I. INTRODUCTION:

Medical students have responsibilities and privileges that are different from other students and therefore, higher professional and ethical behaviors are expected of them. The medical school has the responsibility to ensure that medical students are given the guidance and the opportunity to learn and practice the standards to which they will be held to.

II. PRINCIPLES OF PROFESSIONAL BEHAVIOR FOR MEDICAL STUDENTS:

Although medical students have legal restrictions on the clinical work they may perform, patients often see them as knowledgeable and with the same duties and responsibilities as a doctor. Medical students must be aware that their actions can and will affect patients.

Students should be encouraged to strive for academic excellence, as well as high standards in their professional and personal lives. Basic clinical training gives medical students the opportunity to learn professional behavior in a supervised setting that provides safety for patients, but also gives the school an opportunity to identify behaviors that are not acceptable, and take remedial action to help students improve. This applies not only to student behavior within the school or clinical setting, but students should be aware that their behavior outside the clinical environment, including their personal lives, may have an impact on their fitness to practice. Student behavior must, at all times, justify the trust that the public places on the medical profession.

To be able to provide good clinical care is fundamental to becoming a physician. This is the objective that should drive and guide a medical student's behavior in clinical and academic work.

a. To provide good medical care is fundamental to becoming a doctor. Students should:
   - Recognize and work within the limits of their competence and ask for help when necessary.
   - Accurately report their position or abilities (Ex. should not present themselves as “doctor”).
   - Make certain that they are supervised appropriately when performing any procedure or clinical task.
   - Respect the patient's autonomy and rights.
   - Behave with courtesy and respect.
   - Not allow personal biases interfere with a patient’s treatment. The student must not discriminate against patients because of gender, age, color, ethnicity, social standing or lack thereof, religion, beliefs, sexual orientation marital status, etc.
   - Report any concerns they may have about patient safety or wellbeing to the appropriate authority.
   - Be aware of the responsibility of maintaining their knowledge and skills throughout their careers.

b. To demonstrate good clinical practice, students must be aware of their responsibility to maintain their knowledge, and skills through out their careers. The student should:
   - Attend compulsory teaching sessions or lectures, and if unable, arrange with the proper authority to remediate or fulfill the learning objectives for the activity.
   - Complete and submit work on time.
   - Be responsible for their own learning.
   - Reflect on feedback about their performance and achievements and respond constructively.
• Respect the knowledge and skills of those involved in their education.
• Are expected to contribute to the teaching, training, appraising and assessing of students and peers. They should be fair, honest and objective when appraising the work of others, in order to ensure that students and peers acquire and maintain a satisfactory standard of practice.

c. Medical students have extensive contact with patients during their academic courses. To maintain good relationships with patients, students should:
• Build and maintain relationships with patients based on openness, trust, and good communication. Relatives, spouses and other caretakers must be treated with respect and consideration, and be given support as necessary.
• Students must maintain a professional boundary between themselves and anyone close to the patient. Their position must not be used to cause distress or to exploit patients.
• Patient’s autonomy must be respected, not only in terms of choices for treatment, but in participating in teaching, or research, or any activity undertaken by the student.
• Patients have a fundamental right to expect that information about them be held in strict confidence. A patient’s case may not be discussed in a way that may identify them with anyone not directly involved in the case. Academic work containing specific information about a patient must not identify the patient if it is to be seen outside the care team. This includes case and procedure logs that are submitted as part of the student’s course work or assessment.
• Student must treat patients with respect and dignity.
• Be aware of ethical issues in their behavior with patients, their careers, relatives, partners or anyone else close to them. This includes issues of consent and confidentiality.
• Make sure that the patient has consented to a student being involved in their care.
• Make sure they are clearly identified as students
• Dress in an appropriate and professional way. They need to be aware that patients will respond to their appearance, presentation and hygiene.

d. As members of a team, students should:
• Work effectively with colleagues inside and outside of healthcare in order to deliver a high standard of care and safety.
• Develop skills necessary to work in multi-disciplinary teams. This involves respect for the contributions and skills of other members of the team and developing effective communication with the other members of the team, as well as not discriminating against them.
• Protect patients from harm posed by another physician’s or medical student’s behavior, performance or health. The information should be shared with the appropriate person.
• Demonstrate skills that allow them to deal with uncertainty and change in the workplace.
• Develop and demonstrate teamwork and leadership skills.
• Awareness of the roles and responsibilities of the persons involved in delivering health care.

c. Probity: Students must be honest and trustworthy, and act with integrity.
• By bringing attention to any concerns about, or errors, in their clinical work.
• Be honest, original and genuine in their academic work, in conducting research.
• Be honest and trustworthy when writing reports and logbooks.
• Be honest in not misrepresenting themselves in CVs, applications: not misrepresent their qualifications, positions or abilities.
• Be honest in any financial dealings.
• Cooperate with any formal inquiry by the medical school, or other agency into their health, behavior, or performance, or that of anybody else.
• Comply with the laws of Puerto Rico.
• Comply with the regulations of the medical school, or the clinical settings where they may be assigned.

Students must be aware that fitness to practice may be impaired for a number of reasons (and that the information can be recorded in the Medical Student Performance Evaluation on seeking a residency program):
- Misconduct: issues that raise questions about a student’s probity, trustworthiness or character.
- Deficient professional performance.
- Convictions or a determination by a regulatory body.
- Adverse physical or mental health (including problematic use of alcohol, legal or illegal drugs).

III. FREQUENT AREAS OF CONCERN RELATING TO STUDENT FITNESS TO PRACTICE:

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<tr>
<th>Areas of Concern</th>
<th>Examples</th>
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<tr>
<td><strong>Criminal Convictions</strong></td>
<td>• Child pornography&lt;br&gt;• Theft&lt;br&gt;• Financial Fraud&lt;br&gt;• Possession of illegal substances&lt;br&gt;• Child abuse or any other abuse&lt;br&gt;• Physical or verbal violence</td>
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<td><strong>Drug/Alcohol Misuse</strong></td>
<td>• Drunk/reckless driving&lt;br&gt;• Alcohol consumption that affects clinical work or the work environment&lt;br&gt;• Dealing, possessing or misusing drugs, even if there are no legal proceedings</td>
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<td><strong>Aggressive or Violent Behavior</strong></td>
<td>• Assault and Battery&lt;br&gt;• Physical Violence&lt;br&gt;• Bullying&lt;br&gt;• Abuse</td>
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<td><strong>Persistent Inappropriate Attitude or Behavior</strong></td>
<td>• Uncommitted to work&lt;br&gt;• Neglect of administrative tasks&lt;br&gt;• Poor time management&lt;br&gt;• Non-attendance&lt;br&gt;• Poor communication skills&lt;br&gt;• Failure to accept and follow educational advice</td>
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<td><strong>Cheating/Plagiarizing</strong></td>
<td>• Cheating on exams, logbooks or portfolios&lt;br&gt;• Passing off another’s work as if one’s own&lt;br&gt;• Forging a supervisor’s name or signature on assessments</td>
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<td><strong>Dishonesty or Fraud</strong></td>
<td>• Falsifying Research&lt;br&gt;• Financial Fraud&lt;br&gt;• Fraudulent CVs or other documents&lt;br&gt;• Misrepresentation of qualifications</td>
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<td><strong>Unprofessional Behavior or Attitudes</strong></td>
<td>• Breach of Confidentiality&lt;br&gt;• Misleading patients about their care or treatment&lt;br&gt;• Culpable involvement in a failure to obtain proper informed consent from a patient&lt;br&gt;• Sexual, racist or other forms of harassment&lt;br&gt;• Inappropriate examinations or failure to keep boundaries in behavior&lt;br&gt;• Persistent rudeness to patients, colleagues or others&lt;br&gt;• Unlawful discrimination</td>
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IV. MANAGING REPORTS OF UNPROFESSIONAL ACADEMIC STUDENT BEHAVIOR:

1. Concerns about student professional academic behavior may arise from (a) faculty with whom a student interacts during a course, or another (b) faculty, staff, student or patient with whom the student interacts. These individuals will be expected to report their concerns to the faculty responsible for the student’s evaluation. In some instances, such reports may go directly to the course/clerkship director. Some student behaviors, such as academic dishonesty and unlawful behavior are managed under the University’s disciplinary process and are not a part of this policy.

2. Faculty is expected to discuss all concerns about a student’s professional behavior both with the student and with the course/clerkship director. The faculty then has the option to (a) include professionalism concerns in the student’s formal evaluation, (b) submit a separate Early Concern Note to the course or clerkship director, (c) include professionalism concerns in the student’s evaluation and submit an Early Concern Note or (d) determine that no action is indicated. In the case of reports which come to the course/clerkship directors directly from staff, students, patients or faculty not responsible for the student’s evaluation, the course/clerkship director may chose to complete an Early Concern Note.

3. Upon receipt of an Early Concern Note, the course/clerkship director will review the information with the student and forward the Early Concern Note to the Dean of Student Affairs. While Early Concern Notes are confidential, (their content is not shared with anyone except the reporting faculty, course/clerkship director and student) they are not anonymous. The student will know which faculty or course/clerkship director submitted the Early Concern Note. For this reason, faculty/course/clerkship directors are strongly urged to review their concerns personally with the student when an Early Concern Note is submitted.

4. Upon receipt of an Early Concern Note on a student, the Dean of Student Affairs will meet with the student to discuss the report. After this discussion, the Dean will make recommendations to the student regarding appropriate interventions. Any professionalism forms do not become part of the student’s academic record.

In order to promulgate this policy of Medical Student Professional and Ethical Values: Fitness to Practice, this document will be posted electronically on the University’s web site, and a copy will be distributed to students, faculty members, residents, and other individuals who teach students. Additionally, this policy will become part of the institutional policies and regulations.

This policy is applicable to all medical students immediately.

approved by

[Signature]

Date

Prepared by: Frances García, MD
June 22, 2011

Modified and adapted from the work of Maxine Papadakis; University of California
Medical Student Professional and Ethical Values: Fitness to Practice

Early Concern Note

Please complete this note if you have any concerns about the professional behavior of a medical student. This note is to be submitted to the course or clerkship director who is responsible for the course in which the student is currently enrolled. The course/clerkship coordinator will submit the note to the Dean of Student Affairs.

Student Name ____________________________

Course ____________________________ Date ____________________________

Person originating this Early Concern Note (print) ____________________________

Title/role of person initiating this Early Concern Note ____________________________

This form is being completed based on: [ ] my direct observation(s) or encounter(s) with this student
[ ] information about this student provided to me by a third party

A student with any of the following patterns of behavior is not meeting the personal or professional standards inherent to the profession of medicine. Please check the area which best describes your concerns about this student. Provide comments in the space provided on the back.

**Integrity and Personal Responsibility:** The student
[ ] fails to fulfill responsibilities reliably
[ ] misrepresents or falsifies actions and / or information
[ ] fails to accept responsibility for actions
[ ] fails to respect patient confidentiality
[ ] uses his/her professional position to take advantage of a patient emotionally or sexually
[ ] Other ___________________________________

**Motivation to Pursuit of Excellence and Insight for Self-improvement:** The student
[ ] has inadequate personal commitment to honoring the needs of patients
[ ] is resistant or defensive in accepting criticism
[ ] remains unaware of his/her limits
[ ] resists considering or making changes based on feedback
[ ] appears to seek or accept the minimally acceptable level of effort as a goal
[ ] Other ___________________________________

**Personal Interactions - Compassion and Respect:** The student
[ ] inadequately establishes rapport or empathy with patients or families
[ ] does not function and interact appropriately within groups
[ ] is insensitive to the needs, feelings or wishes of others
[ ] uses demeaning or disrespectful language about others
[ ] is abusive or arrogant during times of stress
[ ] fails to maintain a professional appearance / attire
[ ] Other ___________________________________

The back of this form must be used to describe details and examples of student behaviors which led to completion of this form. This form will be shared with the student and the information will be used to counsel the student on the problem(s) identified.
COMMENSTS (required): (a separate sheet may be attached)

Instructions for Course Coordinator/Director:
1. Review this Early Concern Note. If possible, meet with the student to review/discuss the concerns.
2. Sign below; if you meet with the student, ask the student to complete the student section below.
3. Forward this Early Concern Note to the Dean of Student Affairs.

Course Director Signature ___________________________ Date ___________________________

I have reviewed the contents of this Early Concern Note with the student: [ ] YES [ ] NO

For completion by the student:
I have read this evaluation and discussed it with the course/clerkship director. The student’s signature on this form is intended only to verify that the student has reviewed the form with the course/clerkship director.

Student Signature ___________________________ Date ___________________________

Student Comments (optional)

For the use of the Dean of Student Affairs:
Nature of discussion with student and recommendations:

Student’s signature ___________________________ Date ___/___/___

Dean of Student Affairs signature ___________________________ Date ___/___/___

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