MD: Absences & Leaves

Absence Policy for Medical Students on Clinical Rotations

Background

The profession of medicine requires the utmost commitment of time and energy to patient care and research activities. While the development of this commitment begins in the preclinical years, it is further practiced and developed during clinical training.

The clinical year at Washington University School of Medicine (WUSM) comprises 48 weeks of required core clinical experiences. The fourth year encompasses a 44-week time block and requires MD students to take a minimum of 36 weeks of credit (32 weeks of electives plus four weeks of Capstone). MSTP students are required to take a minimum of 12 weeks of credit (eight weeks of electives plus four weeks of Capstone).

All students on clinical rotations have a scheduled two-week winter recess break and a three-day spring break. All clinical students have a two-week break between the end of the third-year clinical rotations and the start of the fourth-year elective rotations. During every clinical rotation, each student is expected to participate fully in all activities of the clinical rotation until the designated end time of the clinical rotation or the start time of a holiday break. This regularly requires participation beyond formal weekday hours to include evening and nighttime call and clinical responsibilities on weekends. Regarding access to healthcare services, refer to the Access to Healthcare Services Policy.

Students must recognize that clinical teaching, learning and evaluation are dependent on the student’s presence and participation in every aspect of the clinical rotation. While students will not be graded down only because of an excused absence, time spent away from the rotation may decrease learning and impede effective evaluation.

Policies

If a student is ill or has a personal emergency, they are responsible for notifying the clinical course director’s office and the supervising clinician of their clinical team as soon as possible. If the absence extends beyond two consecutive days, the student is responsible for notifying the Office of Student Affairs.

It is recognized that a student may, on a rare basis, desire to be excused from clinical activities for professional or significant personal events. Travel prior to or following observed university holidays and breaks that occurs outside of the officially designated times/dates on the MD Program Academic Calendar does not constitute a significant personal event or unavoidable absence. Students are responsible for directly contacting the clinical course director in writing to obtain permission for any planned absences well in advance.

For all students on clinical rotations, the Clinical Curriculum Committee has agreed upon the following limitations on the maximum number of days of absences (both planned and unplanned) from clinical rotations.

<table>
<thead>
<tr>
<th>Type of Course</th>
<th>MD Students</th>
<th>MSTP Students and Interviewing Fourth-Year MD Students*</th>
</tr>
</thead>
<tbody>
<tr>
<td>2-week clerkship</td>
<td>1 day</td>
<td>1 day</td>
</tr>
<tr>
<td>2-week elective</td>
<td>1 day</td>
<td>1 day</td>
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<tr>
<td>3-week clerkship</td>
<td>1 day</td>
<td>2 days</td>
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<tr>
<td>4-week clerkship</td>
<td>2 days</td>
<td>3 days</td>
</tr>
<tr>
<td>4-week elective</td>
<td>3 days</td>
<td>5 days</td>
</tr>
<tr>
<td>5-week clerkship</td>
<td>3 days</td>
<td>5 days</td>
</tr>
<tr>
<td>6-week clerkship</td>
<td>3 days (1 day max per 2-week rotation)</td>
<td>5 days (2 days max per 2-week rotation)</td>
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<tr>
<td>8-week clerkship</td>
<td>4 days</td>
<td>7 days</td>
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<tr>
<td>9-week clerkship</td>
<td>4 days</td>
<td>7 days</td>
</tr>
<tr>
<td>10-week clerkship</td>
<td>5 days</td>
<td>9 days</td>
</tr>
<tr>
<td>12-week clerkship</td>
<td>5 days</td>
<td>9 days</td>
</tr>
</tbody>
</table>

* Residency interviewing season is typically from mid-October through January. Any additional days off would require approval by the associate dean for medical student education and the elective course director.

If a student misses more than the maximum number of allowable days of absences for a given clinical rotation, the consequence rendered will be at the discretion of the clinical course director and the associate dean of student affairs or the associate dean of the office of medical student education.

Failure of the student to notify the clinical course director of their absence after consideration of the particular circumstances of the absence will result in the filing of a professionalism concern form (PCF).

Guidelines

All non-clinical electives and the Capstone course may have separate attendance requirements and absence procedures. Please refer to the course syllabus for details.

Students are encouraged to make up missed work on rotations in which this can result in meaningful learning and should discuss this option with the clinical course director.
At the discretion of the clinical course director, any student who misses portions of the clinical experiences due to planned and/or unplanned absences that exceed the maximum time may be required to utilize winter recess, spring break or free time at the end of the third-year clinical rotations to complete the 48 weeks of mandatory clinical rotations.

Central monitoring of absences will reside with the Office of Student Affairs, in order to support student well-being. A concerning trend of absences may result in a review of professional integrity by the Committee on the Academic and Professional Evaluation of Students (CAPES), at the discretion of the dean of student affairs.

MSTP students are encouraged to do the following:

- Meet with the Assistant Dean for Career Development early for assistance in residency planning.
- Consider returning to the MD program to allow for 18 to 24 months to complete MD training to allow flexibility for interviewing and USMLE exams.
- Discuss planned absences with clinical course directors early, prior to a clinical rotation, to better allow placement on a team to optimize the educational experience. We believe this guideline strikes an appropriate balance between increased flexibility for the MSTP students and assuring a meaningful educational experience on the core clinical rotations.

The Washington University School of Medicine Absence Policy for Medical Students on Clinical Rotations was last approved by the Oversight Committee on Medical Student Education on November 4, 2019. All substantive edits to this policy require approval by Oversight Committee on Medical Student Education.

Phase 1 Attendance Policy

Background

The profession of medicine requires the utmost commitment of time and energy to learning/education, patient care, research and other scholarly activities. The development of this commitment begins in Phase 1 of the Gateway Curriculum.

Students must recognize that teaching, learning and assessment in both clinical and nonclinical settings are dependent on the student's presence and participation in their education. Time spent away from an educational experience may decrease learning and impede effective assessment.

In keeping with LCME standard 12.4, all students requiring access to necessary diagnostic, preventive, and therapeutic care for both acute and chronic health concerns are to be excused from required learning activities. Please refer to the Access to Healthcare Services Policy (p. 4) for additional details.

Policies/Requirement

Students are expected to attend all required sessions within Phase 1 of the Gateway Curriculum as specified within the learning management system. In the unusual circumstance that a student finds that they are unable to attend a required session, the student must complete an absence notification form in the learning management system that will be sent to the faculty lead, with a copy sent to the Office of Medical Student Education (OMSE). This form must be completed prior to the session that they will miss or as soon as possible after the session if missed due to sudden illness or emergency. In addition, students unable to attend a team activity should notify their team members by email. In the case of immersions, students must also notify by email the clinical team to which they have been assigned.

In the event that an absence is unavoidable, students will work with the faculty leads to develop a remediation plan for the missed session. All required assignments associated with a missed session must be completed. Faculty directors may require additional makeup work for missed sessions. Faculty leads may also designate some sessions as those that cannot be missed except under extreme circumstances because they cannot be made up. These sessions will be noted in the learning management system and should only be missed under extreme, unavoidable circumstances such as a medical illness or family emergency. Failure to attend a required learning activity without providing notification is considered an unprofessional behavior.

Attendance data will be tracked longitudinally by OMSE within the learning management system for all phases of the curriculum. An absence will be recorded even when makeup work for a missed session is completed. Data will be monitored by the Director of Assessment in collaboration with OMSE and will be reviewed by the Competency Attainment Committee as evidence contributing to attainment of competency in PROF-2: Exhibit high standards of professional integrity.

Guidelines

Central monitoring of absences will reside with the Office of Medical Student Education and the Director of Assessment. A concerning trend of absences may be discussed with the Associate Dean of Student Affairs and the Director of Coaching and Student Success to ensure appropriate student support can be offered and provided. Faculty directors of required Phase 1 sessions will include a specific faculty contact in the learning management system associated with all required sessions.

The Washington University School of Medicine Phase 1 Attendance Policy was last approved by the Committee on the Oversight of Medical Student Education governing body on February 19, 2021. All substantive edits to this policy require approval by the Committee on the Oversight of Medical Student Education governing body.
Preclinical Course Attendance Guidelines

Attendance Guidelines for All Preclinical Courses

Team Activities
Students are assigned to teams prior to the beginning of the course session and are accountable to these teams as they work together on a task. Team Activities allow for the development of interpersonal and communication skills as well as of the ability to work collaboratively and effectively in teams. These are essential competencies for all professionals and, consequently, attendance at Team Activities is required.

Patient Presentations
Patient Presentations are live presentations by patients to learners during which patients recount their personal experiences. Attendance at Patient Presentations is required out of respect for patients and their time commitments.

Other Activities
Attendance at events of additional activity types may be required for individual courses.

Attendance Expectations for All Preclinical Courses
The expectation is that all students will be present for all sessions with required attendance. However, the Preclinical Curriculum Committee acknowledges that students may need to be excused from some of these sessions due to unavoidable illness, professional obligations, or significant personal events/emergencies (hereinafter referred to as unavoidable/emergency absences). Thus, the Preclinical Curriculum Committee has agreed on the following guidelines regarding the maximum number of excused absences (including for illness) from required sessions:

Maximum Number of Excused Absences Without Required Remediation
A student may miss no more than 10% of sessions (including for illness) with required attendance within an academic year. Individual courses will adhere to this 10% allowance for unavoidable/emergency absences unless they have fewer than 10 sessions requiring attendance; in these cases, the course director will set the number of allowable absences at a level higher than 10% but not exceeding 25% of required attendance sessions.

Approval of Absences
Absences do not need to be approved, but the expectation is that they will be used for unavoidable/emergency situations. It is expected that students will not use all of the allowed unavoidable/emergency absences.

Reporting of Absences
Students who are unable to attend a session are expected to contact the course director prior to the session that they will miss (or as soon as possible after the session if missing due to sudden illness or emergency). For planned absences, students should notify course directors well in advance of the absence. In addition, students unable to attend a Team Activity should notify their team members. Failure to attend a required learning activity without providing notification is considered an unprofessional behavior.

Completion of Associated Assignments
All required assignments associated with a missed session must be completed. Course directors may require additional makeup work for missed sessions.

Consequences for Exceeding the Maximum Number of Absences Within a Course
Absences beyond the allowed percentage within each course may result in one or both of the following:

1. A grade of Incomplete for the course will be given until remediation is completed. The remediation will be determined by the course director.
2. A Professionalism Concern Form will be filed.

Addressing Concerning Patterns of Absences
Attendance data will be tracked longitudinally for all preclinical courses, and this data will be monitored by the associate dean for student affairs in collaboration with the Office of Medical Student Education. An absence will be recorded even when makeup work for a missed session is completed. Students for which a concerning pattern of absences is identified will be required to meet with the associate dean for student affairs. Students for which a professionalism concern is identified will be referred to the associate dean for medical student education, and this may also result in referral to the Committee on the Academic and Professional Evaluation of Students (CAPES) (http://bulletin.wustl.edu/medicine/policies/md-assessment/).
Medical Student Access to Healthcare Services Policy

Background

The Liaison Committee on Medical Education (LCME), per element 12.4, expects that a medical school provides its medical students with timely access to needed diagnostic, preventive, and therapeutic health services at sites in reasonable proximity to the locations of their required educational activities and has policies and procedures in place that permit students to be excused from educational activities to seek needed care.

This LCME requirement is aligned with Washington University School of Medicine’s (WUSM) dedication to providing access to support and high-quality care for the physical, emotional and mental well-being of its students. To achieve this, the Student Health Services team provides students at WUSM with efficient, accessible, high-quality care, without undue financial burden, in order to prevent and treat health problems that may interfere with a student’s educational and professional goals while attending WUSM. The Student Health Services Office is located on the Medical School Campus and provides a full range of primary care medical, mental health, health promotion and wellness services. The staff consists of physicians, nurses, psychologists, and administrative support for those clinicians.

Policies

In order to access these health services, medical students will be excused from classes or clinical activities. The following procedures will be followed:

A. Student responsibility

1. The student is responsible for notifying the office of the relevant director of the educational activity (e.g., the clerkship director) and, if applicable, the supervising clinician of their clinical team as soon as possible. This is for both routine preventative appointments and acute incidents.

2. For additional details regarding student responsibilities in the event of a planned or unplanned absence for students on clinical courses, please refer to the Absence Policy for Medical Students on Clinical Rotations (p. 1).

B. Responsibility of directors of required educational activities (e.g., the clerkship director)

1. Directors will work with students to ensure that students can access healthcare services in a timely manner and as needed.

2. If a student encounters any barrier to timely access to necessary health services, they are to notify the Associate Dean for Student Affairs or Ombuds. The Associate Dean for Student Affairs will address the concern with the clinical or course director and take appropriate action.

Leave of Absence (LOA) Policy

Return of students from involuntary leave of absence requires clearance of both the director of Student Health Services and the associate dean for student affairs.

I. Voluntary LOA: A student may request a leave of absence for academic or personal reasons by submitting a statement in writing to the Office of Student Affairs. Such a statement should include indication of the beginning and anticipated ending dates and a brief statement of the reason (academic or personal). Requests for leaves of absence must be approved by the associate dean for student affairs. Leaves of absence shall be granted for no more than one year, but in unusual cases may be renewed by the Committee on the Academic and Professional Evaluation of Students (CAPES) for additional time after discussion with the associate dean for student affairs. Students requiring a personal leave of absence for medical reasons must submit a supporting letter from the director of Student Health Services. A written statement of medical clearance will be required before the student may return from such a leave.

II. Involuntary LOA: If there is a reasonable basis for believing that the continued presence of the student on campus or in clinical rotations poses a substantial threat to the student, to patients, or to the rights of others to engage in their normal university functions and activities, the following procedures apply:

A. The chancellor or his designate may impose an involuntary leave of absence when there is evidence that a student has committed an offense under these rules or the University’s Judicial Code, and when there is evidence that the continued presence of the student on the university campus or as a participant in a clinical rotation poses a substantial threat to themselves, to patients, or to the rights of others to continue their normal university function and activities.
B. Imposition of the involuntary leave of absence may result in denial of access to the campus, prohibition of class attendance and/or prohibition of participation in clinical rotations.

C. If an involuntary leave of absence is imposed, the suspending authority shall prepare a written notice of the imposition and shall have the notice mailed certified or personally presented to the student. The written notice shall include a brief statement of the reasons therefore and a brief statement of the procedures provided for resolving cases of involuntary leave of absence under these rules.

D. The student shall be given an opportunity to appear personally before the suspending authority within five (5) business days from the date of service of the notice of imposition of the involuntary leave of absence. If the student asks to appear personally before the suspending authority, only the following issues shall be considered:
   1. Whether the suspending authority’s information concerning the student’s conduct is reliable; and
   2. Whether under all the circumstances, there is a reasonable basis for believing that the continued presence of the student on campus or in clinical rotations poses a substantial threat to the student, to patients, or to the rights of others to engage in their normal university functions and activities.

E. Within one week of the date of imposition of the involuntary leave of absence, the suspending authority shall either file a statement of charges against the student with the University Judicial Board, and shall have the statement or charges served, by mail or personal service, upon the student and the dean of the school or college or director of the program in which the student is enrolled, or initiate proceedings under these rules to convene a Disciplinary Committee.

F. A temporary suspension shall end
   1. when rescinded by the suspending authority, or
   2. upon the failure of the suspending authority to promptly file a statement of charges with the University Judicial Board or a Disciplinary Committee, or
   3. when the case is heard and decided by the University Judicial Board or the Disciplinary Committee.

Return of students from involuntary leave of absence requires clearance of both the director of Student Health Services and the associate dean for student affairs.

III. LOA Impact on Financial Aid: Students receiving financial aid should be advised that at the end of sixty (60) days or more leave of absence, the grace period for loan repayment during a leave of absence may be exhausted. In such cases there will be an obligation for the student to start payments. According to the federal rules under which loans are made, the use of a grace period during a leave of absence will generally mean that the schedule for loan repayment may be changed. Students who are receiving financial assistance should consult with the Financial Aid Office to determine the implications of a leave of absence for their financial aid.

IV. LOA Impact on Tuition: A student returning from a leave of absence of one year duration or less will maintain the same tuition rate. Students returning after more than one year leave of absence will assume the tuition rate of the class they are rejoining. Appeals of this policy should be submitted in writing to the registrar. Please refer to the Financial Information section on Registration, Payments, and Withdrawal & Refunds Policy and the effect of a leave of absence on tuition and other financially related matters.

For additional information please review the Student Information for Leave of Absence or Withdrawal (PDF) (http://bulletin.wustl.edu/medicine/policies/md-absences/Leave_of_Absence_Withdrawal_Handout_2018.pdf).

Policy on Student Status and Benefits During Research Years or Leave of Absence

MD/PhD

Student status is maintained while in the research phase of the MD/PhD programs. During research years, students are registered in either the graduate school or under the program granting the master's degree. Both student health and disability coverage are provided by the Division of Biology and Biomedical Sciences.

Master’s/MD

Student status is maintained while in the research phase of the MSCI and MPH programs. Both student health and disability coverage are provided.

Five-Year MD Program

Research Year at WUSM

Student status is maintained throughout the approved research year. In exceptional circumstances, a second research year may be permitted. The student may receive a stipend, but may not be considered an employee of the university. Students are registered in the School of Medicine. Both disability and student health coverage are required and are payable by the student. Outside funding often covers such fees.
Approved Research Year Away

Student status is maintained throughout the approved research year. Students are registered in the School of Medicine. Both disability and student health coverage are optional with proof of like coverage. The cost of either elected coverage is payable by the student. Outside funding often allows these costs.

Leave of Absence

Leave of Absence Year at WUSM

Student status is not maintained during the leave of absence though benefits of student health coverage and disability insurance are optional throughout an approved leave. Costs are payable by the MD program students. MD/PhD students may request support for these costs from the Division of Biology and Biomedical Sciences if funds are available. The Office of Financial Aid should be consulted for information regarding loan repayment and grace periods when on a leave of absence.

Leave of Absence Year Away

Student status is not maintained during the leave of absence away from Washington University School of Medicine. Both disability and student health coverage are optional with proof of like coverage. The cost of either elected coverage is payable by the student.