

# BUSM Medical Student Code of Conduct and Disciplinary Procedures

Approved by: BUSM Executive Committee

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## 1.0 Introduction

### 1.1 Purpose of this Code

The Boston University School of Medicine (BUSM) expects all students to adhere to the high standards of behavior expected of physicians during all professional and patient care activities at the school and all of its academic affiliates. **All students must uphold the standards of the medical profession.** This includes, but is not limited to, being respectful of patients, staff, members of the faculty, their peers, and the community, being aware of the ways in which their conduct may affect others, and conducting themselves with honesty and integrity in all interactions.

BUSM Students are also required to adhere to the highest standards of academic honesty and professional conduct in relation to their coursework.

Medical students who fail to meet these requirements may be subject to review, potential disciplinary action where relevant, and possible dismissal from BUSM. This document outlines the disciplinary process at the School of Medicine for students who are accused of not adhering to these standards.

BUSM Students are also subject to:

- Discipline under the University-wide Code of Student Responsibilities. <http://www.bu.edu/dos/policies/student-responsibilities/>
- Evaluation of their academic performance as described in the Policies and Procedures for Academic Performance. <http://www.bu.edu/academics/busm/policies/busm-policies/>

### 1.2 BUSM Student Code of Conduct

Boston University School of Medicine is committed to a work environment that is professional, collegial, supportive of all personnel, and conducive to providing the best possible patient care, teaching, training and research. The school places a very high priority on maintaining a work environment for staff, trainees, and faculty characterized by generosity, integrity, constructive interactions, mentoring, and respect for diversity and differences among members of our community. All faculty, staff and students are expected to model the behavioral attributes of responsibility, empathy, service excellence, problem solving and continuous improvement, efficiency, cultural humility and teamwork.

### BUSM Student Supplement

BUSM students wish to elaborate on the code of conduct, defined above, and discuss the pillars that serve as the foundation of the school's culture: humility, integrity, and generosity. At BUSM, students aspire to embrace a community attitude where all continuously strive towards competence in education, cultural humility and communication, teamwork, research, and patient care. By fostering these attributes, students help the BUSM community at large foster an environment that encourages empathy, mentorship, desire for lifelong learning and a willingness to engage in productive and meaningful work.

Students are expected to embody these characteristics in the pursuit of continuous personal and professional growth, and aspire to sustain the highest level of ethical and moral standards and academic excellence. These standards are exemplified as follows:

## **Humility**

- Reflect on your own abilities and limitations, exercising self-awareness and striving for continuous personal growth
- Accept feedback with an open and receptive mindset
- Dress and behave in a manner that is appropriate for the setting
- Engage in the life-long process of personal and professional growth
- Always put your best effort forward and follow through on responsibilities, with a commitment to excellence
- Use all necessary and available resources effectively to support your professional development
- Endeavor to exhibit cultural humility and cultural sensitivity in all interactions with patients, colleagues, and the broader BUMC community

## **Integrity**

- Accept responsibility for your actions
- Hold yourself accountable for the impact of your actions and words
- Be punctual and fully engage in all mandatory activities
- Prioritize responsibilities to complete all tasks and assignments in a timely manner

## **Respect**

- Demonstrate regard for the feelings, wishes, rights, and traditions of others
- Approach all interactions in a manner that is kind, fair, and courteous
- Maintain open and timely communication with peers, colleagues, teachers and leadership
- Honor the diverse stories of patients, colleagues and the broader BUMC community
- Engage thoughtfully in effective advocacy to create a more inclusive environment for yourself, patients, and colleagues

## **Communication:**

- Protect patient privacy across all communication platforms
- Respond promptly to all forms of communication in a clear and courteous manner
- Maintain responsible use of social media platforms
- Engage in active listening and appreciative inquiry
- Be generous

## **Collegiality:**

- Be compassionate, kind, and supportive of your peers, faculty, and staff
- Give others the benefit of the doubt, approaching situations of uncertainty or disagreement with curiosity and willingness to engage in productive conversation; promote the exchange of diverse viewpoints and narratives

## **Inclusivity:**

- Ensure classrooms, student clubs and organizations are welcoming to students of all backgrounds
- Acknowledge and embrace diversity as an essential factor in the development of a progressive, innovative learning community of future effective leaders in the healthcare field

### **1.3 Definition of Academic and Professional Misconduct**

Conduct inappropriate to the medical profession is behavior that raises serious doubts about the integrity and character of a student in meeting the obligations of a medical career. Illegal, unethical, or other behavior inappropriate to the medical profession by a student outside the University community may also be considered and addressed under these procedures. The School of Medicine expects that all students, whether or not they are on campus or are currently enrolled as degree candidates, will behave in a mature, responsible, and professional manner on and off campus.

Academic and professional misconduct includes misconduct in which a student misrepresents his or her academic or professional accomplishments or impedes other students' chances of being judged fairly for their academic or professional work. A student who knowingly allows others to represent their work as their own commits as serious an offense as one who submits another's work as their own.

Students are subject to disciplinary action under this Code for academic and professional misconduct at the School or at any of its affiliated institutions, facilities, or practice offices, if found in violation of this Code of Conduct.

See the Appendix 1 for examples of academic and professional misconduct.

## **2.0 Implementation of this Code**

### **2.1 Associate Dean of Student Affairs (ADSA)**

The ADSA is principally responsible for implementing and administering this Code of Conduct and is responsible for:

- gathering relevant evidence,
- meeting with the accused student(s),
- presenting the matter to the Medical Student Disciplinary Committee (MSDC),
- insuring that the student complies with the decisions of the Committee.

When the decisions of the ADSA or the Disciplinary Committee affect the student's school attendance, the ADSA will immediately inform the appropriate Course or Clerkship Directors and the registrar that the student will be absent.

The ADSA's authorized designee may perform any actions of the ADSA authorized by this Code.

### **2.2 Medical Student Disciplinary Committee (MSDC)**

The MSDC is responsible for overseeing the implementation of this Code, determining the guilt or innocence of student charged with violating this Code and determining sanctions as provided in this Code.

**2.21 A chair, two additional faculty members, and two ad hoc medical student members comprise the MSDC.** Two alternate faculty members participate in committee activities only as a substitute for one of the regular members. The Chair may substitute one or both of the two  
Faculty alternates for one or both of the regular committee members when s/he deems necessary.

**2.22 The Dean of the School of Medicine appoints the chair and faculty members** after consulting with the Associate Deans of Medical Education, Student Affairs, and Diversity and Multicultural Affairs. At least two of the five faculty on the committee will be pre-clerkship faculty and at least two will be clerkship faculty. None of the faculty members may be a Course or Clerkship Director.  
Faculty members are appointed for three year terms, except where the Dean deems shorter terms appropriate, and may be renewed for additional three-year terms at the Dean's discretion.

**2.23 The two students who serve *ad hoc* on the MSDC** are selected from a randomized list provided by the Registrar of all active BUSM medical students in good academic standing and without comportment issues, excluding members of the class of the accused student. The Office of Student Affairs will contact the first two students on the list to determine their availability for committee service or disqualification due to possible conflict-of-interest. The ADSA will continue through the list in strict order until two students are selected to serve.

### **3.0 Disciplinary Procedures**

#### **3.1 Responsibilities of Faculty and Staff**

As a general rule, faculty who have reason to believe that a student has violated this Code shall meet with the student, personally or through a designee, inform the student of the suspected violation, and document the student's response. Faculty members will then report suspected violations of the Code to the ADSA. The report should include the evidence on which the faculty member relied as well as the student's response to the charges.

#### **3.2 Responsibilities of the ADSA**

On receipt of an allegation of student misconduct, the ADSA will notify the student in writing of the allegation. This and subsequent communications may be via email attachment or hard copy, whichever is most likely to insure notification.

The ADSA will seek to determine facts and relevant information relating to the allegation and will interview the accused student or students.

If the health, safety, or welfare of the University or School requires immediate action, the ADSA, after consultation with the University's Dean of Students, may impose interim sanctions, conditions, or restrictions on the student, who will be given the opportunity to respond to the allegation within one day. The continuation, modification, or rescission of an interim sanction will initially be at the discretion of the ADSA.

The ASDA may determine that the accusation and the situation are such that restrictions should be imposed on the student while disciplinary procedures are underway. The ADSA will inform the student in writing of any specific expectations for his/her continued engagement in academic

and school-sponsored activities during the interim period that concludes when the report of the MSDC is issued.

As a result of investigation or review of the allegations, the ADSA will determine whether the case should be:

- dismissed and closed without findings,
- referred for review and resolution by the MSDC,
- referred to the University's Dean of Students for resolution under the University-wide Code of Student Responsibilities and will inform the Dean of the Medical School as soon as possible. If resolved by the University's Dean of Students, a report of the allegations, the findings, and the outcome will be provided to the MSDC, the Medical School Dean and the Associate Dean of Medical Education.

All students will be informed that they have the right to have their case heard and determined by the MSDC. The ADSA may accept a guilty plea from the accused student(s), and present the allegations and guilty plea to the MSDC, which will determine any sanctions.

The ADSA, subject to the approval of the MSDC, may at any time, agree with the student to a negotiated disposition of the matter that may include or may be in lieu of a formal review by the MSDC. Negotiated decisions shall be reported as described in paragraph 3.4, below.

The ADSA may reveal determinations and sanctions under this Code to authorized School or University personnel and/or others to whom disclosure is permitted under applicable law. The ADSA may choose to comment publicly, in writing or otherwise, regarding cases that come before the committee. However, such reports shall not reveal the name of any student, professor, or course, involved in a case that has been heard by the committee.

### **3.3 Conduct of Proceedings by the Medical Student Disciplinary Committee (MSDC)**

In this document all time frames are expressed in calendar days. The ADSA will notify an accused student in writing at least seven (7) days in advance of the hearing of:

- the charge(s) against them with sufficient specificity to permit the student to prepare a response.
- the time and place of the Committee hearing.
- the documentary evidence that the ADSA plans to present to the MSDC

The MSDC, consisting of three faculty and two *ad hoc* medical students, may:

- meet prior to the hearing to review the charges,
- request the ADSA to present evidence and gather additional information that the MSDC deems necessary or relevant.

The MSDC Chair presides at the committee hearing, which is closed to the public. The Chair may choose to admit relatives or friends of the student if their presence will not jeopardize the decorum and orderliness of the hearing.

The student may be accompanied by an advisor of their choice; however, except to the extent permitted by the Chair, the advisor may not participate directly in the hearing. The ADSA or designate presenting the charges may not also serve as advisor.

The student must inform the ADSA of all individuals s/he expects to invite to the hearing as advisors or witnesses at least five (5) days before the hearing, and provide any evidence s/he intends to present.

Rules of evidence and procedures applicable to courts of law are not applicable at the hearing. The Chair may make appropriate rulings to safeguard the integrity and fairness of the hearing. The committee will audiotape all testimony at the hearing; the student has the right to a copy of this recording. A staff member may be designated to take notes on the committee's decisions.

The ADSA presents the charge(s), introduces the evidence and calls any witnesses.

The student may testify, introduce evidence and witnesses to speak on their behalf.

Committee members may:

- question any witness,
- request that additional witnesses or information be obtained,
- rely on facts or information based on the records of the University.

To ensure a fair and orderly hearing, the Chair may:

- permit direct questioning of a witness by the accused student or the ADSA
- permit a witness to remain in the hearing room before or after giving testimony
- exclude any person from the hearing room,
- limit or exclude repetitive or irrelevant testimony.

The MSDC members are the sole arbiters of the weight of the evidence, the demeanor and credibility of the witnesses, and the guilt or innocence of the student.

After completion of the hearing, the Committee will deliberate to reach a decision on guilt or innocence and any sanctions. Each finding of guilt and each sanction require a majority vote of the committee, with each of the three faculty members and each of the two *ad hoc* students having one vote.

The committee may modify the specification or description of an offense to conform to the evidence, provided that the modification does not deprive the student of the right to respond to particular charges.

The student's failure to attend the hearing will be deemed a withdrawal of the request for a hearing except for good cause. Under extraordinary circumstances, the MSDC Chair may postpone a scheduled hearing if a request for postponement, supported by good cause, is submitted to the ADSA at least 24 hours prior to the scheduled hearing. The Chair may, for good cause, grant a new hearing or reopen a hearing.

If in the judgment of the ADSA, the Dean of the School of Medicine, or the University Provost, a student's case is prejudiced by the University's failure to carry out or complete a procedure required under this Code, they will direct appropriate corrective measures at any stage of the proceedings. Errors and failures that are correctively addressed will not invalidate the proceedings. The proceedings of a MSDC hearing will not be invalid because of a defective mechanical recording of the proceeding.

### **3.4 Reports of Disciplinary Proceedings**

The MSDC Chair will report the Committee's factual findings, judgment, and sanctions, in writing to the ADSA within seven days of the conclusion of the hearing.

The ADSA will inform the student in writing of the judgment and any sanctions, and the procedure for an appeal to the medical school Dean with a copy to the Dean, the Associate Dean of Medical Education, and the registrar.

### **3.5 Documents relating to disciplinary cases**

All documentation of disciplinary cases will be kept by the ADSA for 10 years after the completion of proceedings or the date of graduation, whichever is later. Documents will be moved into the student's academic file maintained by the registrar only if the student is found guilty after all appeals have been exhausted.

Whenever a student is accused of misconduct, the ADSA will determine whether there have been any prior disciplinary proceedings concerning the student (regardless of outcome) and will bring such proceedings to the attention of the Committee so that it may determine if they are relevant either to the adjudication of the charges or the sanction.

## **4.0 Appeals**

A student may appeal the decision of the MSDC to the Dean of the School of Medicine, and, if not satisfied with the outcome, may further appeal to the Provost of the University.

### **4.1 Appeal to the Dean of the School of Medicine**

The student may file an appeal to the Dean of the School of Medicine no later than fourteen (14) days after the date of the written notification of the findings and/or sanctions.

If the imposed sanction was dismissal, a student who notifies the Registrar in writing of their intent to appeal a MSDC decision may remain registered and participate in courses or clerkships until they either miss the deadline for the next appeal or the dean upholds the MSDC's decision (even if an appeal is submitted to the Boston University Provost). No course or clerkship grades obtained during the appeal period will be recorded on the student's medical school transcript if the MSDC decision to dismiss is upheld. Students are responsible for tuition charges during this period. Filing an appeal will not stay other sanctions imposed.

Upon receipt of a timely appeal, the Dean will request the relevant record. The decision of the Dean will be in writing, and will include the procedure for an appeal to the University Provost, with copies provided to the ADSA, the Associate Dean of Medical Education and the student.

The Dean, or designee may:

- Affirm, modify, or reverse the findings of the ADSA and/or the MSDC.
- Affirm or modify (to increase or decrease) the sanctions imposed.
- Remand the matter to the ADSA or the MSDC for additional investigation, a new hearing, or a reopening of the hearing, as they may deem appropriate. If a case is remanded, the decision will specify whether the sanctions are to be maintained, modified, suspended, or reversed pending resolution of the matter.

### **4.2 Appeal to the University Provost**

The student may file an appeal to the University Provost of the findings of or sanctions imposed by the Dean of the School of Medicine no sooner than receipt of the Dean's notification of findings and sanctions and no more than fourteen (14) days after receipt.

The appeal may request the University Provost to stay or modify the sanctions pending determination of the appeal, stating the reasons for such request.

Upon receipt of a timely appeal, the University Provost will request the relevant record. Any written response by the Dean to the student's appeal to the University Provost must be copied to the student.

The University Provost, or their designee, may:

- Affirm, modify, or reverse the findings of guilt.
- Affirm or modify (increase or decrease) the sanctions imposed.
- Remand the matter to the Dean, the ADSA or a new hearing, or a reopening of the MSDC hearing, as he or she may deem appropriate.
- Take such other action as the University Provost may deem appropriate.

The decision of the University Provost will be in writing, with copies provided to the student, Dean, the ADSA, the Associate Dean of Medical Education.

## **5.0 Sanctions**

The following, individually or in combination, are authorized disciplinary sanctions.

### **5.1. Major Sanctions**

- Expulsion from the School.
- Suspension from the School or a program of the School for a specific length of time.
- Denial or revocation of credit, grade or honors, graduation diploma or degree previously credited, awarded, or conferred.
- Imposition of a grade of failure for any course or program of the School.

### **5.2 Other Sanctions**

- Disciplinary probation that may involve counseling with faculty or administrative staff and restriction of student privileges.
- Disciplinary reprimand or warning.
- Restitution. The student will reimburse the University and/or other appropriate party for damage to or loss of property or for full costs or expenses incurred by the University or other party.
- Impounding of prohibited materials or equipment used in violation of this Code, or specifically prohibited by law or the rules and regulations of the University. The sanction may determine that once equipment is impounded, the student will lose all further privileges of use or possession of such equipment permanently or for a stated period of time.

Where appropriate, the statement of the sanction shall include:

- the duration with dates,
- any conditions to be observed during that period, and
- the conditions for termination of the sanction.

## 6.0 Disciplinary Record and Readmissions

### 6.1 Disciplinary Records

A sanction of expulsion or suspension and any sanction resulting from academic misconduct, other than an interim sanction, will be entered on the student's permanent record unless this provision is waived by the ADSA with the approval of the Dean.

### 6.2 Withdrawal and Readmission

The ADSA will notify the Register if a student voluntarily withdraws from School while charges against them are pending or as part of a negotiated settlement of such charges. Such a student may re-enroll only if all pending charges are resolved and the Dean of the School of Medicine grants permission for readmission at their discretion.

### Appendix 1

Academic and professional misconduct includes without being limited to the following, when committed knowingly, intentionally or with reckless disregard for others and proved by a preponderance of the evidence:

1. **Failing to uphold or violating the standards of the medical profession:** failure to behave in a mature, responsible, and professional manner, with honesty and integrity, at all times and in all settings (classroom, clinical, and social), on and off campus.
2. **Cheating on examinations or clinical or laboratory work:** Obtaining, receiving, or using or attempting to obtain, receive, or use assistance during an examination or other formal exercise from any source not authorized by the faculty. This includes use or attempted use of any unauthorized books, notes or other materials to enhance the student's performance in an examination or exercise, copying or attempting to copy from another student, or communication with another student to obtain unauthorized assistance with an examination or exercise.
3. **Plagiarism:** Any attempt by a student to represent the work of another as their own. This includes copying the answers of another student on an examination or copying or substantially restating the work of another person or persons in any oral or written work without properly citing the source. Plagiarism also includes the presentation for grading of any technical or written assignment (clinical or otherwise) that is not the work of the student(s) being graded. If a student has collaborated with someone else in an academic endeavor, their contribution must be acknowledged.
4. **Providing unauthorized assistance:** Giving or attempting to give unauthorized assistance during an examination or exercise, including, but not limited to, permitting another student to copy from an examination or exercise.
5. **Misrepresentation, falsification, or fabrication of data.**
6. **Unauthorized obtaining of an examination:** Stealing or otherwise obtaining or attempting to obtain or use of any unauthorized knowledge of examination questions or other exercises.
7. **Allowing another student to represent your work as their own.**

8. **Forgery, alteration or misuse** of graded examinations, grade lists, or official University records or documents, including but not limited to transcripts, letters of recommendation, degree certificates, alteration of examinations or other work after submission.
9. **Unauthorized reproduction, distribution, or sale** of class notes, examinations, or other class materials without the express written consent of the author.
10. **Theft or destruction** of examinations or papers or altering grades.
11. **Altering or destroying** another person's work or records, including altering records of any kind (whether hard copy or electronic), removing materials from libraries or offices without consent, or in any way interfering with the work of others so as to impede their academic performance.
12. **Unauthorized and/or unsupervised treatment of patients**, including, but not limited to, treating patients in unauthorized clinical settings, accepting personal monetary payment from patients for services, waiving patient payment responsibilities without authorization, or otherwise acting in disregard of patient-related contracting and financial policies of the School of Medicine.
13. **Unauthorized use of prescriptions.**
14. **Misrepresentation of a student's credentials or status.**
15. **Misuse of documents** including patient records, by their unauthorized removal from their locus of instruction or storage, or unauthorized use or dissemination of personal or private information in such documents.
16. **Falsifying patient records** in any manner, e.g. by changing previous entries, making false entries, or by forging signatures, with intent to defraud, injure or deceive another.
17. **Violating patient rights** to confidentiality or improperly disclosing confidential patient information.
18. **Unauthorized entry or use** of School or other University facilities or those of the School's affiliates.
19. **Willful obstruction or disruption** of the regular operations and activities of the School, including, but not limited to teaching and research, disciplinary proceedings, service functions, or other authorized activities occurring on the premises of the School or affiliated institutions.
20. **Violation of Public Law**, when such violation occurs within a program of the School or affects the professional interests or standards of the School, whether or not occurring on campus.
21. **Violation of responsibilities listed in the University-wide Code**, when such violation occurs within a program of the School or affects the professional interests or standards of the School
22. **Failure to comply with the sanctions imposed** under the authority of this Code.