, 2015</td>
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<td>Aug 24-28, 2015</td>
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<tr>
<td><strong>Rotation 3</strong></td>
<td>Aug 31-Sept 4, 2015</td>
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<td>Sept 7-11, 2015</td>
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<td>Sept 14-18, 2015</td>
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<td>Sept 21-25, 2015</td>
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<tr>
<td><strong>Rotation 4</strong></td>
<td>Sept 28-Oct 2, 2015</td>
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<td>Oct 5-9, 2015</td>
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<td>Oct 12-16, 2015</td>
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<td>Oct 19-23, 2015</td>
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<tr>
<td><strong>Rotation 5</strong></td>
<td>Oct 26-30, 2015</td>
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<td>Nov 2-6, 2015</td>
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<td>Nov 9-13, 2015</td>
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<td>Nov 16-20, 2015</td>
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<tr>
<td><strong>Rotation 6</strong></td>
<td>Nov 23-27, 2015</td>
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<td>Nov 30-Dec 4, 2015</td>
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<td>Dec 7-11, 2015</td>
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<td>Dec 14-18, 2015</td>
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<tr>
<td><strong>Rotation 7</strong></td>
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<td>Dec 28, 2015-Jan 1, 2016</td>
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<td>Jan 4-8, 2016</td>
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<td>Jan 11-15, 2016</td>
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<tr>
<td><strong>Rotation 8</strong></td>
<td>Jan 18-22, 2016</td>
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<td></td>
<td>Jan 25-29, 2016</td>
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<td>Feb 1-5, 2016</td>
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<td>Feb 8-12, 2016</td>
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<tr>
<td><strong>Rotation 9</strong></td>
<td>Feb 15-19, 2016</td>
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<td></td>
<td>Feb 22-28, 2016</td>
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<td>Feb 29-Mar 4, 2016</td>
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</table>
NOTES: 1. One of the rotation blocks listed above consists of two (2) weeks clinical and two (2) weeks vacation (flex time). The date of the clinical/vacation block will vary based on each student’s schedule.
2. Depending on rotation scheduling, students in the Class of 2017 may finish OMS III rotations by June 3, 2016 and start OMS IV rotations as early as June 6, 2016. However, the University academic calendar for the 2016 - 2017 year does not begin until July 18, 2016.

<table>
<thead>
<tr>
<th>Year 4 (Class of 2016)</th>
<th>Date</th>
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<tbody>
<tr>
<td>Rotation 1</td>
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<td>Jun 8-12, 2015</td>
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<td>Jun 29-July 3, 2015</td>
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<td>Rotation 2</td>
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<td>Aug 31-Sept 4, 2015</td>
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<td>Rotation 8</td>
<td>Nov 30-Dec 4, 2015</td>
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<td>Apr 25-29, 2016</td>
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<td>May 2-6, 2016</td>
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<td>May 9-13, 2016</td>
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<td>May 18: Military Commissioning Dinner; May 19: Graduation Orientation (required), and Innovator's Gala; May 20 Commencement (required)</td>
<td>May 16-20, 2016</td>
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NOTES: 1. One of the rotation blocks listed above consists of two (2) weeks clinical and two (2) weeks vacation (flex time). The date of the clinical/vacation block will vary based on each student's schedule.
2. Depending on rotation scheduling, students in the Class of 2016 may finish OMS III rotations by June 5, 2015 and start OMS IV rotations as early as June 8, 2015. However, the University academic calendar for the 2015 - 2016 year does not begin until July 13th, 2015.
## CURRICULUM OVERVIEW

### Class of 2019*

*previous classes should refer to the curriculum plan included with the catalog corresponding to their initial matriculation

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<tr>
<th>Credit Hours</th>
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<td>Osteopathic Principles and Practice II</td>
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| **Year 2 Courses, Fall** |                                        |               |
| 4            | Epidemiology                            | MED 620       |
| 7            | Genitourinary I                         | MED 613       |
| 5            | Genitourinary II                        | MED 614       |
| 4            | Senses                                  | MED 615       |
| 5            | Human Development                       | MED 607       |
| 6            | Medical Skills III                      | MED 609A      |
| 2            | Osteopathic Principles and Practice III | MED 610A      |
| 8            | Hematology                              | MED 605       |
| 4            | Biostatistics & Preventive Medicine     | MED 621       |
| 4            | Dermatology                             | MED 604       |
| 5            | Mind                                    | MED 606       |
| 7            | Integrative                             | MED 608       |
| 6            | Medical Skills IV                       | MED 609B      |
| 2            | Osteopathic Principles and Practice IV  | MED 610B      |
| 9            | Integrative II                          | MED 622       |

| **Year 3 Clerkships and Courses** |                                        |               |
| 11           | Family Medicine I (4 weeks)             | Core 7000     |
| 11           | Family Medicine II (4 weeks)            | Core 7001     |
| 11           | Internal Medicine I (4 weeks)           | Core 7002     |
| 11           | Internal Medicine II (4 weeks)          | Core 7003     |
End-of-Rotation Examinations are required after each Core Rotation. SOMA currently uses the NBOME COMAT examination for the OMS III year and Emergency Medicine in the OMS IV year, and Exam Master Examinations for the remaining Core Rotations in the OMS IV year. These electronic examinations are to be scheduled for and taken on the last day of the rotation (usually a Friday). For the OMS III, these examinations are to be taken for Family Medicine, Internal Medicine, OB/Gyn, Pediatrics, Psychiatry, and Surgery. In addition, the OPP COMAT must be taken and passed in the second semester of the OMS III year. See the OPP syllabus for further requirements. For the OMS IV, these Core Rotations are Cardiology, Critical Care, Neurology, and Emergency Medicine. The student must have engaged in the rotation prior to being eligible to sit for the post-rotation exam at the completion of that rotation, and not before. If a student anticipates they will not be able to take the examination on the last day of the rotation, they may petition the Director, Clinical Education Department for an extension. Should a student fail a post-rotation examination, retakes must be completed within 30 days of the original failure, and approved by the Associate or Assistant Dean for Clinical Education and Services prior to that retake.
COURSE DESCRIPTIONS

YEAR ONE
FALL SEMESTER

MED 530: Basic Structural Foundations- 5 semester credit hours
This course serves to introduce first year osteopathic medical students to the fundamental organization and structure of the human body using a variety of instructional resources (e.g., cadaveric specimens, anatomical software, virtual anatomy laboratory). Both microscopic (histology) and macroscopic (gross) anatomy will be covered, with an emphasis on the foundational musculoskeletal-, vascular, and neuro-anatomy required for Medical Skills I and Osteopathic Principles & Practice I courses. In addition, imaging techniques including CT scans, MRI, and x-ray radiography will be used to introduce the student to the physician’s perspective of the structure of the human body.

MED 520: Foundations of Health- 6 semester credit hours
Foundations of Health (FOH) lays the groundwork for immersion into SOMA’s integrated curriculum. The course includes critical concepts in biochemistry, molecular biology, genetics, physiology, pathology, immunology, microbiology and pharmacology. To help students develop skills essential for compassionate medical care, these scientific foundations are complemented by medical humanities throughout the course.

MED 521: Neuromusculoskeletal A- 8 semester credit hours
This course integrates the basic and clinical sciences associated with the nervous system and the musculoskeletal system. Clinical presentations are used to explain the fundamental relationships between neurons, nerves, muscles, and bones. Physiology, anatomy, pathology, embryology, microbiology, immunology, biochemistry, genetics, and pharmacology are used to reveal structure and function.

The clinical presentations incorporated into the course include those mainly associated with the musculoskeletal system such as upper and lower extremity pain, spinal pain, and musculoskeletal lump/mass.

Guided learning through reading assignments, small group exercises and large group activities allow students to examine relevant basic science concepts of neural and musculoskeletal function from a clinical viewpoint. Other large group sessions, as well as material presented in concurrent courses (e.g., Medical Skills, Osteopathic Principles & Practice) augment the learning by providing a broader picture in which to incorporate knowledge and opportunities to clarify topics.

MED 522: Neuromusculoskeletal B- 10 semester credit hours
This course integrates the basic and clinical sciences associated with the nervous system and the musculoskeletal system. Clinical presentations are used to explain the fundamental relationships between neurons, nerves, muscles, and bones. Physiology, anatomy, pathology, embryology, microbiology, immunology, biochemistry, genetics, and pharmacology are used to reveal structure and function.
The clinical presentations incorporated into the course include those mainly associated with the nervous system such as weakness, numbness/tingling, headache, movement disorders, dizziness/vertigo, and acute neurological deficits.

Guided learning through reading assignments, small group exercises and large group activities allow students to examine relevant basic science concepts of neural and musculoskeletal function from a clinical viewpoint. Other large group sessions, as well as material presented in concurrent courses (e.g., Medical Skills, Osteopathic Principles & Practice) augment the learning by providing a broader picture in which to incorporate knowledge and opportunities to clarify topics.

**MED 514: Cardiopulmonary I** - 5 semester credit hours
Cardiopulmonary is a two-course sequence that integrates the basic and clinical sciences associated with common cardiopulmonary conditions. A major emphasis is placed on cardiac and respiratory anatomy and physiology as they relate to the structure and function of the cardiopulmonary system. The course will also discover the relationships of embryology, biochemistry, microbiology, immunology, genetics, pathology and pharmacology as they relate to cardiopulmonary system health and disease. A solid understanding of these basic sciences will be used to learn a clinical approach to common cardiopulmonary conditions. Students will learn basic skills for interpretation of chest x-rays, electrocardiograms, arterial blood gases and spirometry.

**MED 508A: Medical Skills I** - 3 semester credit hours
Medical Skills 508A is held weekly throughout the fall semester of the first year. The Medical Skills courses will teach the arts of the physical examination, history-taking, chart documentation, and oral presentation of a patient. The Medical Skills courses are enriched by the mentoring of bedside manner skills and medical student personal growth through Communications sessions and standardized patient encounters. Throughout the year, students will participate in large group discussions of topics such as professionalism, evidence-based medicine, the social determinants of health, and health promotion. Students will also engage in small group practice of history-taking and physical examination skills with clinician facilitators, practice of basic medical procedures, simulation activities with patient simulator models, and multiple one-on-one encounters with standardized patients throughout the year. Student skills will be assessed intermittently through the use of graded note-writing, written examinations, and OSCEs (objective structured clinical examinations.)

**MED 509A: Osteopathic Principles & Practice I** - 3 semester credit hours
The year one courses in Osteopathic Principles and Practice (OPP) introduce the history, philosophy, and principles of Osteopathic Medicine. The course provides training in the fundamentals of physical diagnosis and treatment of the neuromusculoskeletal system. Emphasis is placed on the development of palpatory skills to diagnose and treat dysfunction of the body framework system: skeletal, arthrodial, and myofascial structures, and their related vascular, lymphatic, and neural elements. A range of standard approaches to osteopathic manipulative treatment (OMT), are introduced to address the needs of many patients complaints with a “whole person” approach of body mind and spirit. These include direct and indirect techniques including
soft tissue, myofascial release, strain-counterstrain, muscle energy, high velocity-low amplitude, and osteopathy in the cranial field. Interactive lab sessions reinforce basic science knowledge of anatomy and physiology through the use of non-invasive physiologic measurements that are taken real-time pre and post OMT. Clinical applications are discussed during the course. Students are closely supervised and guided in the lab for an optimum learning experience.

**SPRING SEMESTER**

**MED515: Cardiopulmonary II**- 13 semester credit hours
Cardiopulmonary is a two-course sequence that integrates the basic and clinical sciences associated with common cardiopulmonary conditions. A major emphasis is placed on cardiac and respiratory anatomy and physiology as they relate to the structure and function of the cardiopulmonary system. The course will also discover the relationships of embryology, biochemistry, microbiology, immunology, genetics, pathology and pharmacology as they relate to cardiopulmonary system health and disease. A solid understanding of these basic sciences will be used to learn a clinical approach to common cardiopulmonary conditions. Students will learn basic skills for interpretation of chest x-rays, electrocardiograms, arterial blood gases and spirometry.

**MED 516: Renal, Endocrine, and Metabolism I**- 8 semester credit hours
These courses integrate the basic and clinical sciences associated with the kidneys and the endocrine system. Clinical presentations are used to explain renal function and the fundamental relationships between hormones and other organ systems. Physiology, anatomy, pathology, embryology, microbiology, immunology, biochemistry, genetics, and pharmacology are used to reveal structure and function. The clinical presentations incorporated into the course include those mainly associated with the renal system such as generalized edema, hypernatremia, hyponatremia, hyperkalemia, hypokalemia, metabolic acidosis, metabolic alkalosis, hematuria, urinary frequency, acute renal failure, urinary obstruction, and chronic renal failure, as well as those associated mainly with the endocrine system such as abnormal growth and stature, neck mass/hyper-& hypothyroidism, calcium/phosphate abnormalities, weight abnormalities, hyperglycemia/diabetes mellitus, and hypoglycemia. Guided learning through reading assignments, small group exercises and large group activities allow students to examine relevant basic science concepts of renal and endocrine function from a clinical viewpoint. Other large group sessions, as well as material presented in concurrent courses (e.g., Medical Skills, Osteopathic Principles & Practice) augment the learning by providing a broader picture in which to incorporate knowledge and opportunities to clarify topics.

**MED 517: Renal, Endocrine and Metabolism II**- 8 semester credit hours
These courses integrate the basic and clinical sciences associated with the kidneys and the endocrine system. Clinical presentations are used to explain renal function and the fundamental relationships between hormones and other organ systems. Physiology, anatomy, pathology, embryology, microbiology, immunology, biochemistry, genetics, and pharmacology are used to reveal structure and function. The clinical presentations incorporated into the course include those mainly associated with the renal system such as generalized edema, hypernatremia, hyponatremia, hyperkalemia, hypokalemia, metabolic acidosis, metabolic alkalosis, hematuria, urinary frequency, acute renal failure, urinary obstruction, and chronic renal failure, as well as
those associated mainly with the endocrine system such as abnormal growth and stature, neck mass/hyper- & hypothyroidism, calcium/phosphate abnormalities, weight abnormalities, hyperglycemia/diabetes mellitus, and hypoglycemia. Guided learning through reading assignments, small group exercises and large group activities allow students to examine relevant basic science concepts of renal and endocrine function from a clinical viewpoint. Other large group sessions, as well as material presented in concurrent courses (e.g., Medical Skills, Osteopathic Principles & Practice) augment the learning by providing a broader picture in which to incorporate knowledge and opportunities to clarify topics.

**MED 603: Gastrointestinal**– 10 semester credit hours
The Gastrointestinal course integrates the basic and clinical sciences associated with the gastrointestinal system. Coordinated self-directed learning by use of reading assignments, small group exercises and large group activities allows students to discover the relationships of gastrointestinal anatomy, embryology, microbiology, immunology, biochemistry, genetics, pathology, physiology and pharmacology to gastrointestinal structure and function. Clinical presentations will be used to learn a clinical approach to common gastrointestinal conditions and to learn how the basic sciences relate to gastrointestinal system health and disease.

**MED 508 B: Medical Skills II**- 4 semester credit hours
Medical Skills 508B is held weekly throughout the spring semester of the first year. The Medical Skills courses will teach the arts of the physical examination, history-taking, chart documentation, and oral presentation of a patient. The Medical Skills courses are enriched by the mentoring of bedside manner skills and medical student personal growth through Communications sessions and standardized patient encounters. Throughout the year, students will participate in large group discussions of topics such as professionalism, evidence-based medicine, the social determinants of health, and health promotion. Students will also engage in small group practice of history-taking and physical examination skills with clinician facilitators, practice of basic medical procedures, simulation activities with patient simulator models, and multiple one-on-one encounters with standardized patients throughout the year. Student skills will be assessed intermittently through the use of graded note-writing, written examinations, and OSCEs (objective structured clinical examinations.)

**MED 509B: Osteopathic Principles & Practice II**- 3 semester credit hours
The year one courses in Osteopathic Principles and Practice (OPP) introduce the history, philosophy, and principles of Osteopathic Medicine. The course provides training in the fundamentals of physical diagnosis and treatment of the neuromusculoskeletal system. Emphasis is placed on the development of palpatory skills to diagnose and treat dysfunction of the body framework system: skeletal, arthrodial, and myofascial structures, and their related vascular, lymphatic, and neural elements. A range of standard approaches to osteopathic manipulative treatments (OMT), are introduced to address the needs of many patients complaints with a “whole person” approach of body mind and spirit. These include direct and indirect techniques including soft tissue, myofascial release, strain-counterstrain, muscle energy, high velocity-low amplitude, and osteopathy in the cranial field. Interactive lab sessions reinforce basic science knowledge of anatomy and physiology through the use of non-invasive physiologic measurements that are taken real-time pre and post OMT. Clinical applications are discussed
during the course. Students are closely supervised and guided in the lab for an optimum learning experience.

YEAR TWO
FALL SEMESTER

MED 613: Genitourinary I- 7 semester credit hours
GU I and II integrate basic and clinical sciences associated with the reproductive and urinary systems. Using clinical presentations and inductive pathways, students understand and apply the pathology, embryology, microbiology, immunology, biochemistry, genetics and pharmacology of the two systems.

Topics covered include the pregnant female, complications of pregnancy, diseases of pregnancy, fetal distress, amenorrhea, dysmenorrhea, contraception, infertility, vaginal discharge, Pap smear, abnormal uterine/vaginal bleeding, breast mass, pelvic pain and mass, menopause, sexual dysfunction, erectile dysfunction, urinary incontinence and scrotal mass/pain.

Reading assignments, webcast presentations and small group exercises allow students to examine basic science concepts of reproductive function from a clinical viewpoint. Material presented in Medical Skills and OPP augment this learning by incorporating new knowledge and opportunities to clarify difficult-to-understand topics. Related topics of evidence-based medicine, complementary and alternative medicine, self-care, wellness and preventive medicine, cultural diversity, health-care policy and systems, and spirituality are incorporated throughout the course.

MED614: Genitourinary II- 5 semester credit hours
GU I and II integrate basic and clinical sciences associated with the reproductive and urinary systems. Using clinical presentations and inductive pathways, students understand and apply the pathology, embryology, microbiology, immunology, biochemistry, genetics and pharmacology of the two systems.

Topics covered include the pregnant female, complications of pregnancy, diseases of pregnancy, fetal distress, amenorrhea, dysmenorrhea, contraception, infertility, vaginal discharge, Pap smear, abnormal uterine/vaginal bleeding, breast mass, pelvic pain and mass, menopause, sexual dysfunction, erectile dysfunction, urinary incontinence and scrotal mass/pain.

Reading assignments, webcast presentations and small group exercises allow students to examine basic science concepts of reproductive function from a clinical viewpoint. Material presented in Medical Skills and OPP augment this learning by incorporating new knowledge and opportunities to clarify difficult-to-understand topics. Related topics of evidence-based medicine, complementary and alternative medicine, self-care, wellness and preventive medicine, cultural diversity, health-care policy and systems, and spirituality are incorporated throughout the course.
MED 615: Senses- 4 semester credit hours
This course integrates the basic and clinical sciences associated with the “senses” hearing, vision and smell/taste and the related organ systems. A major emphasis is placed on using these clinical presentations to discover the relationships of pathology, embryology, microbiology, immunology, biochemistry, genetics and pharmacology to these specific body structures and functions.

The clinical presentations incorporated into this course include hearing loss, ear pain, tinnitus, vision loss, diplopia, eye redness, strabismus and smell/taste dysfunction. Coordinated self-directed learning by use of reading assignments, small group exercises and large group activities allows students to examine relevant basic science concepts from a clinical viewpoint. Other large group sessions, as well as material presented in simultaneous courses (e.g., Medical Skills, Osteopathic Principles & Practice) augment these self-directed learning exercises by providing a broader picture in which to incorporate new knowledge and opportunities to clarify difficult-to-understand topics. Additionally, related topics of evidence-based medicine, complimentary & alternative medicine, self-care, wellness and preventative medicine, cultural diversity, healthcare policy & systems, and spirituality are incorporated throughout the course as applicable.

MED 607: Human Development- 5 semester credit hours
The course integrates the clinical and behavioral sciences associated with human development. Behavior patterns are the authentic end products of a total developmental process. Growth is a patterning process, which unfolds in sequence. Development refers to the acquisition of predictable, sequentially acquired functional skills during life and is a continual process from birth to death. Four domains of development are emphasized: physical-motor, adaptive-cognitive, language-communication and, social-emotional. Normal growth and development of humans, from infants to elderly, are discussed.

Importance is placed on the similarities and differences of the various age groups and the specialized needs of each. When appropriate, disorders, conditions and disabilities that relate directly to the disruption of the development of physical or mental processes will be discussed, including abuse, death, dying and bereavement.

MED 620: Epidemiology- 4 semester credit hours
Examines the study of disease in populations from a public health perspective, a foundation for the integration of primary care and public health. Topics covered include data sources and management, surveillance/outbreak investigation, study design, sampling, data analysis and causation.

The tools acquired allow students to apply research findings to individual patient care, population health and public policy. Additional tools include the fundamentals necessary for evidence-based practice.

Specific learning objectives are provided for each topic presented. Students apply knowledge by developing "community projects" and submitting applications to the Institutional Review Board (IRB).
Students work in teams on either "research" or "best practice/innovation" projects. Each team starts with a needs assessment in their community. Students work together to develop project ideas, research questions, hypotheses and potential plans. All projects must be related to the social determinants of health and the tenants of Osteopathic Medicine.

**MED 609A: Medical Skills III**- 6 semester credit hours
The OMS II “Medical Skills” courses are designed to enhance and maintain the cognitive and psychomotor skills necessary to obtain a medical history and perform a physical examination, support the personal and professional development of the student, help the student understand the mission of the community health center, and model primary care continuity-based clinical service. Supervised clinical activities, large and small group interactive presentations, and individual reflection lead to documented competencies in clinical assessment, community-based preventive medicine and health care provision.

**MED 610A: Osteopathic Principles & Practice III**- 2 semester credit hours
The year two courses in Osteopathic Principles & Practice (OPP) build upon the concepts taught in the year 1, and include additional clinical application. Coursework is organized by system and clinical presentations emphasize the clinical application of osteopathic manipulative medicine in the primary care setting. The courses are delivered through both online curriculum materials and live instruction by OPP faculty at each community campus. Osteopathic screening, palpatory diagnosis, and treatment in all body regions are presented and reinforced. Emphasis is placed on the expansion of palpatory skills to diagnose and treat dysfunction of the body framework system: skeletal, arthrodial, and myofascial structures, and their related vascular, lymphatic, and neural elements. Additional OMT treatment types are introduced, including The Still Technique and Facilitated Positional Release. Clinical cases with OPP applications are discussed, and practice in performance and documentation of OMT are included. The Spring semester course concludes with a final review block, covering topics from years 1 and 2.

**SPRING SEMESTER**

**MED 605: Hematology**- 8 semester credit hours
This course integrates the basic and clinical sciences associated with the hematologic system. A major emphasis is placed on using clinical presentations to discover the relationships among embryology, microbiology, immunology, biochemistry, genetics, pharmacology and hematologic pathology.

The clinical presentations incorporated into the course include coagulation abnormalities, anemia, polycythemia, abnormalities of white blood cells, splenomegaly, and lymphadenopathy. The effects of chronic, persistent infections on blood cells is also reviewed. Coordinated self-directed learning by use of reading assignments, webcast presentations, and small group exercises allows students to examine relevant basic science concepts of hematologic function from a clinical viewpoint. Other material presented in simultaneous courses (e.g., Integrated Clinical Experience, Osteopathic Principles & Practice) augment these self-directed learning exercises by providing a broader picture in which to incorporate new knowledge and opportunities to clarify difficult-to-understand topics.
MED 604: Dermatology- 4 semester credit hours
This course seeks to prepare the physician for the diagnosis and management of common cutaneous diseases. All of the common eruptive diseases are discussed and presented visually with their characteristic and common variations. Coordinated self-directed learning by use of reading assignments, recorded video/audio presentations and small group exercises allows students to examine basic science concepts relevant to dermatology from a clinical viewpoint. Students will learn the use of topical therapy and special diagnostic and therapeutic procedures as they pertain to dermatology. In addition, students will participate in a high-fidelity cutaneous suturing workshop as part of Dermatology.

MED 606: Mind- 5 semester credit hours
The Mind Course introduces students to the fundamental mental functions underlying human adaptations to the environment, and the clinical manifestations when these functions become maladaptive. The course continues the exploration of the brain-behavior relationship initiated in the NMSK-B course in Year One while serving as a preparatory step for the Psychiatry rotation in Year Three.

Students will acquire knowledge in neuroanatomy, neurophysiology, neuropathology, pathology, genetics and pharmacology as related to mental functions and dysfunctions. Some of the basic science information has been covered in previous courses. This course will offer an opportunity to review these topics in a new context to enhance understanding in various disciplines.

In the clinical domain, students will become familiar with the current DSM diagnostic considerations for patients presenting with disturbances in mental function. Students recognizing critical information will be able to apply it to the Clinical Presentation Schemes and using the inductive reasoning process arrive at a broad category of mental illness.

Coordinated self-directed learning by use of reading assignments, small group and large group exercises and clinical experiences allow students to examine the relevant basic science concepts of behavioral and mental function in a broader light. Medical skills, Osteopathic Principles and Practice along with related topics of evidenced base medicine, wellness, spirituality are introduced. Professionalism, ethics, cultural sensitivity and social determinants of health are incorporated throughout the course.

MED 608: Integrative- 7 semester credit hours
Integrative I is a structured review of basic sciences and OPP in a question based format designed to review curriculum and prepare for board exams. This course sequentially increases the number of questions over time for exposure and endurance. The material is dovetailed to coincide and enhance the existing curriculum. Preparatory exams are utilized as well as review videos and podcasts. The culmination of the course is a COMSAE-D exam which assesses board eligibility for each student. This is Pass/ Fail course.

MED 621: Biostatistics & Preventive Medicine- 4 semester credit hours
Biostatistics & Preventive Medicine introduces the basic principles of biostatistics and preventive medicine. Biostatistics is the study and development of mathematical, statistical and
Students apply their knowledge by completing their "community project." Students are expected to summarize their work in an abstract and to present their work in poster form. Student teams also complete a video recording of their poster presentation.

**MED 609B: Medical Skills IV** - 6 semester credit hours
The OMS II “Medical Skills” courses are designed to enhance and maintain the cognitive and psychomotor skills necessary to obtain a medical history and perform a physical examination, support the personal and professional development of the student, help the student understand the mission of the community health center, and model primary care continuity-based clinical service. Supervised clinical activities, large and small group interactive presentations, and individual reflection lead to documented competencies in clinical assessment, community-based preventive medicine and health care provision.

**MED 610B: Osteopathic Principles & Practice IV** - 2 semester credit hours
The year two courses in Osteopathic Principles & Practice (OPP) build upon the concepts taught in the year 1, and include additional clinical application. Coursework is organized by system and clinical presentations emphasize the clinical application of osteopathic manipulative medicine in the primary care setting. The courses are delivered through both online curriculum materials and live instruction by OPP faculty at each community campus. Osteopathic screening, palpatory diagnosis, and treatment in all body regions are presented and reinforced. Emphasis is placed on the expansion of palpatory skills to diagnose and treat dysfunction of the body framework system: skeletal, arthrodial, and myofascial structures, and their related vascular, lymphatic, and neural elements. Additional OMT treatment types are introduced, including The Still Technique and Facilitated Positional Release. Clinical cases with OPP applications are discussed, and practice in performance and documentation of OMT are included. The Spring semester course concludes with a final review block, covering topics from years 1 and 2.

**MED 622: Integrative II** - 9 semester credit hours
This course is designed to provide the student with the opportunity to prepare independently for COMLEX-1 and USMLE-1 examinations at the end of the second year of study. The earned grade in this course will either be PASS or FAIL, and credits will not be included in the GPA.

**YEAR THREE**

**Core 7000, 7001: Family Medicine** - 22 credits
The clinical clerkship in Family Medicine provides two required, four-week Core rotations. This
clerkship is designed to provide the student with an understanding of Family Medicine through the integration of didactic knowledge and clinical experiences. Students will receive exposure to a diverse community of patients in both ambulatory and inpatient settings. The curriculum content is delivered to students via the learning management system web site. During the clerkship, students will access the learning website to review learning modules on topics appropriate for a third year Family Medicine clerkship. These prescribed learning modules are based upon the 125 clinical presentations encountered during the first two years of medical education.

**Core 7002, 7003: Internal Medicine**- 22 credits
The clinical clerkship in Internal Medicine provides two required, four-week Core rotations. This clerkship is designed to provide the student with an understanding of Internal Medicine through the integration of didactic knowledge and clinical experiences. Students will receive exposure to a diverse community of patients in both ambulatory and required inpatient settings. The curriculum content is delivered to students via the learning management system web site. During the clerkship, students will access the learning website to review learning modules on topics appropriate for a third year Internal Medicine clerkship. These prescribed learning modules are based upon the 125 clinical presentations encountered during the first two years of medical education.

**Core 7004: Pediatrics**- 11 credits
The clinical clerkship in Pediatrics provides one required, four-week Core rotation. This clerkship is designed to provide the student with an understanding of Pediatrics through the integration of didactic knowledge and clinical experiences. Students will receive exposure to a diverse community of patients in both ambulatory and required inpatient settings. The curriculum content is delivered to students via the learning management system web site. During the clerkship, students will access the learning website to review learning modules on topics appropriate for a third year Pediatric clerkship. These prescribed learning modules are based upon the 125 clinical presentations encountered during the first two years of medical education.

**Core 7005: OB/Gyn**- 11 credits
The clinical clerkship in Obstetrics and Gynecology provides one required, four-week Core rotation. This clerkship is designed to provide the student with an understanding of OB/Gyn through the integration of didactic knowledge and clinical experiences. Students will receive exposure to a diverse community of patients in both ambulatory and required inpatient settings. The curriculum content is delivered to students via the learning management system web site. During the clerkship, students will access the learning website to review learning modules on topics appropriate for a third year OB/Gyn clerkship. These prescribed learning modules are based upon the 125 clinical presentations encountered during the first two years of medical education.

**Core 7006: General Surgery**- 11 credits
The clinical clerkship in Surgery is a required, four-week Core rotation. This clerkship is designed to provide the student with a basic understanding of Surgery through the integration of didactic knowledge and clinical experiences. Students will receive exposure to a diverse community of patients in both ambulatory and inpatient settings. The curriculum content is delivered to students via the learning management system web site. During the clerkship, students will access the learning website to review learning modules on topics appropriate for a third year surgery clerkship. These prescribed learning modules are based upon the 125 clinical presentations encountered during the first two years of medical education.

**Core 7007: Psychiatry** - 11 credits
The clinical clerkship in Psychiatry provides one required, four-week Core rotation. This clerkship is designed to provide the student with an understanding of Psychiatric illness and treatment through the integration of didactic knowledge and clinical experiences. Students will receive exposure to a diverse community of patients in both ambulatory and required inpatient settings. The curriculum content is delivered to students via the learning management system web site. During the clerkship, students will access the learning website to review learning modules on topics appropriate for a third year Psychiatry clerkship. These prescribed learning modules are based upon the 125 clinical presentations encountered during the first two years of medical education.

**CPSL 7010, 7011, 7012, or 7013: Maternal/Child Health** - 11 credits
The clinical clerkship in Maternal and Child Health (MCH) provides one required, four-week Core rotation. This clerkship is designed to provide the student with an understanding of Maternal and Child health through the integration of didactic knowledge and clinical experiences. Students will receive exposure to a diverse community of patients in both ambulatory and required inpatient settings. The curriculum content is delivered to students via the learning management system web site. During the clerkship, students will access the learning website to review learning modules on topics appropriate for a third year Maternal and Child Health clerkship. These prescribed learning modules are based upon the 125 clinical presentations encountered during the first two years of the SOMA curriculum. This required rotation may be satisfied by any approved combination of Obstetrical, Gynecological, and Pediatric experiences. To satisfy the Ob/Gyn clerkship, Pediatrics clerkship, and MCH clerkship, any of the following may be used:

- **Option 1:**
  Ob/Gyn: 4 weeks, Pediatrics: 4 weeks, and MCH: 4 weeks (The MCH may be 4 weeks of OB focus, 4 weeks Pediatrics focus, or 2 weeks OB focus and 2 weeks Pediatrics focus)

- **Option 2:**
  Ob/Gyn: 6 weeks and Pediatrics: 6 weeks (taken together)

- **Option 3:**
  Ob/Gyn: 8 weeks and Pediatrics: 4 weeks

- **Option 4:**
  Ob/Gyn: 4 weeks and Pediatrics: 8 weeks
The post-rotation COMAT exam is to be taken after the rotations in a given discipline are complete. For instance, if a student takes 4 weeks of Ob/Gyn, and 8 week of Pediatrics, the Ob/Gyn COMAT is to be taken at the conclusion of the 4-week Ob/Gyn rotation, and the Pediatrics COMAT is to be taken at the conclusion of the second Pediatrics rotation, even if the two Pediatrics rotations occur in different semesters.

**PCSL 7014-7048: Primary Care Selective**- 11 credits
The Primary Care Selective clerkship is a required, four-week rotation. Students may select a primary care discipline to study from a list of approved courses. This clerkship is designed to provide the student with a basic understanding of primary care topics through the integration of didactic knowledge and clinical experiences. Students will receive exposure to a diverse community of patients in both ambulatory and inpatient settings. The curriculum content is delivered to students via the learning management system web site. During the clerkship, students will access the learning website to review learning modules on topics appropriate for a third year clerkship. These prescribed learning modules are based upon the 125 clinical presentations encountered during the first two years of medical education.

**ELECT 7049-7132: Electives I and II**- 16.5 credits
The OMS III “Electives I and II” clerkships are a 4 week service and a two week service. Each rotation is designed to provide the student with the opportunity to select a discipline and receive hands-on training through the integration of didactic knowledge and clinical experiences. Students will receive exposure to a diverse community of patients in both ambulatory and inpatient settings. The curriculum content is delivered to students via the learning management system website. During the clerkship, students will access the learning website to review learning modules on topics appropriate for a third year clerkship. These prescribed learning modules are based upon the 125 clinical presentations encountered during the first two years of medical education.

**Core 7008: Osteopathic Principles and Practice V**- 2.5 credits
The OMS III Fall Semester OPP course emphasizes the clinical application of distinctive osteopathic history taking, physical exam, palpatory diagnosis and manipulative treatments. The course utilizes multi-media instructional materials that are clinically relevant to the osteopathic family physician. It includes an evidence-based approach to medical-decision making by the use of journal article reviews. The learning activities provide flexibility for integration during the 3rd year clinical clerkship year.

**Core 7009: Osteopathic Principles and Practice VI**- 2.5 credits
The OMS III Spring Semester OPP course emphasizes the clinical application of distinctive osteopathic history taking, physical exam, palpatory diagnosis and manipulative treatments. It includes an evidence-based approach to medical-decision making by the use of journal article reviews. The use of the COMAT-OPP examination provides the student with feedback on their foundational knowledge of OPP. The learning activities provide flexibility for integration during the 3rd year clinical clerkship year.

**DRS 5000, DRS 6000, DRS 7000, DRS 8000: Directed Studies**- 1 credit per week
The Directed Studies course is a supplemental didactic program of study and is offered to students who wish to pursue additional study in areas of interest that do not fall within the required core, selective, or elective courses. Students requiring additional didactic study in one or more areas may also be assigned this course by the Dean or Associate or Assistant Dean(s). One (1) credit hour per week is awarded for participation in the Directed Studies course. (Additional fee may apply)

**PCSL 7134: PC Selective: Public Health for SOMA DO/MPH Students**

The Primary Care Selective is a required, four-week rotation. The Public Health option requires that the student be enrolled in the DO/MPH dual degree program. Students may take the Public Health for DO/MPH students clerkship in either the OMS III or the OMS IV year but it can only be taken once. This clerkship is designed to provide the student with a basic understanding of primary care and public health topics through the integration of didactic knowledge, clinical and other experiences.

The student will work with their program director, course director, RDME and other advisors to create a unique experience.

Students are required to submit a proposal to the course director (Director of the DO/MPH program) with the planned course of study. This proposal should include rotation details such as location, on site preceptor, objectives and competencies the student will achieve. This should also include a one-page description detailing how the student will spend their time, how they will achieve the detailed competencies and how they will demonstrate the achievement of the competencies. The course syllabus details the list of competencies to choose from. The demonstration of achievement may be in the form of a presentation, paper or other creative product. This "product" will be graded by the course director.

Students must submit their proposal 90 days in advance of their proposed start date.

Once the proposal is approved by the program director, she will forward it to the ATSU-CGHS Dean for approval. Once final approval is given by the ATSU-CGHS Dean, the DO/MPH program Director will inform the student.

**YEAR FOUR**

**Core 8000: Cardiology**- 11 credits

The clinical clerkship in Cardiology is a required, four-week Core rotation. This clerkship is designed to provide the student with an understanding of cardiology through the integration of didactic knowledge and clinical experiences. Students will receive exposure to a diverse community of patients in both ambulatory and inpatient settings. The curriculum content is delivered to students via the learning management system web site. During the clerkship, students will access the learning website to review learning modules on topics appropriate for a fourth year cardiology clerkship. These prescribed learning modules are based upon the 125 clinical presentations encountered during the first two years of medical education.
Core 8001: Critical Care- 11 credits
The clinical clerkship in Critical Care is a required, four-week Core rotation. This clerkship is designed to provide the student with a basic understanding of ICU medicine through the integration of didactic knowledge and clinical experiences. Students will receive exposure to a diverse community of patients in both ambulatory and inpatient settings. The curriculum content is delivered to students via the learning management system web site. During the clerkship, students will access the learning website to review learning modules on topics appropriate for a fourth year Critical Care clerkship. These prescribed learning modules are based upon the 125 clinical presentations encountered during the first two years of medical education.

Core 8002: Neurology- 5.5 credits
The clinical clerkship in Neurology is a required, two-week Core rotation. This clerkship is designed to provide the student with an understanding of neurology through the integration of didactic knowledge and clinical experiences. Students will receive exposure to a diverse community of patients in both ambulatory and inpatient settings. The curriculum content is delivered to students via the learning management system web site. During the clerkship, students will access the learning website to review learning modules on topics appropriate for a fourth year neurology clerkship. These prescribed learning modules are based upon the 125 clinical presentations encountered during the first two years of medical education.

Core 8003: Emergency Medicine- 11 credits
The clinical clerkship in Emergency Medicine is a required, four-week Core rotation. This clerkship is designed to provide the student with an understanding of emergency medicine through the integration of didactic knowledge and clinical experiences. Students will receive exposure to a diverse community of patients in both ambulatory and inpatient settings. The curriculum content will be delivered to students via the learning management system web site. During the clerkship, students will access the learning website to review learning modules on topics appropriate for a fourth year clerkship. These prescribed learning modules will be based upon the 125 clinical presentations encountered during the first two years of medical education.

SELE 8006-8090: Selective I: Medicine- 11 credits
The Selective I: Medicine clerkship is a required, four-week rotation. This clerkship is designed to provide the student with a basic understanding of medical topics through the integration of didactic knowledge and clinical experiences. Students may select a rotation from among a list of medical disciplines. Students will receive exposure to a diverse community of patients in both ambulatory and inpatient settings. The curriculum content is delivered to students via the learning management system web site. During the clerkship, students will access the learning website to review learning modules on topics appropriate for a fourth year clerkship. These prescribed learning modules are based upon the 125 clinical presentations encountered during the first two years of medical education.

SELE 8006-8090: Selective II: Medicine, Research, or Academic Study- 11 credits
**Medicine Option**
The Selective II: Medicine clerkship is a four-week rotation. This clerkship is designed to provide the student with a continuing understanding of medical topics through the integration of didactic knowledge and clinical experiences. Students may select a rotation from among a list of medical disciplines. Students will receive exposure to a diverse community of patients in both ambulatory and inpatient settings. The curriculum content is delivered to students via the learning management system web site. During the clerkship, students will access the learning website to review learning modules on topics appropriate for a fourth year clerkship. These prescribed learning modules are based upon the 125 clinical presentations encountered during the first two years of medical education.

**Research Option**
The Selective II: Research clerkship is a four-week course. The purpose of the Research Selective is to provide meaningful research experiences for SOMA medical students, with the expectation that students will gain initial experience and interest in research that will carry over into the practice of medicine. The goals of the Research Selective are to provide students an opportunity to participate an ongoing research project, to create a greater appreciation for clinical, basic science, or medical education research, and to introduce future physicians to good research practices.

**Academic Study Option**
The Selective II: Academic Study clerkship is a four-week course. This clerkship is designed to provide the student with the opportunity to prepare for board examinations or perform any approved academic activity through reviewing educational content and participating in optional clinical experiences. The student will submit a board study plan and timeline for their curriculum of study for approval. An end of rotation Academic Study Clinical Performance Evaluation will be submitted by the RDME. During the clerkship, students access the learning website to review Evidence-Based Practice learning modules.

**SELE 8051-8061: Selective III: Pediatrics** - 11 credits
The Selective III: Pediatrics clerkship is a required, four-week rotation. This clerkship is designed to provide the student with a basic understanding of pediatric topics through the integration of didactic knowledge and clinical experiences. Students will receive exposure to a diverse community of patients in both ambulatory and inpatient settings. The curriculum content is delivered to students via the learning management system web site. During the clerkship, students will access the learning website to review learning modules on topics appropriate for a fourth year clerkship. These prescribed learning modules are based upon the 125 clinical presentations encountered during the first two years of medical education.

**SELE 8078-8058: Selective IV: Surgery** - 11 credits
The clinical clerkship in Surgery is a required, four-week Core rotation. This clerkship is designed to provide the student with a basic understanding of Surgery through the integration of didactic knowledge and clinical experiences. Students will receive exposure to a diverse community of patients in both ambulatory and inpatient settings. The curriculum content is delivered to students via the learning management system web site. During the clerkship, students will access the learning website to review learning modules on topics appropriate for a
fourth year surgery clerkship. These prescribed learning modules are based upon the 125 clinical presentations encountered during the first two years of medical education.

**ELEC 8091-8175: Elective Clerkships I, II, III** - 11 credits
The OMS IV “Elective I, II, III” clerkships are required rotations, each 4 weeks in duration. These rotations are designed to provide the student with the opportunity to select a discipline and receive hands-on training through the integration of didactic knowledge and clinical experiences. Students will receive exposure to a diverse community of patients in both ambulatory and inpatient settings. The curriculum content is delivered to students via the learning management system website. During the clerkship, students will access the learning website to review learning modules on topics appropriate for a fourth year clerkship. These prescribed learning modules are based upon the 125 clinical presentations encountered during the first two years of medical education.

**Core 8004: Osteopathic Principles and Practice VII** - 1.3 credits
The year 4 Fall Semester OPP course is designed to provide the student with clinical experience as well as guided scholarly activity. The course includes hands-on activities in osteopathic manipulative treatment, and scholarly activities involving osteopathic principles and practice. There are activity options for hands-on and scholarly requirements, ensuring flexible integration of osteopathic principles and practice during the 4th year clinical clerkship year.

**Core 8005: Osteopathic Principles and Practice VIII** - 1.3 credits
The year 4 Spring Semester OPP course is designed to provide the student with clinical experience as well as guided scholarly activity. The course includes hands-on activities in osteopathic manipulative treatment, and scholarly activities involving osteopathic principles and practice. There are activity options for hands-on and scholarly requirements, ensuring flexible integration of osteopathic principles and practice during the 4th year clinical clerkship year.

**DRS 5000, DRS 6000, DRS 7000, DRS 8000: Directed Studies** - 1 credit per week
The Directed Studies course is a supplemental didactic program of study and is offered to students who wish to pursue additional study in areas of interest that do not fall within the required core, selective, or elective courses. Students requiring additional didactic study in one or more areas may also be assigned this course by the Dean or Associate or Assistant Dean(s). One (1) credit hour per week is awarded for participation in the Directed Studies course. (Additional fee may apply)

**SELE 8177: Selective II: Public Health for SOMA DO/MPH Students**
The OMS IV Medicine Selective II is a four-week rotation. The Public Health option requires that the student be enrolled in the DO/MPH dual degree program. Students may take the Public Health for DO/MPH students clerkship in either the OMS III or the OMS IV year but it can only be taken once. This clerkship is designed to provide the student with a basic understanding of primary care and public health topics through the integration of didactic knowledge, clinical and other experiences.

The student will work with their program director, course director, RDME and other advisors to create a unique experience.
Students are required to submit a proposal to the course director (Director of the DO/MPH program) with the planned course of study. This proposal should include rotation details such as location, on site preceptor, objectives and competencies the student will achieve. This should also include a one-page description detailing how the student will spend their time, how they will achieve the detailed competencies and how they will demonstrate the achievement of the competencies. The course syllabus details the list of competencies to choose from. The demonstration of achievement may be in the form of a presentation, paper or other creative product. This "product" will be graded by the course director.

Students must submit their proposal 90 days in advance of their proposed start date.

Once the proposal is approved by the program director, she will forward it to the ATSU-CGHS Dean for approval. Once final approval is given by the ATSU-CGHS Dean, the DO/MPH program Director will inform the student.

**ELEC 8178: Elective I: Public Health Practicum for SOMA DO/MPH Students**

**ELEC 8178: Elective II: Public Health Practicum for SOMA DO/MPH Students**

**ELEC 8178: Elective III: Public Health Practicum for SOMA DO/MPH Students**

The SOMA Public Health Practicum requires completion of a project in an approved supervised public health setting emphasizing public health policy and/or management. This course is only open to SOMA DO/MPH students. Students will have a one-month Elective involving intense study in a public health area of their choice.

The student must be registered in the CGHS MPH 874 during the time of the SOMA Public Health Practicum Elective. The student will obtain a CGHS advisor and will identify their Practicum site, location and preceptor. The one month SOMA Practicum Elective will be spent at that site. The student will begin logging hours towards the practicum as he or she works on their literature review prior to the start of this one-month Elective.

The student may not take the Elective until their practicum proposal is approved by the course director from SOMA and the practicum faculty advisor from the CGHS. The proposal for any projects that involve human subjects must also be submitted to the ATSU institutional review board. The student must also have a preceptor on location and a faculty advisor from the School of Health Management. The course director can serve as the faculty advisor from SOMA, but a SCGHS faculty advisor is also required.

A formal write up of the experience in the form of a scholarly paper or innovations project paper is required for completion of the Elective. The student will also be required to present an oral report. It may be required that the 'oral report' be recorded electronically.
ACADEMIC PROGRAMS

Pre-Doctoral Osteopathic Teaching Fellowship
The Pre-doctoral Osteopathic Teaching Fellowship is a unique opportunity which expands the medical training period from four to five years by including one twelve (12)-month Fellowship time period. The Fellowship is composed of 2 courses that are each 66 credits, or 11 credit hours per month. The Fellowship credit hours are not transferable to any other course or program within SOMA. The goals of the course include providing opportunities for focused special training in teaching, research, and clinical activities in the discipline areas of Anatomy, Medical Skills, and Osteopathic Principles and Practices.

Students must meet the following criteria to apply for the Osteopathic Teaching Fellowship:
1. Must be in good standing and provide a letter of good standing from ATSU SOMA
2. Must have successfully completed OMS I and OMS II years
3. Must submit a letter of intent, and two letters of recommendations (1 from a SOMA faculty member)

All OMS III coursework must be completed prior to the start of the Fellowship.

DO/MPH Dual Degree
With ATSU's dual DO/MPH program, students earn their Master of Public Health (MPH) through ATSU's College of Graduate Health Studies (ATSU-CGHS) while completing their doctor of osteopathic medicine degree at ATSU-SOMA. Students trained in ATSU-SOMA's innovative community campus model will be well prepared for a medical career in public health venues. The MPH requires additional courses completed online via ATSU-CGHS. Applications to the MPH program are accepted toward the end of the students' first year at ATSU-SOMA. After earning their DO and MPH degrees students will be able to do the following and more:
- Analyze issues of access, quality, and cost for populations, communities, and individuals
- Evaluate social determinants of health and health disparities at your community health center and beyond
- Hypothesize reasons for observed disparities
- Create interventions to address health disparities
- Design research studies to address health disparities
- Compare and contrast research methodologies
- Critically appraise public health and medical literature
- Define health literacy and apply its concepts to health promotion and disease prevention programs
- Apply knowledge and skills acquired from the curriculum and complete an academic paper suitable for publication
- Present research findings at national meetings
- Evaluate health promotion and disease prevention programs from a variety of perspectives

Students must meet the following criteria to apply for the DO/MPH dual degree:
- Must have attended the introductory presentation by the Program Director or have had a meeting with the Program Director to ensure they are informed of the rigor of a dual
degree program.

- Must be in good academic standing
- Must have no course failures during the OMS I year
- Must not be identified as At Risk according to the SOMA catalog description

Once these criteria have been met, a letter of support must be obtained for the student from the SOMA Dean. The student may then apply online via the ATSU website. There is no admission fee for potential DO/MPH students.
SECTION V
Faculty

A complete list of faculty with contact information can be found at the following site:

http://www.atsu.edu/soma/faculty_staff/faculty.htm
Osteopathic Pledge of Commitment

As members of the osteopathic medical profession, in an effort to instill loyalty and to strengthen the profession, we recall the tenets on which this profession is founded: The dynamic interaction of mind, body and spirit; the primary role of the musculoskeletal system; that preventive medicine is the key to maintain health. We recognize the work our predecessors have accomplished in building the profession. We will commit ourselves to continuing that work.

I pledge to:

Provide compassionate, quality care to my patients;
Partner with them to promote health;
Display integrity and professionalism throughout my career;
Advance the philosophy, practice and science of osteopathic medicine;
Continue life-long learning;
Support the profession with loyalty in action, word and deed; and
Live each day as an example of what an osteopathic physician should be.