

College of Health Related Professions



Handbook
2007-2008

University of Arkansas for Medical Sciences

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SECTION 1.0

GENERAL INFORMATION

1.1 POLICY STATEMENT REGARDING HANDBOOK

Procedures stated in this Handbook require continuing evaluation, review, and approval by appropriate University officials. All statements contained herein reflect policies in existence at the time this Handbook went to press, and the University and College reserve the right to change policies at any time and without prior notice.

1.2 AFFIRMATIVE ACTION POLICY

The University of Arkansas for Medical Sciences fully supports, both in spirit and practice, Titles VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Executive Order 11246, the Rehabilitation Act of 1973 (Sections 503 and 504), Titles I and II of the Americans with Disabilities Act of 1990, and Section 402 of the Vietnam Era Veterans Readjustment Assistance Act of 1974, which prohibits discrimination on the basis of race, sex, color, national origin, religion, age, marital status, ethnic origin, disability and/or disabled veterans and veterans of the Vietnam Era. Student complaints concerning any policy, procedure or practice prohibited by these Acts should be addressed to Dr. Diane E. Heestand, Interim Associate Dean for Academic and Student Affairs in the College of Health Related Professions Dean's Office (501) 686-5732 for assistance in addressing such concerns. The UAMS Office of Human Relations, Room M1/112, is also available to assist with these concerns.

1.3 TELEPHONING INFORMATION

1.3.1 Medical Sciences Campus Dial System

Campus Calls	Dial the seven-digit campus number.
Off-Campus Calls	Dial the desired number.
Dormitory	Except for the hallway phones that are part of the campus system, all Dormitory phones are private.
Audio Call Paging	Before requesting a page in the Hospital, call the appropriate office or lab; if unable to locate the party, request a page by dialing "0" and giving the operator the name to be paged and the number from which you are calling.
Display Pagers	Dial the display pager number; instructions will ask you to enter your telephone number; hang up; wait for call back.

For assistance in dialing, dial "0" for information.

1.3.2 Emergency Telephone Numbers

Police	(501) 686-7777
Fire	(501) 686-5333
Medical Emergency (Code Blue)	(501) 686-7333

1.3.3 University Hospital Emergency Room (501) 686-6333

1.3.4 Poison Control Center (Emergency) and Drug Information 1-800-3POISON

1.3.5 Rape Crisis Hotline (501) 801-2700 or 1-877-432-5368

1.3.6 Central Arkansas Hospitals

Arkansas Children's Hospital	(501) 364-1100
Arkansas Heart Hospital	(501) 219-7000
Baptist Health	(501) 202-2000

Baptist Health Medical Center (North Little Rock)	(501) 202-3000
Department of Veterans Affairs, Central Arkansas Veterans Healthcare System (Little Rock and North Little Rock)	(501) 257-1000
Jefferson Regional Medical Center (Pine Bluff)	(870) 541-7100
Rebsamen Medical Center (Jacksonville)	(501) 985-7000
Southwest Regional Medical Center	(501) 455-7100
St. Vincent Doctors Hospital	(501) 552-6000
St. Vincent Infirmary Medical Center	(501) 552-3000
State Hospital	(501) 686-9000
1.3.7 Employee Health/Student Preventive Health Services	(501) 686-6565

1.4 EMERGENCY PROCEDURES

1.4.1 Fire Assistance

Activate the nearest alarm box and then dial 686-5333 to inform central control of exact location, floor, wing, room number, what is burning and name of caller. In the education and research buildings, the ringing of a general alarm will signal "Fire/Danger." It is advisable to become familiar with the location of alarm boxes, fire blankets, and extinguishers in the area where you spend most of your time. The fire plan for UAMS is referred to as "CODE RED." "CODE RED" will be put into effect when fire and/or smoke are reported anywhere on campus. The phrase "CODE RED" shall be used as the code for announcing a fire emergency or a fire drill. Under no circumstances should anyone shout "Fire."

1.4.2 Campus Police Dialing

Dial 686-7777 and give detailed information. If there is no answer, dial "0."

1.5 ADMINISTRATION

1.5.1 Chancellor

The chief administrative officer of the campus is the Chancellor who is responsible to the President of the University. Under his leadership, campus affairs are conducted in keeping with state laws and policies established by the President and the Board of Trustees.

1.5.2 Vice Chancellors

Directly responsible to the Chancellor are the Executive Vice Chancellor, the Vice Chancellor for Academic Affairs and Research Administration, the Vice Chancellor for Administration and Governmental Affairs, the Vice Chancellor for Campus Operations, the Vice Chancellor for Clinical Programs, the Vice Chancellor for Communications, the Vice Chancellor for Compliance, the Vice Chancellor for Development and Alumni Affairs, the Vice Chancellor for Finance and Chief Financial Officer, the Vice Chancellor for Northwest Arkansas, the Vice Chancellor for Regional Programs, the Vice Chancellor for Research, and the Assistant Vice Chancellor of Employee Relations.

1.5.3 Deans and Directors

Deans are the chief administrative officers of their respective UAMS colleges. The Executive Director of Campus Operations and the Director of Area Health Education Centers (AHECs) are administrative officers of their respective units.

The college Deans and the Directors of the Campus Operations and AHEC, directly responsible to the Chancellor, are empowered to execute all University policies applicable to the colleges, Campus Operations, or AHEC. They may establish requirements to be satisfied by members of their faculty and/or staff as may be needed to achieve the goals of their respective organizations.

1.5.4 Chairmen

Chairmen are the administrative officers of the various UAMS departments. They are responsible for the overall operation of their departments. Chairmen are empowered to execute all approved departmental and college policies regarding the academic and administrative aspects of their program(s). Chairmen may delegate specific tasks and responsibilities to departmental division or program directors. Chairmen report directly to the Dean of their respective college.

1.5.5 Medical Director/Advisor

Some disciplines represented in the CHRP are support services for medical and surgical specialties. In these disciplines, a Medical Director or Advisor, who is a physician, may be required to meet accreditation standards. A Medical Director or Advisor participates in the development and evaluation of the curriculum and may serve the College and Department in other capacities related to the discipline.

1.5.6 Faculty

Faculty members are responsible for student instruction, university, public and professional service, and a variety of scholarly activities. Faculty in the College of Health Related Professions report directly to their Department Chairman in all areas of responsibilities related to the departmental goals and objectives.

1.5.7 Clinical/Adjunct Faculty

Clinical and Adjunct faculty are appointed to the CHRP to assist in the instruction/evaluation of its students. Those faculty usually have primary appointments of employment in other UAMS or University of Arkansas units, the Department of Veterans Affairs Medical Center, or other affiliated institutions.

1.6 ADMINISTRATION OFFICERS FOR UAMS

Dr. I. Dodd Wilson	Chancellor
Dr. John P. Shock	Executive Vice Chancellor and Director of the Jones Eye Institute
Dr. Debra Fiser	Vice Chancellor and Dean, College of Medicine
Dr. Larry D. Milne	Vice Chancellor for Academic Affairs and Research Administration
Mr. Tom S. Butler	Vice Chancellor for Administration and Governmental Affairs
Mr. Leo Gehring	Vice Chancellor for Campus Operations
Mr. Richard Pierson	Vice Chancellor for Clinical Programs
Ms. Pat Torvestad	Vice Chancellor for Communications
Mr. Robert W. Bishop	Vice Chancellor for Compliance
Mr. John I. Blohm	Vice Chancellor for Development and Alumni Affairs
Ms. Melony Goodhand	Vice Chancellor for Finance and Chief Financial Officer
Dr. Peter Kohler	Vice Chancellor for Northwest Arkansas
Dr. Charles O. Cranford	Vice Chancellor for Regional Programs and Director of Area Health Education Centers
Dr. Larry Cornett	Vice Chancellor for Research
Mr. Charles White	Assistant Vice Chancellor of Employee Relations
Dr. Ronald H. Winters	Dean, College of Health Related Professions
Dr. Claudia Barone	Dean, College of Nursing
Dr. Stephanie Gardner	Dean, College of Pharmacy
Dr. James M. Raczynski	Dean, College of Public Health
Dr. Robert McGehee, Jr.	Dean, Graduate School
Ms. Kari Cassel	Director of Information Systems
Dr. Peter D. Emanuel	Director of the Arkansas Cancer Research Center (ACRC)
Dr. David Lipschitz	Director of the Donald W. Reynolds Center on Aging
Dr. T. Glenn Pait	Director of Jackson T. Stephens Spine and Neurosciences Institute
Dr. Bart Barlogie	Director of the Myeloma Institute for Research and Therapy (MIRT)
Dr. Richard Smith	Director of the Psychiatric Research Institute (PRI)

(Dr. B. Alan Sugg is President of the University of Arkansas.)

SECTION 2.0

COLLEGE OF HEALTH RELATED PROFESSIONS (CHRP)

Ronald H. Winters, Ph.D., Dean

Office location: Winston K. Shorey Building, Room S1/01

Telephone: (501) 686-5731

2.1 MISSION OF THE COLLEGE

The College of Health Related Professions (CHRP) serves the state of Arkansas as the primary arm of the University of Arkansas in offering programs that provide education, service, and research in the allied health professions. The College was organized as a separate college within the University of Arkansas for Medical Sciences in 1971.

In fulfilling its mission, the College of Health Related Professions offers education and training opportunities for students of the allied health professions to prepare them as graduates to assume the roles of the professional. The College curricula coordinate the professional course work with the arts, humanities, and basic and social sciences into a total educational experience that emphasizes life-long learning in the allied health professions.

Patient and public health education is an important part of the mission of the College of Health Related Professions. In its public service role, programs in the College render patient care services as part of their educational efforts under the supervision of faculty. Technical advice and consultative services are available from the College to institutions and agencies throughout the state. The professional service mission of the College includes the offering of continuing education courses to practitioners to enhance teaching, administration, and professional skills.

Research in the College of Health Related Professions involves the educational process as well as professional fields. The research mission involves the quest for new information which addresses the health and health care educational needs of the state, and the sharing of this information with the scientific community.

2.2 CHRP ROLE AND SCOPE

The CHRP mission is achieved through the varied offerings of its departments. The College, the only one of its kind at an academic health science center in Arkansas, has as its main role the education of allied health professionals to serve in the health care delivery system in the state. The specific educational programs currently offered within the College of Health Related Professions are provided by ten academic departments. They include: Audiology and Speech Pathology; Dental Hygiene; Dietetics and Nutrition; Emergency Medical Sciences; Genetic Counseling; Health Information Management; Imaging and Radiation Sciences (Diagnostic Medical Sonography, Medical Dosimetry, Nuclear Medicine Imaging Sciences, Radiation Therapy, Radiologic Imaging Sciences); Laboratory Sciences (Cytotechnology, Medical Technology); Ophthalmic Technologies; and Respiratory and Surgical Technologies. Programs range from academic requirements of one semester to programs that require four or more years. Academic awards include the certificate and the associate, bachelor, master, and doctoral degrees. Nearly all the programs stipulate prerequisites for admission that must be completed at another (general undergraduate) institution.

Other roles of the College of Health Related Professions include public and professional service, and research. The College offers professional continuing education opportunities to enhance the abilities of practicing allied health professionals; serves as a resource center for allied health planning, education, and delivery systems in Arkansas, and develops applied research programs in allied health. All of these roles combine to support the overall mission of the College.

2.3 DEPARTMENTAL LISTINGS

The following departments comprise the College:

Audiology and Speech Pathology

Thomas W. Guyette, Ph.D., Chairman
UAMS #702/UALR
Speech, Language, and Hearing Clinic
University of Arkansas at Little Rock
2801 South University Avenue
Little Rock, Arkansas 72204
Telephone: (501) 569-3155

Audiology (Au.D.)

Laura Smith-Olinde, Ph.D., C.C.C.-A., Program Director
UAMS #702/UALR

Speech, Language, and Hearing Clinic
University of Arkansas at Little Rock
2801 South University Avenue
Little Rock, Arkansas 72204
Telephone: (501) 569-3155

Communication Sciences and Disorders (Ph.D.)

Susan Moss-Logan, Ph.D., Program Director
UAMS #702/UALR

Speech, Language, and Hearing Clinic
University of Arkansas at Little Rock
2801 South University Avenue
Little Rock, Arkansas 72204
Telephone: (501) 569-3155

Communicative Disorders (M.S.-Speech Pathology)

Terri J. Hutton, M.F.A., Graduate Coordinator
UAMS #702/UALR

Speech, Language, and Hearing Clinic
University of Arkansas at Little Rock
2801 South University Avenue
Little Rock, Arkansas 72204
Telephone: (501) 569-3155

Dental Hygiene

Susan Long, Ed.D., Chairman
UAMS #609
Room S8/13 Shorey Building
Telephone: (501) 686-5734

Dietetics and Nutrition

Reza Hakkak, Ph.D., Chairman
Education South Building
4021 West 8th, UAMS #627
Little Rock, Arkansas 72205
Telephone: (501) 686-6166

Emergency Medical Sciences

Daniel L. Bercher, M.Ed., Chairman
Education South Building
4021 West 8th, UAMS #635
Little Rock, Arkansas 72205
Telephone: (501) 686-5772

Genetic Counseling

Bruce R. Haas, C.G.C., CLSp(CG), Chairman
601 South Cedar Street, UAMS #836
Little Rock, AR 72205
Telephone: (501) 526-7701

Health Information Management

Kathy Trawick, Ed.D., Chairman
UAMS #733
Room S8/15 Shorey Building
Telephone: (501) 686-8613

Imaging and Radiation Sciences

Rebecca Ludwig, Ph.D., Interim Chairman
Education South Building
4021 West 8th, UAMS #563
Little Rock, AR 72205
Phone: (501) 686-6510

Diagnostic Medical Sonography

Terry DuBose, M.S., Division Director
Education South Building
4021 West 8th, UAMS #563
Little Rock, AR 72205
Phone: (501) 686-6510

Medical Dosimetry

Yulong Yan, Ph.D., Division Director
UAMS/CARTI #771
Telephone: (501) 526-7474

Nuclear Medicine Imaging Sciences

Paul D. Thaxton, M.A.T., Division Director
Education South Building
4021 West 8th, UAMS #714
Little Rock, Arkansas 72205
Telephone: (501) 686-6848

Radiation Therapy

Debra Tomlinson, M.A., Division Director
UAMS/CARTI #701
Telephone: (501) 603-2343

Radiologic Imaging Sciences

Joe Bittengle, M.Ed., Division Director
Education South Building
4021 West 8th, UAMS #563
Little Rock, AR 72205
Phone: (501) 686-6510

Laboratory Sciences

Donald Simpson, Ph.D., Chairman
Education South Building
4021 West 8th, UAMS #597
Little Rock, Arkansas 72205
Phone: (501) 686-5776

Cytotechnology

Donald D. Simpson, Ph.D., Chairman and Program Director
UAMS #517
Room S8/14 Shorey Building
Telephone: (501) 686-5618

Medical Technology

Kathleen M. Mugas, M.Ed., Program Director
Education South Building
4021 West 8th, UAMS #597
Little Rock, Arkansas 72205
Telephone: (501) 686-5776

Ophthalmic Technologies

Suzanne Hansen, B.A., B.S., Interim Chairman
UAMS #523
Jones Eye Institute, Room 216
Telephone: (501) 686-5150

Respiratory and Surgical Technologies

Erna L. Boone, M.Ed., Chairman
UAMS #704 14-B/NLRVA
Building 68, Room 102
Department of Veterans Affairs Medical Center
North Little Rock Division
2200 Fort Roots Drive
Phone: (501) 257-2348

Respiratory Care

Erna L. Boone, M.Ed., Chairman and Program Director

Surgical Technology

Gennie Castleberry, Program Director

2.4 AWARDS

2.4.1 College-wide Awards

1. Chancellor's List: A student is eligible for the Chancellor's List if he or she has completed twelve (12) semester credits of the required departmental courses and has achieved a 4.0 cumulative grade point average for those semester credits. In the event that general education electives are taken concurrently with the twelve (12) SC of departmental course work, the grades for those general education courses will be included in calculating the GPA. To be eligible for the Chancellor's List in future semesters, the student must complete an additional twelve (12) SC in the respective program since the last Chancellor's List report and again achieve a 4.0 cumulative grade point average (e.g., a student can accumulate 3 SC semester one, 6 SC semester two, and 3 SC semester three and again become eligible for the Chancellor's List). If in the semester that the 12 SC is accumulated, the student takes more than the 12 hours, the SC in that semester will be used to calculate the GPA. The GPA will be calculated on the subsequent hours completed including concurrent general education course work. This procedure will be followed for all semester equivalents as appropriate for a given program of study.
2. Dean's List: A student is eligible for the Dean's List if he or she has completed twelve (12) semester credits of the required departmental courses and has achieved a 3.70 to 3.99 cumulative grade point average for those semester credits. In the event that general education electives are taken concurrently with the twelve (12) SC of departmental course work, the grades for those general education courses will be included in calculating the GPA. To be eligible for the Dean's List in future semesters, the student must complete an additional twelve (12) SC in the respective program since the last Dean's List report and again achieve a 3.70 to 3.99 cumulative grade point average (e.g., a student can accumulate 3 SC semester one, 6 SC semester two, and 3 SC semester three and again become eligible for the Dean's List). The GPA will be calculated on the subsequent hours completed including concurrent general education course work. This procedure will be followed for all semester equivalents as appropriate for a given program of study.

2.4.2 Departmental and Program Awards

Audiology and Speech Pathology

Clinician of the Year in Audiology
Clinician of the Year in Speech Pathology
Leah Katayama Wilkins Memorial Scholarship
Scholar of the Year in Audiology
Scholar of the Year in Speech Pathology

Dental Hygiene

Alice Marie Kelly Kuntz Endowed Scholarship
American College of Dentist's Award
Arkansas Implant Study Group Endowed Award
Arkansas State Dental Hygienists' Association Award
ASDHA Endowed Scholarship
Colgate STAR Award
Delta Dental Plan of Arkansas Endowed Scholarship
Faculty Gold Key
Hu-Friedy Golden Scaler Award
International College of Dentistry Award
P&G Crest/Oral-B Performance Award
Patterson Award for Clinical Performance
Richard D. Hardin Award for Excellence
Sigma Phi Alpha National Honor Society

Diagnostic Medical Sonography

Faculty Gold Key (Little Rock, Texarkana, Fayetteville)

Dietetics & Nutrition

Maxine Hinton Faculty Gold Key

Emergency Medical Sciences

Faculty Gold Key
The Don R. Fletcher Piranha Award
The EMS Glow Award

Health Information Management

Faculty Gold Key

Laboratory Sciences

Bobby Morgan Scholarship
Faculty Gold Key
Jerry Brummett Scholarship
M. Gene Hall Scholarship
Paula Peacock Scholarship
Sharon Edwards Gibbert Memorial Scholarship
Wanda L. Culbreth Memorial Scholarship

Medical Dosimetry

Faculty Gold Key

Nuclear Medicine Imaging Sciences

Faculty Gold Key
Greater Gift Award

Radiation Therapy

Darrel Wayne Martin Outstanding Student Award
Doug Meiner Scholastic Achievement Award
Faculty Gold Key
H.O. McKenzie Award

Radiologic Imaging Sciences

Award of Excellence (Little Rock, Texarkana, Fayetteville)
Dr. and Mrs. Cyrus P. Klein Award (Texarkana Only)
Dr. and Mrs. Lee Parker Award (Fayetteville Only)
Dr. Ray Laevell Memorial Award (Texarkana Only)
Faculty Gold Key (Little Rock, Texarkana, Fayetteville)
Kenneth C. Pedersen Scholarship (Little Rock, Texarkana, Fayetteville)
Outstanding Student Award (Little Rock, Texarkana, Fayetteville)
Vicki Lynn Ables Memorial Award (Little Rock Only)

Respiratory Care

Clinical Practitioner Award (Little Rock Only)
Faculty Gold Key (Little Rock and Texarkana)
Peer Award (Little Rock and Texarkana)
Outstanding Academic Achievement Award (Little Rock and Texarkana)

Surgical Technology

Faculty Gold Key
Peer and Outstanding Academic Achievement Award

2.4.3 Graduation with Honors and High Honors

Students whose transcript grade point averages (TGPA) are 3.5 or higher will graduate with honors from the CHRP. Those students whose TGPA's are 3.7 or higher will graduate with high honors. The TGPA is computed after the end of the preceding Fall Semester for students likely to be eligible to participate in the following May Commencement (for listing honors recipients in the Commencement Program) and again at the end of each student's academic program (completion of all requirements for the degree). If the TGPA falls below the requisite level for honors after computation for May Commencement, or if the TGPA subsequently rises to the honors level, the student's final program TGPA will be used to determine eligibility for honors or high honors. This means it is possible a student will be listed in the Commencement Program as receiving honors (due to the submission time for program listings), but will not actually be eligible by the time Commencement occurs, OR, that a student eligible for honors at Commencement will not be listed because the requisite TGPA level was not reached until the end of Spring or Summer Semester. To insure students who earn honors will be so notified and appropriately recognized in their records, students will be notified by mail at the end of their academic program if they have earned honors or high honors, and their final transcripts will list these awards.

2.5 NONCOGNITIVE PERFORMANCE STANDARDS

Students are accountable for conducting themselves as responsible adults. A Student Handbook, available from the Department Chairman, has been developed to aid in this process.

Student Conduct: A College of Health Related Professions student is considered to be a mature adult whose attitude, conduct, and morals are compatible with the functions and missions of the University of Arkansas for Medical Sciences as an educational institution, and with the ethical standards of his/her chosen profession. Each student is expected to comply with requests of University officials in the performance of his/her duties; to obey the laws of the city, state, and nation; and to refrain from conduct which would demean the ethics and integrity of his/her chosen profession.

CHRP Student Responsibilities Code: Failure to comply with the requirements of any code item could result in a conference with the Department Chairman or his/her designee to discuss the difficulty. Should a conference be held and the problem continues after the conference, the Chairman will place the student on disciplinary probation or dismiss him/her from the Department and the College. In very serious cases, the Chairman may dismiss the student immediately after the conference. The following is a description of the principal noncognitive responsibilities of students in the College:

1. Come adequately prepared for class.
2. Attend all classes, laboratories, and clinical/field experiences, as scheduled, unless previous arrangements have been made with the instructor or Department Chairman.
3. Request instructor/student conferences when needed.
4. Treat patients and co-workers justly and impartially, regardless of their sex or their physical, mental, emotional, political, economic, racial, or religious characteristics.
5. Maintain a non-biased, open point-of-view during class sessions.
6. Request and take makeup examinations, if permitted by the instructor, within the specified period of time for the given course.
7. Act as a favorable role model for your chosen health profession at all times.
8. Be responsible for the condition of the instructional area during and at the completion of a class session.
9. Refrain from smoking, eating, or drinking in classrooms or in specifically designated areas during class or clinic sessions.
10. Maintain and arrange class materials in a form that will be usable in the future as a professional reference.
11. Attempt to resolve concerns and questions in a courteous and informal manner, utilizing only when necessary grievance procedures according to the published rules.
12. Adhere to the student responsibilities required by the program in which enrolled.
13. Maintain academic integrity (see Academic Integrity Statement in the Student Handbook) by doing one's own work.

The University of Arkansas for Medical Sciences, College of Health Related Professions reserves the right to dismiss a student at any time on grounds the University and College judge to be appropriate. Each student by his own admission to the College recognizes this right of the University and College.

The continuance of any student on the roster of the College, the receipt of academic credit, graduation, and the granting of a degree or certificate rest solely within the powers of the University and College.

2.6 OFFICE OF STUDENT AFFAIRS

The CHRP Office of Student Affairs is staffed by the Associate Dean for Academic/Student Affairs, the Director of Student Affairs, Registrar, and the Admissions Officer. The Office assists the Dean and the academic departments in the recruitment, selection, and admission of students; student retention; maintenance of student records; and other student affairs. The Office is located in the CHRP Dean's Office suite on the first floor of the Winston K. Shorey Building. The Office is open 8:00 AM - 4:30 PM, Monday through Friday. Appointments may be made by telephoning (501) 686-5730.

2.7 STUDENT COUNCIL

2.7.1 Constitution

Article I (Name)

The organization shall be named the Student Council of the University of Arkansas for Medical Sciences, College of Health Related Professions.

Article II (Purpose)

The purpose of this Student Council shall be to assist in the development of policies for students; determine ways to communicate policies to students; select representatives to appropriate College committees; and assist in planning student affairs, such as social activities, orientation, reception for friends and parents at graduation, field trips, reception during orientation, and College-wide awards convocations, or other such student affairs as seems appropriate.

Article III (Membership)

Membership in this Student Council shall consist of two elected representatives from each Department in the College of Health Related Professions; a voting member and an alternate, both selected by a method determined by each Department. For Departments with students in more than one professional year, it is preferable that the alternate member be a beginning student who will become the voting member upon entering the second professional year. Alternate members will attend meetings of the Student Council but will vote only in the absence of the voting member.

Each class representative must attend the monthly meeting. The alternate must attend if the representative cannot attend the meeting. If the representative misses three meetings, the alternate becomes the representative and the class will elect a new alternate.

Each Department is to have one representative on the Associated Student Government Council. The voting members of the Student Council of the College of Health Related Professions will represent their respective Departments on the Associated Student Government Council.

Article IV (Meetings)

Section 1

Regular meetings of the Student Council shall be held monthly during the fall and spring semesters.

Section 2

Special meetings shall be called at any time by the President, by a majority vote of the Student Council, or by a written request of twenty members of the student body of the College of Health Related Professions. This meeting must be publicly announced at least one week prior to the meeting date.

Article V (Officers)

Section 1

The officers of this group shall be a President, a President-Elect, a Secretary, and a Treasurer, selected from the voting members. Candidates for the position of President-Elect must be students in the first year of a two-year academic program.

Section 2

The officers of this Council shall be elected by majority vote by the voting members of the Council. Voting members of the Council shall elect a President-Elect, a Secretary, and a Treasurer at the first regular meeting of the school year. The President-Elect from the previous year shall assume the position of President. In the event that the President-Elect does not return for a second year, the voting members shall elect a President.

Section 3

Vacancies in office may be filled at any regular meeting by vote of the Council.

Article VI (Amendments)

The Constitution and By-laws may be amended by a two-thirds majority of the votes cast by the student body and approved by the Associate Dean for Student Affairs.

2.7.2 By-Laws

Article I (Duties of Officers)

Section 1

The duties of the President are to

1. preside at all meetings of the Council;
2. officially represent the student body of the College of Health Related Professions;

3. appoint any committees necessary to conduct the functions of the Student Council;
4. alert the Council members in writing when a special meeting is to be held and to state the purpose of the session.

Section 2

The duties of the President-Elect are to

1. act for the President in his/her absence;
2. perform other duties as assigned by the President;
3. serve as an apprentice for all duties of the President.

Section 3

The duties of the Secretary are to

1. keep minutes of all meetings;
2. notify all officers of their election and committee members of their appointments;
3. present a written annual report at the last regular meeting of the academic year.

Section 4

The duties of the Treasurer are to

1. pay all bills and keep a record of all moneys received and expended, giving a report at each meeting;
2. coordinate solicitation of funds (e.g. fund-raising efforts, student activity funds, etc.).

Section 5

All officers, upon retiring, shall deliver to their successors all accounts, records, books, papers, or other property belonging to the Student Council.

Article II (Quorum)

A quorum shall consist of two officers and at least one representative from each of six Departments.

Article III (Passage of Motion)

Passage of all motions shall require an affirmative vote by at least one-half of the voting members present.

SECTION 3.0

STUDENT SERVICES

3.1 GENERAL SERVICES

The following is an alphabetical listing of some of the services available to students of the College. It is intended as a brief introduction of what is available and where to go for further information.

Advising, Academic: Comprehensive academic advising is available from the faculty. Because of the small faculty to student ratio, faculty are able to provide advising and/or tutorial assistance directly and in the early stages of academic difficulty. If unable to provide the assistance necessary, the faculty member refers the student to the department chairman or division director. If additional assistance is needed, the Associate Dean for Academic and Student Affairs is available upon referral from the department chairman.

Razorback Football Tickets: The UAMS Student Activities and Housing Office offers UAMS students a chance to purchase discounted Razorback football tickets to the Little Rock games, using a lottery method approved by the ASG. Students can sign up for the lottery at their fall registration. Contact the Student Activities and Housing Office at (501) 686-5850 for more information.

Automatic Banking Tellers: Banking services are available via automatic tellers located in the lobbies of the University Hospital of Arkansas. Automatic teller machines are also located on the ground floor of the hospital near the cafeteria.

Counseling Services: See Section 3.16.6, page 22.

Dental Hygiene Services: Dental hygiene care is available at the Dental Hygiene Clinic, Room S1/23 of the Shorey Building. Services include teeth cleaning, diagnostic radiographs, and fluoride applications. For appointments, call (501) 686-5733. A modest charge is assessed for the various services.

Educational Development Services: Assistance in areas such as study habits and test taking skills is available. For appointments, call the UAMS Office of Educational Development at (501) 686-7349.

Library Services: Call (501) 686-5980 for further information. See also pages 15-18 for a list of specific services.

Pharmacy Services: Students receive discounts on prescriptions filled at the UAMS Ambulatory Care Center Pharmacy. For details, call (501) 686-5530.

Speech and Hearing Clinic: The College cooperatively sponsors a clinic for clients with communicative disorders. Speech, language, literacy, and hearing evaluations, and therapy are available to students at reduced rates. The clinic also offers assistive listening devices, audiologic rehabilitation, and hearing aid services. This clinic is located at the University of Arkansas at Little Rock (UALR). For further information, call (501) 569-3155.

Student Health Service: See Section 3.16, pages 21-24.

Transcript Services: Transcripts of undergraduate work may be ordered from the CHRP Office of Student Affairs, Room S1/04 in the Shorey Building. Call (501) 686-5730. There is a \$2.00 charge for transcripts after the first request.

3.2 FOOD SERVICES

Cafeteria: Located on the ground floor of the University Hospital of Arkansas. Cash and traveler's checks only; personal checks are not accepted. A twenty percent (20%) discount is given to students who wear a UAMS student ID badge. The cafeteria hours are:

Breakfast	6:30 – 9:30 AM Monday through Friday 6:30 – 9:00 AM Saturday, Sunday, and Holidays
Lunch	10:45 AM – 2:00 PM all week
Dinner	4:30 – 7:30 PM Monday through Friday 4:30 – 7:00 PM Saturday, Sunday, and Holidays

Gourmet Bean: 6:30 AM – 4:00 PM Monday through Friday
9:00 PM – 12:00 AM all week – Closed on Holidays
(First floor, Ward Tower)

Sage Deli: 10:45 AM – 4:00 PM Monday through Friday – Closed on Holidays
(Ground floor of main hospital near cafeteria)

Generations Cafe: 8:00 AM – 4:00 PM Monday through Friday
(Operated by D's Catering) (Ground floor, Donald W. Reynolds Institute on Aging)

Boulevard Bread Company: 7:00 AM – 3:00 PM Monday through Friday
(First floor, College of Public Health Building)

Canteen: Vending machines are available in the canteen 24 hours per day for the convenience of students, faculty, and staff. The canteen is located on the Hospital ground floor. Change machines are available.

3.3 EDUCATION II & College of Public Health (COPH) BUILDINGS

Many classes are held in the Education Building II (ED II) and in the COPH Building. The floors in ED II are numbered using a system designed to make the various levels in ED II coincide with the floors in the Shorey Building (ED I). Since the individual floors in the two buildings are not the same height, two levels (4 and 7) were omitted in ED II and COPH.

Two levels in ED II (containing the Lecture Center and Creative Services) are below ground. The lower one (two floors below street level) is labeled "B". The level above B (corresponding to the lowest level in the Shorey Building and the Hospital and one floor below street level) is labeled "G".

The street level entry into ED II on the south (Library entrance) is labeled "1". The next two floors, going up, are "2" and "3" (both are occupied by the Library). There is no 4th floor in ED II or COPH, and the next floor above "3" is the 5th floor. The 5th floor is occupied by the College of Nursing (both buildings) and the Learning Resource Center. The next floor up is "6" and is occupied entirely by the College of Pharmacy (both buildings). There is no 7th floor. The 8th and 9th floors are occupied by the teaching laboratories, student lounges, classrooms, and the administrative offices of the Office of Academic Services (8/141 and 8/145) and the Office of Academic Computing (8/147 and 8/102).

The "damp" laboratories are on the 8th floor (laboratories 8A-8D), while the "wet" laboratories are on the 9th floor (laboratories 9A-9D). There is no 9th floor in the COPH.

To summarize, floors in ED II and COPH are (starting from the lowest): B, G, 1, 2, 3, 5, 6, 8, 9.

The following room numbering system is used in Ed II and COPH.

1. The first two characters of the number indicate the building ("E2" in the case of ED II, no letter designations in the case of COPH).
2. The third character indicates the floor.
3. The remaining characters (if alphabetical designators are required) designate the individual rooms on the floor.

For example:

"E2/G/131A" is interpreted as "ED II Building/the floor immediately below street level/Room 131A".

"E2/B/108 A/B" would translate "ED II Building/the lowest level of ED II/Rooms 108 A and B".

The COPH Building is attached to ED II, with the first floor containing classrooms and lecture halls. The numbering of the classrooms are in the "200s" and are located in a circle around two large lecture halls. Floors (3-8) house the College of Public Health with College of Nursing offices on the fifth floor, College of Pharmacy offices on the sixth floor, and the Center for Clinical Skills Education on the eighth floor.

3.4 LOCATION OF SELECTED CAMPUS UNITS

	<u>Floor</u>
3.4.1 Winston K. Shorey (formerly Education I) Building	
Anatomy Department	9
Anesthesiology Department	2
College of Health Related Professions Office	1
College of Nursing Offices	8
Cytotechnology Offices and Laboratory	8
Decision Sciences Laboratory	6
Dental Hygiene Offices	8
Dental Hygiene Clinic	1
Dermatology Department, Administration	6
Health Information Management Offices and Classroom	8
James N. Pasley, College of Medicine Educational Advancement	6
Internal Medicine Department and Administrative Offices	3
Obstetrics and Gynecology Department	5
Office of Educational Development	G
Orthopedics Department	2
Pathology Department	4
Surgery Department	2, 7
Surgical Pathology	4
Urology Department, Administration	6
3.4.2 Education II Building	
Audiovisual Services	B
Classrooms	B, G
College of Nursing Office	5
College of Pharmacy Office	6
Drug Information Center	6
Lecture Amphitheaters	G
Library	1
Creative Services	B
Office of Educational Services	8
Poison Control Center	6
Tunnel to Hospital and Shorey	G
Teaching Laboratories	8, 9
3.4.3 Fay W. Boozman-College of Public Health Building	
Classrooms	G
College of Nursing Offices and Classrooms	5
College of Pharmacy Offices	6
College of Public Health Offices, Laboratories, and Classrooms	1, 2, 3, 6
College of Public Health Auditorium	8
Gross Anatomy Laboratory	B
Student Financial Services	1
UAMS Fitness Center	8
3.4.4 Education South Building	
Dietetics and Nutrition	1
Emergency Medical Sciences Offices	2
Medical Technology Offices	3
Nuclear Medicine Technology Offices	3
Radiologic Technology Offices	2

3.4.5 Other Units

College of Medicine Offices
Police Department
Family Medical Center
Treasurer

Hospital, M1/1000
Distribution Center, 7th and Cottage
521 Jack Stephens Drive
Hospital, M1/092

3.5 EMERGENCY TELEPHONES

Emergency telephones have been installed on campus for immediate access to the UAMS Police Department at any time of the day or night. Revolving blue lights mark telephones throughout the campus. If you need help or want to report any unusual situation, open the telephone box door and lift the receiver; a Police officer will answer.

3.6 IDENTIFICATION (ID) CARDS

A student ID badge with photograph will be made during the initial registration process. The ID badge entitles students to use the UAMS Library and obtain tickets to University functions at student rates. **It should be worn at all times while on campus (including at AHECs and other UAMS sites).** If the badge is lost or damaged, or if your name changes while you are a student at UAMS, you may purchase a replacement badge from Creative Services, located in ED II/B/142. ID badges are made on Monday, 3:00 - 4:00 PM; Tuesday, 8:00 - 8:30 AM; and Thursday, 8:30 - 9:00 AM. The fee for a replacement badge is \$11.00.

3.7 LIBRARY

Library Web Site: <http://www.library.uams.edu>

The UAMS Library serves the faculty, staff and students of all colleges on the campus as well as the staff of the University Hospital. It also extends reference and borrowing privileges to health care practitioners throughout Arkansas either directly or through the Area Health Education Center (AHEC) Libraries. The collection and services are designed to fill the education, research, and patient care needs of all of its users.

Computers in the Library provide access to the Library catalog and online resources and the Internet. Printing is available for a small charge. Additional computers and educational resources are available in the Library Learning Resource Center (LRC) for student use. See below for more information about the LRC. All computers in the Library and the Learning Resource Center are covered by the UAMS Acceptable Use Guidelines - Student Use of UAMS Network and Computer Resources.

The Library provides wireless connectivity for laptops, PDAs, and cell phones throughout the Library. Anyone with a wireless-enabled device can connect to the Internet via the UAMS wireless network by entering his or her email address and signing on as 'Guest'; however, students must contact the HELP desk (501) 686-8555 to configure their wireless-enabled devices before connecting to a UAMS network or Intranet. If you have additional questions please contact the Library Technical Support Team (501) 686-8822.

Regular Library Hours:

Monday through Thursday	7:30 AM to Midnight
Friday	7:30 AM to 6:00 PM
Saturday	9:00 AM to 6:00 PM
Sunday	2:00 PM to Midnight

Special Library hours during holidays are posted in advance in the Library and on the UAMS Library Web site (www.library.uams.edu). The LRC closes at 10:00 PM on Sunday through Thursday when classes are not in session in the summer. The LRC may close or be open fewer hours than the Library itself at other times when classes are not in session.

When the Library is closed, materials may be returned to the book drops located outside the northeast corner of Education II and on the west side of the Education II south lobby.

3.7.1. UAMS Library Web Site and Remote Access

The UAMS Library Web site is available at <http://www.library.uams.edu>. The Web site includes links to information about the UAMS Library; library services, collections, and databases; links to the online databases; the Library's online catalog and other library catalogs in Arkansas and the U.S., and many other electronic reference and research materials. Information about copyright and the UAMS copyright policy and guidelines for avoiding plagiarism are available on the Library Web site. Additionally, links to other Internet resources, including subject-oriented health sciences sites, are provided. The Library adds new resources to the site on a regular basis.

UAMS students can use their UAMS network domain accounts and password to access most of the Library's electronic resources, including databases, electronic books and journals, eReserves, and LRC materials from off campus.

3.7.2 Checkout of Materials

Students must present a current UAMS student ID badge to check out Library materials. Replacement badges may be obtained at from the UAMS Creative Services Department.

Standard Loan Periods

Reserve Items	Print items normally check out for two hours of use in the Library.
Books	Up to 10 books at a time may be checked out for two weeks. A book may be renewed two times after the original due date unless another patron has requested the material by placing a hold on the item.
Reference, Core	May not be checked out
Journals	May not be checked out
Abstracts, Indexes	May not be checked out
AVs, CD-ROMs	May be checked out for three working days unless restricted.

Fines for overdue books are \$1.00 per day per book with a maximum fine of \$100.00. Courtesy notices are sent through e-mail three days prior to the due date. Renewals may be requested by replying to the courtesy notice, telephoning the Circulation Desk (501) 686-5980 during operating hours, completing the online form on the Library Web site, or in person.

If items are not returned, four notices are sent. The first notice is sent via e-mail the day after the book is due. The final notice is a bill for the replacement cost of the item and overdue fines incurred plus a \$15.00 billing and processing charge. Borrowing privileges are suspended and will not be reinstated until 1) the materials are returned and fines are paid, or 2) in the case of lost materials, replacement cost and all fines are paid.

3.7.3 Special Collections

Reserve Collection: Print materials instructors select to support lectures and class assignments are housed behind the Circulation Desk. Items may be checked out for two hours but must be used in the Library.

eReserves: Digital materials, such as images, PowerPoint presentations, and documents, placed on reserve for students are available from the electronic reserve component on the Library Web site. These materials are password-protected to allow access only to students enrolled in the courses.

Reference Collection: Non-circulating reference materials are housed on the first floor of the Library. Ask at the Reference Desk for help in locating items or information. The Robert Watson Room houses historical directories, statistical resources, and biographies.

History of Medicine Collection: Works pertaining to the history of medicine around the world are located on the second floor in the Historical Research Center. The Archives Collection, also located in the Historical Research Center, contains records documenting the history of UAMS and the health sciences in Arkansas.

Core Collection: This small collection of non-circulating, heavily used, basic materials, primarily recent textbooks, covers all areas of the health sciences. The collection is adjacent to the Reference Desk, and is used as a quick reference source. Duplicate copies of most of these books may be found in the Book Collection on the third floor.

3.7.4 Reference Resources and Services

Reference Services staff are available at the Reference Desk on the first floor of the Library Monday through Friday, 7:30 AM - 6:00 PM to help students make the most efficient use of the Library. They will be happy to provide instruction in Library use. There is no charge for basic reference services.

Online Catalog: Records for all the books, audiovisuals, journal titles, and computer-based instructional programs the Library owns are included in the online catalog, as well as records for books owned by some departmental libraries and the libraries at Arkansas Children's Hospital and the AHECs. The catalog may be searched on computers in the Library or remotely over the Internet. Printers are provided with Library computers. There is no charge for use of the online catalog, but there is a small charge for printing from the computers.

Online Resources: The Library Web site serves as gateway to a variety of online resources including bibliographic databases (including CINAHL, Evidence-Based Medicine Reviews, Health & Psychosocial Instruments, International Pharmaceutical Abstracts, PsycInfo and MEDLINE); clinical reference tools (including Clinical Pharmacology and UpToDate); electronic books (including a variety of nursing and medical specialty textbooks); and electronic journals. Most of these resources are available both on- and off-campus.

Mediated Computer Searching: Librarians can search in any of over 500 databases available in all subject areas. Requests for this free service may be submitted at the Reference Desk on the first floor of the Library, submitting a request via the "Ask a Librarian" section of the Library Web site, or by calling (501) 686-6734.

Library Research Instruction: The Library offers Library Research Instruction at the request of faculty, staff or a group of students. Instruction can be tailored to meet specific research needs, including both print and electronic resources. Call (501) 686-6737 for more information.

3.7.5 Interlibrary Loans

The Interlibrary Loan staff will obtain materials not available in the UAMS Library from other libraries and commercial document suppliers. Interlibrary Loan requests must be submitted through the ILLiad section of the Library Web site. ILLiad requires a one-time registration. There is a \$5.00 fee per item for all interlibrary loans filled. The Library will absorb up to \$30.00 of the loan fee for any item; however, all costs above \$30.00 will be the responsibility of the requester. For more information, please call (501) 686-6742 between the hours of 7:30 AM and 5:00 PM Monday through Friday.

3.7.6 Photocopiers, Copy Cards, and Printing

Self-service photocopiers are available in the Photocopier Room on the first floor of the Library. The cost per copy is 10 cents.

Copy cards may also be used for photocopies and may be purchased at the Library Circulation Desk. The minimum price for a copy card is \$1.00 purchased at the Circulation Desk or \$5.00 from the vending machine located in the copy room. Each card may be revalued in any amount through the Circulation Desk.

A copy card is required for printing. Printing is 10 cents per page. Color printing is available at \$.30 cents per page.

3.7.7 Group Study Rooms

The UAMS Library has seven group study rooms available, three on Level 2 and four on Level 3. These rooms may not be reserved but are available on a first come-first served basis and are intended for use by groups of two or more persons. Markers for the white boards in the rooms are available for checkout at the Circulation Desk.

3.7.8 Food Policy and 'Recovery Room' Lounge

Food is allowed in all areas of the Library except at the computer workstations; however, the Recovery Room Lounge is specifically designated as the appropriate place for eating meals or hearty snacks. Library users must meet food delivery people outside the Library; Library staff will not use the Library PA system for notification of food deliveries or allow delivery people inside the Library. Library users must dispose of their trash in the large wastebaskets provided, and they must keep the Library environment clean, sanitary, and pleasant by using the paper towels and hand wipes provided.

3.7.9 Learning Resource Center (LRC)

The LRC is located on the 3rd and 5th floors of the Library. Although the LRC is open the same hours as the rest of the Library during the fall and spring sessions, the LRC closes earlier on Sunday through Thursday nights during the summer break.

Testing: Tests delivered via computer are often given in the LRC. Some tests may be scheduled at specific times, and some tests may be given at anytime over a specified period. Students must check in with the LRC staff for access to the test. Areas frequently used for testing are monitored by video camera.

Audiovisuals: Audiovisual materials and equipment are available for student use in the LRC at the north end of the 3rd floor of the Library. The audiovisual collection includes slide sets, videotapes, audiocassettes, and models. Audiovisual materials not on reserve for classes or restricted by licensing agreements are available for 3-day checkout. The LRC does not lend equipment.

Group Viewing Rooms: Three group viewing rooms on the 3rd floor have audiovisual and computer equipment for use by small groups of students. Preference is given to groups using audiovisual or computer-based materials.

Computer Laboratories: All LRC student computer laboratories provide access to a wide variety of computer-based educational resources as well as Microsoft Office applications, Internet access, e-mail, and access to the Library's electronic resources. Some programs on CD-ROM may be checked out, and some of the programs are available over the Internet from locations off-campus. Check with the LRC staff on availability. The computer laboratories include:

- ♦ Computer areas on the 3rd and 5th floors of the Library. In addition to the above mentioned resources, the 5th floor laboratory computers provide scanning and image manipulation programs to assist students in preparing presentations. A PDA "hotsync" station is available on the 5th floor and assistance with PDAs is available from 8:00 AM to 5:00 PM Monday through Friday.
- ♦ A 24 hour/7day a week computer area accessible from the north hallway on the 5th floor. The entrance to this facility is secured by a card-swipe access control device. A current student UAMS ID badge is required to gain entrance. In addition the facility is monitored via a security video system.

3.8 MAIL SERVICE

3.8.1 Interdepartmental Campus Mail

Campus mail can be sent free of charge by dropping the letter or package at the Mail Room G900 near the Hospital Cafeteria or in any departmental office. The Mail Room window is open daily between the hours of 8:00 AM – 4:00 PM Monday through Friday.

3.8.2 U.S. Mail

Mail addressed to Dormitory residents is sorted and placed in "pigeon holes" outside the Student Activities and Housing Office to be collected by the student.

3.9 OFFICE OF EDUCATIONAL DEVELOPMENT (OED)

Dr. Judy Garrett, Learning Assistance Program Director (501) 686-7349

OED provides two types of academic assistance: 1) learning skills assessment and help in developing good study skills, 2) peer tutoring.

Learning skills sessions are designed to provide general information such as ways to learn and apply information, how to improve test-taking skills and study methods to get the most out of lectures and laboratories. Other types of 'learning skills' sessions are also available where you can actually do weekly assignments that will help you develop study skills such as condensing and organizing materials, checking your understanding, or visualizing information. Each assignment will be checked so you can follow your progress in developing these skills. Since assignments are based on current course material, you will actually be studying while you improve your study skills. Although these sessions are available at any time during the semester, they are most helpful during the first few weeks of the semester if you are concerned about your science background or have been out of school for awhile. To schedule a 'learning skills checkup' to help you examine your study strategies for specific courses, call (501) 686-7349 or email Dr. Garrett at GarrettJudithE@uams.edu.

The peer-tutoring program is staffed by students who have already successfully completed a course. Availability is based on the number of qualified students who are willing to tutor, generally 1-2 per program. If you think a tutor would be helpful, the first step is to talk to your instructor. If your instructor agrees and knows a qualified student who is willing to tutor, he/she will call OED, recommend a tutor, and then tell you how to contact that student.

There is no charge for peer tutoring. Since only a limited number of students are available to tutor, tutoring is usually done in small groups (generally 2-4 students). Tutoring sessions are done on a regularly scheduled basis (usually once a week) for about 90 minutes. Tutors do not repeat lectures but focus on reasons why students may not do well in UAMS courses, such as not understanding which concepts are important or how they will be tested. Tutors ask questions over course materials which are similar to those on actual examinations. Answering these questions will give you an opportunity to check your understanding and will help you and your tutor to identify and correct weaknesses in your understanding of course material.

Dr. Garrett's office is located on the sixth floor of the College of Public Health Building in Room 6239. Dr. Garrett can be reached by telephone at either (501) 686-7349 or by email (GarrettJudithE@uams.edu).

3.10 OFFICE OF ACADEMIC SERVICES (OAS)

Dr. Kenneth Wagner, Associate Vice Chancellor (501) 686-5575

Administrative Offices (501) 686-5575

The OAS is located in ED II, Room 8/141 and 8/145, and is responsible for the logistic support of curriculum delivery for the campus. Such functions include: Classroom and Teaching Laboratory Support, Instrumentation Laboratory Repair, Telemedical Communications (Interactive Video-Conferencing), Room Scheduling, Audiovisual Services, Teleconferencing Activities, and Microscope Rental and Locker Assignments.

3.11 CREATIVE SERVICES

Tim Irby, Interim Director (501) 686-5570

Creative Services is a division of the Office of Communications and Marketing. The following services are available to assist students in the effective use of communications media:

Graphic Design: Design and production of charts, graphs, displays, posters, original art, and calligraphy. Writing and editing services are also available.

Photography and Imaging: Student photographs are taken during Fall registration for use in the yearbook and inclusion in a class composite print. Students may purchase a composite from Creative Services, located in ED II B142.

Printing: Production of a wide variety of printed matter, including booklets, brochures, and announcements.

Video and Audio: A full production studio is available for audio and visual projects. CD/DVD duplication are also available.

For more information about these services and their cost, contact Creative Services, ED II B142 at (501) 686-5570.

3.12 OFFICE OF STUDENT ACTIVITIES AND HOUSING

Cheri Goforth, Director (501) 686-5850

Health Insurance: Full-time students admitted to a CHRP degree or certificate program must have major medical health insurance coverage at all times. During registration, students may purchase insurance coverage through the University sponsored plan or sign a wavier stating that they have major medical coverage insurance through private sources. Students are encouraged to confirm their existing insurance coverage or obtain such coverage prior to registration.

IN ORDER TO COMPLETE REGISTRATION, THIS REQUIREMENT MUST BE MET. STUDENTS MUST SIGN A WAVIER STATING THEY HAVE COVERAGE OR PURCHASE COVERAGE AT REGISTRATION.

If the student's insurance lapses after registration, the University will assume no responsibility for expenses incurred for health care services rendered to the student or his/her dependents. Lack of required health insurance may also affect student status.

Students admitted as Nondegree/Noncertificate students are strongly encouraged, though not required, to purchase health insurance through a private source. **The University will assume no responsibility for expenses incurred for health care services rendered to these students or their dependents.**

Student Liability Insurance: The CHRP requires **all students** to purchase liability insurance effective during their enrollment in any course requiring active participation in a patient care setting. Students should contact the Department Chairman for current information regarding this requirement.

3.13 PUBLICATIONS

3.12.1 The Caduceus

The Caduceus is the UAMS yearbook and is published annually. Full-time students and all graduates are entitled to one copy.

3.12.2 The UAMS Update

The UAMS Update is produced monthly by the Office of Communications and Marketing. It contains information of interest to UAMS staff and employees.

3.12.3 CHRP Webpage

The CHRP webpage can be accessed through the UAMS homepage on the Internet. The homepage Web site is www.uams.edu.

3.14 RECREATIONAL SERVICES

3.14.1 Intramural Sports

The Associated Student Government (ASG) assists with organizing student events and intramural sports. The ASG meets the second Monday of each month in ED II/G110 A/B beginning at 12:00 noon. Lunch is served, and students are informed about upcoming events and insurance changes. The intramural sports offered include: flag football, basketball, softball, and golf tournaments. Information can be obtained by contacting the ASG representative from each class or by contacting the Assistant Director of Student Activities.

3.14.2 Fitness Centers

Students may join the UAMS Fitness Center located on the eighth (8th) floor of the College of Public Health building. The current fee is \$15.00 per month. For UAMS Fitness Center information, visit the Web site at www.uams.edu/gethealthy.

Students receive a \$10 discount at War Memorial and UALR's Donaghey Fitness Centers. You will have to show proof of your current UAMS enrollment by showing your current student ID badge at those facilities. You must also provide your social security number to receive the discount. Membership is for the UAMS student only, and neither the card nor membership is transferable. This discount is provided by the Office of the Vice Chancellor for Academic Affairs.

3.15 RELIGIOUS OPPORTUNITIES

Chaplain Services: Chaplain George Hankins-Hull, is the Director of UAMS Medical Center Pastoral Care and Clinical Pastoral Education Department. While its pastoral services are primarily directed toward patients, their families, and staff persons, students may also call for short-term personal counseling needs.

The non-denominational Samuel Moore Walton Memorial Chapel is open every day 6:00 AM - 8:30 PM for quiet prayer and meditation and is located on first floor (1E90) of the Hospital next to the Dental Hygiene waiting room. The Pastoral Care office is located on the first floor of the Hospital (1E50) across from the Gourmet Bean. It is open 8:00 AM - 4:00 PM, Monday through Friday. You may reach the Pastoral Care office at (501) 686-5410.

3.16 STUDENT HEALTH SERVICES

3.16.1 Employee Health/Student Preventive Health Services (EH/SPHS)

EH/SPHS provides the following services at no cost to the students:

- Record and Maintain Immunization Records
- Blood Pressure Screening
- Glucose Screening
- Cholesterol Screening
- Weight Tracking
- Tuberculosis Skin Test
- Measles/Mumps/Rubella (MMR) Vaccine
- Tetanus/Diphtheria Vaccine
- Hepatitis B Vaccine Series
- Post-Vaccination Hepatitis B Titers
- Varicella Titer/Vaccine Series
- Influenza Vaccine
- Needlestick/Sharps and Blood/Body Fluid Exposures Follow-up (UAMS Policy HR.4.01)
- Smoking Cessation Programs Information

EH/SPHS is located in the basement of the Family Medical Center (FMC) at 6th and Jack Stephens Drive, across from the Jones Eye Building. EH/SPHS has a separate entrance at the back of the FMC adjacent to the parking lot.

The main clinic is open 8:00 AM to 4:30 PM, Monday through Friday. You may contact the clinic by calling (501) 686-6565. A satellite clinic is located on the 8th floor of the hospital, Room 8035. The satellite clinic is open 7:00 AM to 12:00 PM and 1:30 to 3:30 PM. You may contact the satellite clinic at (501) 686-8810. Both locations are closed on holidays. An appointment is not necessary at either clinic except. Please contact EH/SPHS if you have any questions regarding student services.

3.16.2 Family Medical Center (FMC)

The FMC is located on the UAMS campus on the corner of 6th and Jack Stephens Drive. The FMC offers medical care to students and their families who choose one of the Family Practice Physicians as their Primary Care Physician (PCP). The FMC offers a full range of Primary Care including women's health, newborn, pediatric, and adult care.

Appointments may be made by calling (501) 686-6560. When calling, **please identify yourself as a UAMS student to receive preference in scheduling.** Students under the UAMS insurance plan, QualChoice of Arkansas, are responsible for the co-payment at the **time of check-in** at the FMC. Students who have insurance other than QualChoice of Arkansas are responsible for any deductibles or copayments associated with their insurance.

Call (501) 686-6560 and ask to speak with a manager if you have questions regarding service or billing.

3.16.3 Get Healthy

Get Healthy UAMS is a new program designed to provide an environment that promotes healthy lifestyle habits among all UAMS employees and students. This program includes the Get Healthy UAMS Wellness Center, the hub for all wellness-related activities, programs, events, classes/seminars, materials, and community involvement initiatives. The Wellness Center, located in the College of Public Health, includes a 24-hour gymnasium, on-site management, smoking cessation programs, aquatic classes offered through the Spine Center pool, access to nutritionists, dietitians, trainers, and other health care professionals. For more information, visit the Web site at www.uams.edu/gethealthy.

3.16.4 Dental Hygiene Services

Dental hygiene services are available to UAMS students at a nominal fee. Services include teeth cleaning, diagnostic radiographs, and fluoride applications. The Dental Hygiene Clinic is located in room S1/23 of the Shorey Building. For appointments call (501) 686-5733.

3.16.5 Pharmacy

Students receive discounts on prescriptions filled at the UAMS Outpatient Pharmacy located in the Outpatient Center on the first floor. Call (501) 686-5530.

3.16.6 UAMS Student Wellness Program

Linda Worley, M.D., Medical Director
Barbara Baldwin, L.C.S.W., Lead Therapist
Dayna Hughes, M.D.; Robert Jarvis, M.D.; Janice Summerhill, L.P.C.; Clinical Staff
Meshelle McKaskle-Helms, Program Manager

Introduction: The UAMS Student Wellness Program (student mental health program) is a preventative service created to provide short term, confidential assistance for students who are actively enrolled at UAMS (Little Rock Campus). The purpose of this service is to provide the necessary tools for students to achieve their fullest potential.

Students seek help for depression, anxiety, grief, relationship conflicts, academic difficulties and numerous other issues interfering with their maximal functioning. Seeking care through this service is absolutely confidential. The only exceptions to the strict code of confidentiality (as required by law) include homicidality (planning to kill someone else, or being so severely impaired that patients in your care are in jeopardy), suicidality (planning to kill self) and child abuse. Record keeping is also **strictly confidential** within the student wellness program and does not go into the campus-wide UAMS medical record.

For short-term treatment, there is no financial cost to students seeking care. The service is made possible through the support of the Chancellor of UAMS, and a portion of the student health fee. A utilization report is generated annually to justify continued funding for the service. This report may contain the number of students utilizing the service and describe the types of problems students seek help for. Specific identifying information about the students is NOT released.

Due to the high volume of utilization, students are urged to keep an appointment once it is made or cancel as far as possible in advance to allow other students timely access to services.

Referrals for Long Term Difficulties: Students suffering from major mental illnesses and/or severe substance addiction requiring inpatient hospitalization and/or intensive long-term care will be referred to a community mental health center, the UAMS Psychiatric Clinic, or to appropriate resources in the community. The cost for this level of care is the responsibility of the student (it is important to maintain health insurance coverage without lapse through school to help cover the cost of medications if indicated).

Hours: The Student Wellness Program can be reached by telephone at (501) 686-8408 between 7:45 AM to 4:15 PM Monday through Friday. Students are seen by appointment only. To schedule a confidential appointment, telephone the program manager, Ms. Meshelle Helms at (501) 686-8408. Inform her of the type of problem you are having and how urgently you feel the need to be seen. This will allow Ms. Helms to triage urgent situations immediately and/or schedule each student with the most skilled clinician for his/her particular problem. For an after-hour emergency, call the UAMS operator at (501) 686-7000, identify yourself as a UAMS student with an emergency, and request the operator to page the UAMS Department of Psychiatry resident on call.

Location: The Student Wellness Program is located at 201 Jack Stephens Drive, in a two story grey building. The office suite is on the street level. Ring the doorbell for entry. Parking is available in front in reserved parking spaces #15, #17, #19, and #20 for the duration of the appointment only. Unauthorized vehicles are ticketed and towed to insure parking spaces for those coming for appointments.

3.16.7 Speech, Language, and Hearing Services

The CHRP cooperatively sponsors a clinic for clients with communicative disorders. Speech, language, literacy, and hearing evaluations and therapy are available to students at reduced rates. The clinic also offers assistive listening devices, audiologic rehabilitation, and hearing aid services. The Speech and Hearing Clinic is located at UALR. For information, call (501) 569-3155.

3.16.8 Rape Crisis Hotline

In Arkansas, if a person reports being raped and reports the incident within the first 72 hours to the local police, he or she is entitled to: 1. a free medical/legal exam by a physician from the State Medical Examiner's office who will appear in court, if needed; and 2. free medical care for the first 48 hours.

This service is provided for the Pulaski County area through all local hospitals; in addition, the hotline serves these additional counties: Faulkner, Conway, and Perry. Call Rape Crisis, (501) 801-2700 or 1-877-432-5368, for information on rape prevention and services available to rape victims.

3.16.9 Intervention for the Impaired Allied Health Student Program

1. CHRP Preventive Mental Health Care

The College of Health Related Professions encourages all students to seek confidential help at the first sign of difficulty due to substance abuse. Any student who feels he/she may have a substance abuse problem can voluntarily confide to a faculty member or Student Mental Health (SMH) services (see section 3.15.6). If the student confides to a member of the faculty, the faculty member will refer the student to SMH for a confidential evaluation. A student who is self-referred or referred by a member of the faculty will receive confidential short-term mental health care provided by SMH. If the SMH evaluation finds the student's

substance abuse problem beyond the SMH scope of practice, the student will be referred to resources within the community that may be able to offer the student proper care and treatment. If the SMH evaluation finds the student impaired due to substance abuse, SMH will recommend an appropriate treatment plan for the student. If the student is compliant with the treatment plan recommended by SMH and the student's impairment is no longer an issue, no further action will be taken. If the student fails to comply to the treatment plan recommended by SMH, the CHRP Substance Abuse Policy will be implemented, and SMH will forward a report of the action to the Associate Dean of Academic and Student Affairs.

2. CHRP Substance Abuse Policy

If a faculty member or the director of Student Mental Health (SMH) suspects a student of impairment due to substance abuse, the student will be required to submit to an immediate drug screen and will be referred to SMH services for evaluation. SMH will forward a report with treatment recommendations and the results of the drug screen to the Associate Dean for Academic & Student Affairs to be placed in the student's permanent record. The student must comply with the treatment plan recommended by SMH to continue in his/her respective program. A student who is identified under the CHRP Substance Abuse Policy is subject to periodic random drug screening as long as he/she is a student at the University of Arkansas for Medical Sciences. Any subsequent drug screening that is reported as "positive" will result in the immediate dismissal of the student. The refusal of the student to submit to the drug screen or SMH evaluation and/or recommended treatment plan will result in immediate dismissal of the student.

3.17 UNIVERSITY BOOKSTORE

The UAMS Bookstore serves the campus by providing the most-up-to-date medical reference books and textbooks available. A 10% discount on books is given to students with proper UAMS I.D on textbooks required for the current semester only. Special orders for books not in stock are gladly taken, and prepayment is required. The Bookstore also carries consumer health titles and gift books. In addition to books, other merchandise carried by the Bookstore includes academically-priced computer software, accessories and peripherals; assorted soft-goods including T-shirts, sweatshirts, jackets, lab jackets (plain or monogrammed); supplies such as notebooks, postage stamps, pens and pencils, etc.; candy; cosmetics; prepaid phone cards; gift items with the UAMS insignia; Arkansas Razorback items; Aromatique; Burt's Bee; Dr. Treatric's Ominbalm; greeting cards; magazines; diploma frames; and medical equipment. The UAMS Bookstore is located at 200 Hooper Drive, across from the College of Public Health Building and is open 8:00 AM - 4:30 PM, Monday through Friday. The Bookstore accepts cash, personal checks with a valid drivers license, Visa, Mastercard, American Express, and Discover cards. Telephone: (501) 686-6160, fax: (501) 686-7209, and e-mail: Bookstore@uams.edu. The Bookstore also has online shopping available at www.uamsbookstore.com.

3.18 UNIVERSITY GIFT SHOP

The Gift Shop carries such items as magazines, books and gift items. The Shop is located on the main floor of the Harry P. Ward Hospital Medical Tower, off the lobby, and is open from 9:30 AM - 7:00 PM, Monday through Thursday, and 9:30 AM - 3:45 PM Friday. Telephone (501) 686-5519.

3.19 UNIVERSITY DEVELOPMENT AND ALUMNI AFFAIRS

The Division of Development at UAMS is a part of the Office of the Chancellor. The mission of this division is to present in priority order the needs of the institution to individuals, corporations, foundations, and organizations capable of supporting the university through philanthropy. Fund-raising activities include planned giving programs, major gifts solicitations, the Annual Fund, the Chancellor's Circle and Roundtable, and special campaigns. "Friend-raising" activities include donor relations and record keeping. The telephone number is (501) 686-8200.

3.20 UNIVERSITY COMMUNICATIONS AND MARKETING

The Office of Communications and Marketing tells "The UAMS Story" to many constituencies along the lines of the university's mission statement – To Teach, To Search, To Heal, and To Serve. The office is a separate department with UAMS, headed by the Vice Chancellor for Communications and Marketing, who reports to the Chancellor. The Office is responsible for all internal and external communications planning, public relations, news releases and relationships with the media, and advertising/marketing programs. It is also responsible for electronic communications, including the UAMS Web site. News and information is presented in many formats, including "UAMS Update" (the employee newspaper); booklets/brochure; radio, TV, and print programs; and through the Internet and Intranet. Information is distributed through local, regional, and national print and electronic media organizations to the public and selected constituencies of the university. The telephone number is (501) 686-8990. For information on guidelines for communications, refer to the section on "Communications" in the Administrative Guide on the intranet at <http://uams.edu/AdminGuide/Win13101.html>.

3.21 CHILD CARE FACILITIES

Arkansas Department of Health and Human Services-approved child care facilities are available by contacting the Division of Child Care and Early Childhood Education or accessing the Web pages of the licensed child care facilities at the following: www.accessarkansas.org/childcare/.

3.22 UAMS POLICE

The UAMS Police Department is located at the Distribution Center, 800 Cottage Drive. The UAMS Police Department operates 24 hours a day, seven days a week. The Police Department is dedicated to protecting the students, employees, patients, and visitors, as well as the property of UAMS.

The UAMS police officers that you see patrolling the campus complex are not to be confused with security guards. UAMS officers are sworn, certified, and trained in accordance with Arkansas State Standards. They have full police powers of authority and arrest.

The UAMS Police Department, in compliance with the "Student Right-to-Know" and "Campus Security Act", has added this annual security report to its list of printed material that is distributed to our campus community. UAMS Crime Statistics are compiled in accordance with the definitions of the FBI's Uniform Crime Reporting System in which the UAMS Police Department has participated since March of 1979. For a copy of the current security report, you may access it at the following Web site: <http://www.uams.edu/police>.

SECTION 4.0

RULES AND POLICIES

4.1 AUTOMOBILE REGISTRATION

All faculty, students, and staff of the UAMS who park on campus at any time are required to register their vehicles with UAMS Parking Operations and display the appropriate registration decal on the vehicles. Dormitory residents normally register vehicles during fall semester academic registration. Requirements for vehicle registration are a completed registration form and a State Vehicle Registration (pink slip). Students can purchase an after 5:00 PM decal. This decal will allow any student to park on the A-level of the North parking deck between 5:00 PM and 7:00 AM Monday - Friday, and anytime on weekends. These are available at registration or through the Parking Operations Office located at the UAMS Distribution Center, 800 Cottage Drive (adjacent to Ricks Armory), Monday through Friday, 7:30 AM - 4:00 PM.

4.2 PARKING

All parking on campus is controlled. Commuting students may park at War Memorial stadium or Lot 10 with a proper permit and ride the shuttle bus to the UAMS campus. The shuttle bus runs 6:00 AM - 7:30 PM, Monday through Friday, with exception of UAMS holidays. For further parking information, call UAMS Parking Operations (501) 526-PARK (7275) or check the Web site at www.uams.edu/parking.

4.3 HOUSING

A newly constructed residence hall opened in the fall of 2006. Room descriptions, rates, and application procedures can be found on the Student Activities and Housing Web site: www.uams.edu/studentlife (click on "Student Housing").

4.4 STUDENT INSPECTION OF PERSONAL RECORDS

Federal regulations and University of Arkansas policy require an annual notice that informs students of their rights regarding personally identifiable records. A student at the UAMS has the following rights with regard to his/her education records:

1. The right to inspect and review the student's education records, with some exceptions under the Act, within 45 days of the day the University receives a request for access. Students should submit to the appropriate official written requests that identify the record(s) they wish to inspect. The appendix to University-wide Administrative memorandum 515.1 provides a list of the types and locations of education records, the custodian of those records, and copying fees for each individual campus. The University official will make arrangements for access and notify the student of the time and place where the records may be inspected. If the records are not maintained by the University official to whom the request was submitted, the official shall advise the student of the correct official to whom the request should be addressed.
2. The right to request the amendment of the student's education records that the student believes are inaccurate or misleading. Students should write the University official responsible for the record they want changed, and specify why it is inaccurate or misleading. A sample form which may be used in making this request is contained in the appendix to University-wide Administrative Memorandum 515.1.

If the University decides not to amend the record as requested by the student, the University will notify the student of the decision and advise the student of his or her right to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the student when notified of the right to a hearing and is also contained in University-wide Administrative 515.1.

3. The right to withhold consent of disclosure information, which information includes: the student's name; address; telephone number; e-mail address; date and place of birth; nationality; religious preference; major field of study; classification by year; number of hours in which enrolled and

number completed; parents' or spouse's names and addresses; marital status; participation in officially recognized activities and sports; weight and height of members of athletic teams; dates of attendance including matriculation and withdrawal dates; degrees, scholarships, honors, and awards received, including type and date granted; most recent previous educational agency or institution attended; and photograph. This information will be subject to public disclosure unless the student informs the registrar in writing by Fall registration that he or she does not want any or all of this information designated as directory information.

4. The right to consent to disclosures of personally identifiable information contained in the student's education records, except to the extent that FERPA authorizes disclosure without consent.

One exception which permits disclosure without consent is disclosure to school officials with legitimate educational interests. A "school official" is a person employed by the University in an administrative, supervisory, academic or research, or support staff position (including law enforcement unit personnel and health staff); a person or company with whom the University has contracted (such as an attorney, auditor, or collection agent); a person serving on the Board of Trustees; or a student serving on an official committee, such as a disciplinary or grievance committee, or assisting another school official in performing his or her tasks. A school official has a "legitimate educational interest" if the official needs to review an education record in order to fulfill his or her professional responsibility. Upon request, the University also discloses education records without consent to officials of another school in which a student seeks or intends to enroll.

5. The right to file a complaint with the US Department of Education concerning alleged failures by the university to comply with the requirements of FERPA. The name and address of the office that administers FERPA is:

Family Policy Compliance Office
US Department of Education
400 Maryland Avenue, S.W.
Washington, DC 20202-5901
www.ed.gov/policy/gen/guid/fpco/index.html

6. University-wide Administrative Memorandum 515.1 is available on request in the main library on campus or by e-mail at www.library.uams.edu.

4.5 PROHIBITION AGAINST HAZING

Prologue

In 1983, the General Assembly of the State of Arkansas implemented Act 75 which prohibits hazing and prescribes punishment for those convicted of hazing. It is printed below in its entirety.

Section 1

No student of any school, college, university, or other educational institution in Arkansas shall engage in what is commonly known and recognized as hazing, or encourage, aid, or assist any other student in the commission of this offense.

Section 2

Hazing is defined as follows: (1) Any willful act on or off any school, college, university, or other educational institution in Arkansas by one student alone or acting with others, directed against any other student done for the purpose of intimidating the student attacked by threatening such student with social or other ostracism, or of submitting such student to ignominy, shame or disgrace among his fellow students, and acts calculated to produce such results; or (2) The playing of abusive or truculent tricks on or off any school, college university, or other educational institution in Arkansas by one student alone or acting with others, upon a student to frighten or scare him; or (3) Any willful act on or off any school, college, university, or other educational institution in Arkansas by one student alone or acting with others, directed against any other student done for the purpose of humbling the pride, stifling the ambition, or impairing the courage of the student attacked, or to discourage any such student from

remaining in such school, college, university, or other educational institution or reasonably to cause him to leave the institution rather than submit to such acts; or (4) Any willful act on or off any school, college, university, or other educational institution in Arkansas by one student alone or acting with others, in striking, beating, bruising, or maiming, or seriously offering, threatening, or attempting to strike, beat, bruise, or maim, or to do or seriously offer, threaten, or attempt to do physical violence to any student of any such educational institution or any assault upon any such students made for the purpose of committing any of the acts, or producing any of the results, to such student as defined in this Section. (5) The term hazing as defined in this Section does not include customary athletic events or similar contests or competitions, and is limited to those actions taken and situations created in connection with initiating into or affiliation with any organization.

Section 3

No person shall knowingly permit, encourage, aid, or assist any person in committing the offense of hazing, or willfully acquiesce in the commission of such offense, or fail to report promptly his knowledge or any reasonable information within his knowledge of the presence and practice of hazing in this State to an appropriate administrative official of the school, college, university, or other educational institution in Arkansas. Any act of omission or commission shall be deemed hazing under the provisions of this Section.

Section 4

The offense of hazing is a Class B misdemeanor.

Section 5

Upon conviction of any student of the offense of hazing, he shall, in addition to any punishment imposed by the court, be expelled from the school, college, university, or other educational institution he is attending.

Section 6

Nothing in this Act shall be construed as in any manner affecting or repealing any law of this State respecting any other criminal offense.

4.6 CHRP ACADEMIC INTEGRITY

4.6.1 Prologue

Faculty of the CHRP believe that both students and teachers have significant roles within the educational process. Acts of academic misconduct can influence this educational process by causing a distorted picture of the academic achievement of individual students and jeopardizing the success of the student's total educational program. Although monitoring of academic conduct is primarily the responsibility of faculty, students ultimately have the responsibility and are expected to act in an honest and responsible manner during the educational preparation for their professional role.

Upon graduation, allied health professionals are expected to practice their profession with a commitment to high standards and integrity. Moreover, they are expected to protect patients from those who abuse professional ethics in providing care. This commitment to high standards and integrity is also expected during each student's course of academic study.

To promote high standards and ethical conduct of students enrolled in the CHRP, the following statements of policies and procedures regarding academic misconduct have been developed by the faculty in collaboration with the Student Council. The responsibilities of both students and faculty in relation to acts of academic misconduct are outlined.

In the event a student is involved in a violation of the CHRP academic integrity policy, sanction(s) for academic misconduct may include, but are not limited to, a failing grade in the test/assignment, failing grade for the course, or suspension or dismissal from the CHRP.

4.6.2 Definition of Academic Misconduct

Academic misconduct is considered to be an act contrary to academic and/or professional ethics. Examples of academic misconduct include, but are not limited to:

1. Copying from another student's test paper, reports or computer files and listings;
2. Using materials and/or devices during an examination which have not been authorized by the person in charge of the examination;
3. Giving or receiving assistance on examinations. This not only includes providing specific answers to subsequent examinees, but also involves providing or receiving information which would allow the student to have an unfair advantage in the examination over those students who did not possess such information;
4. Exchanging places with another person for the purpose of taking an examination or completing other assignments;
5. Using, buying, selling, stealing, transporting or soliciting in its entirety or in part, the contents of an examination or other assignment not authorized for release;
6. Falsifying clinical logs, records, or reports (oral or written);
7. Plagiarism, *i.e.*, presenting work that has been done by others as one's own. Plagiarism is characterized by failure to acknowledge the source of the work and includes the unreferenced use of ideas and words which belong to others or distribution of copyrighted material from texts, Internet Web sites, or other printed or electronic material. It also includes the unacknowledged use of another's created products such as computer programs, clinical material, audio and video tapes, graphs, charts, tables, artwork, and photographs;
8. Stealing equipment, library books or professional journals;
9. Violating patient confidentiality;
10. Misrepresenting facts to cover up mistakes or omissions in clinical or academic settings;
11. Deliberately performing at less than maximum ability, or asking another student to do so, to alter the grading scale.

4.6.3 Resolution of Alleged Incidents of Academic Misconduct

Within the process to resolve allegations of academic misconduct, the time requirements specified include only those week days (not including holidays) when classes are in session. If an allegation against a student arises or is in process at the end of the semester, the student would be allowed to register and progress into the following semester pending the resolution of the alleged act of academic misconduct.

Similarly, if a student is accused of academic misconduct at or near graduation, and sufficient time to complete the resolution process is not available prior to graduation, the student would be allowed to participate in the graduation exercises; however a degree and/or transcript would not be released until the allegation has been resolved.

To insure fair and consistent resolution of alleged incidents of academic misconduct, the following process is to be utilized. The process should be carried out confidentially and expeditiously.

1. If a student has reason to believe that another student has engaged in an act of academic misconduct, the student who observed the act is responsible for confronting the suspected student and informing him/her of the act he/she is believed to have committed. If the student suspected of an act of academic misconduct provides the accuser with a satisfactory explanation, convincing him/her that the questioned behavior was not academic misconduct, then the incident is considered to be resolved.

If the incident is not resolved at this stage, it is the responsibility of the student who observed the act of academic misconduct to inform (in writing), the accused student, and the appropriate faculty member (usually the course instructor) of the alleged act of academic

misconduct. If the faculty member notified is outside of the course in which the alleged act occurred, the student who reported the act will be directed to notify the principal instructor of the course in which the incident occurred. If identification of a specific course is not clear, the student shall notify the Chairman of the Department.

2. If a student has reason to believe that another student has engaged in an act of academic misconduct and chooses not to confront the suspected student, the student who observed the act is responsible for approaching the appropriate faculty member (usually the course instructor) who will deal with the matter in accordance with item 3 below.
3. If a faculty member, through his/her own observation or information, has reason to believe that a student has engaged in an act of academic misconduct, the faculty member is responsible for confronting the suspected student and informing him/her of the act he/she is believed to have committed. If the student suspected of academic misconduct provides the faculty member with a satisfactory explanation for the questioned behavior, the incident is considered to be resolved.

If the explanation of the questioned behavior is not satisfactory, the faculty member is responsible for assembling pertinent data and immediately discussing the alleged incident with the course instructor (if the faculty member is not himself/herself the course instructor) and Department Chairman. Such discussion should include possible sanctions to be imposed if the alleged act of misconduct did occur. If the evidence is not considered sufficient to pursue the allegation, the incident is considered to be resolved.

4. If a course instructor, through evidence from other sources, has reason to believe that a student has engaged in academic misconduct, he/she is responsible for assembling pertinent data and immediately discussing the alleged incident with the Department Chairman to determine whether the evidence is sufficient to confront the accused student. If the evidence is not sufficient to pursue, the incident is considered to be resolved.

If the evidence is considered sufficient to pursue the matter, the student will be confronted by the faculty member, who will inform him/her of the allegation made from another source. If the student who is suspected of academic misconduct provides a satisfactory explanation for the questioned behavior, the incident is considered resolved. If the explanation of the questioned behavior is not satisfactory and/or if there is a need for further administrative consideration of the student's explanation, the faculty member is responsible for assembling the data and again discussing it with the Department Chairman. Such discussions should include possible sanctions to be imposed if the alleged act of academic misconduct did occur. If the evidence is not sufficient to pursue the allegation, the incident is considered to be resolved.

5. If the evidence in Steps 2, 3 or 4 is sufficient to support further pursuit of the alleged academic misconduct, the course instructor will then meet with the student as soon as possible, but no longer than fifteen (15) week days after discovery or report of the alleged act of misconduct. The student will be given at least five (5) week days notice of the meeting. The notice will be in writing, and mailed to the student's address of record with a copy sent to the Department Chairman. The notice will contain the time, place and nature of the meeting, and a brief description of the incident involved. The notice will also inform the student of his/her right to present witness on his/her behalf. The accused student should notify the faculty member about his/her intention to present such witness at least two days prior to the meeting. The faculty member may have the Department Chairman or another faculty member present to validate the proceedings in the meeting with the student.

At the conference with the student, the faculty member will:

- a. Present the accusation;
- b. Hear the explanation (admission or denial) of the alleged act of academic misconduct by the accused student;

- c. Discuss the seriousness of the alleged act of academic misconduct, the implications, and the process for resolution of the allegation;
- d. Inform the student of the probable sanction(s), previously determined by the faculty member and Department Chairman, for the alleged academic misconduct.

NOTE: At this point in the process, the steps to be followed for the various student responses to the alleged academic misconduct are as follows:

If the student admits the allegation and agrees with the recommended sanction(s):

6. If the student admits to the allegation, the faculty member will inform the student of the sanction(s) that will be recommended to the Department Chairman of the program in which the student is enrolled.
7. Following the conference between the faculty member and student, the Department Chairman will make a decision on the recommended sanction(s) e.g., to impose or modify the sanction(s).
8. This decision will be communicated to the student and will be documented in a full written report of the incident, with signature of the Department Chairman, faculty member, and student, to acknowledge that all have read the report. This report is placed in the student's departmental and college files and remains until the student has graduated.
9. If the student agrees with the decision on the sanction(s), the report will be forwarded to the Dean. The Dean may approve or reduce the sanction(s) recommended in the report but shall not increase the sanction(s). The Dean's decision must be communicated to the student and faculty member within five (5) week days after receiving the report, at which time the sanction(s) for the admitted misconduct is imposed.

If the student admits the allegation and disagrees with the recommended sanction(s):

10. If the student disagrees with the decision on the sanction(s) made by the Department Chairman, the student may appeal the decision in writing to the Dean, CHRP, within five (5) week days after being informed of the decision by the Chairman. The Dean's decision on the appeal will be based on the student's written reasons for disagreement and other pertinent evidence, as well as the written report in Step 8. The Dean, in ruling on the appeal, may enlist the aid of the Academic Integrity Advisory Panel. The Dean's decision is final and must be communicated to the student within fifteen (15) week days from the date the appeal was received by the Dean. If the Dean's decision is to impose a sanction(s), it is imposed at the time of notification.

If the student denies the allegation:

11. If the student denies the allegation at the time of the initial conference with the faculty member, (as described in Step 5), the faculty member and the student each prepare a written report to be forwarded to the Department Chairman. The reports shall include a description of the alleged incident of academic misconduct, the process used to address the allegation, and the outcome of the conference. The student's written report should include a clear statement of his/her rebuttal to the allegation. These written reports are to be submitted to the Department Chairman within five (5) week days following the conference between the faculty member and accused student.
12. Within five (5) week days following receipt of the latter of the two reports, the Department Chairman will meet with the faculty member and accused student. The alleged act of academic misconduct will be described by the faculty member. The student will present his/her response to the allegation.
13. Based on the data presented and interviews with selected witnesses or other individuals, the Department Chairman will determine whether or not the evidence supports the allegation against the student.

- a. If the Chairman's decision is that there is not sufficient evidence of academic misconduct, the process is terminated with a complete written summary forwarded to the Dean, CHRP. Prior to forwarding the summary, the Department Chairman, faculty member, and student will sign the summary report to indicate that it has been reviewed by each of them.
- b. If the decision is that the evidence supports the allegation of academic misconduct, the recommended sanction(s) is delineated by the Chairman and a written report is prepared. The report is signed by the Department Chairman, faculty member, and student to indicate that all have read the report and it is forwarded to the Dean.

If the student agrees with the decision on the denied allegation:

14. The Dean has the authority to approve or reduce the sanction(s) recommended in the report, but may not increase the sanction(s). The Dean's decision must be communicated to the student, Department Chairman, and faculty member within five (5) week days of receiving the report, at which time the sanction(s) is imposed.

If the student disagrees with the decision on the denied allegation:

15. If the student disagrees with the decision or the recommended sanction(s) made by the Department Chairman, the student may appeal the decision in writing to the Dean within five (5) week days after being informed of the decision. The Dean's decision will be based on the student's written reasons for disagreement and any other available relevant evidence, as well as the written report described in Step 13. The Dean, in ruling on the appeal, may enlist the aid of the Academic Integrity Advisory Panel. The Dean's decision is final and must be communicated to the student within fifteen (15) week days from the date the appeal was received by the Dean. Following this notification, the applicable sanction(s) is imposed.

4.6.4 Academic Integrity Advisory Panel

Within the procedure for handling alleged incidences of academic misconduct, the Dean, CHRP, has the prerogative of establishing a Panel, as the need arises, to consider the issues related to alleged incidences of academic misconduct and/or the proposed sanctions, as described in Steps 10 and 15 of the previously described procedure.

- A. **Purposes:** The purpose of the Academic Integrity Advisory Panel is to insure full investigation of incidences of alleged academic misconduct and/or the sanction(s) of academic misconduct when use of the informal process, described previously, has not resolved an issue to the student's satisfaction. The panel shall be advisory to the Dean, and its recommendations shall not be binding upon him/her.
- B. **Composition:** The composition of the Academic Integrity Advisory Panel shall be:
 1. A Chairman appointed by the Dean.
 2. Two faculty members selected by the Dean. One faculty member shall be from the department in which the accused student is enrolled, but he/she shall not be involved in the allegation. The other faculty member shall be from another department of the CHRP. If it is not possible to identify a faculty member in the student's department who is not involved in the allegation, both faculty members shall be appointed from other departments.
 3. Two students selected by the Dean. The students shall be in good standing. One student shall be selected from the department, in which the accused student is enrolled, but not from the same class as the accused student. The second student shall be from another department in the CHRP. In the event the department has only one class, both students will be selected from other departments.
- C. **Duties of the Academic Integrity Advisory Panel:** The primary duty of the Academic Integrity Advisory Panel shall be to review as rapidly and discreetly as possible, all information provided about the alleged incident of academic misconduct and to seek other

facts deemed necessary to insure adequate review of the allegation and/or recommendations for sanction(s). The student and the faculty member involved in the allegation may be present and hear all witnesses. Confidentiality is expected from all Panel members and others involved.

At the time the Panel is convened for this purpose, a reasonable deadline by which the Panel's work must be completed will be established by the Dean, recognizing the overall 15-day deadline. At the completion of its review, a written report of the Committee's process of review, findings, and its recommendations shall be forwarded to the Dean of the CHRP, thereby completing the work of the Panel.

Following the review of the findings and recommendations of the Academic Integrity Advisory Panel, the Dean of the CHRP shall make the final decision.

4.7 CHRP GRIEVANCE PROCEDURES

A grievance based upon a complaint of discrimination should follow the UAMS Grievance Procedure found on page 36 of this Handbook.

4.7.1 Prologue

The Student Grievance Procedure represents a formal mechanism whereby any student may obtain a review of a complaint of unfair treatment. The grievance procedure shall not be used to question a rule, procedure or policy established by an authorized faculty or administrative body. Rather it shall be used for a hearing and due process for those who believe that a rule, procedure or policy has been applied in an unfair or inequitable manner, or that there has been unfair or improper treatment by a person or persons.

4.7.2 Informal Procedure

In the academic community, the responsibility for course development, course delivery, and the assessment of student achievement rests primarily with each course instructor. Any student who has a complaint of unfair treatment related to a course should first seek to resolve it informally with the course instructor. A student with such a complaint must request reconsideration of the application of a rule, procedure, or policy or unfair or improper treatment within five (5) working days following the incident which forms the basis for the complaint (e.g., five days after grades are posted). The instructor will meet with the student (or speak with the student via telephone or interactive video, for those students located more than 50 miles from the location of the instructor's office if so requested by the student) within three (3) working days of receiving the student's request for reconsideration and will notify the student of his/her decision regarding the complaint within two (2) working days following the meeting or discussion. If resolution is not achieved at this level, the student should seek resolution with the chairman of the department in which the course is offered within five (5) working days following notification by the instructor that the complaint cannot be resolved. If the course instructor is the Department Chairman, the student should seek resolution with him/her at the outset. The chairman will meet with the student (or speak with the student via telephone or interactive video, for those students located more than 50 miles from the location of the chairman's office if so requested by the student) within three (3) working days of receiving the student's request for resolution and will notify the student of his/her decision regarding the complaint within two (2) working days following the meeting of discussion. If, after the informal attempt to resolve the complaint, the chairman concludes that the complaint cannot be resolved, the student will be so notified by the chairman within five (5) working days of receiving the request for resolution from the student. Accordingly, if the student concludes after the informal attempt that the complaint cannot be resolved, the student will so notify the chairman. In either case, then and only then should the formal grievance procedure be initiated by the student. For issues or complaints that are not course-specific, the student should seek resolution with his/her Department Chairman first, before considering initiating the grievance procedure.

4.7.3 Formal Procedure

A student with a grievance (the grievant) must submit a written statement to the Dean of the College of Health Related Professions or his/her designee outlining specifics within five (5) working days following notification of the failure to resolve the complaint using the Informal Procedure described under section 4.7.2 above. The student may request that the Dean convene a Grievance Panel for the purpose of conducting a hearing to determine the facts; the panel may then recommend a resolution to the Dean (or his/her designee). In the absence of such a request from the grievant, the Dean (or his/her designee) may choose to convene a Grievance Panel, or the Dean (or his/her designee) may render a decision without participation by a Grievance Panel.

In the College of Health Related Professions, the Grievance Panel shall be selected as follows: A Grievance Committee consisting of 10 faculty and 10 students, will be appointed annually by the Dean. For every hearing held under this procedure, the grievant and the appropriate Associate Dean or designee jointly will meet within eight (8) working days after the decision to refer the grievance to the Grievance Panel and review the members of the Grievance Committee, removing from consideration any member who may with reason be considered inappropriate for the hearing (e.g., a faculty member directly involved in the issue being grieved should not sit on the Panel for that grievance). The names of the remaining members will then be written on tabs of paper which will be folded and placed into separate containers for faculty and students and randomized by mixing. The grievant will draw three names from each container. The first six names will constitute the Grievance Panel, which shall be composed of three faculty and three students. The remaining names shall be drawn alternatively from each container until all names are drawn in order to develop a list of alternate members. Should a Panel member be removed for any reason during the process, that member shall be replaced by an alternate having the same status (faculty or student).

The Dean will schedule the hearing to take place no sooner than three (3) working days and not later than ten (10) working days after the Panel is notified, unless there is a specific reason why another time must be selected (e.g., availability of participants).

Students who have begun the grievance procedure may request permission to progress to the next semester or participate in Commencement if the decision of the Department Chairman during the informal phase would preclude progression to the next semester or participation in Commencement at the end of the current semester, and if the resolution of the grievance could reasonably extend past the respective dates for these activities. If resolution of the grievance procedure results in suspension or dismissal, the student will not be allowed to continue to attend classes nor will the student graduate from his/her program, regardless of participation in Commencement activities.

A. **The Pre-Hearing**

At a prearranged time prior to the hearing, the members of the Panel, the grievant, and faculty members directly named in the grievance will meet briefly with the Dean, or his/her designee, to be given the charge (*i.e.*, to determine whether the grievant has been treated fairly and equitably), plus all relevant background data. The grievant and faculty members named in the grievance should identify documents which they intend to submit to the hearing as well as a list of witnesses whom they believe have information relevant to the grievance. The Panel may restrict the number of documents and witnesses if it considers their proposed testimony to be cumulative, repetitive or not relevant to the grievance. The grievant may have one (1) person from the UAMS campus community (*i.e.*, faculty, student, or staff) present during the pre-hearing to advise him/her. This person may not address the Panel, speak on behalf of the grievant, or otherwise actively participate in the pre-hearing. Faculty members named in the grievance may be present during the pre-hearing but may not speak. The Panel will then meet in closed session to elect a chairman who will preside at the subsequent hearing. The Panel may require copies of relevant documents be presented prior to the hearing as well as any written statements by the grievant or the faculty members named in the grievance in support or defense of the grievance.

B. **The Hearing**

The hearing will be conducted in private. Witnesses will be admitted for testimony only and then asked to leave. The testimony will be tape-recorded, but deliberations of the Panel will not be recorded. The grievant may have one (1) person from the UAMS campus community (*i.e.*, faculty, student, or staff) present during the hearing to advise him/her. This person may not address the Panel, speak on behalf of the grievant, question witnesses, or otherwise actively participate in the hearing. The grievant must appear in person, make an oral statement of the grievance and answer questions from the faculty directly named in the grievance and from members of the Panel. The grievant may submit sworn written statements, other exhibits, and witnesses in his/her behalf. The grievant, Panel, and faculty directly named in the grievance may hear and question all witnesses testifying before the Panel. The faculty directly named in the grievance must appear in person, make an oral statement in response to the grievance, and answer questions from the grievant and from members of the Panel. The faculty directly named in the grievance may submit sworn written statements and other exhibits and witnesses. The Panel shall make its determination of whether the grievant was treated fairly or unfairly based upon the evidence presented at the hearing which is relevant to the issue or issues before the Panel. The grievant, the grievant's advisor, witnesses, and faculty directly named in the grievance may not be present during the Panel's deliberations. The determination will be presented by the Grievance Panel to the Dean, or his/her designee, in writing by the end of the third working day following the conclusion of the deliberations. The Panel may make recommendations for resolution of the dispute. The grievant and faculty directly named in the grievance shall be notified in writing by the Dean or his/her designee of the Panel's determination within three (3) working days following his/her receipt of the Panel's determination. The notification may be hand-delivered to the grievant and faculty directly named in the grievance or sent by registered mail with return receipt (and with a copy by regular mail) to their last known addresses. In the event a registered letter is returned undelivered after a notice has been left for the addressee, it shall be presumed that the copy sent by regular mail was received three (3) days following the date of mailing unless it is returned undelivered. Within seven (7) working days of the receipt of the Dean's or his/her designee's notification to the grievant or the faculty directly named in the grievance of the Panel's determination, either party by a request for reconsideration may contest in writing to the Dean or his/her designee that a substantial mistake of fact occurred, a fundamental misinterpretation of official policies is evident, or a significant procedural defect took place. These are the only bases for contesting the determination of the Panel. After receipt of a determination from the Panel, and if the seven day period has elapsed without the filing of a request for reconsideration, the determination of the Panel shall be a recommendation which the Dean or his/her designee may accept or reject, in whole or in part.

If the determination of the Panel is contested by a grievant or by the faculty directly named in the grievance, the Panel will reconvene within ten (10) working days of the Dean's or his/her designee's receipt of the request for reconsideration to review the bases of the contest. If the Panel concurs with the contestant, it will correct the procedural defect, reinterpret the policy as appropriate, or review the factual error, and then review its determination and revise it if the Panel deems appropriate. The Panel will present its determination in writing to the Dean or his/her designee within three (3) working days following the conclusion of its deliberations. A second determination from the panel, if submitted to the Dean or his/her designee by the Panel subsequent to a second hearing resulting from a request for reconsideration, shall be a recommendation which the Dean or his/her designee may accept or reject, in whole or in part. The decision of the Dean or his/her designee shall be sent in writing to the grievant and faculty directly named in the grievance within five (5) working days thereafter. The notification may be hand-delivered to the grievant and faculty directly named in the grievance or sent by registered mail with return receipt (and a copy by regular mail) to their last known addresses. The decision of the Dean or his/her designee shall be final.

4.8 UAMS GRIEVANCE POLICY RELATED TO DISCRIMINATION COMPLAINTS

4.8.1 Purpose and Scope

- A. Policy Statement: UAMS prohibits discrimination on the basis of race, color, national origin, disability, sex, or age.
- B. Purpose: The purpose of this procedure is to provide the process for addressing student grievances alleging discrimination based on race, color, national origin, disability, sex, or age.

4.8.2 Definitions

- A. Grievance: Grievance means a complaint of a student alleging any policy, procedure, or practice prohibited by Title VI of the Civil Rights Act of 1964 (Title VI), Title IX of the Education Amendments of 1972 (Title IX), the Age Discrimination Act of 1975, Section 504 of the Rehabilitation Act of 1973 (Section 504), and Title II of the Americans with Disabilities Act of 1990 (Title II), and their implementing regulations.
- B. Procedure: The steps set out in this procedure shall constitute the grievance procedure for discrimination complaints brought by students based on race, color, national origin, disability, sex, or age.
- C. Grievant: Grievant means a student who submits a grievance alleging violation of Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, the Age Discrimination Act of 1975, Section 504 of the Rehabilitation Act of 1973, and Title II of the Americans with Disabilities Act of 1990, and their implementing regulations.
- D. UAMS: UAMS means any college, department, subunit, or program operated by the University of Arkansas for Medical Sciences. When used in this Agreement, the term "college" shall be deemed to include the Graduate School.
- E. Coordinator: The person serving as the designated Title IX and/or Section 504/Title II Coordinator.
- F. Respondent: Respondent means a person alleged to be responsible for the violation alleged in a grievance. The term may be used to designate persons with direct responsibility for a particular action or those persons with supervisory responsibility for procedures and policies in those areas covered in the grievance.
- G. Associate Dean Responsible for Student and Academic Affairs: Refers to the Associate Dean in the college where the grievant is enrolled as a student. Since there is no Associate Dean for the Graduate School, reference to Associate Dean shall be deemed to include the Assistant Dean for Graduate Studies and Institutional Reporting, where applicable.
- H. Dean: Refers to the Dean of the college where the grievant is enrolled as a student.

4.8.3 Filing of Grievance

- A. Eligibility for Filing: Any UAMS student may file a grievance alleging discrimination on the basis of race, color, national origin, disability, sex, or age.
- B. Pre-Grievance Meeting: Prior to the filing of a written grievance, the grievant(s) should first consult with the appropriate Associate Dean responsible for student and academic affairs, who shall attempt to resolve the grievance informally by agreement between the grievant and the respondent alleged to be directly responsible for the possible violation, and/or persons with immediate supervisory authority related to the grievance.

If the matter cannot be resolved at this level, a written grievance should be submitted to the appropriate Associate Dean responsible for student and academic affairs for subsequent processing in accordance with the procedures for formal grievances outlined below.
- C. Filing a Grievance: Grievances filed with the appropriate Associate Dean shall be in writing and shall provide the following information:

1. Name and address of the grievant(s).
 2. Nature, date and description of alleged violation.
 3. Name(s) of persons responsible for the alleged violation
 4. Requested relief for corrective action.
 5. Any background information that the grievant believes to be relevant.
- D. Time Limit for Grievance Filing: A grievance must be filed within twenty (20) calendar days of the occurrence of the alleged violation or within twenty (20) calendar days of the date the grievant became aware of the alleged violation. If the last day for filing a grievance falls on a Saturday, Sunday, or a day on which the University is closed for business, then the grievance may be filed on the first day following the Saturday, Sunday, or date when the University is closed.
- E. Notification of Respondent(s): Immediately upon receipt of a formal grievance, the appropriate Associate Dean will give the respondent a copy of the grievance, and will direct the respondent to submit a written response to the charges within ten (10) calendar days. If the last day for filing a response falls on a Saturday, Sunday, or a day on which the University is closed for business, then the response may be filed on the first day following the Saturday, Sunday, or date when the University is closed. The respondent will be specifically warned not to retaliate against the grievant in any way. Retaliation will subject the respondent to appropriate disciplinary action.
- F. Response: The response should include any denial, in whole or in part, of the charges. Failure to respond may subject the respondent to disciplinary action by the Dean of the appropriate college or other appropriate UAMS official.
- G. Notification of Appropriate Administrative Officers: The appropriate Associate Dean will notify the appropriate administrative officers to whom the respondent reports of the existence of the complaint. However, all administrative officers will attempt to maintain the confidentiality of the information during the grievance process.
- H. Role of the Associate Dean Responsible for Student and Academic Affairs in Discrimination Grievances Filed by Students: The appropriate Associate Dean responsible for student and academic affairs must conduct a preliminary investigation of the complaint, and take one of the following steps, within thirty (30) calendar days after its receipt:
1. dismiss the grievance on the grounds that the evidence submitted in support of the complaint or developed in the preliminary investigation does not warrant a detailed investigation or a formal hearing (for example: grievant failed to articulate the factual basis for his or her belief that discrimination occurred; the grievance is so weak, attenuated, or insubstantial that it is without merit, or so replete with incoherent statements that the grievance, as a whole, cannot be considered to be grounded in fact; the grievance anticipates discrimination that has not yet occurred).
 2. refer the grievance to a hearing before the Grievance Panel.
 3. allow the parties to sign a written statement resolving the grievance. It should be understood that without the approval in writing by the appropriate Associate Dean, any agreement between the parties does not preclude further action by the University against either party.

It is the responsibility of the Associate Dean responsible for student and academic affairs of each College to insure the effective implementation, maintenance, processing, record keeping, and notifications required by the grievance procedures.

If an appeal of a dismissal of a grievance is filed, (see Section 4.8.3.1.), the Associate Dean will forward a copy of the investigative report and determination to the Dean. If the Associate Dean refers a grievance to a hearing before the Grievance Panel, the Associate Dean will forward a copy of the investigative report to the Panel.

- I. Appeal of Grievance Dismissal: A student may appeal the dismissal of his/her grievance by submitting a written request for review with his/her Dean. The request for review must be submitted within five (5) calendar days of receipt of the decision to dismiss. Upon receipt of an appeal of the dismissal of a grievance, the Dean shall carefully consider the relevant information contained in the appeal as well as the investigative report and determination of the Associate Dean, to ascertain that the evidence either submitted in support of the complaint or developed in the preliminary investigation did not warrant a detailed investigation or a formal hearing. The Dean will notify the student of his/her decision in writing within ten (10) calendar days of receipt of the request for review. The decision of the Dean will be final.
- J. Notification of Dean: Upon receipt of a formal grievance from a student, the appropriate Associate Dean shall send a copy of the grievance to the Dean of the appropriate College. The Associate Dean or his/her designated representative shall be notified of any hearing and shall be required to attend all student grievance hearings pertaining to alleged discrimination on the basis of race, color, national origin, disability, sex, or age to serve as a University resource person. This individual shall not have a vote at the hearing, nor be present during deliberations of the Grievance Panel.

4.8.4 Prehearing Procedures

- A. Selection of Grievance Panel: When a grievance is referred to the Grievance Panel, the appropriate Associate Dean shall forward a copy of his/her investigative report to a six member Grievance Panel. The Grievance Panel shall be selected as follows: A Grievance Committee will be appointed by each College Dean, consisting of nine (9) faculty and nine (9) students. For every hearing held under this procedure, the person filing the grievance and the appropriate Associate Dean or designee jointly will meet within ten (10) calendar days after the decision to refer the grievance to the Grievance Panel, and review the members of the Grievance Committee, removing from consideration any member who may with reason be considered inappropriate for the hearing (e.g., a faculty member directly involved in the issue being grieved should not sit on the Panel for that grievance). The names of the remaining members will then be written on tabs of paper, folded, placed into separate containers for faculty and students, and randomized by mixing. The grievant will draw three names from each container. The first six names will constitute the Grievance Panel, which shall be composed of three faculty and three students. The remaining names shall be drawn alternatively from each container until all names are drawn in order to develop a list of alternate members. Should a Panel member be removed for any reason during the process, that member shall be replaced by an alternate having the same status (faculty or student).
- B. Scheduling of Hearing of Grievance: Hearings before the Grievance Panel will be conducted no sooner than ten (10) calendar days and not later than twenty (20) calendar days after the selection of the Grievance Panel. The date of the hearing must be adhered to except for unusual circumstances which must be reported in writing as soon as possible to the appropriate Associate Dean. The hearing shall be conducted in accordance with the procedure set forth in Section 4.8.5, A through G of this procedure.
- C. Representation: The grievant and the respondent have the right to be assisted by no more than two representatives, including attorneys, at any point during the initiation, filing processing, or hearing of the formal grievance; however, no representative may examine witnesses or otherwise actively participate in a hearing. The Panel may also be assisted and advised by an attorney or other representative at its discretion.
- D. Evidence: The grievant and respondent shall provide the appropriate Associate Dean with all documents to be used and relied on at the hearing, and with the name, address and telephone number of their representative(s) and witnesses no later than seven (7) calendar days prior to the date of the hearing. There will be a simultaneous exchange of this information between the parties, which will be facilitated by the Associate Dean five (5) calendar days before the date of the hearing.

4.8.5 Hearing Procedures

- A. Record of Hearing: The hearing will be recorded by recording devices supplied by UAMS. These recordings shall be maintained for a period of three years after resolution of the grievance. The grievant or respondent may obtain a copy of the tapes from any recorded hearing, at the requesting party's expense. The deliberations of the Grievance Panel will not be recorded.
- B. Counsel: The grievant and respondent shall have the right to advice of counsel of his/her choice; however, counsel may not examine witnesses or otherwise actively participate in any hearing.
- C. Private Hearing: The hearing shall be conducted in private. Witnesses shall not be present during the testimony of any party or other witness. Witnesses shall be admitted for testimony only and then asked to leave. The parties may hear and question all witnesses testifying before the Grievance Panel.
- D. Presentation of Case: The grievant and respondent shall be afforded reasonable opportunity for oral opening statements and closing arguments and/or presentation of witnesses and pertinent documentary evidence, including sworn, written statements.
- E. Grievance Panel Rights: The Grievance Panel shall have the right to question any and all witnesses, to examine documentary evidence presented, and to summon other witnesses to review other documentation as the Panel deems necessary.
- F. Grievance Panel Deliberation: After the hearing is concluded, the Grievance Panel shall convene to deliberate in closed session and arrive at a majority recommendation.
- G. Transmittal of the Recommendation: Within five (5) calendar days after the hearing is concluded, the Grievance Panel shall transmit a written copy of its recommendation to the appropriate Associate Dean responsible for student and academic affairs, who will then mail, by certified mail, return receipt requested, a copy of the written document to the grievant and respondent at addresses previously provided by the grievant and the respondent.
- H. Appeal of Recommendation of the Grievance Panel: If no appeal is received by the appropriate Associate Dean within seven (7) calendar days of receipt of the recommendation by the grievant and the respondent, any recommendations by the Grievance Panel shall be forwarded to the appropriate Dean for consideration. The Dean may accept the Grievance Panel recommendation, reverse it, or refer the grievance back to the Panel for reconsideration. If the last day for filing an appeal falls on a Saturday, Sunday, or a day on which the University is closed for business, then the appeal may be filed on the first day following the Saturday, Sunday, or date when the University is closed.

If the grievant or respondent wishes to appeal the recommendation of the Grievance Panel, the respondent and/or grievant shall, within seven (7) calendar days of the receipt of the recommendation, appeal the grievance recommendation to the Dean through the Associate Dean. The appeal shall be in writing.

If an appeal is submitted, it will be transmitted to the appropriate Dean. The Dean shall review the appeal and notify the parties of his/her determination within ten (10) calendar days from the date of his/her receipt of the appeal. The decision of the Dean is final and may not be appealed further.

The Dean's review is the final institutional step in matters of discrimination grievances. However, nothing precludes the grievant or respondent from filing a complaint with any external agency that handles discrimination complaints.

4.8.6 Other

- A. Grievances Involving a Grievant and Respondent from Different Units of UAMS: Whenever a grievance is instituted by a student grievant in one college against a respondent in another college or unit, the grievance shall proceed through the Associate Dean, Dean, and Grievance Committee from the college in which the student is enrolled.
- B. Maintenance of Written Grievance Records: Records shall be kept of each grievance process. These records shall be confidential to the extent allowed by law, and shall include, at minimum: the written grievant complaint filed by the grievant, the written response filed by the respondent, the investigative report of the Associate Dean, the recording and documents of the hearing, the written recommendation of the Grievance Panel, the results of any appeal, the decision of the Dean, and any other material designated by the Associate Dean responsible for Student and Academic Affairs. A file of these records shall be maintained in the Office of the Associate Dean responsible for Student and Academic Affairs for each college.

For purposes of the dissemination of grievance precedents, separate records may be created and kept which indicate only the subject matter of each grievance, the resolution of each grievance, and the date of the resolution. These records shall not refer to any specific individuals and they may be open to the public in accordance with the Arkansas Freedom of Information Act or pertinent Federal laws.

- C. Retaliation: No person shall be subjected to retaliation for having utilized or having assisted others in the utilization of the grievance process.

4.9 ARRESTS AND CONVICTIONS

Students who are convicted of a felony while enrolled in a CHRP program are subject to immediate dismissal. The CHRP also reserves the right to suspend or dismiss students who are arrested for a violation of the law, in accordance and with regard for the due process rights of the student as described in this handbook in Section 4.6.

4.10 CHRP DISABILITY POLICY

The College of Health Related Professions (CHRP), UAMS, will provide reasonable and appropriate accommodations for students with documented disabilities who demonstrate a need for accommodations in accordance with the Americans with Disabilities Act.

Americans With Disabilities Act (ADA): The Americans with Disabilities Act (ADA) of 1990, defines a person with a disability as someone with a physical or mental impairment that **substantially limits** one or more major life activities.

Purpose of Special Accommodations: The purpose of special accommodations is to provide equal access to required courses. Accommodations should be consistent with the identified functional limitation(s) such that the identified impairment is alleviated through the use of an auxiliary aid/or an adjustment in a testing procedure, and/or scheduling of practicum assignments. Functional limitations relate to the behavioral manifestations of a disability that impede an individual's capacity to function. In short, functions that an impaired person cannot do on a regular and continuing basis as a result of the documented disability are functional in nature. A functional limitation might be the inability to control fine motor movement such that the individual is unable to fill-in a computer answer sheet. In such a case, the appropriate accommodation might be someone to assist in the recording of answers.

The following guidelines are provided as a means of assisting applicants in the documentation of a need for accommodation based on an impairment that **substantially limits** one or more of his/her major life activities. Documentation submitted in support of a request for special test accommodations will be reviewed by the Department Chairman and the CHRP Associate Dean for Academic and Student Affairs

in a fair and impartial manner. **Please note that students requesting accommodations must personally initiate a written request for accommodations; requests by a third party (such as an evaluator, physician, etc.) cannot be honored.**

Students seeking special accommodations should make an appointment with their department chairmen to discuss the guidelines for submitting their application to the CHRP¹.

1. **Comprehensive Written Report:** A comprehensive written report describing the disability, its severity, with justification for requested accommodation(s) must be provided.
2. **Specific Diagnosis:** In the case of a learning disability, a specific diagnosis of the disability must be provided. It is strongly recommended the diagnostic taxonomies as defined in the current edition of the Diagnostic and Statistical Manual of the American Psychiatric Association (DSM-IV) be used. The specific diagnostic tests used, including date(s) of evaluation, test results, and a detailed interpretation of the test results should be submitted with the application for special accommodations. Specific test scores should be reported to support the diagnosis. The application should also include a relevant educational, developmental, and medical history.
3. **Diagnostic Methods vs. Disability:** The diagnostic methods used should be consonant with the described disability and current professional practices within the field. Informal, or non-standardized evaluations, should be described in sufficient detail such that other professionals can understand their role and significance in the diagnostic process.
4. **Current Documentation:** Documentation of a disability should be current for provision of reasonable accommodations because the decision is based on the evaluation of the current impact of the student's disability on the proposed activities (examinations, clinical assignments, etc.). Because manifestations of disabilities may vary with time and different settings, it is recommended that evaluations conducted within the past three years be submitted.
5. **Applicant's Limitations As a Function of Diagnosis:** Professionals submitting supporting documentation for special test accommodations should describe in detail the student's limitations due to the diagnosed disability and specifically address the effect of the disability on a student's activity as it relates to current physical, perceptual, and cognitive abilities.
6. **Recommended Accommodations:** The professional submitting documentation for students requesting special accommodations should recommend specific accommodations and/or assistive devices for such students. Additionally, and importantly, a detailed explanation of why these accommodations or devices are needed and how they will reduce the impact of the identified functional limitations should be submitted.
7. **Professional Credentials of the Evaluator:** The professional credentials of the evaluator that qualify him/her to make the particular diagnosis, including information about licensure or certification and specialization in the area of the diagnosis, must accompany the application. The evaluator should present evidence of comprehensive training and direct experience in the diagnosis and treatment of adults in the specific area of disability.
8. **Prior Accommodations:** If no prior accommodations have been provided for the student, the qualified professional expert should include a detailed explanation as to why no accommodations were given in the past and why accommodations are needed now.

¹The information required for the application is tailored to specific diagnoses. That additional information is available in the CHRP Dean's Office. Please contact the department chairman or the Associate Dean for Academic and Student Affairs for a copy of the CHRP Policy on Request for Special Accommodations.

4.11 UAMS SEXUAL HARASSMENT POLICY

Purpose

The University of Arkansas for Medical Sciences (UAMS) is committed to its mission of providing an academic and employment environment that fosters excellence. Sexual harassment violates the trust and respect essential to the preservation of such an environment, and threatens the education, employment, and well

being of its community members. University members have the right to work and study in an environment free of any form of sexual harassment. This right is protected by Title VII of the 1964 Civil Rights Act for employees and Title IX of the Educational Amendment of 1972 for students. Sexual harassment is destructive to students, faculty, staff, and the UAMS community as a whole, and it will not be tolerated.

This policy may not be used to infringe upon academic freedom. Students, faculty, staff, and guests must be aware of the need for freedom of inquiry and openness of discussion in its educational and research programs, and must strive to create and maintain an atmosphere of intellectual seriousness and mutual tolerance in which these essential features of academic life can thrive. No university can or should guarantee that every idea expressed in its classrooms or laboratories will be inoffensive to all; pursued seriously, education and scholarship necessarily entail raising questions about received opinions and conventional interpretations. If, however, UAMS determines that credible accusations of inappropriate sexual remarks or actions have been made, UAMS shall investigate such accusations promptly, thoroughly, and fairly.

Sexual harassment is particularly serious when it threatens relationships between teacher and student, or supervisor and subordinate, because of the potential to exploit the power inherent in these relationships and to undermine the ability of UAMS to carry out its mission. UAMS strongly encourages all community members to report incidents of sexual harassment. To the extent possible, reporting and investigating procedures are supportive of and sensitive to the alleged victim, while adequately safeguarding the rights of the alleged offender. For more information about the UAMS policy, see the UAMS Administrative Guide, Policy 3.1.05, Sexual Harassment at <http://www.uams.edu/AdminGuide/WIN03105.html>.

Policy

UAMS opposes all forms of sexual harassment, whether subtle or direct, and is committed to a thorough, timely, and confidential investigation, in a fair and impartial manner, of all complaints from its students or employees. The sexual harassment of UAMS faculty, staff, and students by non-university employees and guests doing business or providing services on campus (for example, contractors, vendors, delivery persons) is also prohibited by this policy. Incidents of sexual harassment involving visitors should be reported directly to the Office of Human Resources. During non-business hours, sexual harassment complaints may be reported to the UAMS Police Department, who will then refer the complaint to the Office of Human Resources for review and action. UAMS will take appropriate actions within the scope of its legal authority to prevent, correct, and discipline behavior that violates this policy.

A. Definition of Sexual Harassment

Sexual harassment generally includes any unwanted or unsolicited sexual gesture, physical contact, or statement which, when viewed from the perspective of a reasonable person similarly situated, is offensive, threatening, humiliating, or interferes with a person's ability to perform his or her job, educational pursuit, or participation in campus life.

B. Prohibited Acts

For the purpose of this policy, sexual harassment may take many forms — subtle or indirect, or blatant and overt. It may consist of repeated actions or may even arise from a single incident if sufficiently extreme. In assessing whether a particular act or acts constitute sexual harassment under this policy, the standard shall be the perspective of a reasonable person similarly situated.

Sexual harassment includes any behavior of a sexual nature where:

- ♦ Submission to or rejection of the conduct is made either explicitly or implicitly a term or condition of employment or status in a UAMS-sponsored course, program, or activity;
- ♦ Submission to or rejection of the conduct is used as a basis for employment or academic decisions affecting that individual; or
- ♦ Such conduct unreasonably interferes with an individual's work or academic performance, or creates an intimidating, hostile, or offensive environment for work or learning.

Sexual harassment may occur within a variety of relationships. It may occur between individuals of the opposite sex – male against female, or female against male – or, between individuals of the same sex. Incidents may occur between supervisor and subordinate, faculty member and student, or between fellow employees and fellow students; they may also take place between employees and campus visitors and between employees and those who do business with UAMS. Especially injurious, however, is harassment in relationships characterized by an imbalance of power and authority. Typically, such relationships are found between:

- a. administrator and student or medical resident
- b. employee and student or medical resident
- c. graduate assistant and student
- d. faculty and student

C. Anonymous Complaints

All members of the UAMS community may contact the Office of Human Resources at any time to ask questions about sexual harassment or complaint procedures without disclosing their names and without filing a complaint. However, because of the inherent difficulty in investigating and resolving allegations from unknown persons, individuals are discouraged from making anonymous complaints of sexual harassment. Although anonymous complaints are discouraged, UAMS will respond reasonably to all allegations of sexual harassment.

D. Consensual Relationships

The basic function of a university is the discovery and the transmission of knowledge, which is founded upon the free and open exchange of ideas. In order for productive learning and the work that supports it to occur, members of the campus community (faculty, staff, and students) should pursue their responsibilities guided by a strong commitment to principles of mutual trust, confidence, and professional codes of conduct.

Consenting romantic relationships between faculty members and students, supervisors and subordinates or fellow employees are **strongly discouraged**.

E. Disciplinary Actions for Violations of the Sexual Harassment Policy

Disciplinary actions for violations of the Sexual Harassment Policy may include, but are not limited to, the following: oral or written warning, reassignment, counseling, demotion, termination, or any combination thereof. Sanctions for sexual harassment depend upon the circumstances in each case.

In addition to disciplinary action, those who engage in sexual harassment may be subject to legal consequences, including civil and criminal penalties and monetary damages.

All individuals accused of sexual harassment shall be given the opportunity to respond to the complaints prior to any final employment and academic decisions.

F. Confidentiality

UAMS understands that some individuals may be reluctant to tell anyone about harassment or to have their names disclosed. Every reasonable effort will be made to maintain confidentiality of all parties, all conversations, and all documents concerning a sexual harassment complaint. However, UAMS's obligation to stop sexual harassment means that it cannot fail to take appropriate action and, as such, confidentiality cannot always be guaranteed. The appropriate administrative officials will be kept informed on a "need to know" basis. All persons involved should maintain confidentiality to the greatest extent possible, except to the extent needed for processing complaints under this Policy.

G. Retaliation

Reprisals or retaliatory action against an individual who, in good faith, reports or provides information in an investigation about behavior that may violate this policy will not be tolerated. Such action should be regarded as a separate and distinct cause for disciplinary action.

H. Malicious Allegations/Complaints; False Information

UAMS is committed to protecting the due process rights it provides to the accused as well as the accuser. Allegations of sexual harassment that are malicious, intentionally false, or without foundation are very serious with potential for great harm to all persons involved and are prohibited by this policy. Such actions constitute grounds for disciplinary action that may include, but is not limited to, written warning, demotion, transfer, or dismissal. Further, repeated filing of frivolous complaints is considered a malicious action and may be grounds for disciplinary action.

The failure to substantiate a sexual harassment complaint does not automatically constitute a malicious or frivolous complaint. In the event that allegations are not substantiated, every reasonable effort will be made and all reasonable steps taken to restore the reputation of the accused if it was damaged by the proceedings.

Procedure

Complaints of sexual harassment, submitted in writing or accepted orally, are taken seriously and will be dealt with promptly. Allegations of sexual harassment shall be judged on the facts of the particular case and the context in which the alleged incident(s) occurred. The complainant has the responsibility of providing evidence to substantiate the alleged sexual harassment. The specific action taken in any particular case depends on the nature and gravity of the conduct reported and may include intervention, mediation, investigation and the initiation of disciplinary action as described above. Where a violation of the Sexual Harassment policy is found to have occurred, UAMS will act to stop the harassment, prevent its recurrence, and discipline those responsible.

UAMS recommends that all reports of suspected sexual harassment be made within 180 days of the alleged incident to assist in the investigation process.

A. Reporting Procedures - Students:

1. In the event that a student believes that sexual harassment has been or is occurring, he or she is encouraged, but not required, to communicate clearly, preferably in writing, to the alleged harasser and state the conduct is not acceptable. The student is also encouraged to maintain careful written records of the harassment and to continue to maintain current records throughout the process.
2. The student should consider meeting with the appropriate student affairs official in his or her college to discuss the sexual harassment allegation. If the student cannot decide whether to initiate a formal complaint or is reluctant to discuss the matter with the alleged harasser, he or she may seek the advice of the Employee Relations Manager who, with the individual's permission, may seek to resolve the issue informally through discussions with the individual, the accused, and the accused's supervisor.

If the student does not wish to prepare a signed, written complaint, written documentation shall be prepared by the Employee Relations Manager of the Office of Human Resources or a college's designated individual within the Office of Student Affairs. Such written documentation shall include the nature of the complaint, the date(s) on which the alleged incident(s) occurred, and any witness(es) to the incident(s). The student shall be asked to read the written documentation prepared by the appropriate representative to acknowledge its accuracy; a written acknowledgment will be prepared and may be made in a separate document. If the student refuses to sign the written documentation, the Employee Relations Manager or college's designee shall note such on the documentation and forward it to the Office of Human Resources for determination of whether the complaint will be investigated despite the student's refusal to acknowledge the written documentation.

Written documentation shall be prepared before any informal discussions are held with the accused and the accused's supervisor. The accused shall be given an opportunity to read the written documentation that may be edited to protect the anonymity of the complaining individual and any other collateral witnesses to the process.

3. If the parties are unable to reach a mutually satisfactory agreement after an informal discussion, the option of filing a formal complaint is available.
4. The Informal Complaint Process may also include referral of either or both parties to confidential counseling through UAMS' Employee Assistance Program (EAP).
5. The complainant, the Office of Human Resources, or a college's Office of Student Affairs may elect to refer the complaint to the Formal Complaint Process at any time as deemed necessary to resolve the complaint in an appropriate and timely manner.

B. Informal Complaint Process

1. In the event that a student believes that sexual harassment has been or is occurring, he or she is encouraged, but not required, to communicate clearly, preferably in writing, to the alleged harasser and state the conduct is not acceptable. The student is also encouraged to maintain careful written records of the harassment and to continue to maintain current records throughout the process.
2. The student should consider meeting with the appropriate student affairs official in his or her college to discuss the sexual harassment allegation. If the student cannot decide whether to initiate a formal complaint or is reluctant to discuss the matter with the alleged harasser, he or she may seek the advice of the Employee Relations Manager who, with the individual's permission, may seek to resolve the issue informally through discussions with the individual, the accused, and the accused's supervisor.

If the student does not wish to prepare a signed, written complaint, written documentation shall be prepared by the Employee Relations Manager of the Office of Human Resources or a college's designated individual within the Office of Student Affairs. Such written documentation shall include the nature of the complaint, the date(s) on which the alleged incident(s) occurred, and any witness(es) to the incident(s). The student shall be asked to read the written documentation prepared by the appropriate representative to acknowledge its accuracy; a written acknowledgment will be prepared and may be made in a separate document. If the student refuses to sign the written documentation, the Employee Relations Manager or college's designee shall note such on the documentation and forward it to the Office of Human Resources for determination of whether the complaint will be investigated despite the student's refusal to acknowledge the written documentation.

Written documentation shall be prepared before any informal discussions are held with the accused and the accused's supervisor. The accused shall be given an opportunity to read the written documentation that may be edited to protect the anonymity of the complaining individual and any other collateral witnesses to the process.

3. If the parties are unable to reach a mutually satisfactory agreement after an informal discussion, the option of filing a formal complaint is available.
4. The Informal Complaint Process may also include referral of either or both parties to confidential counseling through UAMS' Employee Assistance Program (EAP).
5. The complainant, the Office of Human Resources, or a college's Office of Student Affairs may elect to refer the complaint to the Formal Complaint Process at any time as deemed necessary to resolve the complaint in an appropriate and timely manner.

C. Formal Complaint Process

1. When the Informal Complaint Process fails to resolve the complaint, or in instances where the college's Office of Student Affairs determines the nature of the allegations requires formal investigation, the Formal Complaint Process will be used. The Employee Relations Manager in the Office of Human Resources may assist the complainant in preparing his or her complaint, in writing, as necessary.

2. If a student wishes to file a formal complaint, he or she must submit a signed, written statement alleging harassment to the Employee Relations Manager of the Office of Human Resources. Documentation should include the name of the complainant, the name of the accused, the nature of the complaint, date(s), witness(es), and any other information relevant to the complaint. If some of this information is not available, the reason(s) of unavailability, if known, should be documented.

Upon receipt of the written complaint, the Employee Relations Manager will notify the Assistant Vice Chancellor of Human Resources, who will appoint two investigators to investigate the facts of the complaint.

The Employee Relations Manager will meet with the accused and present him or her with a copy of the complaint and a copy of the sexual harassment policy. The accused will be given an opportunity to respond to the complaint orally and in writing, and may provide evidence and witnesses. The Employee Relations Manager will also explain that there is to be no contact with or retaliation against the complainant.

The investigators will gather relevant evidence by interviewing the complainant, the victim (if different from the complainant), the accused, and any witnesses or other individuals deemed appropriate to conduct a thorough investigation.

Every effort will be made to ensure a thorough and timely investigation of the complaint.

3. Following completion of the investigation, the investigators will present their written findings to the Assistant Vice Chancellor of Human Resources. The Assistant Vice Chancellor of Human Resources will consult with the student's appropriate student affairs official regarding the written findings for purposes of resolving the complaint. It is the responsibility of the student affairs official to take action consistent with the written findings. Once a final determination is made by the appropriate student affairs official, both the complainant and the accused will be notified of the action to be taken.
4. Pursuant to FERPA (Family and Educational Rights to Privacy Act), student disciplinary records will remain confidential unless the accused consents to release of information.
5. Students who are found to have violated the sexual harassment policy may grieve any decision affecting their educational status through the grievance procedure of their respective college.
6. Complainants may not appeal administrative decisions regarding sexual harassment complaints through the UAMS grievance process.

Questions regarding this policy may be directed to the Office of Human Resources at (501) 686-5650.

4.12 UAMS SUBSTANCE ABUSE POLICY

Purpose

It is the goal of the UAMS to provide the highest quality health care, education and services available. To achieve this goal it is important that administrators, faculty, staff, and students be able to fulfill their respective roles without the impairment produced by intoxication or addiction to alcohol or other drugs.

The unlawful manufacture, distribution, dispensation, sale, possession or use of any controlled substance (as defined in the UAMS Drug-Free Workplace Policy) by any employee or student of UAMS while on University property or on a University affiliated assignment will not be tolerated. Consumption of alcohol on University property will not be tolerated, except within approved areas by individuals over the ages of 21 years. It is the policy of UAMS to provide a drug-free workplace. To support our goal of a drug-free environment, the UAMS drug testing program has been established and consists of (1) pre-employment drug testing, (2) for cause drug testing, and (3) random drug testing.

Policy

1. No employee or student of UAMS may report for their assignments and/or classes impaired by the use of alcohol or following the use of controlled substances.

2. Nothing in this policy will preclude the *medical* or *research* use of alcohol or controlled substances. Violators of this policy will be disciplined up to and including termination.
3. It is the underlying philosophy of the UAMS that addiction to alcohol and/or other drugs represents a disease state, and treatment of such problems is a legitimate part of medical practice. Employees or students with an addiction to drugs or alcohol are encouraged to seek help through the UAMS Employee Assistance Program (EAP) or Student/Employee Health Service. Individuals who seek help through the UAMS EAP or Student/Employee Health Service will not be punished for seeking such help. However, appropriate disciplinary procedures linked to performance criteria are not precluded by this policy.

4.13 NOTICE REGARDING DRUG TESTING AND CRIMINAL BACKGROUND CHECKS

A critical part of health professions education involves learning experiences in hospitals and other health care facilities. Use of these facilities for instruction is essential, and students must be able to complete their assigned rotations. Many hospitals and other health care facilities have policies requiring drug testing and/or criminal background checks for employees, students, and volunteers. Facilities that provide instruction to College of Health Related Professions students may have, or may adopt in the future, drug testing and/or criminal background check policies. Some facilities stipulate that students who test positive for drugs, or who have certain types of information in their criminal background checks, are ineligible to work in that facility.

Because the use of these health care facilities is part of the curriculum and essential to health professions education, students should be prepared to comply with the policies and procedures at any facility where they engage in rotations or other learning experiences. Students may not request facility assignments in an effort to avoid criminal background checks or drug screening requirements. Students may not refuse to participate in educational activities at these facilities because they do not want to submit to drug testing and/or criminal background checks. Students who fail to attend assigned activities, or who are terminated from rotations in these facilities because they violate the drug testing or drug use policies of the facilities, or who are found to have objectionable information in their criminal background checks, will be unable to complete the college requirements for graduation and will be subject to dismissal from the College of Health Related Professions on academic grounds.

4.14 UAMS SMOKING POLICY

Purpose

Smoking both from direct smoking as well as indirectly from inhaling the smoke from others who are smoking near-by, is a major cause of preventable disease and death. Further, individuals who smoke provide a role model that increases the likelihood that others around them will begin smoking and creates an environment that makes it more difficult for smokers around them who wish to quit to be successful in their quit attempts. The University of Arkansas for Medical Sciences (UAMS) is committed to promoting health, wellness, prevention and the treatment of diseases within the community as well as to providing a safe, clean and healthy environment for patients, visitors, employees and students. UAMS serves as a model for the community in the area of promoting the good health of our staff and influencing public attitudes about smoking. It is, therefore, UAMS's policy to provide a totally smoke-free work environment. UAMS is committed to providing helpful intervention strategies and treatment resources in addressing this issue and to offering programs to assist patients, students, current employees to reduce their dependence on tobacco products.

Definitions

Smoking - a lighted cigar, cigarette, pipe or other lighted smoking device carried by a person.

Employee - for the purpose of this policy, all UAMS employees while in UAMS facilities (leased or owned) or on the grounds of those facilities.

Students - for the purpose of this policy, any UAMS student attending any of the colleges on the UAMS grounds, leased or owned buildings.

Procedures

1. Employees/students are prohibited from smoking on or in all UAMS designated buildings, owned or leased properties, UAMS owned or leased vehicles, and UAMS adjacent grounds, including parking lots and ramps.
2. Patients in the UAMS Medical Center are prohibited from smoking in accordance with the UAMS Medical Center Policy Manual Policy PS 1.09.
3. This policy applies to all persons, including employees, faculty, students, patients, visitors, contractors, subcontractors, and others in UAMS buildings and parking lots and ramps. Individuals located in buildings off-campus which are not owned by UAMS will abide by the smoking policy of the particular building in which they reside. Administrative personnel responsible for these areas may impose more restrictive policies if so desired.
4. Compliance with this non-smoking policy will be the responsibility of all administrators.
 - ♦ Lack of cooperation or repeated violations should be reported to the individual's supervisor/student's department chairman. The supervisor/chairman shall then attempt to resolve the problem.
 - ♦ Standard disciplinary procedures will be followed for compliance problems with employees/students. Employees/students who violate the policy will be subject to progressive disciplinary actions, including termination.
 - ♦ In the event the smoking violation involves a potential threat to health or safety (e.g., smoking where combustible supplies, flammable liquids, gasses or oxygen are used or stored) the UAMS Police maybe called for additional support.
 - ♦ UAMS Police shall be notified as the final resource to resolve problems arising with visitors during the enforcement of this policy.
5. Signs will be posted at each building's entrances and displayed in prominent, visible areas thanking employees for not smoking in accordance with this policy.
6. Employees/students will be informed of the UAMS non-smoking policy during orientation. The Office of Human Resources will also inform employment candidates of the non-smoking policy during the application process.
7. Smoking materials will not be sold or dispensed within the UAMS campus.
8. Employees/students may not smoke in their own or others' vehicles when the vehicles are on UAMS property.

4.15 UAMS SEXUAL ASSAULT POLICY DISCLOSURE

Amended in 1992, the security policies released pursuant to the Campus Security Act shall specifically address sex offense prevention and include the following provisions in cases of alleged sexual assault:

- ♦ Accuser and accused must have the same opportunity to have others present.
- ♦ Both parties shall be informed of the outcome of any disciplinary proceeding.
- ♦ Survivors shall be informed of their options to notify law enforcement.
- ♦ Survivors shall be notified of counseling services.
- ♦ Survivors shall be notified of options for changing academic and living situations.

See page 25 for the Web address of the current campus security report.

4.16 SEX OFFENDER NOTIFICATION

The UAMS Police Department maintains information on registered sex offenders for the University of Arkansas Medical Science Campus and makes notifications regarding registered sex offenders associated with the Campus consistent with the state guidelines pursuant to Arkansas Code Annotated 12-12901-920 and 12-12-1301-1303.

These individuals subject to the notification process have been convicted of an offense that requires registration with the Arkansas Crime Information Center. These individuals, it must be stressed, are not wanted by law enforcement at this time and have already served their assigned sentences. Should you become aware of a registered sex offender on campus, no action on your part is required other than the type of alertness and caution that increases the safety of individuals, families, neighborhoods, and communities. Should you observe suspicious behavior on the part of such an individual, do not take action on your own, but immediately notify law enforcement. You may not share confidential information that you may receive regarding registered sex offenders with others, except those who have a need to know (for example, supervisors or co-workers in a position to prevent harm.)

A written summary of campus guidelines and the notification plan for each offender will be maintained by the UAMS Police Department. Our campus Police Department will also make determinations regarding notifications. If you seek further information, please contact Officer Flometta Berthia, UAMS Police Department at (501) 686-7777.

4.17 REPORTING POLICY FOR HIPAA VIOLATIONS

HIPAA refers to the Health Insurance Portability and Accountability Act that ensures the protection of patient health information. All students must receive HIPAA Training.

Protected Health Information (PHI) is that part of an individual's health information that identifies the individual or there is a reasonable basis to believe the information could be used to identify the individual, including demographic information, and that (i) relates to the past, present, or future physical or mental health or conditions of the individual; (ii) relates to the provision of health care services to the individual; or (iii) relates to the past, present, or future payment for the provision of health care services to an individual. This includes PHI which is recorded or transmitted in any form or medium (verbally, or in writing, or electronically). PHI excludes health information maintained in educational records covered by the federal Family Educational Rights Privacy Act and health information about UAMS employees maintained by UAMS in its role as an employer.

Policy

The UAMS workforce/students will abide by the federal standards for Privacy of Individually Identifiable Health Information, also known as the HIPAA Privacy Regulations, and will conduct themselves in accordance with the UAMS policies and procedures relating to the HIPAA Privacy Regulations. Any known or suspected violations of the HIPAA regulations or related UAMS policies and procedures must be reported in accordance with this Policy.

UAMS workforce who report in good faith such known or suspected violations shall not be subjected to retaliation intimidation, discrimination, coercion, or harassment as a result of their report.

Violations of this policy, including failure to report, will be grounds for disciplinary action up to and including termination. Any sanctions that are applied will be documented.

4.18 UAMS CONFIDENTIALITY POLICY

Purpose

Confidentiality measures are taken to assure that all UAMS employees, students, agents, or contractors hold information used or obtained in the course of their duties in confidence. The responsibility for maintaining confidentiality of information lies with the individual entrusted with the information. Implicit in the trust is the expectation that the individual will not divulge information, nor gain access to information unless there is necessity based on the job description or standards of practice.

Policy

UAMS prohibits the unlawful or unauthorized access, use or disclosure of confidential and proprietary information obtained during the course of employment or other relationship with UAMS. As a condition of employment, continued employment or relationship with UAMS, UAMS workforce shall be required to sign the UAMS Confidentiality Agreement approved by the UAMS Office of General Counsel. UAMS will provide training for each of its workforce members/students on the importance of maintaining confidentiality and the specific requirements of state and federal law, including the HIPAA Privacy Regulations and laws protecting the privacy of students and employees.

For purposes of this policy, "Confidential Information" includes information concerning UAMS research projects, confidential employee information, information concerning the UAMS research programs, proprietary information of UAMS, and sign-on and password codes for access to UAMS computer systems. "Confidential Information" shall include "Protected Health Information" which is any information about a UAMS patient, including demographic information, that relates to the past, present or future health of the patient, the health services provided to the patient, or payment for health services, and which reasonably can be used to identify that patient. Protected Health Information (PHI) includes the following examples of information about a patient, each of which, standing alone, constitutes PHI subject to this Policy: name, address, telephone or fax numbers, email address, date of birth, social security number, name of employer, admission or discharge dates, medical record number, medical diagnosis or health condition, health beneficiary, license number, or photographs.

This policy applies to information maintained or transmitted in any form, including verbally, in writing, or in any electronic form.

Procedures

Confidentiality Agreement: As a condition of employment, continued employment, or a relationship with UAMS (students), UAMS will require such individuals to sign the UAMS Confidentiality Agreement approved by the UAMS Office of General Counsel. The Confidentiality Agreement shall include an agreement that the signing party will abide by the UAMS policies and procedures and with federal and state laws, governing the confidentiality and privacy of information.

All new employees, students, or vendors requiring access to electronic Confidential Information (computer systems) must have a current Confidentiality Agreement on file in the IT Security Office. The UAMS IT Security Office will maintain signed Confidentiality Agreements and furnish a copy to the individual signing the agreement. It is the responsibility of the manager hiring individual vendors or consultants or receiving sales representatives or service technicians (who do not require electronic access but who may have access to Confidential Information) to require execution of the appropriate confidentiality agreements approved by the UAMS Office of General Counsel and to send those documents to the UAMS IT Security Office.

Restriction on Access, Use and Disclosure of Confidential Information: UAMS limits and restricts access to Confidential Information and computer systems containing Confidential Information based upon the specific duties and functions of the individual seeking or requiring access. UAMS will restrict access to Confidential Information to the minimum necessary to perform his/her job functions or duties. UAMS will further limit and control access to its computer systems with the use of sign-on and password codes issued by the IT Security Office to the individual user authorized to have such access. Authorization to access, use or disclose Protected Health Information also is governed by the UAMS Use and Disclosure Policy.

UAMS will control and monitor access to Confidential Information through management oversight, identification and authentication procedures, and internal audits. UAMS managers and heads of departments will have the responsibility of educating their respective staff members about this Policy and the restrictions on the access, use and disclosure of Confidential Information, and will monitor compliance with this Policy.

Sales Representatives and Service Technicians: Must register in the appropriate area (Refer to UAMS Vendor Policy), sign and complete the Confidentiality Agreement prior to any exposure to UAMS confidential information.

Media: All contacts from the media regarding any Confidential Information must be referred to the UAMS Office of Communications and Marketing.

Violation of Confidentiality Policy: Individuals shall not access, use, or disclose Confidential Information in violation of the law or contrary to UAMS policies. Each individual allowed by UAMS to have access to Confidential Information must maintain and protect against the unauthorized access, use or disclosure of Confidential Information. Any access use or disclosure of Confidential Information in any form - verbal, written, or electronic - which is inconsistent with or in violation of this Policy may result in disciplinary action, including but not limited to, immediate termination of employment, dismissal from an academic program, loss of privileges, or termination of relationship with UAMS.

All UAMS employees and others subject to this Policy must report any known or suspected incidents to access, use or disclose Confidential Information in violation of this Policy or in violation of the law.

4.19 POLICY ON AIDS AND STUDENTS

Introduction

The Policy Guidelines herein are of a generic nature and deal with students who are infected the Human Immunodeficiency Virus (HIV). They apply to all students enrolled in programs at UAMS. Due to differences in the various educational programs, individual UAMS colleges or programs may have specific rules and/or guidelines that are modifications of those in the generic policy. The specific policies of the various colleges will, however, be consistent in their intent with the guidelines noted herein.

Many reference sources were consulted in the preparation of this document (the major ones noted herein) and in all cases the proposed guidelines are consistent with those of The University Hospital of Arkansas Policy and Procedures Manual.

Admission and Retention

Admissions: The HIV status of an applicant should not enter into the application process. It should also not be determined in the admissions physical examination nor should routine serological assays be performed to determine the HIV status of applicants. Applicants applying for health care programs should, however, be informed that certain diseases may necessitate either a modification of their programs, or in the extreme, may necessitate their dismissal from a program if they cannot perform procedures and/or tasks that are considered essential to their educational experience.

Retention: If it is determined that a student is sero-positive for HIV and/or is clinically manifesting AIDS, that student should receive counseling, both as to their own health care and their interaction with others, especially patients. Students should be seen by a physician(s) relative to treatment and disease management and by a designated faculty member in their respective programs. The function of the designated faculty member is to counsel the student as to whether their program of education should be modified, or in the extreme, whether the student should be dismissed from a program because of their inability to perform procedures and/or tasks crucial to their educational program. Also, the health risks to the student must be considered because of the enhanced susceptibility of individuals to infectious disease of individuals with AIDS. For this reason, and to protect our patients from HIV exposure, the faculty advisor must work closely with the student's physician in order to determine whether the condition of a student warrants program modification. HIV sero-positive students should be cognizant of the fact that they pose a very low but potential risk to patients in the performance of invasive procedures and that they should seek advice as to protocols that will limit the likelihood of HIV transmission. These protocols are defined in The University Hospital of Arkansas Policy and Procedures Manual. The student should be cognizant that HIV sero-positivity alone may mitigate against performance of certain procedures. The confidentiality of this process is to be maintained in accordance with The University Hospital of Arkansas Policy and Procedures Manual.

Since programs within the UAMS system differ relative to curriculum, it is recognized that differences will exist as to the need for program modification or dismissal from a program. The key points as to whether a student's program should be modified or whether the student should be dismissed include the ability

of the student to perform tasks and/or procedures essential to their educational experience and the health risks that are imposed for the student should they continue in their program. At all times, the health management of the student and the health of our patients are of paramount importance.

Counseling

Students who are HIV sero-positive (symptomatic or asymptomatic) shall be counseled relative to their own health, and how their health status will impact on their performance as students at the UAMS. Each affected student shall be counseled by the Medical Director of Student/Employee Health or a designated medical faculty member, his/her personal physician if he/she has one, and the dean or his/her designee of the student's college concerning the appropriate safeguards and behavior expected. The student will be counseled on his/her future plans relative to their education, which may include withdrawal from their program if essential degree requirements cannot be met. Counseled students will sign a document attesting to the fact that they received counseling.

Counseling of the student concerning his/her continued academic endeavors will follow the policy outlined in the University Hospital of Arkansas Policy and Procedures Manual, including the confidentiality statement.

Housing

Data accrued over the last twenty (20) years clearly indicate that transmission of HIV from an infected to an uninfected non-sex partner as a function of co-habitation is extremely unlikely. This being the case, housing assignments involving HIV sero-positive students shall be handled in the same manner as for sero-negative students. The question of a roommate's right to know the HIV serological status of his/her roommate may occur. Release of information dealing with the HIV serologic status of students to other students is forbidden because disclosure of such information would breach the confidentiality rights of the student. Should a student become aware that his/her roommate is HIV sero-positive, the student may request a room assignment change. It is recommended that such requests be granted if appropriate housing can be provided. In any case, all students should observe universal precautions for body fluids at all times.

The question of sexual activity in the student housing facility is also a point of concern. All students are required to attend, as part of their orientation program, a seminar on AIDS (please see, AIDS Education below). This seminar will deal with the many facets of AIDS including the mechanisms of transmission of HIV, as well as, ways that students can protect themselves from being infected with HIV, both in terms of their profession and in terms of their sexuality.

Classroom and Extracurricular Activities

The extent to which HIV sero-positive students can participate in classroom and extracurricular activities is defined by the same parameters as for continuation of employment of Hospital employees; see University Hospital of Arkansas Policy and Procedures Manual. The key question is that of potential exposure to HIV-contaminated body fluids. Student classroom activities that involve potential exposure of students and faculty to HIV-contaminated body fluids should probably not be carried out if there is a strong likelihood that exposure to HIV will occur; however, in the event that it becomes necessary that a student perform invasive procedures on patients that are HIV sero-positive, the faculty member in charge must determine *a priori* that the student has the skills necessary to ensure that he/she is not exposed to HIV as a result of a compromise in the procedure or protocol being used. The question of potential exposure of patients to HIV as a result of interaction with an HIV sero-positive student is discussed in the University Hospital of Arkansas Policy and Procedures Manual.

HIV sero-positive students should be counseled concerning their participation in extra-curricular activities that by their very nature involve trauma and potential injury leading to bleeding. All students should be advised as to the precautions that they should take in the treatment of cases of trauma. This information should be provided as part of the student orientation program.

AIDS Education

Students will be required to attend, as part of their orientation program, an AIDS education seminar presented "live", on videotape, via interactive video, or in another appropriate format. A faculty member(s) will be available to answer any questions that students may have relative to AIDS. The following topics will be discussed in the presentation:

Students will be required to sign a document attesting to the fact that they have seen and understand the contents of the presentation on AIDS. Students will be encouraged to see their respective dean subsequent to the presentation should questions arise concerning AIDS.

1. The Nature of HIV.
2. The Pathophysiology of AIDS.
3. Current Treatment Modalities.
4. The Epidemiology of AIDS.
5. AIDS Prevention.
6. Institutional AIDS Policy.

References

1. Policy Guidelines for Addressing HIV Infection in the Academic Medical Community. A report of the AAMC Committee on AIDS and the Academic Medical Center, October 1988.
2. McClain, J. R., and T. E. Matteoli, *Confronting AIDS on the Campus and in the Classroom, A Guide for Higher Education*, College and University Personnel Association, 1989.
3. The University Hospital of Arkansas Policy and Procedures Manual, March 2, 1989.
4. Blood-Borne Pathogen Disease in Health Science Students: Recommendations from the Lexington Conference, *J. Am. Coll. Health* 50:107-120, 2001.

4.20 AIDS POLICY FOR THE CHRP

Introduction

The College of Health Related Professions adheres to the UAMS policy on admission of students with HIV-1 sero-positive status.

Policy

In every case, department chairmen and faculty will work closely with HIV-1 sero-positive students to make every effort to retain them in the program if it is possible to do so. The use of models and manikins as substitutes for actual patient contact will be employed if the educational objectives of the program can thusly be achieved and appropriate competencies developed in the student. It should be noted, however, that HIV-1 sero-positive graduates may have great difficulty finding employment in hospitals if their status were to become known to potential employers.

In certain programs, HIV-1 sero-positive status prevents the students from performing certain clinical procedures necessary to meet program requirements. Contact the department chairman if you have questions or concerns.

4.21 THE UNIVERSITY HOSPITAL OF ARKANSAS AIDS POLICIES AND PROCEDURES

4.21.1 Reporting of HIV-Antibody Results

Policy

Reporting results of tests for HIV antibody shall preserve the confidentiality of the test results as appropriate for good medical practice. Reporting is applicable to students, residents, faculty, employees, and patients.

Arkansas statute requires that all positive HIVs (after confirmation via the Western Blot Test) must be reported to the Arkansas Department of Health. Reporting shall occur by the Pathology Director who has designated this to Infection Control (or designee) in the Infection Control Office.

Procedures

Employee and Student Results: Tests for employees/students, residents, and faculty shall be reported as: The Clinical Laboratory shall report all negative tests in the computer.

Organ Donor Results: Tests performed on organ donors shall be reported in a standard format in the medical record, if applicable.

Patient Results: All patient results shall be reported in the medical record utilizing the standard laboratory reporting format. Positive results shall be reported to Department of Health only upon confirmation by Western Blot.

4.21.2 Needle Stick/Sharps Injuries and Blood/Body Fluid Exposure

Policy

All faculty, employees, residents, or students, who suffer a parenteral (e.g., needlestick or cut) or mucous membrane (e.g., splash to the eye or mouth) exposure to blood or other body fluids, or who have a cutaneous exposure involving large amounts of blood or prolonged contact with blood – especially when the exposed skin is chapped, abraded, or afflicted with dermatitis – shall:

- 1. Report the incident immediately to their immediate supervisor or instructor.**
- 2. Call immediately to EH/SPHS at (501) 686-6565, if it is during regular business hours or the Emergency Department (ED) at (501) 686-7925, if it is after business hours.**
- 3. The amount of risk incurred as a result of the exposure must be evaluated and prophylactic treatment must be started within 2 hours to be effective.**
- 4. Complete the UAMS Incident and Injury (I&I) Report form.**

Information about the source patient shall be documented on the Employee I&I Report form by the nursing supervisor or his/her designee from which the source patient is receiving care. **All employees and students who have a blood/body fluid exposure are to be evaluated either by the EH/SPHS or the ED regardless of the type of exposure or risk status of the source patient.**

The I&I form shall accompany the employee/student to EH/EPHS or the ED at the time of the initial evaluation.

It is the responsibility of the employee's supervisor or student's instructor to make sure that all information relevant to the I&I has been completed and the involved employee or student has called either EH/SPHS or the UAMS ED, for triage. It is the responsibility of the Nursing Supervisor or designee to record all information regarding the source patient on the I&I, notify either EH/SPHS or the ED with the risk factors for HIV, and ensure that orders are written for lab work on the source patient's chart.

Procedures

- I. "Clean" Needle Stick/Sharps Injury
 - A. The supervisor or designee shall record that a "clean" needlestick has occurred. A "clean" injury is defined as one where the instrument involved has not been used on a patient.
 - B. The employee/student should call the EH/SPHS or ED to arrange to be seen within 24 hours for wound treatment and tetanus prophylaxis, if necessary. No further treatment is necessary.
- II. Sharps Injury/Blood or Body Fluid Exposure Involving a Patient
 - A. If the involved patient cannot be identified:
 1. The supervisor or designee shall note on the I&I form that the source patient is unknown.
 2. The employee/student shall contact EH/SPHS or the ED immediately after the exposure.

3. The employee/student will start or resume the Hepatitis B vaccine series if it is determined to be necessary.
 4. The employee/student will have a baseline HIV and HBSAb drawn at the time of the initial visit. The HIV will be repeated in 3 months.
- B. Source Patient Involved Can Be Identified:
1. The supervisor or designee shall:
 - a. Record the source patient's name, medical record number, physician, and pertinent medical information from the source patients chart regarding the risk status for Hepatitis and HIV infection (e.g., history of blood transfusions, IV drug use, incarceration, sexually transmitted diseases) on the I&I form.
 - b. Obtain orders from the physician for a Hepatitis B Surface Antigen (HBSAg) and HIV serologies to be drawn as soon as possible on the source patient. The lab work will be performed at the hospitals expense. Document in the chart that this is an "Occupational Exposure-No Charge".
 2. The employee's supervisor or instructor shall ensure that the above information has been documented on the appropriate forms and that the involved employee/student has been referred for appropriate evaluation and treatment.
 3. When used in this paragraph, the term "employee" shall be deemed to include all UAMS employees, residents, faculty, or students, who suffer an exposure at UAMS. A source patient's blood may be tested for HIV, Hepatitis B, and other diseases as recommended by the Arkansas State Health Department at the hospital's expense without the consent of the patient or a patient representative. If the source patient is capable of understanding, the patient's attending physician shall inform the patient of the incident, the need to test the patient's blood, and that the patient will be informed of the results of the tests. The patient's physician is not required to provide such information to a patient's representative if the patient is incapable of understanding. When the results are obtained, the physician shall advise the patient of the results, and shall provide appropriate counseling. Results of the tests will also be provided to the affected employee and to the employee's physician, both of whom shall have an obligation to maintain the patient's confidentiality. **It is the responsibility of the supervisor to make sure that this policy is carried out.**
 4. Treatment of Employee/Student Following Patient Testing
 - a. The supervisor or designee shall record which tests were done on the source patient and the date on which they were done on the I&I form.
 - b. The employee/student shall contact either EH/SPHS or the ED as soon as possible after the exposure. The employee must be evaluated by a physician in EH/SPHS or the ED within two (2) hours of the exposure.
 - c. If the source patient has AIDS or is sero-positive for HIV, the employee/student will be tested for HIV at the initial evaluation, and, if the employee/student is sero-negative, will retest at six weeks, three and six months following the exposure. The employee/student will be counseled to report back to EH/SPHS for any febrile illness that occurs within twelve weeks of the exposure (such as illness, particularly characterized by fever, rash, or lymphadenopathy which may be indicative of recent HIV infection). Especially during the first six to twelve weeks of the follow-up period, the employee/student should be advised to follow U.S. Public Health Service recommendations for preventing transmission of HIV.
 - d. If the source patient is sero-negative for HIV, the employee/student will be tested for HIV at the initial evaluation, and if sero-negative, the employee shall be retested at three months.

- e. Any employee or student who agrees to be tested for HIV following an injury or exposure and is found to be sero-positive shall be informed of the test results and will be seen and counseled by an EH/SPHS physician regarding the need of further confirmatory testing. Reporting of confirmed positive HIV tests will be performed in accordance with Hospital Policy and Procedure Number A-14, Reporting of HIV Antibody Results.

III. Source Patient Is Diagnosed or Suspected of Having a Blood-Borne Infection

- A. The supervisor or instructor shall record any of the following diagnosed or suspected blood-borne infections:
 - 1. Arthropod-borne viral fevers
 - 2. Babesiosis
 - 3. Creutzfeldt-Jacob Disease
 - 4. Hepatitis C
 - 5. Leptospirosis
 - 6. Malaria
 - 7. Rat-bite fever
 - 8. Relapsing fever
 - 9. Syphilis, primary and secondary
 - 10. HIV
- B. EH/SPHS shall follow recommendations for tetanus, HIV, and Hepatitis B evaluation according to the situation.
- C. EH/SPHS may consult an infectious disease specialist in the event that an employee had an injury/exposure to any of the above listed diseases.

IV. Billing for Blood/Body Fluid Exposure

- A. Employees: Since this type of injury is classified as "job related", a claim for Worker's Compensation shall be initiated at the time that the employee reports to either EH/SPHS or the ED.
- B. Students: Students who have a blood/body fluid exposure shall also be evaluated by EH/SPHS or the ED and are subject to completing an I&I Report form so that proper evaluation and treatment may be accomplished. Insurance and/or the appropriate college shall be billed in the case of students with a blood/body fluid exposure.

V. The Administration of Chemoprophylaxis Post-Exposure to Blood/Body Fluids

- A. The hospital will make chemoprophylaxis available for UAMS employees who have sustained an occupational exposure from either a high risk or HIV positive patient. Insurance or the appropriate college will be billed for Chemoprophylaxis for UAMS students.
- B. EH/SPHS has developed a protocol for Post-Exposure Prophylaxis which involves counseling, informed consent, prescribing the drug, and follow-up visits with laboratory assessment. Symptoms and laboratory work will be monitored to minimize toxicity. The use of Chemoprophylaxis following occupational exposure to HIV is controversial. The decision will rest with the individual and the EH/SPHS or ED physician. In theory, chemoprophylaxis is best given within the first 2 hours following the exposure.

4.21.3 Protection Against Occupational Exposure to Hepatitis B Virus (HBV), Hepatitis C, and HIV

Policy

Since medical history and examination cannot reliably identify all patients infected with HIV, Hepatitis B, or Hepatitis C, or other blood-borne infections, "Universal/Standard Precautions" when handling blood and body fluid shall be consistently used for all patients. Students, residents, and employees (hereafter known as health care workers) shall not be permitted by their supervisors to draw blood or perform invasive procedures until their skills have reached a satisfactory level of proficiency.

Procedure

- I. Routine Precautions
 - A. Health care workers shall use appropriate barrier precautions according to Universal/Standard Precautions, see below.
 - B. Hands and other skin surfaces shall be cleaned immediately if contaminated with blood or body fluid. Hands shall be washed after gloves are removed.
 - C. Precautions to prevent "sharps" injury should be taken. Needles should not be recapped, bent, or broken by hand, or removed from disposable syringes. After use, "sharps" should be placed in puncture-resistant containers for disposal.
 - D. Although saliva has not been implicated in HIV transmission, mouth-to-mouth resuscitation should be replaced by mouth pieces, resuscitation bags, or other ventilation devices.
 - E. Health care workers with exudative lesions or weeping dermatitis should refrain from direct patient care and handling equipment until the condition resolves.
 - F. Pregnant health care workers are not known to be at greater risk of contracting HIV, Hepatitis B, or Hepatitis C than non-pregnant workers. However, if infections did occur, prenatal transmission may result. Therefore, pregnant health care workers should be especially familiar with and strictly adhere to these precautions.
 - G. Blood, saliva, and gingival fluid from all dental patients should be considered potentially infected. Blood and body fluids from all patients sent to clinical laboratories should be considered potentially infected.
- II. Universal (Standard) Precautions
 - A. **Hand Hygiene:** Frequent hand hygiene is an important safety precaution which should be practiced after contact with patients and specimens. Hands should always be cleaned with antimicrobial soap or waterless hand cleaner before and after contact with patients even when gloves have been used. If hands come in contact with blood, body fluids, or human tissue, they should be immediately cleaned with an antimicrobial agent. (Washing with an antimicrobial agent is recommended; however, soap and water may be used. Using a moisturizing hand cream may reduce skin irritation caused by frequent handwashing.)

Hands NEED to be cleaned:

 1. Before invasive procedures.
 2. After the completion of work.
 3. Before any contact with wounds.
 4. After removal of gloves and/or other protective clothing, immediately or as soon as possible after hand contact with blood or other potentially infectious materials and upon leaving the work area.
 5. Before eating, drinking, smoking, applying makeup, changing contact lenses, and using lavatory facilities.
 6. Before all other activities which entail hand contact with mucous membranes or breaks in the skin.
 7. Immediately after accidental skin contact with blood, body fluids, or tissues, hands or other skin areas should be thoroughly washed. If the contact occurs through breaks in gloves, the gloves should immediately be removed and the hand should be thoroughly cleaned.
 8. Between contacts with different patients.

9. After contact with a source that is likely to be contaminated with virulent microorganisms or hospital pathogens (e.g., touching infected patient, after taking rectal temperatures, emptying Foley bags, blowing nose).
- B. **Gloves:** Gloves shall be worn when the employee/student has the potential for direct skin contact with blood, other potentially infectious materials, mucous membranes, non-intact skin of patients, and when handling items or surfaces soiled with blood or other potentially infectious materials. Gloves shall be disposable and changed in between patients, or between different open body sites. Gloves should be changed if they become visibly contaminated with blood or body fluids or if physical damage occurs. Latex, vinyl, or polyethylene gloves all provide adequate barrier protection. Wearing two pairs of gloves (double-gloving) is recommended in situations where large amounts of blood may be present in the field of work, such as in the Emergency Room.
- C. **Facial Protection:** Masks and eye protection or face shields shall be worn whenever splashes, spray, splatter, droplets or aerosols of blood or other potentially infectious material may be generated and there is a potential for eye, nose, or mouth contamination. Full-face shields made of lightweight plastic (similar to chemical splash shields) are the preferred means of facial protection. They offer excellent protection of the entire face and neck region. A surgical mask offers protection of the nose and mouth. Either soft or preformed masks are effective. Ordinary prescription glasses are not adequate eye protection. Better protection is afforded by plastic wrap-around safety glasses that fit over regular glasses. If there is substantial hazard of spattering, goggles with a plastic cushion seal are preferred. Surgical caps may be worn if extreme spattering is anticipated.
- D. **Occlusive Bandages:** All open skin defects (e.g., exudative lesions, dermatitis, cuts, abrasions, etc.) on health care workers shall be covered with a water-impermeable occlusive bandage. This includes defects on the arms, face, and neck.
- E. **Gowns, Aprons and Other Protective Body Clothing:** Appropriate protective clothing shall be worn when the employee/student has a potential for exposure to blood and other potentially infectious materials. Gowns and laboratory coats shall be changed immediately if grossly contaminated with blood or body fluids to prevent blood seeping through and contaminating street clothes or skin. They should be changed at appropriate intervals to ensure cleanliness. Contaminated gowns shall be placed into the isolation linen bag and sent to the hospital laundry. Disposable plastic aprons are recommended if there is a significant probability that blood or body fluids may be splashed on the worker. At the completion of the task being performed, the apron shall be discarded into a biohazard container.

4.21.4 Health Care Workers with HIV and Infectious HBV

Policy

The purpose of this policy is to prevent transmission of blood-borne pathogens, specifically HIV and HBV, from health care workers who are infectious. The term "health care worker" shall mean any person who provides medical or health care to a patient at UAMS Medical Center, and shall include employees, students, staff physicians, residents, and all other providers of medical or health care at UAMS Medical Center. UAMS Medical Center provides an environment that limits the potential for transmission of bloodborne infections from UAMS health care workers to patients, while protecting employee privacy.

Procedure

1. **Reporting of Infectious Status:** Health care workers who are infected with HIV or who are HBV surface-antigen-positive are encouraged to report their status. Physicians are encouraged to report their status to their Chief of Service and the Chief of Staff; students are encouraged to report their status to the Dean of Students; and employees are encouraged to report their status to their supervisors.
2. **Counseling:** UAMS shall provide counseling to every such individual who reports a positive HIV or infectious HBV status. Counseling shall include education as to the modes of transmission of blood-borne pathogens, the risk of transmission, appropriate standards of personal hygiene, maintenance of health for the infected individual, and restriction, if any, on such individual's work. If appropriate, the individual shall also be informed of the possibility that knowledge of the individual's status may become known due to work restrictions. Counseling shall be provided under the direction of the Medical Director of Student/Employee Health.
3. **Disciplinary Action:** Any infected individual who places any other person at risk of infection by failing to follow reasonable precautions and restrictions shall be subject to appropriate disciplinary measures.
4. **Restriction On Work:** Infected individuals shall not perform "exposure-prone procedures". Characteristics of exposure-prone procedures include digital palpation of a needle tip in a body cavity or the simultaneous presence of the individual's fingers and a needle or other sharp instrument or object in a poorly visualized or highly confined anatomic site. Performance of exposure-prone procedures presents a recognized risk of percutaneous injury to the individual, and if such an injury occurs, the individual's blood is likely to contact the patient's body cavity, subcutaneous tissues, and/or mucous membranes. The Chief of Service will make determinations about potential performance of exposure-prone procedures on a case-by-case basis on consultation with experts in the field.
5. **Confidentiality:** If an infected individual reports her/his status as outlined in this policy, the person who receives such report shall maintain the information in confidence, with further disclosure being limited to those with a need to know, who shall have the same duty of confidentiality.

4.21.5 Employee Vaccinations and Tuberculosis (TB) Screening

Purpose

Minimize potential exposure to vaccine-preventable diseases and Tuberculosis for all UAMS employees, students, volunteers, patients, and visitors.

Policy

UAMS makes optimal use of immunizing agents and TB screening to safeguard the health of workers and protect patients from becoming infected with vaccine-preventable diseases or TB. Vaccines will be administered as indicated unless contraindicated.

Procedure

- I. The UAMS Employee Health/Student Preventive Health Services provides a medical screening for vaccine-preventable diseases and TB.
 - A. All personnel are required to have a TB screening within six (6) months of employment and annually thereafter. Special populations may be required to have more frequent screenings.
 - B. All personnel who do not have documentation of Rubella vaccine or do not have laboratory evidence of immunity must be vaccinated.
 - C. All personnel born in or after 1957 must be vaccinated for Measles/Mumps if they do not have one of the following:

1. Proof of two doses of live measles vaccine no closer than one month apart or of one dose of live Measles vaccine after age 12.
 2. Documentation of physician-diagnosed Measles.
 3. Laboratory evidence of Measles immunity.
- D. Personnel with the potential for occupational exposure to Hepatitis B on the average of one or more times per month, and who do not have documentation or history of completion of the vaccine series or laboratory evidence of prior disease, should obtain this vaccine.
- Occupational exposure means reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties. This definition excludes incidental exposures that may take place on the job, and that are neither reasonably nor routinely expected and that the worker is not required to incur in the normal course of employment.
1. Personnel who were offered the Hepatitis B vaccine and declined have documentation entered into their record indicating their choice.
- E. Hemodialysis workers are required to receive Hepatitis B vaccine.
- F. Personnel whose duties involve the risk of directly contracting and spreading the Hepatitis A Virus, specifically laboratory or other health care workers who handle Hepatitis A Virus and Food Handlers, are offered the Hepatitis A Vaccine.
- G. All personnel are offered the Influenza vaccine according to CDC guidelines for that particular year.
- H. All personnel are offered a Tetanus Diphtheria booster every 10 years. A current booster is required for all employees who work with animals. A history of the vaccination is sufficient.
- I. All personnel working in high risk areas with neonates (newborns), children, and oncology patients without a reliable history of Varricella disease or proof of vaccination must have a Varricella titer. Those who are seronegative for Varricella must be vaccinated.
- II. UAMS employee, student, volunteer, patient, and visitor non-compliance with the above will be subject to disciplinary measures.
- III. The financing of necessary vaccinations will be in accordance with Hospital Policy HR.3.01.

4.21.6 Testing Patients for HIV - Consent Requirement

Policy

No student, employee or member of the medical or affiliate staff shall test a UAMS Medical Center patient for HIV except in accordance with this Policy.

Procedure

Documentation in the medical chart of patient consent (verbal or written) of the patient to testing shall be obtained in advance of testing, unless the patient's attending physician orders testing without consent in one of the two following circumstances:

1. A student, employee, staff member, or other person providing health care at UAMS Medical Center has been exposed to a patient's bodily fluids, in which case testing shall be done in compliance with UAMS Medical Center Policies and Procedures.
2. In the judgment of the patient's attending physician, such testing is medically indicated to provide appropriate diagnosis and treatment to the patient, provided that the patient has otherwise provided his or her consent to such physician for medical treatment, if able to do so.

4.22 MILITARY DUTY POLICY

Students enrolled in the UAMS CHRP, who are members of military reserve or national guard units and who are called to active military duty as a result of the activation authorized by the President of the United States may elect one of the following options:

1. The student can officially withdraw from the CHRP, and receive a full adjustment and refund of tuition and nonconsumable fees for the terms involved. A copy of the activation orders must be attached to the official withdrawal form for the student to obtain the full tuition and fee adjustment and refund. Students electing this option will not receive credit for any courses for the semester(s) involved; however, the academic record will indicate enrollment until the official date of withdrawal.
2. The student can remain enrolled and arrange for a mark of "Incomplete" for each class for which he or she is enrolled, provided the work to date is of passing quality. In order to receive a mark of "Incomplete" in any course, the student must obtain agreement from the instructor of the course. Upon discharge from the service, the student must within six months develop with the department in question a satisfactory plan to remove the "Incomplete".
3. An instructor who believes a sufficient portion of a course has been completed may assign an appropriate final grade in that course at the time the student leaves. This grade will be reported on the final grade roster.
4. A student activated during the course of a semester shall be entitled, within a period of two (2) years following deactivation, to free tuition for one (1) semester at the institution where attendance had been interrupted unless federal aid is made available for the same purpose.

4.23 INCLEMENT WEATHER POLICY

UAMS recognizes that transportation problems result from inclement weather and hazardous road conditions. However, by virtue of our commitment to patient care, academics, and research, this campus never closes. When such conditions occurs, the inclement weather alert will be invoked by the Chancellor of the University for the day the policy is to be effective. If the invocation states that the alert applies to day shift workers, then all CHRP classes are canceled for that calendar day (day and evening). Canceled classes and examinations will be rescheduled by the department or course faculty at a later time, possibly at night or on weekends. Students assigned to clinical activities should follow the procedures specified by their respective departments. If the inclement weather policy has not been invoked but the road conditions where students live precludes safe travel, students should notify their Department Chairman of their inability to attend class. Students should then work with the course faculty to make up what was missed.

If the alert is invoked sometime after the beginning of the workday, CHRP classes scheduled after that alert are canceled. The following day after the weather alert, CHRP classes should meet as scheduled unless another alert is invoked for that day. If the alert occurs on the day of CHRP registration, the next available workday that is not another UAMS' College registration day will be used to register CHRP students. The department chairman will notify students as to which day will be used for alternate registration.

The inclement weather alert should be announced on KARN (AM 920), KURB (FB 98.5), KARK (Channel 4), KATV (Channel 7), and KTHV (Channel 11).

4.24 COMPUTING SERVICES (Student Computer and Email Resources)

1. Network access: Access to the UAMS network, including access to the Internet via the UAMS network, on-line reference and information resources provided through the UAMS Library, and other UAMS computing resources is, generally speaking, restricted to persons having a UAMS network account; *i.e.*, a UAMS network domain logon ID and password. All active UAMS students receive UAMS network accounts. Information about network accounts is provided to new students during the registration or orientation processes.

Everyone granted access to the UAMS network must review and sign the UAMS Confidentiality Agreement (Go to <http://intranet.uams.edu/tools.htm>) and click on the “Confidentiality Agreement” link under “Information Technology”. This requirement will also be dealt with during registration.

Your UAMS network account is to be used only by you. Do not share your UAMS network logon identification and password. This is one of the provisions of the Confidentiality Agreement.

2. Network access passwords

- ◆ Passwords for UAMS network accounts are case sensitive and must be a minimum of six (6) characters and no more than 240 characters.
- ◆ Passwords can, and should, include alphabetic, numeric, and special characters, e.g., #4Gh1b or jOke51mn.
- ◆ Passwords should not be overtly based on personal information such as family members’ or pets’ names, birth dates, or similar information.
- ◆ Network passwords can include spaces. A good way to define an effective password is to use a nonsensical phrase such as “The sky is blue and orange but never on Sunday.”
- ◆ UAMS network account passwords expire every 90 days. As the expiration of your password approaches, you will receive warnings when you log onto the UAMS network. You can change your password at that time. You can also change your password at any time by clicking on “Reset Your UAMS Domain Password” at <http://webmail.uams.edu/>.
- ◆ Sharing your logon information or using someone else’s logon information to gain access to the UAMS network or information systems violates UAMS policy and the UAMS Confidentiality Agreement.
- ◆ Change your password if you suspect any problems. If you suspect someone else has used your account, notify the IT Security Department at (501) 686-6207.

3. Acceptable Use Guidelines for Student Use of UAMS Network and Computer Resources

The UAMS network, computer laboratories, and other computing resources support the teaching, research, and clinical care missions of the UAMS. Faculty, staff, and students are encouraged to use these resources as tools for work, learning, communication, and research. It must be recognized, however, that these resources serve a large number of users for a variety of purposes. The following guidelines describe acceptable and unacceptable uses of these resources. They are intended to foster use of these resources that is consistent with their intended purposes and that is responsible, appropriate, efficient, and in accord with legal and ethical standards.

Appropriate and acceptable uses include:

- ◆ Use for UAMS course assignments or any project assigned by a UAMS faculty member.
- ◆ Use to facilitate UAMS research projects or other UAMS work-related projects.
- ◆ Communication with faculty, staff, and students at UAMS to share information.
- ◆ Communication with faculty, staff, and students at other universities for the purpose of exchanging educational or general information.
- ◆ Use of Internet access for personal information research and personal communication with others at UAMS and elsewhere is acceptable if such use is not excessive, does not interfere with use of resources for education or research, and does not violate any other acceptable use provisions or UAMS policies.

Unacceptable uses include but are not limited to:

- ◆ Use of Internet access or other resources for mass transfers or personal files or other materials or for any other personal purpose which consumes a large amount of network bandwidth or other network or computing resources is unacceptable.

- ◆ Unauthorized use of these resources by non-UAMS personnel.
- ◆ Use for any purpose that violates U.S. or state laws including copyright laws. (See the Guidelines for UAMS Faculty, Staff, and Students Using Copyrighted Materials at <http://www.library.uams.edu/policy/copyguide.aspx>.)
- ◆ Use which violates any other applicable UAMS policy.
- ◆ Downloading information from Internet sites to be used in committing a crime or which can result in harm to others.
- ◆ Use for any commercial enterprise or for outside employment.
- ◆ Creation or propagation of computer viruses.
- ◆ Unauthorized entry into other computers or information systems.
- ◆ Use in a manner that interferes with or disrupts other users, services, or equipment.

Use of these resources for course assignments, education, research, and UAMS work-related projects has precedence over all other uses. Additional rules governing their use may apply in particular facilities.

4. As a member of the UAMS community, you are also obligated to observe all UAMS policies relating to the use of network and computer resources. Consult the UAMS Administrative Guide at <http://www.uams.edu/AdminGuide/index.html> to review UAMS policies. See in particular:

Confidentiality Policy	http://uams.edu/AdminGuide/Win03115.html
Email Access and Usage	http://uams.edu/AdminGuide/Win07112.html
Wireless Networking	http://uams.edu/AdminGuide/Win07113.html
Use of Computer Resources	http://uams.edu/AdminGuide/Win07201.html
Access to Internet	http://uams.edu/AdminGuide/Win07221.html

5. Revocation of Access: Violation of the Acceptable Use Guidelines or other UAMS policies may result in loss of your privileges to use the UAMS network and computing resources and/or disciplinary action by your department or college.
6. Internet Access: Access to the Internet is provided through the UAMS network. Other than in particular cases, such as the public access PC's in the UAMS Library, you must log onto the UAMS network in order to gain access to the Internet. Moreover, further restrictions may be enforced in clinical work areas or other areas in which more stringent security requirements apply.
7. Email: All students receive UAMS email accounts. You will receive information about your email account during the registration or the orientation process. Email services for UAMS students, faculty, and staff are provided through Microsoft Exchange and Outlook. You can access your email account via the Web at <http://webmail.uams.edu/> using an up-to-date Web browser such as those listed on <http://webmail.uams.edu/Download.htm>. This requires that you have an active UAMS network logon ID and password. See <http://www.uams.edu/email/outlook2003/> for more information.
8. Clinical Information Systems: Access to clinical information systems is only available after appropriate training. Logon IDs and passwords for access to these systems will be made available to students when training has been completed.
9. Technical Support Center (Help Desk): For resolution of issues related to your UAMS network or email accounts, access to clinical information systems, and computer security provisions contact the UAMS Technical Support Center at 686-8555 or TechSupportCenter@uams.edu . Support Center staff will answer your questions or direct your call or request to the appropriate personnel.
10. Computer Laboratories: The principal computer facilities available to all UAMS students are the public computer access areas in the UAMS Library (1st, 2nd, and 3rd floors) and the Library Learning Resource Center (LRC) computer laboratories (3rd and 5th floors of the Library). The public access computers in the Library provide access to the Library catalog, on-line resources, the Internet, and Microsoft Office

applications. In addition to these services a wide variety of computer-based educational resources and other software are available in the LRC computer laboratories. Library computer facilities available after work hours are equipped with security provisions including card-swipe door access devices, door alarms, and monitored security cameras. See the Library section of the handbook for more information.

In addition, the college may provide access to computers for their students in Education South, 8th floor Shorey Building in the Health Information Management Laboratories, and the student area of the Department of Audiology and Speech Pathology.

11. Computer classrooms: UAMS educational facilities include several computer classrooms used for scheduled computer-based classes and exams. These computer classrooms are located on the 8th floor of the Ed 2 building. They are equipped with security provisions including card-swipe door access devices, door alarms, and monitored security cameras. Use of these facilities is scheduled through the Office of Academic Services and is ordinarily restricted to UAMS curricular activities or other UAMS sponsored educational programs.

SECTION 5.0
FINANCIAL AID

GENERAL INFORMATION

Student financial aid programs are intended to remove financial barriers to education for those who are unable to pay and to ease the financial burden for those who are more able to pay. Financial aid resources must be coordinated and delivered to students in a manner which best fits their needs. Therefore, a combination of types of aid is offered to students as a financial aid package. Generally, financial aid is divided into the following categories:

1. **Scholarships:** To be eligible for any of the College scholarships you must be enrolled at least half-time (6 SC or more) during the semester you expect to receive the scholarship. Part-time students must have completed at least 6 SC course work in the College of Health Related Professions to be eligible for receipt of a CHRP scholarship. You will need to provide a copy of your degree plan and a confirmation from the department chairman with the application. Contact the College of Health Related Professions Office at 686-5730 for additional information.

2. **Federal Financial Aid:** The UAMS Student Financial Aid Office processes aid offered through the Title IV Federal Aid programs and the Arkansas Department of Higher Education. Generally, this aid is divided into the following categories:

Grants: Grants are not repayable and usually are awarded to students who have exceptional financial need.

Loans: Loans **MUST** be repaid. Principal and interest are usually deferred until the student ceases to be enrolled at least half time; however, certain loans require interest and/or principal payments while students are in school.

Employment: Federal Work Study (FWS) is available to students who qualify and payment is received at the end of each pay period. In addition to filing the usual financial aid application, students must submit a written request for FWS.

To apply for loans, grants, or Federal Work Study, the student should complete the Free Application for Federal Student Aid (FAFSA). This application is included in a packet that may be obtained from the UAMS Financial Aid Office located in the College of Public Health Building, 1st floor, room 1232B. For more details about these financial aid programs, visit the Web site at: <http://www.uams.edu/studentfinancialaid/>.

To request a packet or additional information, call the UAMS Student Financial Aid Office at 501-686-5451; office hours are Monday through Friday, 8:00 AM to 4:30 PM. It is not necessary to make an appointment to visit with the Financial Aid Office staff, and any student, prospective student, or parent may visit or call at any time. This office will return long distance telephone calls from students outside the Little Rock area.

Students are encouraged to apply for financial aid (after filing a federal tax return) between January and March of the academic year that they plan to attend. Acceptance into a program of study is not required to apply for financial aid, and it is strongly recommended that students complete the Free Application for Student Financial Aid (FAFSA) as soon as they decide to pursue their education. Award letters will be processed throughout the year; however, funds for an upcoming semester or summer session will not be disbursed prior to the date of registration for that semester or summer session.

Students who receive a grade of "I" for a course may have their financial aid withheld for the following semester. Those students who begin the subsequent semester with an "I" may be eligible to have tuition deferred but will not receive any other funds. The chairman of the student's department will recommend to the Associate Dean for Academic and Student Affairs which student's tuition can be deferred. Financial aid will be awarded when the course(s) are satisfactorily completed.

SECTION 6.0

ACADEMIC INFORMATION

6.1 ACADEMIC REQUIREMENTS

6.1.1 Progression

For a student to progress in a CHRP professional program from one semester to the next, including progression from one year to the next, each semester he/she must achieve a grade of "C" or higher in all professional courses designated by the respective program (see individual departmental sections of the current CHRP Catalog) as prerequisite to progression to subsequent course work. In addition, students are required to maintain a program grade point average (PGPA) of at least 2.0, with the following stipulations:

1. A **first semester** student who meets the specific course grade(s) and other program requirements but has not maintained a PGPA of 2.0 for all courses taken since entering the program **will** be allowed to progress **on probation** to the second semester. Since a student cannot be on probation for two consecutive semesters, however, a student on probation because of insufficient PGPA at the end of the first semester must raise his/her PGPA to at least 2.0 by the end of the next (probationary) semester in order to remain in the program. Students failing to do so will be dismissed from the College.
2. For a student who is in the **second or subsequent semester** of a program to continue to progress, however, he/she must maintain a PGPA of not less than 2.0 for all courses taken since entering the program, including both professional and concurrent courses. These students, therefore, are **not** eligible for probation if their PGPA falls below 2.0 (eligibility for probation on other grounds is described elsewhere in this Handbook, the CHRP Catalog, and in various program materials). If a student fails to meet this requirement, he/she will be dismissed from the College.

6.1.2 Authorization for Progression with an Incomplete ("I") Grade in a Pre-requisite Professional Course

If a student receives an incomplete ("I" grade) in a program pre-requisite course, is subsequently allowed to enroll in the next semester of a program, fails to replace the "I" with a passing grade, and is administratively dismissed during the semester and not allowed to complete course work for that semester, the college may be responsible for repaying any and all financial aid received by the student for that semester. Consequently, for students who are receiving financial aid at the time of registration who also have a grade of "I" in a professional course from the previous semester that is a prerequisite to progression to subsequent course work, there will be three options:

- a. The student may not be allowed to register for classes.
- b. The chairman of the department in which the student's program resides may provide written authorization for the student to register for courses; however, he/she will be not be eligible to receive financial aid until the grade of "I" is converted to a grade of "C" or better. In this option, the student may be administratively withdrawn from the program at any time during the semester should he/she not meet the standards of progress for the pre-requisite course for which they received an "I" grade.
- c. The department chairman may provide written authorization for the student to enroll and continue in the program and complete all required current semester course work. In this option, students will be eligible to receive the financial aid for which they have been approved, assuming they meet all other financial aid requirements. If, at the conclusion of the semester, the student has failed to convert the "I" to a grade of "C" or better, the student will not be allowed to continue in the program. Students will, however, receive grades earned for other course work that is completed during the semester. All other departmental and college policies regarding student progression remain in effect.

For all these options, permission to enroll in classes for the semester following the one in which an "I" grade was awarded must be based on a review by the chairman of the student's past academic performance, progress in the curriculum, amount of material and other requirements yet to be completed, and any special circumstances regarding the student and the reason for the "I" grade (e.g., illness, injury, death in the family). The option selected should reflect the chairman's conclusion that it is the one least likely to result in the college having to bear the cost of repaying the student's financial aid award, while recognizing the importance of upholding the academic standards and the rules and regulations of the university, college, and program as well as assisting the student in achieving his/her academic objectives to the extent possible consistent with the foregoing considerations.

6.1.3 Denial of Entry into Clinical Phases

A grade of "C" or higher is required for designated courses which are prerequisites to subsequent clinical course work. Students failing to achieve this requirement may be denied entry into subsequent course work.

6.1.4 Academic Probation and Dismissal

If at the end of any semester, a student's grade point average for the total number of hours attempted for that semester falls below 2.0, he/she will be placed on College academic probation for the following semester providing he/she meets the progression requirements (see above). At the end of the probationary semester:

1. If the student achieves the minimum cumulative grade point average, he/she will be reinstated in good standing, or
2. If the student fails to achieve the minimum cumulative grade point average, (*i.e.*, 2.0) he/she will be dismissed from the College.

Departments reserve the right to impose more stringent requirements beyond these minimal provisions for the College as a whole. Students who fail to meet departmental regulations pertaining to academic standing will be placed on departmental academic probation or dismissed and are subject to the policies regarding progression within their respective departments to regain or retain student status.

6.1.5 Clinical Probation and Dismissal

Since patient well-being is a major concern of the University, action will be taken when a student's clinical practice poses a potential threat to patient health, welfare, or safety. Students, therefore, are subject to the Department's specific regulations governing clinical practice and may be placed on clinical probation by the Department and/or dismissed from the Department and the College for unsatisfactory clinical behavior as defined by his/her Department. The specific regulations are contained in the respective departmental handbook and/or clinical course syllabi and distributed to students prior to their entering the clinical area.

6.1.6 Readmission

Each department has a policy on readmission to its program(s). The policy includes voluntary and involuntary withdrawal and continuous enrollment. Please review the department handbook or contact the department chairman for specific policy.

Students who withdraw or are dismissed from the CHRP for any reason and wish to be considered for readmission to the same program in the CHRP (if readmission is permissible under the circumstances in question) must follow the respective department's policy on readmission to its program(s). In addition, the College policy states that the Cumulative Grade Point Average (CGPA) is used to determine eligibility for admission. The CGPA is based on all courses taken prior to applying for admission to a CHRP program. Students seeking readmission will be considered "new" applicants to the program, and the CGPA will be calculated on all courses taken to date, including those taken in the CHRP prior to the reapplication.

Note: The CGPA differs from the transcript GPA (TGPA) that students receive who are enrolled in a CHRP program. The TGPA is based on specified prerequisite courses (a subset of all of the courses taken prior to admission to the CHRP) and the professional courses subsequently taken in the CHRP. The TGPA is not used when determining eligibility for readmission.

6.2 ACADEMIC REGULATIONS

6.2.1 Course Load

The maximum load is twenty (20) semester credits for the fall or spring semester, and sixteen (16) semester credits for the summer session(s). To take a course load exceeding the maximum, approval by the Department Chairman is required. Students may enroll for classes on other campuses in the University of Arkansas system as a part of their normal course load, but such concurrent enrollment must be approved by the appropriate CHRP Department Chairman prior to registration.

6.2.2 Registration

Formal admission by the Department/College as well as completion of registration is a prerequisite to class attendance. Registration after the close of the announced registration period requires the payment of a late registration fee of ten percent (10%) of the applicable tuition. Registration is not permitted after the fifth day of class each semester*. A student is not considered registered until the appropriate forms have been filed with the Office of Student Affairs and payment or special arrangements regarding tuition and fees have been made with the University Treasurer.

*Class days start on the date shown on the General College Calendar, and for purposes of late registration and the add/drop policy, the number of class days specified above refers to the number of calendar days following the day on which classes started (exclusive of weekends and holidays) regardless of how many, if any, class sessions in a particular course were held.

6.2.3 Concurrent Enrollment

Concurrent enrollment at more than one campus is permitted under certain circumstances. The current policy requires applicable fees to be paid to each campus. There is no cap on tuition when combining campus fees.

6.2.4 Change of Registration

A student may add a course after the registration period only by written request approved by the Department Chairman and filed with the Office of Student Affairs by the fifth day of class. A student may drop a course after the fifth day of class only by written request approved by the Department Chairman and filed with the Office of Student Affairs.

6.2.5 Repeating a Course

When a course is repeated, the grade earned in the repeated course is used to assess the student's fulfillment of the academic plan. Though all enrollments, original and repeat, will be shown on the student's transcript, only the grade in the repeated course (even if it is lower than the first) will be used to calculate cumulative grade point averages (CGPA). Courses in the college can only be repeated once.

6.2.6 Withdrawal

A student withdrawing from the University must complete the University's Student's Clearance Certificate and have an exit interview with a staff member in the College's Office of Student Affairs. If a student does not formally withdraw by following the above procedures, a grade of "F" will be assigned in all courses in which the student has not completed all requirements.

6.2.7 Add/Drop Policy and Implementation

Students have until the close of the announced registration period to add or drop courses for the subsequent semester without penalty. After the close of the announced registration period, until the fifth day of class each semester*, students may add or drop a class using the appropriate form with the required signatures for a \$10 fee. No notation will appear on the transcript concerning the addition or deletion of a course. The change(s) in course work will be assessed or remitted at 100% of the applicable tuition. After the fifth day, a course can be dropped with the fees adjusted based on "refund of fee policy" found in the current year's catalog. A \$10 fee will be assessed for each course dropped after the fifth day of classes. No courses can be added after that date. The form used to add/drop a class can be obtained from the department chairman or the college registrar.

*Class days start on the date shown on the General College Calendar, and for purposes of late registration and the add/drop policy, the number of class days specified above refers to the number of calendar days following the day on which classes started (exclusive of weekends and holidays) regardless of how many, if any, class sessions in a particular course were held.

6.2.8 Withholding of Grades and Transcripts

The Registrar is authorized to withhold grades and transcripts and refuse registration to any student or former student who fails to return athletic, military, library, or other University property entrusted to his or her care or who fails to submit all transcripts from attended colleges, or who fails to comply with rules governing the audit of student organization accounts, or who has failed to pay any fees, tuition, room and board charges, fines or other charges assessed against him or her by a University official or by the campus judicial system, or who fails to officially withdraw from the University prior to graduation.

6.2.9 Graduation

The student must file an application for graduation and pay the graduation fee at least thirty (30) days prior to the end of the semester in which the student wants to graduate. If the student wants to participate in the annual commencement exercise, the application for graduation and the graduation fee must be received by the Registrar no later than January 31 of the year in which commencement occurs. Forms are provided for this purpose at Spring semester registration and may also be requested from the Office of Student Affairs.

Students must complete, by the end of Spring Semester, all degree or certificate requirements, except for professional (*i.e.*, CHRP) courses that will be taken in the following summer session, in order to be eligible to participate in Commencement as a candidate for that degree or certificate.

At the conclusion of the semester in which degree/certificate requirements are completed, all official transcripts must be on file in the CHRP Registrar's Office. The student must then complete the University's Student's Clearance Certificate. Failure to do so will result in withholding of grades, transcripts, and diplomas. Degrees are awarded on designated dates in Fall, Spring, and Summer. Diplomas are issued on those dates.

6.2.10 Classification of Courses

A four-digit numbering system is used to classify each course. The first digit identifies the level of the course content (difficulty of course content, not necessarily the year in which the course is taught): 1 for freshman; 2 for sophomore; 3 for junior; 4 for senior; 5, 6, or 7 for graduate. The second digit is the number of semester credit hours except for courses in Audiology and Speech Pathology (ASP). The last digit of ASP courses indicates the semester credit hours. (Courses with greater than nine (9) semester credit hours will be identified by the letter "X" in place of the second digit.* Courses with a variable number of semester credit hours will be identified by the letter "V" in place of the second digit). The third and fourth digits are assigned by the Department to identify specific courses.

*In cases where the letter "x" replaces the second digit, the number of semester credit hours will be indicated in the course descriptions.

6.2.11 Credit Hours

The standard unit of measurement for course work in the College is the semester credit. One semester credit hour is equal to 750-800 minutes of classroom instruction, 2250-2400 minutes of laboratory instruction, or 3750-4000 minutes of clinical instruction.

6.2.12 Change of Name/Address

The student must report in writing any change in name or address to the department chairman and to the Office of Student Affairs within ten (10) days of the change.

6.2.13 Auditing a Course

Students auditing a course pay full semester credit fees. Entry into an audited course and scoring of examinations while enrolled are at the discretion of the instructor. Neither grade points nor credits are assigned upon completion of audited course work.

6.2.14 Master of Science in Clinical Nutrition

Master of Science in Communicative Disorders (Speech Pathology)

Doctor of Philosophy in Communication Sciences and Disorders

Students pursuing the Master of Science degree in Clinical Nutrition, the Master of Science degree in Communicative Disorders (Speech Pathology), and the Doctor of Philosophy in Communication Sciences and Disorders are considered to be students in the Graduate School who are taking courses offered by the faculty of the College of Health Related Professions. Accordingly, the Graduate School Student Handbook is to be considered the primary handbook for all students in these programs. All provisions of the Graduate Student Handbook, including the grievance procedures, are the authority applicable to students pursuing this certificate or degree.

6.2.15 Academic Forgiveness Policy

Applicants to undergraduate programs in the College of Health Related Professions (CHRP) may request consideration under the Academic Forgiveness Policy. This policy does not apply to currently enrolled students in the CHRP or to admission to a CHRP graduate program.

Under the Academic Forgiveness Policy, applicants to undergraduate programs may request that all academic credits, as well as the grades assigned to them, that they earned more than seven (7) years before the anticipated date of registering for classes in the CHRP program to which they have applied shall not be considered by the CHRP in determining 1) their acceptance to that program or 2) the prerequisites, electives, or professional courses they have completed. If the request is granted, all courses taken at all colleges and/or universities that are more than seven (7) years old by this date will be removed from consideration irrespective of the grades earned. That is, the Academic Forgiveness Policy may not be applied to selected courses in a given term or terms or to only those with certain grades. Thus, none of the courses excluded by granting such a request may be counted toward completion of any prerequisites, electives, or professional courses.

If the request for academic forgiveness is granted, only academic work completed less than seven (7) years prior to the date of registration in the intended program will be used in calculating the applicant's grade point average (GPA) and determining transfer credit for admissions. This will be so noted on the CHRP academic transcript if the applicant is admitted. Academic forgiveness may be granted only once to any student. Academic forgiveness is not to be confused with the prerogative each CHRP department has to selectively decline to accept for transfer credit any course or courses taken more than seven (7) years before the intended date of registration on the grounds that the knowledge in the discipline(s) in question, and thus the content of the course(s) as currently taught, has changed so extensively in the interim that it(they) no longer will fulfill the prerequisite or other transfer requirement for the given CHRP program.

Applicants seeking consideration under the Academic Forgiveness Policy must complete and submit the Petition for Admission under the Academic Forgiveness Policy form to the CHRP Admissions Officer prior to the application deadline of the specific CHRP program to which the individual is applying. Petitions submitted after the program's application deadline will not be reviewed. Official transcripts from all colleges and universities attended must also be provided. The petition for Academic Forgiveness and the transcript(s) will be reviewed by the CHRP Admissions Officer who calculates the GPA for program admissions and determines the courses that meet the degree or certificate requirements. The petition and transcript(s) are then forwarded for approval to the CHRP Associate Dean for Academic and Student Affairs and finally to the Dean of the College. Applicants will subsequently receive written notification of the determination of their Academic Forgiveness request.

The Petition for Admission under Academic Forgiveness Policy form and official transcripts from all colleges and universities attended should be sent to: Admissions Officer, College of Health Related Professions, University of Arkansas for Medical Sciences, 4301 West Markham Street, #619, Little Rock, AR 72205. For additional information: (501) 686-5730.

6.3 REFUND OF FEES

Students officially withdrawing may be eligible for a refund calculated as a percentage of the registration fees. Such refunds are determined according to the schedules below. Special fees are not refundable. Refund of housing deposits and overpayment of rental fees are made after the occupant has checked out of University Housing and after all Housing Policy requirements have been met. A new system-wide policy is under consideration at this time. Please check with the CHRP Registrar to determine the status of this policy.

Students officially withdrawing from the University during a fall or spring semester shall be entitled to a refund of registration fees as follows:

<u>Registration, Tuition, & Fees</u>	<u>Fraction Refunded</u>
Up to and including five class days	100%
From the sixth class day through the tenth class day	50%
The eleventh class day and after	No refund

Students officially dropping one or more courses and who continue to be enrolled in the University during a fall or spring semester shall be entitled to individual course refunds as follows:

<u>Registration, Tuition, & Fees</u>	<u>Fraction Refunded</u>
Up to and including five class days	100%
The sixth class day and after	No refund

Students who drop a course or officially withdraw from the University during a summer session shall be entitled to an adjustment as follows:

<u>Registration, Tuition, & Fees</u>	<u>Fraction Refunded</u>
1-4 week courses	
Prior to start of classes	100%
After classes begin	No adjustment
5-6 week courses	
Prior to start of classes	100%
Up to and including two class days	100%
Third through the fifth class days	50%
The sixth class day and after	No adjustment
7-9 week courses	
Prior to start of classes	100%
Up to and including three class days	100%
Fourth through the seventh class days	50%
The eighth class day and after	No adjustment

10-12 week courses

Prior to start of classes	100%
Up to and including five class days	100%
Sixth through the tenth class days	50%
The eleventh class day and after	No adjustment

The date you file a completed Application for Official Withdrawal at the Dean's Office determines the amount of your refund. An Application for Official Withdrawal is not considered complete without all necessary signatures.

Class days start on the date shown on the General College Calendar, and for purposes of refunds, the number of class days specified above refer to the number of calendar days following the day on which classes started (exclusive of weekends and holidays) regardless of how many, if any, class sessions in a particular course were held.

Failure to withdraw officially from a course will adversely affect your transcript and grades. See the Section 6.1.1 on Progression for details.

6.4 RESIDENCY STATUS

Students are classified as "resident" or "non-resident" students for fee purposes on the basis of their legal domicile or that of their parents if they are minors. In general, a student must be a bonafide domiciliary of Arkansas for at least six (6) consecutive months prior to registration to be classified as an "in-state" student. Complete regulations and forms for requesting a change in classification for this purpose may be requested from the Office of the Vice Chancellor for Academic Affairs at (501) 686-5689.

6.5 TRANSCRIPTS

6.5.1 Transcript Request from the College

Requests for transcripts can be submitted to the CHRP Office of Student Affairs between 8:00 AM – 4:30 PM, Room S1/01 Shorey Building or sent to the Office through mail or by fax (if the student signs the fax request). Please allow 3-5 working days for receipt of the requested transcript. The first copy is free; all others are \$2.00 each.

6.5.2 Submission of Transcripts to the College

Official transcripts from other institutions, required of CHRP applicants or students, must be sent to the CHRP Admissions Officer directly from those institutions. Transcripts brought by the applicant or student are not "official" and will not be accepted.

6.6 CERTIFICATION/LICENSURE/REGISTRY REQUIREMENTS

Successful completion of a CHRP program does not itself insure certification/ licensure/registry eligibility. Students are advised to become familiar with the discipline-specific requirements published by each certification/licensure/registry agency.

6.7 TUITION WAIVERS

Dependents of Arkansas residents who have been declared prisoners of war or killed or missing in action may have the tuition and fees waived under certain circumstances. Contact the Office of Student Affairs at (501) 686-5730 for additional information.

SECTION 7.0

COLLEGE ADMINISTRATION

Ronald H. Winters, Ph.D., F.A.S.A.H.P.

Dean

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Interim Associate Dean for Academic & Student Affairs

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CHRP Registrar

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Monna L. Stiles, B.A.

CHRP Admissions Officer

Winston K. Shorey Building, Room S1/01
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Susan K. Williamson, M.A.

Student Recruiter

Winston K. Shorey Building, Room S1/01
(501) 686-5730

Patient Care Buildings

- 8. Harry P. Ward Tower
- 13. UAMS Medical Center
- 14. Emergency Room (Ground Level)
- 20. PET Scanner (under construction)
- 22. MRI, GAMMA Knife
- 24. UAMS/CARTI
- 25. Outpatient Center (OPC)
- 26. Arkansas Cancer Research Center (ACRC)
- 27. Harvey and Bernice Jones Eye Institute
- 32. Jackson T. Stephens Spine and Neurosciences Institute
- 34. Family and Preventive Medicine
- 35. Donald W. Reynolds Center on Aging
- 37. Community Women's Clinic & Pulaski County Community Health Unit

Education Buildings

- 5. ED III - College of Public Health (Anatomy Lab, Classrooms)
- 6. ED II (Library, Classrooms, Colleges of Nursing & Pharmacy)
- 7. Shorey Building (Colleges of Medicine & HRP)
- 9. Jeff Banks Student Union, Bookstore (Ground Level)
- 10. Dormitory
- 36. Ed South (CHRP Departments)

Research Buildings

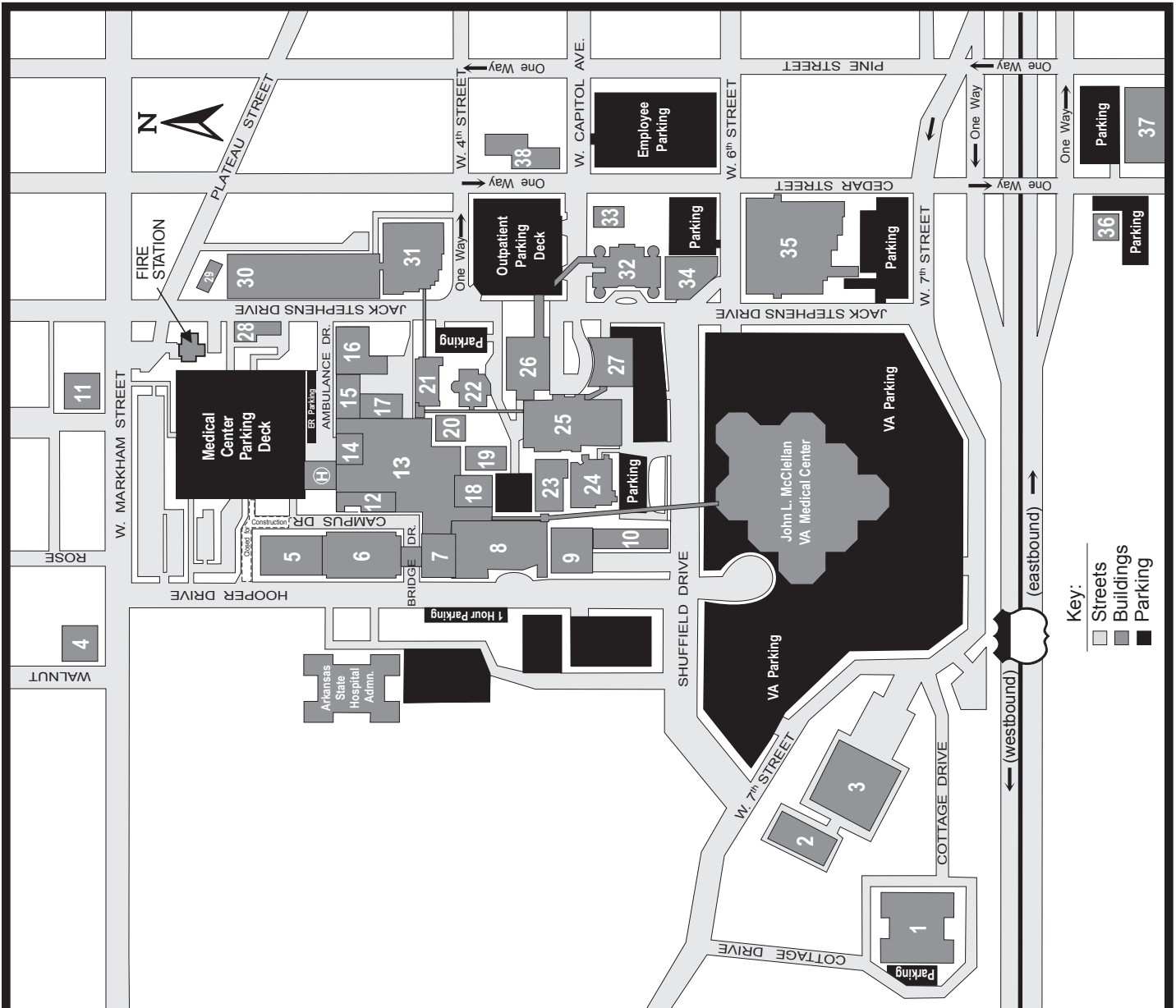
- 21. Barton Research Building
- 23. Child Study Center
- 30. Arkansas Biosciences (Under Construction)
- 31. Biomedical Research Building I
- 38. Bioventures (Under Construction)

Administration & Support Services

- 1. Distribution Center, UAMS Police (Second Floor)
- 2. Fullerton Center
- 3. Hendrix Hall
- 4. Human Resources Office (Recruitment, Classification & Compensation)
- 11. Westmark Building (Patient Accounts, Procurement Office)
- 12. Chancellor & AHEC Administration (First Floor)
- 15. Computing Building
- 16. Boiler House
- 17. Physical Plant Office
- 18. Cafeteria (Ground Level)
- 19. Annex Building (Human Resources, Computer Training Center)
- 28. Paint Shop
- 29. Mediplex Offices
- 33. Outpatient Center Administration

CAMPUS MAP

For other UAMS maps and driving directions, please visit our website:
www.uams.edu/maps
APRIL 2003



SECTION 8.0

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