SECTION III. MEDICAL STUDENTS PART A: KEY QUANTITATIVE INDICATORS

Please provide the following information.

Part A: Key Quantitative Indicators

Complete the following tables, using the medical school's copy of the Longitudinal Statistical Summary Report (LSSR) as the data source, when relevant: Update to include 2010-2011 data, when available.

Please note: Paul L. Foster School of Medicine received preliminary accreditation in 2008 and admitted its first class in 2009. All tables below reflect this history.

a. Mean MCAT scores for NEW (not repeating) first-year medical students:

| | 2005-06 | 2006-07 | 2007-08 | 2008-09 | 2009-10 | 2010-11 | 2011-12 |
|------------------------|---------|---------|---------|---------|---------|---------|---------|
| Verbal Reasoning | | | | | 9.1 | 9.3 | 9.3 |
| Physical Sciences | | | | | 9.3 | 9.6 | 9.5 |
| Biological Sciences | | | | | 9.9 | 10.0 | 10.1 |
| Writing Sample (Mode) | | | | | M | M | Q |

b. Mean overall premedical GPA for NEW (not repeating) first-year medical students:

| | 2005-06 | 2006-07 | 2007-08 | 2008-09 | 2009-10 | 2010-11 | 2011-12 |
|------------------------|---------|---------|---------|---------|---------|---------|---------|
| Mean overall GPA | | | | | 3.72 | 3.64 | 3.68 |

c. The number of admission applications considered by the admissions committee, applicants interviewed, acceptances issued, and medical students <u>newly</u> matriculated for their first year of study; do not include first-year students repeating the year.

| | 2005-06 | 2006-07 | 2007-08 | 2008-09 | 2009-10 | 2010-11 | 2011-12 |
|--------------|---------|---------|---------|---------|---------|---------|---------|
| Applications | | | | | 2503 | 2529 | 2712 |
| Interviews | | | | | 389 | 378 | 589 |
| Acceptances | | | | | 95 | 170 | 216 |
| Matriculants | | | | | 40 | 60 | 81 |

d. The total number of enrolled medical students in the first-year class and in the total student body:

| | 2005-06 | 2006-07 | 2007-08 | 2008-09 | 2009-10 | 2010-11 | 2011-12 |
|------------|---------|---------|---------|---------|---------|---------|---------|
| First Year | | | | | 40 | 62 | 84 |
| Total | | | | | 40 | 99 | 179 |

e. The percentage of first-year medical students and the percentage of all students who withdrew or were dismissed from the medical school:

| | 2005-06 | 2006-07 | 2007-08 | 2008-09 | 2009-10 | 2010-11 | 2011-12 |
|------------------|---------|---------|---------|---------|---------|---------|---------|
| First-year class | | | | | 2.5 | 1.6 | 1.2 |
| All classes | | | | | 2.5 | 1.0 | 1.7 |

f. The percentage of participating medical students initially matched (i.e., who did not enter the "scramble"/Supplemental Offer and Acceptance Program) to PGY-1 programs in the NRMP:

Paul L. Foster School of Medicine will graduate its first class in May 2013. This information is not yet available.

| | 2005-06 | 2006-07 | 2007-08 | 2008-09 | 2009-10 | 2010-11 | 2011-12 |
|---------------------|---------|---------|---------|---------|---------|---------|---------|
| % Initially Matched | | | | | | | |

g. The total tuition and fees for entering in-state/in-province and out-of-state/out-of-province medical students:

| | 2005-06 | 2006-07 | 2007-08 | 2008-09 | 2009-10 | 2010-11 | 2011-12 |
|-------------------------------|---------|---------|---------|---------|----------|----------|----------|
| In-state/ In-province | | | | | \$14,895 | \$14,470 | \$15,500 |
| Out-of-state/ Out-of-province | | | | | \$27,995 | \$27,570 | \$28,600 |

h. The average educational indebtedness of all medical student graduates with educational debt and the percentage of graduates with indebtedness in excess of \$200,000

Paul L. Foster School of Medicine will graduate its first class in May 2013. This information is not yet available.

| | 2005-06 | 2006-07 | 2007-08 | 2008-09 | 2009-10 | 2010-11 | 2011-12 |
|-----------------|---------|---------|---------|---------|---------|---------|---------|
| Average debt | | | | | | | |
| % graduates | | | | | | | |
| >\$200,000 debt | | | | | | | |

MS-1. Students preparing to study medicine should acquire a broad education, including the humanities and social sciences.

Ordinarily, four years of undergraduate education are necessary to prepare for entrance into medical school; however, special programs (e.g., combined baccalaureate-M.D. programs) may allow this to be reduced. General education that includes the social sciences, history, arts, and languages is increasingly important for the development of physician competencies outside of the scientific knowledge domain.

MS-2. Premedical course requirements should be restricted to those deemed essential preparation for completing the medical school curriculum

a. List all college courses or subjects, including associated laboratories, required for admission to the medical school..

Successful applicants for admission to the Paul L. Foster School of Medicine at Texas Tech University Health Sciences Center at El Paso (PLFSOM) must have completed an undergraduate curriculum and must have been awarded a baccalaureate degree or its equivalent before matriculation. Ninety semester hours, including all prerequisite courses, must have been completed at a U.S. or Canadian accredited college or university.

| Biology | 12 semester hours |
|-------------------------------------|-------------------|
| Biology laboratories | 2 semester hours |
| General chemistry with laboratories | 8 semester hours |
| Organic chemistry with laboratories | 8 semester hours |
| Physics with laboratories | 8 semester hours |
| Calculus or statistics | 3 semester hours |
| English | 6 semester hours |

Grades of C or better are required for all prerequisites courses or AP credit.

b. Identify any courses that are recommended but not required for admission to the medical school.

Although PLFSOM has no prescribed course of study beyond the required courses identified above, the Admissions Committee will consider the breadth of the candidate's educational experience in their determination of admission. Additional recommended courses include the following:

- Humanities, Social Sciences, or Behavioral Sciences: 12 semester hours
- Coursework in Biochemistry, Biostatistics, and Cellular/Molecular Biology is also encouraged.
- Competence in spoken and written English will be necessary. A facility in conversational Spanish will be an advantage for students intending to remain in the Southwest.

c. Describe the process by which the medical school determined its premedical course requirements. How often and by whom are premedical course requirements reviewed?

On an annual basis the admissions committee discusses and approves pre-medical course requirements and recommended courses based on information provided by the associate dean for admissions. Final decisions are based on majority vote.

MS-3. The faculty of an institution that offers a medical education program must develop criteria, policies, and procedures for the selection of medical students that are readily available to potential and current applicants and their collegiate advisors.

a. Briefly describe the process of medical student selection, beginning with receipt of the initial application forms and proceeding through preliminary screening for receipt of supplementary application materials, selection for an interview, the interview process, acceptance, the formal offer of admission, and matriculation. For each step, describe the means and selection criteria by which decisions are made and identify the individuals or groups involved in making those decisions.

Applications for admission are processed through the Texas Medical and Dental Schools Application Service (TMDSAS). Application forms and procedural information are available on the TMDSAS website at: http://www.utsystem.edu/tmdsas/. TMDSAS notifies applicants when their applications have been sent to the school.

Applications are reviewed for completeness. In addition, applications are reviewed for adherence to the admissions requirements established by the school. Criteria for selection include MCAT; academic performance as reflected by the science GPA and overall GPA; rigor of the undergraduate curriculum, including course selection, extracurricular activities (medical and non-medical), and employment impact on performance and maturation; recommendations from premedical advisors or faculty; socioeconomic and disadvantaged background; personal statement and its reflection of communication skills, personal qualities, leadership, maturity, determination, and motivation for a career in medicine; and regional origin.

Those candidates whose files are complete and who are considered to be competitive for admission by the Office of Admissions, based on the admissions criteria established by the school, are invited to interview. Added criteria for selection are included in the interview, which is designed to evaluate interest and knowledge of the health care field and motivation for a medical career, personal characteristics, and problem-solving skills. The interview can also address questions by the candidate that may have arisen during the application process Candidates who are selected for interview are invited for a full day of orientation to the school and interviews by members of the faculty. All doctoral level faculty members from the PLFSOM are potential interviewers, as are all members of the admissions committee. Each applicant is interviewed by two faculty members.

These interview sessions are conducted weekly from early August to the middle of January. All successful candidates must participate in the interview process.

Following each interview session, the Admissions Committee reviews the credentials and interview evaluations for each of the candidates and makes decisions for or against admission. The decisions of the Admissions Committee are final. Based upon these decisions, a list of acceptable candidates is prepared, ranking those judged to be best qualified for the study and practice of medicine. The ranking is based on tiers of superior and acceptable candidates determined by a majority vote and the weighted score of each candidate within each tier derived from the results of the interview and cognitive measures. Following TMDSAS guidelines, the associate dean for admissions makes offers to exceptional candidates between

November 15 and December 31. Superior out-of-state candidates receive offers outside of the TMDSAS match on October 15, up to the 10% limit in class size for non-Texas residents. All other acceptable candidates are offered positions through the TMDSAS matching process. All candidates, whether holding an offer or not, must submit preferences to the TMDSAS match by January 10. Match results are announced on February 1. A rolling admissions process is then used to fill remaining positions up to the first day of classes.

Students who are accepted for admission must return the "Applicant Acknowledgement Standards for Curricular Completion" that is mailed to them by the office of Admissions. They also receive a packet of information from the Office of Student Affairs during the spring before their matriculation. This packet contains information about the community of El Paso and the school, including lists of books and materials required, class schedules, housing opportunities, and contact information. Additionally, the packet includes information and forms regarding various requirements that the students need to complete before matriculation, such as, immunization forms, documentation of health insurance, and a criminal background check. The Office of Student Affairs assures completion of all required documentation.

The TTUHSC Registrar is the custodian of criminal background checks. Copies of reports for all matriculating students are provided to the associate dean for student affairs. All reports indicating a criminal record are forwarded to the associate dean for student affairs for review by a committee consisting of him/herself, the associate dean for admissions, and the director of student affairs. This review will determine if the violations preclude the student from training in the clinical affiliates based on exclusion lists provided by these institutions.

b. Describe the manner in which the medical school's student selection criteria are published and disseminated to potential and actual applicants, their advisors, and others.

The criteria for selection are published in the PLFSOM catalog which is disseminated through the school's admissions website: http://www.ttuhsc.edu/fostersom/admissions/. Brochures and other handouts are also utilized to disseminate this material in health career fairs at various Texas universities, presentations to pre-med student organizations and at meetings of the Texas Association of Advisors to the Health Professions.

MS-4. The final responsibility for accepting students to a medical school must rest with a formally constituted medical school admission committee. The authority and composition of the committee and the rules for its operation, including voting privileges and the definition of a quorum, must be specified in bylaws or other medical school policies. Faculty members must constitute the majority of voting members at all meetings.

The composition of the medical school admission committee typically reflects the school's mission. The committee may include individuals other than faculty members, including community members and medical students. While individuals other than faculty members may hold voting privileges, they will not, in aggregate, constitute a majority of voting members at any meeting.

MS-7. At a medical education program, the selection of individual medical students for admission must not be influenced by any political or financial factors.

a. Provide a table or list of the current members of the admission committee, including each member's title and year of appointment to the committee. Identify the current committee chair (name and title). How is the chair selected and does the chair have a defined term?

| Members: Title | | Appointed |
|---|-------------------------------------|-----------|
| Maria Ambat, M.D., Associate Professor, Pedia | atrics | 2011 |
| Tania Arana, Ph D, Assistant Professor, Medica | al Education, Behavioral and | |
| Neurosciences | | 2012 |
| Dolgor Baatar, PhD, Assistant Professor, Medic | cal Education, Immunology | 2012 |
| Elmus Beale, PhD, Professor, Medical Education | on, Anatomy | 2012 |
| Richard Brower, M.D., Associate Professor of I | Medical Education-Neurology | 2010 |
| James Brown, M.D., Assistant Professor, Emerg | gency Medicine | 2010 |
| Humera Chaudhary, M.D., Assistant Professor, | Radiology | 2010 |
| Harry Davis, M.D., Associate Professor, Interna | al Medicine | 2011 |
| Blanca Garcia, M.D., Assistant Professor, Pedia | atrics | 2011 |
| | | |
| John Haynes, M.D. (Chair), Associate Professor | or, Emergency Medicine | 2009 |
| Lynn Hernan, MD, Associate Professor, Pediatr | rics | 2012 |
| Kathryn Horn, M.D., Associate Dean for Studen | nt Affairs and Associate Professor, | |
| Family Medicine | | 2011 |
| Omosalewa Lalude, M.D., Assistant Professor, | Internal Medicine | 2010 |
| Michele Manting, MD, Associate Professor, Ob | ostetrics and Gynecology | 2012 |
| Alberto Maud, M.D., Assistant Professor, Neur | rology | 2011 |
| Charmaine Martin, M.D., Assistant Professor, F | Family Medicine | 2010 |
| Francois Modave, PhD, Associate Professor, Bi | iomedical Sciences | 2012 |

| Angel Morales, M.D., Assistant Professor, Surgery | 2011 |
|--|------|
| Dale Quest, Ph.D., Associate Professor, Medical Education-Pharmacology | 2009 |
| David Palafox, M.D., El Paso County Medical Society Representative | 2012 |
| Tammy Salazar, PhD, Assistant Professor, Family Medicine | 2012 |
| Mingtao Zang, PhD, Associate Professor, Biomedical Sciences | 2012 |

Ex Officio:

Manuel Schydlower, M.D., Associate Dean for Admissions, Professor of Pediatrics John Snelling, M.A., Director of Admissions

The admissions committee is appointed by the dean from nominations provided by department chairs and the associate dean for admissions. Admission committee members serve a term of three years. Members may serve two consecutive terms but then must sit out for at least one year before they are eligible for reappointment. The Admissions Committee nominates and elects a chair and vice-chair from its membership to serve a one year term.

b. Describe the process by which admissions committee members are trained and prepared for their duties.

All admission committee members are provided a handbook describing admissions criteria, admissions policies and procedures, and guidelines for conducting the interview and completing the documentation required for admissions committee decisions. All committee members are required to participate in a 1.5-2.0 hour workshop which covers the material in the handbook and also provides opportunities to discuss the types of questions to ask and questions that would not be considered appropriate for the interview process. Non-committee members who have been selected to participate in the interview process are provided identical information and are also required to participate in the interview preparation workshop.

c. Describe the source of final authority for admission decisions. Describe the process by which final admission decisions are made and identify the individuals or groups involved in making those decisions. Describe the circumstances surrounding any admissions committee decisions or recommendations that have been overruled or rejected since the last full accreditation survey.

The PLFSOM Faculty Bylaws (IX.C.1) empower solely the admissions committee to select members of the medical school entering class and fill vacancies that may occur in any of the medical school classes. There has been no breach of this bylaw by higher institutional authority. The final authority for the admissions decisions resides with the Admissions Committee. With a quorum of 50%, the acceptance of a candidate requires a simple majority vote by the voting members of the committee in attendance. No decisions or recommendations by the committee have been overruled or rejected. Political and/or financial considerations play no role in the admissions decisions.

d. If the school currently sponsors or participates in combined professional degree programs (e.g., M.D.-Ph.D., M.D.-M.P.H., etc.), describe the role of the medical school admission committee in the initial assessment of and final decision-making about candidates for these programs.

A MD/MPH dual degree program between the PLFSOM and the University of Texas at Houston School of Public Health (UTSPH) is offered as an option to students who receive an early pre-match offer or later match to attend the PLFSOM. These students with admissions offers to the PLFSOM are then invited to apply for this MD/MPH track and, if interested, must then apply to the admissions office of the UTSPH. Students in this MD/MPH track are enrolled separately in both universities and receive separate degrees awarded by both institutions upon successful completion of this dual degree program. Currently the Admissions Committee has no role in choosing students for the MD/MPH dual degree program.

MS-5. A medical education program must have a sufficiently large pool of applicants who possess national level qualifications to fill its entering class.

a. Describe the process by which the size of the entering class is determined and identify the individuals or groups involved in making that decision. Does the school have special agreements with external entities within or outside of the U.S. (e.g., international universities, foreign governments) by which some entering students are selected? If so, describe the nature of the agreements and the number of students selected.

As reflected in Section III Part A, the PLFSOM receives a sufficiently large number of qualified applicants. An academic planning committee for the four-year medical school in El Paso proposed a charter class size of 40 based on funding considerations and the need for continuing enrollment of TTUHSC School of Medicine year 3-4 students in El Paso during a 3 year transition period. This transition period ends in June 2012 when the charter class enters the fourth year of the curriculum. This committee further recommended an incremental increase in class size from 40 to 60 students in 2010 and 80 in 2011. These recommendations were endorsed by the Texas Tech University System Board of Regents and subsequently approved by the Texas Higher Education Coordinating Board.

Subsequently, the recommendation was made to consider an increase to 100 students per class based on space and resource availability pending approval of the state Higher Education Coordinating Board (HECB). In July 2010 TTUHSC was notified by the HECB that their approval was not necessary for an increase of this magnitude. In the spring of 2011 the dean appointed a 30 person task force to consider the timing of such an increase. Based on the deliberations of this task force the dean has elected to hold enrollment at 80 students for the 2011-12 recruiting cycle and expand to 100 students in the 2012-13 recruiting cycle. This will enable the school to graduate its charter class and complete the accreditation process before expanding its numbers by 20 students per year from the originally planned 80 students per year class size.

PLFSOM has an agreement with the Joint Admissions Medical Program (JAMP), a state-mandated program for disadvantaged medical students in Texas. JAMP requires that all nine medical schools in the state include in their respective entering class up to 10 % of the total number of students matriculated in the previous academic first year. Enrollment of this cohort at PLFSOM will begin with the class entering in 2012.

The PLFSOM does not have any special agreements with any external entities outside of the United States related to student selection. All students are admitted based on their qualifications and the vote of the admissions committee after a thorough review of each applicant in the context of our admissions standards.

b. In the following table, indicate the total number of medical students enrolled in each academic year of the medical curriculum; if there are combined programs (e.g., M.D.-Ph.D., M.D.-M.P.H.), include only those students enrolled in the M.D. portion of the curriculum in the current academic year.

| | First Year | Second Year | Third Year | Fourth Year | Total |
|---|------------|-------------|------------|-------------|-------|
| Total # of Enrolled Medical Students | 84 | 58 | 40 | 0 | 182 |

c. If not included in the response to the previous question, provide similar tables of enrollment by curricular year for students in the following categories: (1) students enrolled in a combined baccalaureate-M.D. program and (2) students enrolled in each joint degree program (e.g., M.D.-Ph.D., M.D.-M.P.H.). For this item, include students who are enrolled in, for example, the Ph.D. portion of an M.D.-Ph.D. program in the current academic year.

PLFSOM and the University of Texas Houston School of Public Health (UTHSPH) have partnered together in offering a dual degree MD-MPH program with the MD conferred by PLFSOM and the MPH conferred by UTHSPH. The numbers listed below enumerate students who have elected to participate in this program.

MS 1 (class of 2015) =4

MS2 (class of 2014) =7

MS 3 (class of 2013) =2

These students are included in table above listing the total number of medical students by class (see "b" above).

d. If students in combined baccalaureate-M.D. programs or joint degree programs are not drawn from the same applicant pool as regular medical students, briefly describe the size and characteristics of the applicant pools for each such program.

Students in the MD/MPH dual degree program are drawn from the same applicant pool as regular medical students.

See also Part A, item (c.) in this section of the database.

MS-6. A medical education program must select for admission medical students who possess the intelligence, integrity, and personal and emotional characteristics necessary for them to become effective physicians.

a. Briefly describe the methods used during the admissions process to evaluate and document the personal or professional characteristics of medical school applicants.

As noted in MS-3, in the screening process applicants are evaluated not only on their cognitive merits, but also on non-cognitive or non-academic factors as well. This includes evaluations of their personal statements, letters of recommendation and other life, extracurricular or employment experiences. The interview is specifically designed to focus on non-academic criteria. Interviewers assess the applicant's medical experiences, motivation to enter medicine, knowledge of issues in medicine, personal characteristics and problem solving ability.

At the admissions committee deliberations, information is abstracted on each interviewed candidate and projected on screen for the committee that identifies: name, photograph, the hometown, profession of parents, high school and class rank, academic recognitions, leadership, research activities, health care activities, community service, extracurricular activities and employment experiences. Also displayed are the candidate's university, major, overall GPA, science GPA, MCAT score and its components, and residency. If applicable, disadvantaged status, regional origin, and re-applicant status are also noted. The appraisal scores and narratives of both interviewers regarding the candidate's interest and motivation, personal characteristics (interpersonal skills, life experiences, interests, warmth, caring) and problem-solving ability (analytical skills, logical train of thought) are also documented and displayed for the admissions committee to review and consider.

b. If a standard form is used for applicant interviews, supply a copy of the form and describe the ways in which it is used.

Interviewers use a standard form in an on-line electronic format to document the interview. Paper copies are also provided to each interviewer for their use in note taking or recording the results of the interview prior to entering information on the on-line form. The purposes of the form are to assure consistency in the interview process and to document the interviewer's consideration of non-academic personal and professional attributes that are used in the overall evaluation of the candidate. A copy of this form is provided in Section III, Appendix 1.

c. Describe the composition of the pool of individuals who interview medical students, including the total number, student or faculty status, and admissions committee membership. Describe how interviewers who are not members of the admissions committee are selected and trained. Describe how information from applicants that is collected during the interview is considered during the selection process.

At present, 188 individuals are eligible to interview applicants for admission to PLFSOM. Of these, 19 are current members of the admission committee, 9 are volunteer faculty in the community, and the remainder are full time faculty members who meet the requirements of possessing an MD, PhD or other doctoral degree (e.g., DO, DDS, DrPH). Senior students will be included among interviewers for 2012-2013 admissions season. All interviewers must attend an interviewer orientation conducted by the associate dean for admissions and his staff.

Following the interview, each interviewer completes a narrative summary describing the strengths, weaknesses, and unique characteristics and accomplishments of the student applicant. This summary also includes a specific recommendation as to whether the applicant is outstanding/superior, acceptable or unacceptable. The admission committee meets at the end of each interview day to discuss all of the applicants. Non-committee interviewers are encouraged to attend this meeting to provide a verbal summary and to answer committee members' questions. At the time of the meeting, summary data for each applicant from the application record (e.g., undergraduate school attended, college major, leadership experiences, familiarity with medicine, etc) and the interviewer summary impressions are discussed. At the conclusion of the discussion, committee members who are present enter a vote on the applicant based on the totality of the student record, including the interview.

See also Part A, items (a.) and (b.) in this section of the database.

MS-8. A medical education program must develop programs or partnerships aimed at broadening diversity among qualified applicants for medical school admission.

Because graduates of U.S. and Canadian medical schools may practice anywhere in their respective countries, it is expected that an institution that offers a medical education program will recognize its collective responsibility for contributing to the diversity of the profession as a whole. To that end, a medical education program should work within its own institutions and/or collaborate with other institutions to make admission to medical education programs more accessible to potential applicants of diverse backgrounds. Institutions can accomplish that aim through a variety of approaches, including, but not limited to, the development and institutionalization of pipeline programs, collaborations with institutions and organizations that serve students from disadvantaged backgrounds, community service activities that heighten awareness of and interest in the profession, and academic enrichment programs for applicants who may not have taken traditional pre-medical coursework.

a. Indicate whether the medical school has and/or has access to dedicated resources (e.g., an office, specific staff) for the administration of programs and partnerships to enhance the pool of applicants to medical school, both locally and nationally. If so, describe the organizational locus of the individuals involved in this effort (e.g., in the dean's office, in a university office) and the funding source(s) and time commitment(s) of these individuals.

The Office of Admissions of the PLFSOM has six full-time staff and is supported by state (97%) and institutional (3%) funding.

The PLFSOM has an Office for Promotion of Community Education Achievement (OPCEA) that was transferred from the Office of the Dean to the Office of Admissions on September 1, 2009. It is staffed by a full-time unit coordinator (school liaison) who reports to the director of admissions and ultimately to the associate dean for admissions. OPCEA is supported by state (73%) and institutional (27%) funding.

b. Describe the major programs currently in place at your institution intended to enhance diversity in the pool of well-prepared applicants for medical school admission. For each major program describe:

- The type of program
- The length of time the program has been in place
- Program enrollment data for the three most recent years
- Funding sources for the program or partnership

Describe general plans for additional programs.

The Office of Admissions has a two-pronged approach to enhance the applicant pool: recruitment of premed applicants and cultivation of a pipeline of potential future applicants.

OFFICE OF ADMISSIONS RECRUITING PROGRAM.

Full-time staff in the Office of Admissions (associate dean, director, assistant director, lead advisor & recruiter, and school liaison) regularly interacts with counterparts, pre-med advisors and students in the El Paso region and across Texas. Activities include recruiting visits, presentations at health fairs and assemblies, participating in meetings of the Texas Association of Advisors to the Health Professions

(TAAHP), and representation in Councils of the Texas Medical and Dental School Application Services (TMDSAS) and the Joint Admissions Medical Program (JAMP). As participants in TMDSAS, the PLFSOM has received over 2500 applicants yearly, (over 2900 in the 2011-2012 admissions season) including students of diverse backgrounds and those identified as disadvantaged by TMDSAS. The recruiting program has been in place for three years and is funded by the Office of Admissions.

THE SHADOW-A-PHYSICIAN PROGRAM

This program provides opportunity for undergraduate pre-med students to be mentored by a practicing physician. Up to 15 students per semester are accepted from the University of Texas at El Paso (UTEP) to experience the profession of medicine from the perspective of a practicing PLFSOM physician. Seventy-five percent of UTEP students are Hispanic. Participants in this observership program receive a one-on-one interaction with physicians in a clinical setting, and are able to see patients with the physician mentor. The program is reserved for UTEP undergraduates; however, post-baccalaureate and graduate students may apply on a space-available basis. The program has been in place for four years and has enrolled 98 students over the three most recent years. The program is funded by OPCEA.

THE SUMMER ENRICHMENT PROGRAM FOR PRE-MED STUDENTS

This is a partnership between UTEP and PLFSOM and is held in early summer (late May or early June) for four weeks (8 hours a day). Students from accredited undergraduate colleges and universities who have accumulated 40-60 credit hours are eligible to apply. Class size is 20-30 students. Students from UTEP, Sul Ross State University and University of Texas Permian Basin (UTPB) are given priority. These universities are in a region of Texas with one of the lowest ratios of physicians per population (45/100,000), compared with the rest of the state (157/100,000) and the nation (220/100,000). Applicants from this region to the PLFSOM charter class were less competitive in their average MCAT (21.8), compared with the rest of Texas (26.4) and those from out-of-state (27.2). For entry year 2011, the average MCAT of applicants from El Paso was 23.3, compared to 27.3 for those from the rest of Texas. Students who reside in El Paso but attend school elsewhere are also considered. Students are provided academic enrichment preparation for their upper level coursework, and an introduction to MCAT and Critical Thinking at UTEP. In addition, the students spend mornings on the Texas Tech – University Medical Center (UMC) campus shadowing physician faculty in a variety of clinical experiences and attend a daily one hour lecture on topics related to applying to medical school, preparation for interview, library research, and perspectives on clinical experiences. This program has been in place for nine years and enrolled 78 students in the three most recent years. The program is funded by OPCEA and tuition is paid by the students to UTEP.

SUMMER CAMPS FOR HIGH SCHOOL STUDENTS

We offer summer camps for rising 10th and 11th graders from any of the six independent school districts in the El Paso area. Students must be recommended by their respective school counselors. Five camps are offered. The camp is for two weeks (Monday through Friday, all day) and is conducted on the TTUHSC campus. The curriculum consists of PreSAT prep; interactive presentations with health career professionals to gain a better insight about major careers; field trips; mock crime scene investigation experience, and Reality Store (simulation of life expenses). This program has been in place for nine years and enrolled 273 students for the three most recent years. The program is funded by OPCEA.

DEVELOPING RESEARCH AND EARLY ASPIRATIONS FOR MEDICAL SCHOLARS (DREAMS)

This is a program for fifth and sixth grade gifted students from underserved parts of the city who participate in a four-week half-day program conducted by El Paso Independent School District on the Silva Magnet High School – Jefferson Campus. Qualifications for selection include student application and resume, teacher recommendations, grades, Texas Assessment of Knowledge and Skills exam scores and parent questionnaire. The curriculum encompasses a variety of experiences related to the healthcare field. DREAMS is sponsored by the El Paso Independent School District Advanced Academic Services with partial support from the Borderland Area Health Education Center (AHEC), and the Hispanic Center of Excellence of PLFSOM. In the past two years, there were 372 participants.

JOINT ADMISSIONS MEDICAL PROGRAM (JAMP)

This program is in a partnership between the nine medical schools in Texas (eight public and one private) with the state's 31 public and 34 private undergraduate colleges and universities. JAMP supports and encourages highly qualified economically disadvantaged students to pursue medical careers. Students who successfully complete the undergraduate portion of JAMP activities and satisfy established academic performance criteria are guaranteed acceptance into a Texas medical school [Academic Medicine 2009; 84(10): 1373-1382]. Up to 10% of the first year medical school class size is assigned to these students. JAMP has been in place since 2003. PLFSOM is currently a member of JAMP but has been exempt from enrolling students in its initial 3 years. The PLFSOM is scheduled to enroll its first JAMP students in 2012. JAMP is funded by the Texas Legislature.

PLANS FOR ADDITIONAL PROGRAMS

The associate dean for admissions is currently chairing a task force charged by the dean to develop plans for the implementation of a post-baccalaureate program designed to prepare students for admissions to medical school. This task force meets monthly. Our goal is to implement this program in AY 2013-14 following the graduation of our charter class and the achievement of full accreditation from LCME.

- c. Describe the major partnerships or community relationships in place at the institution that were established to enhance diversity in the pool of well-prepared applicants for admission to medical school, both locally and nationally. For each major partnership, describe the:
 - i. Type of partnership or community relationship
 - ii. Length of time the partnership or community relationship has been in place
 - iii. Frequency of communications and modes of interaction with partners

The major community relationships are with UTEP and UMC and support the pre-med student programs described in (b). These relationships have been in place for eight years, dating back to our years as a regional clinical campus. The frequency of communications is 1-2 times per year for planning purposes and bi-weekly during implementation or more frequently if needed. In addition, the six Independent School Districts in our area facilitate promotion of the summer camps for high school students noted in (b). This relationship has been in place for eight years. The frequency of communication is 1-2 times per year. Interactions with these community relationships occur personally in meetings, telephonically and by electronic mail.

- d. Describe the means by which the outcomes of these programs/partnerships are tracked. Provide outcome data for program and partnership participants, indicating those participants who were successful in gaining admission to the medical school, other medical schools, other health professions schools, and other health-related graduate programs.
 - i. Provide data for the three most recent academic years if program or partnership participants were undergraduate college students.
 - ii. Provide data for the six most recent academic years if program or partnership participants were pre-college students.

Acceptance into programs requires an application in which student supplies the Office for Promotion of Community Educational Achievement (OPCEA) with their name, address, phone number, and e-mail address. OPCEA maintains this information for tracking. Students are contacted via e-mail or phone to ascertain where they stand in the pipeline. Tracking has reached 70 % of pipeline graduates. The average MCAT of applicants from the entire border region is much lower than other applicants in Texas (23.7 vs. 27) which may be a reflection of their educationally disadvantaged background and account for the small number of pipeline college students reporting admission to medical school. The majority of pre-college pipeline students report maintaining continued interest in accessing a health career.

| | | Total | Admission | Admission | Admission | Admission |
|----------------------------|-----------|---------|-----------|-----------|-------------|-----------|
| | | in | to | to Other | to Other | to Other |
| i. Undergraduate | | | D. 2001 | | | Health- |
| (Pre-Med) Students | | program | PLFSOM | Medical | Health | related |
| | | | | Schools | Professions | Graduate |
| | | | | | Schools | Programs |
| Academic Enrichment | | | | | | |
| Program | 2010-2011 | 23a | 0 | 0 | 0 | 0 |
| formerly named | 2009-2010 | 25b | 0 | 1 | 0 | 0 |
| "Summer Enrichment | | | | | | |
| Program" | 2008-2009 | 30c | 1 | 2 | 0 | 0 |
| | | | | | | |
| Shadow-A-Physician Program | 2010-2011 | 30d | 1 | 2 | 0 | 0 |
| | 2009-2010 | 34d | 2 | 2 | 0 | 0 |
| | 2008-2009 | 34d | 3 | 4 | 1 | 0 |

| | | The PLFSOM is currently a member of JAMP but is exempt from enrolling summer program pre-med students until 2012 |
|------------------|-----------|--|
| Joint Admissions | 2010-2011 | and thus has no tracking data. |
| Medical Program | 2009-2010 | |
| JAMP | 2008-2009 | |

a. Rising sophomores (all but 2 from UTEP)

b. Rising sophomores, juniors and seniors (all but 2 from UTEP)

c. Rising sophomores, juniors and seniors

d. Students mostly from

UTEP

ii. Pre-CollegeStudents

| | | | | | | Admission |
|--------------|------------|----------|-----------|-----------|-------------|-----------|
| | | | | | Admission | to Other |
| | | | | Admission | to Other | Health |
| | | | Admission | to Other | Health | Related |
| | | Total in | to | Medical | Professions | Graduate |
| | | Program | PLFSOM | Schools | Schools | Programs |
| High School | 2010-2011 | 75 | 0 | 0 | 0 | 0 |
| Summer | 2009-2010 | 100 | 0 | 0 | 0 | 0 |
| Medical Camp | 2008-2009 | 98 | 0 | 0 | 0 | 0 |
| | 2007-2008 | 0 | 0 | 0 | 0 | 0 |
| | 2006-2007 | 28 | 0 | 0 | 0 | 0 |
| | 2005-2006* | 72 | 0 | 0 | 0 | 0 |

 $[\]ensuremath{^{*}}$ Students during this year are current juniors and seniors in college.

MS-9. A medical education program must develop and publish technical standards for the admission, retention, and graduation of applicants or students with disabilities, in accordance with legal requirements.

Provide a copy of the medical school's technical standards for the admission, retention, and graduation of applicants with disabilities. Describe the means by which the technical standards are disseminated to potential and actual applicants, enrolled medical students, faculty, and others.

A copy of the Standards is included in the Section III, Appendix 2.

A copy of the Standards of Curricular Completion is also included in the Medical Student Catalog that can be found at:

http://www.ttuhsc.edu/fostersom/studentaffairs/documents/MGCatalog_2011_2012_11_11.pdf pages 12 - 19.

These standards are also part of an orientation booklet that is provided to candidates who interview for admission to the PLFSOM and sent with the acceptance packet. Faculty, residents and others can access these standards on the website.

If a student has a disability they may request reasonable accommodations as described on the website for ADA Compliance for Students: http://www.ttuhsc.edu/studentservices/ada/default.aspx. The student sends the application with supporting documentation to the office of Student Services in Lubbock which is the central ADA compliance office. The ADA compliance officer, reviews the supporting documentation with medical and/or psychological consultant. A determination of reasonable accommodation is then made and communicated to the office of Student Affairs. The Student Affairs committee meets to review the accommodation recommendations and tailors the recommendations to the specific learning environment (pre-clinical or clinical) and informs the student in writing of the accommodations. The office of Student Affairs notifies course directors in year 1 and 2 and the office of curriculum, evaluation and accreditation regarding the need for prolonged time on a test or other test modifications needed. The student is expected to inform their clerkship director in third or fourth year if they need physical accommodations as determined by the ADA consultants or test accommodations if there is a department based examination. NBME tests in the third and fourth year are given centrally so the office of curriculum, evaluation and accreditation would already be aware of those needs. Students are informed that the granting of accommodations for USMLE step exams is a separate process. The Director of Academic Support will work with students in that process. Students may request accommodations at any time during their studies at TTUHSC Paul L. Foster School of Medicine.

MS-10. A medical education program's catalog and other informational, advertising, and recruitment materials must present a balanced and accurate representation of the mission and objectives of the program, state the requirements for the M.D. degree and all associated joint degree programs, provide the most recent academic calendar for each curricular option, and describe all required courses and clerkship rotations offered by the program.

MS-11. A medical education program's catalog or other informational materials must enumerate the program's criteria for selecting students for admission and describe the application and admission processes.

a. Provide a copy of the current medical school bulletin or catalog. If a hard-copy catalog is no longer published, indicate the Web site URL for the requested material. Include specific Web site URL(s) that provide information about the requirements for admission to the M.D. program and all associated joint degree programs, the most recent academic calendar for each curricular option, all required courses and clerkship rotations, the medical school's criteria for selecting medical students, and the student selection process. Include printed copies of the relevant Web pages in the Appendix.

The catalog is found at the Student Affairs website: http://www.ttuhsc.edu/fostersom/studentaffairs/documents/MGCatalog 2011 2012 11 11.pdf

The school's criteria for selecting students and a description of the admissions process are described in the catalog as well as on the Admissions Office web page at http://www.ttuhsc.edu/fostersom/admissions/.

Relevant pages for admission, selection criteria, student selection process, academic calendar and required courses and clerkship rotations are included in the Student Catalog included Section III, Appendix 3.

b. In the Appendix, provide samples of any recruitment or advertising materials related to the medical school that are made available online, in the media, or in hard copy to potential applicants, health professions advisors, or others.

The following recruitment and informational items are included in Section III, Appendix 4:

1. TTUHSC Paul L. Foster School of Medicine Web Page including lead links, video, and annual report. URL: http://www.ttuhsc.edu/fostersom/ - Attachment a

- 2. TTUHSC PLF SOM Office of Admissions Web Page with related links URL: http://www.ttuhsc.edu/fostersom/admissions/ Attachment b
- Admissions Brochure URL: http://www.ttuhsc.edu/fostersom/admissions/documents/1581_TTU_Adm_Br.pdf
 http://www.ttuhsc.edu/fostersom/admissions/documents/1581_TTU_Adm_Br.pdf
 http://www.ttuhsc.edu/fostersom/admissions/documents/1581_TTU_Adm_Br.pdf
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- 4. Joint Admissions Medical Program (JAMP) brochure URL: http://www.utsystem.edu/jamp/ Attachment d
- 5. TTUHSC PLF SOM Pipeline Programs Attachment e
- 6. TTUHSC PLF SOM Summer High school Med Camp handout Attachment f
- 7. AAMC 2012-2013 Medical School Admission Requirements (MSAR) PLF SOM
 - Attachment g
- 8. PLF SOM Tech View Weekly News, issued electronically to campus and El Paso community; also on Admissions Web Page URL: http://www.ttuhsc.edu/fostersom/admissions/documents/tech_view.pdf - Attachment h
- 9. TTUHSC PLF SOM Information Packet News and Marketing, includes CD, brochures (including Admissions), Annual Report Attachment i
- 10. Admissions Information Booklet for Interviewed Candidates Attachment j

MS-12. The resources used by an institution that offers a medical education program to accommodate the requirements of any visiting and transfer medical students must not significantly diminish the resources available to already enrolled medical students.

MS-15. A medical education program should accept a transfer medical student into the final year of a medical education program only in rare and extraordinary personal or educational circumstances.

a. Complete the following table for each of the past three academic years:

Please note: PLFSOM will not consider transfers until year 3 of our curriculum. In October 2011 we accepted four students from the Juan Bautista School of Medicine in Puerto Rico after we carefully reviewed our resources and determined that we could enroll these students into our third year without compromising the educational experience of existing students. Qualified transfer students were selected by the admissions committee. We do not accept visiting students in required clerkships at this point in time and do not anticipate doing so for the foreseeable future. We have not yet implemented elective courses. Visiting students will be permitted to take electives on a space available basis.

| Number of: | Most Recently Completed Academic Year | One Year Prior | Two Years Prior |
|---|---|----------------|-----------------|
| Transfer students into the second year | 0 | 0 | 0 |
| Transfer students into the third year | 4 | 0 | 0 |
| Transfer students into the fourth year | 0 | 0 | 0 |
| Visiting students taking required clerkship rotations | 0 | 0 | 0 |
| Visiting students taking elective courses | 0 | 0 | 0 |

b. If the medical school has admitted one or more transfer medical students to the final year of the medical education program during any of the past three academic years, describe the circumstances surrounding the admission decision.

Not applicable. Please see note above.

MS-13. A medical education program must ensure that any potential transfer student demonstrates academic achievements and other relevant characteristics comparable to those of the medical students in the class that he or she would join.

MS-14. A medical education program must ensure that prior coursework taken by a medical student who is accepted for transfer or admission with advanced standing is compatible with the coursework at the level of the program to be entered.

a. Describe the process of selecting transferring medical students or students for admission with advanced standing.

Student transfers into the second year of the curriculum are not allowed. Future applicants for transfer to the third year should be Texas residents who are enrolled in an LCME accredited school. Applicants who are not Texas residents may be considered based on space availability within the limit of 10% per class for out-of-state residents.

Applicants must be in good standing and must have passed USMLE Step 1 with the score reported to PLFSOM in time for the start of third year clerkships.

Applications for advanced standing that meet the above criteria are reviewed and considered on an individual and space available basis by an Advanced Standing Task Force composed of two clinical members of the Admissions Committee appointed by the chair. The task force presents its findings and recommendations to the admissions committee for consideration of acceptance. Applicants who are not Texas residents may be considered based on space and availability within the 10% limit in class size for out-of-state residents.

b. Describe the process by which the medical school determines whether the academic work and academic achievement of medical students applying for transfer or for admission with advanced standing are equivalent to the academic work and academic achievement of students in the class that they will join.

The Advanced Standing Task Force of the Admissions Committee appraises the applicant's credentials, background and criteria in (a), and interviews the applicant for suitability and fit with the PLFSOM third year class. Detailed criteria are outlined in the Advanced Standing Admissions Application in the admissions section of the PLFSOM web-site. These include the record of academic performance, MCAT scores, USMLE Step 1 scores, personal data, medical school experience, recommendations including a letter of good standing from the dean and reasons for requesting the transfer. The Advanced Standing Task Force reviews these materials and interviews the applicant before forwarding a recommendation to the full Admissions Committee for a vote.

c. If any transfer or advanced standing students were admitted for the current academic year, complete the following table:

Not applicable.

| | Mean Under- graduate GPA | Mean MCAT Biological Science Score | Mean MCAT Physical Science Score | Mean MCAT Verbal Reasoning Score | Modal MCAT Writing Sample |
|----------------------|-----------------------------|--|--|---|------------------------------|
| Year 2 transfers | | | | | |
| Second-year class | | | | | |

d. If any transfer medical students were admitted from non-LCME-accredited medical schools since the last full accreditation survey, complete the following table:

Not applicable.

| | | 2005- 2006 | 2006- 2007 | 2007- 2008 | 2008- 2009 | 2009- 2010 | 2010- 2011 | 2011- 2012 | 2012- 2013 |
|---------------------|-----------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|
| Year 2 | Number: | | 2007 | 2000 | 2007 | 2010 | 2011 | 2012 | 2010 |
| transfers | Source schools: | | | | | | | | |
| Year 3 transfers | Number: | | | | | | | | |
| | Source schools: | | | | | | | | |
| Year 4 | Number: | | | | | | | | |
| transfers | Source schools: | | | | | | | | |

MS-16. A medical education program should verify the credentials of each visiting medical student, maintain a complete roster of visiting students, approve each visiting student's assignments, and provide a performance assessment for each visiting student.

The institution that offers a medical education program is expected to establish protocols or requirements for health records, immunizations, exposure to infectious agents or environmental hazards, insurance, and liability protection comparable to those for its own enrolled medical students.

MS-17. A medical education program must ensure that any medical student visiting for clinical clerkship rotations and electives demonstrates qualifications comparable to those of the medical students he or she would join in those experiences.

a. Describe the process by which the medical school verifies the credentials of and grants approval for medical students from other medical schools to take clerkship rotations or electives at the institution.

Students wishing to do elective experiences in year 4 at PLFSOM must document that they are in good standing and in their final year of study at an LCME accredited medical school or a school accredited by American Association of Colleges of Osteopathic Medicine. At the time of application, the student must provide official documentation of the following information:

- A complete and signed application through VSAS (Visiting Student Application Service) requesting the specific elective experience indicating the approval of the student's home medical school.
- Verification of student being in good academic standing
- Verification of student being instructed in OSHA safety measures and infection control precautions
- Verification of current BLS certification
- Ensure student is taking electives for credit and will pay tuition at the home school during the period indicated
- Proof of current personal health insurance
- Successful completion of core clerkships before elective is taken
- Proof student will be in his/her senior year at the time of the elective and expected graduation date
- An official immunization history showing compliance with all immunization requirements.
- Proof of minimum professional liability coverage of \$25,000/\$75,00 that is in effect before the visiting student can be enrolled in the elective experience.
- Completion of a criminal background check
- Completion of HIPPA training
- Passing score of USMLE Step 1

Applications and supporting documentation as described above are reviewed by approved staff in the Office of Student Affairs. Acceptance is contingent upon meeting all requirements and space availability. The requested department is notified that a student would like to take an elective in their department to allow the department to decide if there is space available or alternative dates that would be available.

MS-18. A medical education program must have an effective system of academic advising for medical students that integrates the efforts of faculty members, course directors, and student affairs officers with its counseling and tutorial services.

There should be formal mechanisms at the medical education program for medical student mentoring and advocacy at each instructional site. The roles of various participants in the advisory system should be defined and disseminated to all medical students. A medical student should have the option of obtaining advice about academic issues or academic counseling from individuals who have no role in making promotion or assessment decisions about him or her.

a. Describe the elements of the academic advisory system for medical students and how these elements integrate with each other as an effective system. Describe how and when medical students in academic difficulty are identified. Describe the types of assistance available to medical students experiencing academic difficulty, including any assistance available from medical school and other sources (e.g., the parent university).

There are multiple advisory options for students including the college masters (see below), the associate dean for student affairs, the senior associate dean for medical education, the director of academic support, the director of student affairs, course/clerkship directors, and faculty members. The students have access to their e-portfolio which contains grades and summative evaluation information. This provides an easily accessible mechanism for an individual student to monitor their own progress, to identify weaknesses, and when necessary to seek help.

The student body in each academic year is divided into learning communities ("colleges"). Each college is headed by two "college master," senior-level medical educators recruited expressly to serve in this role. The college masters are expected to monitor the performance of the students in their respective colleges by tracking their performance on formative and summative exams. The masters have access to their individual students' e-portfolios for this purpose and receive weekly summaries on the weekly formative exams.

The senior associate dean for medical education and the associate dean for student affairs coordinate the monitoring of test grades with the college masters in order to identify and advise students who experience academic difficulty. The expertise of the office of student affairs includes the director of academic support, an individual with a professional background in educational psychology, to help students identify individual learning styles and to work with students to improve time management, study skills, and test taking strategies to maximize academic performance. Students are able to schedule appointments with the director of academic support as well as with the associate dean for student affairs, their college masters, and the director of student affairs for individual academic advising. When a student has been identified as at risk by the college masters, the Grading and Promotion Committee or a course director, they are instructed to meet with the director of academic support in order to formulate a plan for improvement.

To integrate these processes, there is a monthly meeting of the college masters, the director of academic support, the director of student affairs, the associate dean for student affairs, and the senior associate dean for medical education.

One of the major responsibilities of the college masters is to provide academic and career advising for medical students in conjunction with the office of student affairs. The associate dean for student affairs and the office of student affairs has direct responsibility for administering the resources for academic and career counseling. Students receive information on advisement during initial orientation and periodically at each year's orientation. The college masters and the associate dean for student affairs and her staff meet frequently to coordinate academic and career counseling functions and to enhance the consistency and quality of information provided to students.

Students may also choose a faculty advisor other than the college master to advise them on academic matters. The list of advisors is included on the Student Affairs website at: http://www.ttuhsc.edu/fostersom/studentaffairs/documents/112111_list_of_advisors_revised.pdf

The associate dean for student affairs or the director of academic support meets with each student that fails a unit or semester examination to assure that the student is aware of all resources available to them.

The associate dean for student affairs, the director of academic support, and the senior associate dean for medical education are ex-officio members of the Grading and Promotion committee but have no direct role in the evaluation of students. They also do not carry voting rights in the GPC.

Other academic advising options include peer tutoring and the availability of faculty for one-on-one tutoring. The medical education faculty has 80% of their time dedicated to teaching thus ensuring availability of course directors and faculty for one-on-one tutoring or group tutoring as the need arises. A peer tutoring program has been developed, funded, and implemented to encourage student-driven academic assistance, under the supervision of the director of academic support.

b. Describe any programs designed to assist entering medical students who may be at risk of academic difficulty in adapting to the demands of medical school.

The first three weeks of medical school is a period during which students participate in the language, culture, and community immersion experience as part of the Society, Community, and Individual course. This is also a period of general orientation to the curriculum and life in medical school; included are workshops on stress reduction, time management, and learning styles. Students meet with their college master during this period as an opportunity to begin establishing a working rapport and identify student's concerns about their risk of academic difficulty.

c. Complete the following table for the most recently concluded academic year:

Most recently completed academic year: 2011 – 2012

| Number of Medical Students Who: | | Acadeı | nic Year | | Total |
|--|-------|--------|----------|--------|-------|
| Number of Medical Students who: | First | Second | Third | Fourth | Total |
| Withdrew or were dismissed | 1 | 2 | | | 3 |
| Transferred to another medical school | | | | | 0 |
| Repeated the entire academic year | 3 | | | | 3 |
| Repeated one or more required courses or clerkship rotations | | 1 | | | 1 |
| Moved to a decelerated curriculum | | | | | 0 |
| Took a leave of absence due to academic problems | | | 1 | | 1 |
| Took a leave of absence for academic enrichment (including research or a joint degree program) | | | | | 0 |
| Took a leave of absence for personal reasons | 0 | 0 | 2 | | 2 |

d. Estimate the percentage of students who experience significant academic difficulty and undergo remediation (e.g., a decelerated curriculum, a repeated year, a leave of absence), but who continue to struggle academically (i.e., who withdraw or are dismissed for academic reasons).

The two students (5% of the inaugural class of 39) who were dismissed had experienced significant academic difficulty in their first year and continued to struggle after a repeated first year. They were dismissed because of continued failure in the Scientific Principles of Medicine (SPM) course. Both students had sought and received accommodations and were aware of tutoring and academic support opportunities.

Of the subsequent class of 2014, 3 of 60 (5%) are repeating the year. All three of those students have been retained although one of the three has continued to struggle with components of SPM.

Possible reasons for academic difficulty include 1) the challenge of making the transition from discipline-based, single faculty member delivered undergraduate courses to a highly integrated, multidisciplinary instruction delivered by several different faculty members each day; and 2) problems with time management, prioritization and study skills.

e. Estimate the percentage of a typical entering class that graduates in four years, and provide the overall graduation rate for a typical class.

Our charter class will not graduate until May 2013.

| Four-year Graduation Rate | Overall Graduation Rate |
|------------------------------|-------------------------------|
| | |

f. Provide data from the AAMC GQ or the AAMC CGQ, the independent student analysis, and/or internal school surveys on student satisfaction with academic advising and counseling services.

As the PLFSOM has not yet graduated its first class, AAMC GQ data is not yet available. The data reported below is based on the student independent analysis survey completed in January 2012. The response rate for this survey is as follows: Class of 2013 = 72.5%, class of 2014 = 100%, and class of 2015 = 98.8%. The overall response rate is 93.3%.

| | Class of 2013 | Class of 2014 | Class of 2015 | Total |
|-------------------------------------|---------------|---------------|---------------|-------|
| Satisfaction with academic advising | 79.3% | 84.2% | 77.8% | 80.2% |

MS-19. A medical education program must have an effective system in place to assist medical students in choosing elective courses, evaluating career options, and applying to residency programs.

a. Describe the medical school's system for career and residency counseling. Provide information on the formal (required) activities that occur for students in each year of the curriculum and the informal activities available to some or all students. Provide a description of the resources available to medical students to support their career investigations, including written and/or online materials, and describe how these materials are used.

Formal Activities:

In year 1, the students are introduced to the AAMC Careers in Medicine (CIM) website at orientation. At that meeting we review the navigation process and the kind of information available. In the fall of 2010, the Office of Student Affairs initiated a series of formal workshops on career planning utilizing the CIM tools as a foundation for exploring career plans. Beginning in the fall of 2011, these workshops have been incorporated into the mandatory class meetings that are held every other month for the first and second year students.

Student Affairs hosts "Career Tasters" which is a series of lunch time seminars where two physicians are invited to speak to the students on their specialty. This is publicized to all three classes and is voluntary. Physicians discuss why they chose their specialty, if it has met their expectations and how a student can pursue that same specialty. These workshops usually attract from 30-50 students. They are exposed to 10-12 different specialties through these workshops.

Early in year 3, students are assigned a faculty advisor in the specialty they are considering. To facilitate this assignment, each student may meet with one of the student affairs team (the associate dean for student affairs, the director of academic support, and the student affairs director). At this meeting, career specialties, Year 4 electives and requirements, advising and other issues are discussed. A formal record of this meeting is kept in the student affairs office. The student is encouraged to meet with his/her advisor by December of the third year to discuss plans for the fourth year.

During year 3, the associate dean for student affairs provides students information on specialty selection, CV preparation, and on writing personal statements for their residency applications. Each student is scheduled to meet with the Associate Dean in the summer of fourth year to discuss their career choice, plans for fourth year electives and the MSPE. Further career advice is offered if the student is still considering more than one specialty.

Residency interviewing workshops and mock interviews will be held in the early part of Year 4 for all interested fourth year students prior to residency interviews. The advisors, Office of Student Affairs and the college masters will assist the students as they apply and interview as well as rank their programs.

Informal Activities:

Twenty three student interest groups have been formed encompassing many specialties and student interests. The individual departments provide support to the specialty specific organizations. During the year, students explore the different specialties and participate in discussions with practicing physicians and residents in training. The office of student affairs, through student services fees, supports these organizations' efforts to reach out to the students and to raise funds to attend regional and national meetings where students can network with others interested in the same specialties.

The college masters, associate dean for student affairs, the director of academic support and the director of student affairs are available to meet with students on an informal basis throughout the year. Tools used are CIM, "Charting the Outcomes" from the NRMP, NRMP match results (National Residency Match Process), previous match results, and ERAS (Electronic Residency Application Service) information.

Advisors are chosen from each department on a voluntary basis. Those advisors receive information from the Office of Student Affairs in order to assure that they are familiar with the CIM tools as well as practical advice on career counseling with medical students. Each year the advisors are asked if they would like to continue in that role and they receive information on career advising sites and the expectations for their role as advisors. We currently have a roster of 55 advisors representing all of the major medical specialties. A list of advisors is available on line at the following site: http://www.ttuhsc.edu/fostersom/studentaffairs/documents/112111_list_of_advisors_revised.pdf

b. Identify the individual(s) primarily responsible for providing guidance to medical students about their intramural and extramural elective choices for each year of the curriculum. Note the role(s) or title(s) (e.g., student affairs dean, college advisor, departmental faculty advisor) of the individual(s) responsible for the formal approval of medical students' elective courses in each year of the curriculum.

Planning for intra- and extramural elective experiences in year 4 begins mid-way through year 3. The associate dean for student affairs orients the students to the curricular expectations for the fourth year. She discusses strategies for choosing extramural electives. The students are instructed to discuss their fourth year plans with the advisor that they chose at the beginning of third year. The director of student affairs and the student affairs staff assist students in finding appropriate electives intramural or extramural. The students will turn in their preferences for fourth year. The Associate dean reviews each schedule. If there is a student whose schedule seems to be heavily weighted toward a certain specialty, the schedule will be discussed with the clerkship director's committee for their input and recommendations. Ultimately, the associate dean for student affairs must approve the final elective schedule.

c. Provide data from the AAMC GQ or the AAMC CGQ, the independent student analysis, and/or internal school surveys on student satisfaction with the career advising system and with guidance in the choice of electives.

As the PLFSOM has not yet graduated its first class, AAMC GQ data is not yet available. The data reported below is based on the student independent analysis survey completed in January

2012. The response rate for this survey is as follows: Class of 2013 = 72.5%, class of 2014 = 100%, and class of 2015 = 98.8%. The overall response rate is 93.3%.

| | Class of 2013 | Class of 2014 | Class of 2015 | Total | National GQ data 2011 |
|-----------------------------------|---------------|---------------|---------------|-------|--------------------------|
| Satisfaction with career advising | 79.3% | 87.7% | 75.6% | 80.4% | 59.4% |

d. List the principal components of the medical school's system of assessment that are employed in the composition of the formal Medical Student Performance Evaluation (MSPE, for U.S. medical schools) or the Medical Student Performance Record (MSPR, for Canadian medical schools).

The MSPE consists of the following components:

- Identifying information
- Unique characteristics authored by the student with approval of the associate dean of student affairs
- Academic History date of matriculation and expected graduation; any leaves of absence or remediation or repeated years as documented on the transcript.
- Academic Progress statement of progress in the first two years; this includes a statement of
 professionalism from the pre-clinical years compiled by the college masters, Associate Dean
 for Student Affairs, Senior Associate Dean for Medical Education; and notification of
 completion of the USMLE Step 1. Then verbatim comments completed by the clerkship
 directors from the third year grades for the six clerkships.
- Summary summative assessment on the student's comparative performance in medical school relative to his/her peers, clinical abilities, communication skills, motivation and professionalism as documented by the clerkship directors.
- Appendices graphic representation of student's performance relative to peers
- The assessments that are received from the clerkship directors for the third year rotations are copied in their entirety to the MSPE.
- e. Indicate the individual(s) primarily responsible for preparation of the MSPE/MSPR and include two representative examples for recent graduates (redacting all personally identifiable information) in the Appendix.

Currently, there are no examples of an MSPE for Paul L. Foster School of Medicine as there have been no graduates. Two examples should be available at the time of the site visit after the October 1 release date.

The office of student affairs is responsible for preparing the MSPEs. Year one and two information is tracked on the individual student portfolio as well as through the Banner system database maintained by the registrar's office. Each grade and narrative from the third year is entered into the individual student's MSPE as the year progresses by the staff of the office of student affairs. In the fall of the fourth year, each student meets with the associate dean for student affairs to discuss the unique characteristics that they would like to include in the MSPE. After meeting with each student, the associate dean reviews the components of the MSPE and provides a summary paragraph. Each student has the opportunity to review

their letter and can challenge statements of fact. If a student challenges a narrative comment by the clerkship director, they will meet directly with that faculty member to discuss revisions. After the student has reviewed the letter, it is signed by the associate dean and uploaded into ERAS.

If a student prefers that someone other than the associate dean for student affairs write their MSPE, s/he may inform the Director of Student Affairs that they would like the Senior Associate Dean for Medical Education to write the letter rather than the Associate Dean for Student Affairs. Alternatively, the student may propose another faculty member to write their MSPE.

MS-20. If a medical student at a medical education program is permitted to take electives at another medical education program or institution, there should be a centralized system in the dean's office at the home program to review the proposed extramural electives prior to approval and to ensure the return of a performance assessment by the host program.

a. Describe the process by which medical students' extramural elective choices are screened prior to their being permitted to enroll.

As described in MS-19, the student will meet with their assigned advisor in the fall of their third year. They will discuss the electives that they are interested in as well as their plan for fourth year. The student will not be allowed to take more than three electives outside of the Paul L. Foster School of Medicine. The advisor must agree to the student's plan, taking into consideration the planned specialty and the student's academic progress. The student must turn in a schedule that has been signed by their advisor for approval by the associate dean for student affairs. If the student wants to receive an exception to the fourth year rules or the associate dean for student affairs is concerned about the schedule, it will be discussed by the clerkship directors committee before the associate dean for student affairs gives final approval. This would also be the body to consider a student's appeal if the schedule was not approved by the associate dean for student affairs.

PLFSOM will be part of the AAMC Visiting Student Application Service. This permits students to access high quality elective opportunities in LCME accredited schools. This system also enables the director of student affairs to track PLFSOM students' participation in extramural electives.

b. Describe the system for collecting performance assessments for medical students completing extramural electives.

A copy of the PLFSOM performance assessment form will be sent electronically to the faculty member of record for the extramural elective. The student participating in the extramural elective will also be provided a copy of the assessment form and s/he will request that their faculty preceptor complete the form and return it directly to the Office of Student Affairs in a timely manner so that the appropriate grade can be entered into the students' permanent record. The Office of Student Affairs will review all student files every quarter to assure return of the evaluation forms. If a form has not been returned, the faculty of record will be contacted by staff or if needed the Associate Dean to request completion of the form.

Also see information for MS-19.

MS-21. The process of applying for residency programs at a medical education program should not disrupt the general medical education of its medical students.

A medical education program will develop policies and procedures to minimize the disruption of any required educational or assessment activities of its medical students during the residency application, interview, and match processes.

MS-22. A medical education program should not provide a Medical Student Performance Evaluation/Dean's Letter required for the residency application of a medical student until November 1 of the student's final year.

a. How does the medical school handle potential scheduling conflicts between required academic activities (e.g., fourth-year courses or selectives, examinations) and residency interviews?

Students are permitted up to three excused absences per four week clerkship experience in year 4 that can be used for scheduling interviews. Students may also request additional time during these experiences or during elective experiences for interviews but in doing so must commit to making up missed time.

b. What is the earliest date for the release or provision of the MSPE/MSPR or other documents supporting applications to residency programs?

The MSPE from Paul L Foster School of Medicine will be released the same date as all other LCME accredited schools. Currently that date is November 1 but it is expected to move to October 1, 2012. The students will have had an opportunity to review their letter prior to that time so that all letters will be ready to be released on the specified date. If a student has issues with their letter that require further inquiry, the letter may be delayed after notifying the student.

Letters of recommendation are uploaded to the ERAS mail box from the office of student affairs. This is accomplished as the letters are received from the faculty. If a faculty has not submitted a letter by mid-September, then the office of student affairs contacts the faculty to encourage completion prior to October 1.

MS-23. A medical education program must provide its medical students with effective financial aid and debt management counseling.

In providing financial aid services and debt management counseling, the medical education program should alert medical students to the impact of non-educational debt on students' cumulative indebtedness.

a. Provide the name, title and date of appointment for the financial aid director. Is this a medical school or university-level position? Is it a full-time or part-time position? To whom does the financial aid director report?

Diana Andrade was appointed as the full-time Financial Aid Advisor for the Paul L. Foster School of Medicine in February, 2009. She interacts with Marcus Wilson, the Managing Director of Financial Aid, at TTUHSC in Lubbock Texas. While the Financial Aid Advisor is a medical school appointee, the managing director of financial aid is a university position at the Texas Tech University Health Sciences Center. Ms. Andrade reports to the associate dean for student affairs. They meet on a regular basis to ensure students financial aid needs are addressed. The director of student affairs, the financial aid advisor, and the managing director of financial aid also communicate regularly throughout the year. Financial Aid advice is also available in Lubbock through Mr. Wilson's office. Ms. Sherry Henry, Associate Managing Director of Financial Aid in Lubbock, is also available, by phone or email, when Ms. Andrade is out of the office. She also visits the campus on a yearly basis to meet with Ms. Andrade and students as needed.

b. Identify the office(s) and/or individual(s) who provide financial aid services to medical students. Describe the means by which medical students obtain financial aid advice and services when they are at educational sites geographically distant from the location of the financial aid office (e.g., during clinical rotations).

The students can obtain information from Ms. Andrade, Financial Aid Advisor, who is located in the student affairs office in the Medical Education Building in El Paso. The students on clinical rotations can gain access to information via the internet at the following website: http://www.ttuhsc.edu/fostersom/studentaffairs/finaid.aspx. They may also contact Ms. Andrade or any of the six financial aid advisors located in Lubbock by phone. Contact information and instructions is accessible to students at the student affairs website listed above.

c. Describe the personnel, space, equipment, and other resources available to the financial aid office. Identify any other student groups (e.g., allied health students, graduate students) that are served by the financial aid office. Indicate the number of financial aid staff members who are available specifically to assist medical students. Are the resources available to the financial aid office adequate to allow it to carry out its responsibilities? If not, please explain.

The Financial Aid space for the PLFSOM is located in the main educational building and is equipped with a desk, computer, printer, phone and fax lines and storage drawers in the student affairs suite. These resources are very adequate in carrying out the daily responsibilities of the financial aid advisor.

In addition to providing services to medical students, Ms. Andrade, is also responsible for providing minimal assistance to nursing students in the TTUHSC Gayle Hunt School of Nursing. This assistance consists mainly of helping students access the advisors at the TTUHSC located in Lubbock and providing them website and print information. Medical student services occupy the vast majority of Ms. Andrade's time and it is recognized and accepted that medical students are her primary responsibility and highest priority.

d. Describe the system for effective counseling of medical students about debt management. When in the curriculum and in what format(s) do debt management counseling sessions occur? Note which of the counseling sessions are optional and which are mandatory. Describe the means by which medical students' questions about debt management are answered. Describe the types of information about debt management (e.g., online, printed) that are available to medical students.

During orientation, students are given instructions on borrowing money as mandated by the Federal Government. Students are encouraged to borrow only what money is necessary and to budget carefully to avoid accumulating high debt loans during medical school. Students are encouraged to view the AAMC's programs, such as FIRST for medical education, which they can find on the Financial Aid page of the Student Affairs website https://www.aumc.org/services/first/).

In the fall of 2010, the first of a series of optional workshops on debt management was presented during a brown bag session for first and second year students. Students were given initial instruction on budgeting for medical school and how to avoid excessive consumer debt during the four years of medical school. A second workshop was held in the spring of 2011 that further educated students on their financial planning. Beginning with the fall of 2011, these workshops were incorporated into the mandatory meetings of each class. The first session, "Financial Aid and Budgeting" was presented to all three classes with attendance by all students. The spring presentations are "Debt and Credit card Management: and "Repayment options for student loans". Fourth year students have workshops prior to graduation to review loan repayment options. Exit counseling for all students with federal loans is available on line through the Financial Aid Office.

e. Provide data from the AAMC GQ or the AAMC CGQ, the independent student analysis, and/or internal school surveys on student satisfaction with financial aid counseling and services.

As the PLFSOM has not yet graduated its first class, AAMC GQ data for this school is not yet available. The data reported below is based on the student independent analysis survey completed in January 2012 as compared to the National GQ data. The response rate for this survey is as follows: Class of 2013 = 72.5%, class of 2014 = 100%, and class of 2015 = 98.8%. The overall response rate is 93.3%.

| | Class of 2013 | Class of 2014 | Class of 2015 | Total | National GQ results 2011 |
|--|---------------|---------------|---------------|-------|--------------------------------|
| Satisfaction with financial aid services | 86.2% | 92.9% | 95.1% | 92.8% | 70.3% |
| Satisfaction with debt management counseling | 67.9% | 77.2% | 72% | 73.1% | 64.7% |
| Satisfaction with refund policies | 79.3% | 86% | 80.5% | 82.1% | |
| Satisfaction with accessibility of financial records | 86.2% | 89.5% | 82.9% | 85.7 | |

While our students seem to be more satisfied than those numbers reported nationally, we believe that this is an important area that needs continued revision. Students in the class of 2013 were not exposed to as many required sessions on finances as the subsequent classes. These mandatory meetings should improve student satisfaction in regards to debt management counseling.

MS-24. A medical education program should have mechanisms in place to minimize the impact of direct educational expenses on medical student indebtedness.

As key indicators of the medical education program's compliance with this standard, the LCME and the CACMS consider average medical student debt, including the debt of current students and graduates and trends over the past several years; the total number of medical students with scholarship support and average scholarship support per student; the percentage of total financial need supported by institutional and external grants and scholarships; and the presence of activities at the programmatic or institutional levels to enhance scholarship support for medical students. In addition, the LCME and the CACMS will consider the entire range of other activities in which the program could engage (e.g., limiting tuition increases, supporting students in acquiring external financial aid).

a. Provide a copy of your school's most recent LCME Part I-B Financial Aid Questionnaire.

See Section III, Appendix 5. "2010-2011 LCME Part I-B Student Financial Aid Questionnaire" (The 2011-2012 should be available after September 2012)

b. Describe current activities at the medical school or the university level to increase the amount and availability of scholarship and grant support for medical students. For example, is there a current fund-raising campaign devoted to increasing scholarship resources? If so, what is the goal of the campaign, its level of success to date, and the timeframe for completion?

As a state supported medical school, tuition and fees at Paul L. Foster School of Medicine are quite modest (\$15,500 for instate students and \$28,600 for out of state students in 2011-12). Tuition and fees have only increased by approximately 4% since the matriculation of our charter class in 2009. PLFSOM is committed to minimizing the impact of direct educational expenses on student indebtedness. It offers 20-25 full four-year tuition and fees scholarships per class per year based on merit. The schools endowment will enable us to continue doing so for subsequent classes as well.

In addition to these scholarships, the El Paso Community Foundation and the Paso del Norte Foundation have implemented a loan forgiveness program awarding up to \$20,000 per year to five students per class who plan to return to the El Paso region at the completion of their residency training. For each year the student practices in this area, one year of loan proceeds are forgiven. This program has funded 15 students to date. Since no additional funds were added to that program, there will not be future awards made but the 15 students will be able to receive funds throughout their four years. The Office of Development is actively working to add to this fund from community resources in order to expand this opportunity beyond the first 4 classes. Securing additional funds for scholarship support is a major priority of the development staff. They have recently acquired additional funding through the Wolslager foundation that will provide \$10,000 per student for 7 students from the El Paso area. There are additional scholarship funds to assist students who meet the donor's specifications.

Students receive frequent emails about scholarship opportunities from the financial aid liaison, Diana Andrade. In the last year, students have successfully obtained scholarships through the Texas Medical Association and the AMA minority scholarship award.

See also information for standard MS-23 and Part A, items (g.) and (h.) in this section of the database.

MS-25. An institution that offers a medical education program must have clear and equitable policies for the refund of a medical student's tuition, fees, and other allowable payments.

"Other allowable payments" may include payments made for health insurance, disability insurance, a parking permit, student housing, and other similar services for which a student may no longer be eligible following withdrawal.

Describe the medical school's policy for refunding tuition and fee payments to medical students who withdraw or are dismissed from enrollment.

TTUHSC-Paul L. Foster School of Medicine follows policies established by the Texas Tech University Health Sciences Center Bursar's Office regarding the refund of tuition, fees, or other payments. These policies comply with federal and Texas laws. Students who withdraw from the School of Medicine may be eligible for a partial refund of tuition and fees. If a student receives financial assistance, a portion of the assistance may need to be returned to the scholarship, grant, or loan source from which that assistance was received.

The Texas Education Code sets the amount of tuition and fees to be refunded to students who drop courses or withdraw from the institution. Students, who drop a course within the first 12 days of a fall or spring semester, or within the first 4 days of a summer term, will receive a full refund of tuition and fees for the course or courses dropped. Students who withdraw from the Paul L. Foster School of Medicine are eligible for a prorated percentage refund on tuition and mandatory fees, if they withdraw within the first 20 class days in a fall or spring semester or within the first 6 days of a summer term.

The federal formula is applicable to any students receiving federal aid, if students withdraw on or before the 60% point in the semester. The percentage of the refund is equal to the number of calendar days remaining in the semester divided by the number of calendar days in the semester.

This formula will be used for students receiving Federal Pell Grants, Federal Supplemental Educational Opportunity Grants, Federal Student Loans, or PLUS loans.

This policy is outlined in the Texas Tech University Health Sciences Center Student Handbook that applies to all TTUHSC schools. Please see:

http://www.ttuhsc.edu/fostersom/studentaffairs/documents/hsc_2010_2011_hndbk.pdf

Students are instructed where to view this handbook during orientation. The handbook can also be found through a link at the student affairs website at: http://www.ttuhsc.edu/fostersom/studentaffairs/.

MS-26. A medical education program must have an effective system of personal counseling for its medical students that includes programs to promote the well-being of medical students and facilitate their adjustment to the physical and emotional demands of medical education.

MS-27-A. The health professionals at a medical education program who provide psychiatric/psychological counseling or other sensitive health services to a medical student must have no involvement in the academic assessment or promotion of the medical student receiving those services.

a. Describe the medical school's system for personal counseling of medical students and comment on its accessibility, confidentiality, and effectiveness. Note especially the individuals available to provide personal counseling and their locations.

At orientation, students are introduced to a student assistance program designed to address emotional and personal issues. The Program of Assistance for Students (PAS) includes individual, couple, and family counseling or consultation, and a 24-hour crisis hotline. Students are entitled to 5 free visits per year that are paid for, in part, by their student services fee. Students may call any of the providers directly to make an appointment or they can call the PAS hotline for direct information about the providers. There are currently 8 providers in the El Paso area who participate in this program. These mental health care providers were recruited from the community and have no evaluative role in the school of medicine. All services are confidential. The Office of Student Affairs receives a bill from the contracted provider without the name of the student receiving the service. The above information is available to students in several formats including a printed material brochure available in the Student Affairs office, in the Student Affairs Handbook and on the Student Affairs website: http://www.ttuhsc.edu/fostersom/studentaffairs/documents/PAS.pdf

The list of providers is available in the office of student affairs or on the website as well at: http://www.ttuhsc.edu/fostersom/studentaffairs/documents/StudentAssistanceProviders02 2012.pdf

b. Describe the policies, procedures, and practices that ensure that the providers of sensitive health, psychiatric, or psychological care to medical students (e.g., for substance abuse, sexually transmitted diseases) will not be in a position at some present or future time to assess their academic performance or take part in decisions regarding their advancement and/or graduation. Include copies of relevant medical school policies and/or procedures.

(Please see the Student Handbook at: http://www.ttuhsc.edu/fostersom/studentaffairs/documents/SA Handbook 12 9 11.pdf page 9 or Section III, Appendix6).

Medical students have access to mental health counseling services through the Program of Assistance for Students described earlier. This confidential personal counseling service is provided through licensed professionals in the El Paso community who have no involvement in the academic evaluation or promotion of students. Under the contractual agreements between the providers and the institution,

students have up to five visits at no charge, similar to the established standard for the employee assistance program at TTUHSC. Additional visits, if necessary or desired, may be arranged on referral by the provider to another counselor and/or negotiated between the student and the provider. Students are notified of this service through information in the student handbook and in printed material provided during student orientation and on the Student Affairs website:

<u>http://www.ttuhsc.edu/fostersom/studentaffairs/documents/PAS.pdf</u> Section III, Appendix 7. Students are encouraged to self refer and may also seek referrals through the Office of Student Affairs.

Students receive preventive and other health care services at the Northeast Family Medicine Clinic. A designated physician who has no role in student teaching or evaluation has been hired to provide these services. If a student felt an issue was sensitive, s/he could be assured that this physician would not be their supervisor or evaluator in the future. If a student chose a physician in the department of Family Medicine other than the one assigned for student care, the student could request that person recuse him or herself from future evaluations. All such care is confidential and covered by Family Educational Rights and Privacy Act (FERPA) and Health Insurance Portability and Accountability Act (HIPAA) regulations, unless a student specifically requests that healthcare information be provided to institution officials.

c. Briefly summarize any medical school programs designed to facilitate medical students' ongoing adjustment to the physical and emotional demands of medical school.

Beginning at orientation, the office of student affairs introduces students to the importance of recognizing the physical and emotional demands of their education on the student and his/her family. Students are provided information about stress management, relaxation, and realistic expectations for surviving medical school.

The college masters play an important role in helping students adjust to the demands of medical school. They meet with their students individually to get to know them. They are also aware of each student's background and academic progress which allows them to provide guidance and assistance at individual student meetings. Each College has a budget to off-set the cost of social events designed to foster a sense of community. For example, this year the first year class instituted a "college cup." Each college logs points for various activities – competitions, service hours or other. The college with the most points wins a trophy at the end of the year.

The office of student affairs, particularly the director of academic support, provides several workshops in various areas to help students adjust to the physical and emotional demands of medical school. Before classes begin, a reading workshop is presented to assist students in adjusting to the amount and type of reading that is encountered in medical school. Another workshop focuses on test-taking strategies and is given before the first Unit Exam. The office of student affairs focuses on issues such as stress management, communication, handling conflict, and other issues identified by students as important to their adjustment and well being in medical school during mandatory bimonthly class meetings.

There are several social activities that are in part sponsored by the Office of Student Affairs and the Medical Student Government, including a Thanksgiving potluck luncheon, a Winter Holiday lunch, and class parties. In the fall of 2011, Student Affairs sponsored a student picnic that included spouses and

families and faculty. There were games and an obstacle course as well as food to support socialization among students, families and faculty.

The student wellness and physical fitness center is located in the Medical Education Building. It contains a small gym with weights and aerobic equipment and a changing area with showers. There is also an area for activities such as foosball and ping pong, space for projects, a television viewing area, and a small kitchen with a sink, refrigerator, microwave, and vending machines. Each college also has its own area with lockers, a printer, small refrigerator, microwave, coffeemaker, and tables, chairs, and sofas for meetings/gatherings.

MS-27. Medical students must have access to preventive, diagnostic, and therapeutic health services.

Medical students should have timely access to needed preventive, diagnostic, and therapeutic medical and mental health services at sites in reasonable proximity to the locations of their required educational experiences. Students should be supplied with information about where and how to access health services at all locations where required training occurs. Students with school-sponsored health insurance policies should also be informed about coverage for necessary services. Medical schools also should have policies and/or practices that permit students to be excused from classes or clinical activities to seek needed care.

a. Describe the system for providing preventive and therapeutic health services, including location(s) of health care sites, hours of operation, services provided and how costs of the services will be covered.

Medical students are assessed a health care services fee of \$175 per year for which they have access to a variety of health care services. These services include routine office visits, routine radiologic studies, basic laboratory profiles, microbiology studies, and colposcopy. Immunizations, medications, hospitalization, and emergency room care are not covered. Spouses or other dependents are not covered by student health fees. This service is explained in a brochure given to students at orientation and found on the Student Affairs website at:

http://www.ttuhsc.edu/fostersom/studentaffairs/documents/StudentHealthTTUHSC_5_2010_2011.pdf

Health care services are provided by the Northeast Family Practice Center, operated by the Department of Family and Community Medicine, located at 9849 Kenworthy, which is approximately 10 miles from the main medical school campus. The clinic is open from 8:00am to 5:00pm Monday through Friday and with after-hours phone coverage. For emergencies, it is recommended that a student go to University Medical Center of El Paso or another hospital that would be covered by their individual health insurance plan.

If a student receives care at the Family Practice Center, he or she is seen by the designated physician who does not have medical student teaching responsibilities for any of the four years. If a student chooses to receive care at University Medical Center of El Paso and is admitted to a teaching service, one faculty member and one resident are assigned to their care. These two individuals must recuse themselves from any future evaluation of that student.

Students are required to have private health insurance to cover health care services, including the ones not included by the health services fee. The school offers a health insurance policy through Academic Health Plans. The information for that plan can be found at the TTUHSC student services website at: http://www.ttuhsc.edu/studentservices/studenthealth.aspx

Policies are found in the student handbook that describe a student's responsibility if they are ill and will miss a required class or clinical activity to seek medical care. As PLFSOM does not have a mandatory attendance policy for most class sessions in the pre-clerkship curriculum, students may access health care when available and convenient.

b. Describe the process by which the medical school ensures that medical students at all instructional sites/campuses, including those who are completing required away rotations, have information about and access to needed health services.

Policies and procedures for accessing health care are described during orientation and students are informed that this information is also available through the Student Affairs website: http://www.ttuhsc.edu/fostersom/studentaffairs/documents/StudentHealthTTUHSC_5_2010_2011.pdf.

There are currently no students at any other campus and no required away rotations.

MS-28. A medical education program must make health insurance available to each medical student and his or her dependents and provide each medical student with access to disability insurance.

a. Indicate whether health insurance is available to all medical students and their dependents and briefly describe the scope of benefits and premium costs. Who pays the insurance premium?

The TTUHSC Paul L. Foster School of Medicine ensures that medical students and their families have the opportunity to obtain appropriate health insurance. Medical students are required to have health insurance for themselves that includes appropriate medical and mental health coverage, including emergency treatment and hospitalization, for each semester they are enrolled in medical school. Students must provide proof of coverage at the time of registration each year.

TTUHSC makes available during orientation information about providers of student health insurance. The current plan that is offered through TTUHSC Student Services is a plan which is administered by Academic Health Plans (www.academichealthplans.com/ttuhsc). This plan includes options for coverage of the student plus spouse and children. Benefits include emergency medical care, hospitalization, radiology and pharmacy services. Annual premium costs range from \$1,375 for the student only, \$5,183 for the student and spouse, and \$6,470 for student, spouse, and one child. Students may choose to enroll in other insurance plans or may be enrolled in a parent's or spouse's plan depending upon the provisions of these plans. The student is responsible for paying health insurance premiums.

b. Indicate whether disability insurance is available to medical students and describe the means by which medical students are informed of its availability.

Each student is assessed a fee of \$40 per year for the purchase of long-term disability insurance provided by Fort Dearborn Life. The amount of coverage is negotiated annually. Students may purchase additional disability insurance if they wish. The details of this coverage are provided to students in a presentation during orientation as well as by written and electronic means.

MS-29. A medical education program should follow accepted guidelines in determining immunizations requirements for its medical students.

A medical education program in the U.S. should follow guidelines issued by the Centers for Disease Control and Prevention, along with those of relevant state agencies. A medical education program in Canada should follow the guidelines of the Laboratory Center for Disease Control and relevant provincial agencies.

a. Briefly describe the medical school's immunization policies and procedures for its medical students. Describe the process by which these policies were developed.

The Association of American Medical Colleges states that all students should be immunized against a number of infectious diseases for their own safety as well as the safety of others. All matriculating Paul L. Foster School of Medicine student must be compliant with the school's immunization requirements in order to register for classes.

Immunization Requirements as of fall 2011 include:

- Titers for Rubella, Rubeola, Mumps & Varicella
- Hepatitis B Series (3 doses) at least begun prior to first day on campus. Positive titer documentation required after 3rd dose.
- TB Skin Test (TST) negative results documented no more than three months before start date on campus. Positive TST = negative chest x ray within 3 months of visit
- Td or Tdap within 10 years Tdap if eligible.
- Polio documentation of basic series
- H1N1 Flu vaccine and Seasonal Flu Vaccine (may be combined)

Recommendations concerning immunizations and other preventive measures are made by the school's Infectious Diseases Advisory Committee and its Office of Health and Safety. These units review their recommendations on an annual basis or more frequently with new information and recommendations from the CDC.

Students are required to show proof of these immunizations and titers upon matriculation. If they need boosters during their medical school education, they may obtain them from the Office of Health and Safety. Students are also informed of low cost immunizations that are available in the community.

b. Describe the process by which the immunization status of medical students is monitored.

Student immunization records are kept on file in TTUHSC Occupational Health. This office notifies students when immunization updates are due. If a student does not respond to reminders, the office of student affairs will contact the student and ensure the immunizations are completed.

MS-30. A medical education program must have policies that effectively address medical student exposure to infectious and environmental hazards.

The medical education program's policies regarding medical student exposure to infectious and environmental hazards should include: 1) the education of medical students about methods of prevention; 2) the procedures for care and treatment after exposure, including a definition of financial responsibility; and 3) the effects of infectious and environmental disease or disability on medical student learning activities. All registered students (including visiting students) should be informed of these policies before undertaking any educational activities that would place them at risk.

- a. Describe institutional policies regarding medical student exposure to infectious and environmental hazards, including the following:
 - i. The education of medical students about methods of prevention
 - ii. The procedures for care and treatment after exposure, including definition of financial responsibility
 - iii. The effects of infectious and/or environmental disease or disability on medical student educational activities

1) Education of students about methods of prevention:

At orientation upon initial entry into medical school, and annually thereafter, the Health and Safety Officer educates all students about these policies and procedures and all other safety policies required by the Occupational Safety and Health Administration (OSHA). Students also complete an online module (Community Wide Orientation) annually that describes the methods of prevention. During the first semester in anatomy lab the students are taught how to avoid a needle stick and what to do if an incident occurs. Safety procedures will be covered again by staff of University Medical Center of El Paso before the students begin clinical duties in the third year. Students are specifically advised on where to go for treatment after an exposure incident regardless of where they are working —during regular working hours to the University Medical Center of El Paso Occupational Health Clinic on campus and after hours to the University Medical Center of El Paso Emergency Room.

Students are also provided a pocket-sized laminated card with basic instructions on what to do and who to contact if they have a needle-stick injury or have been exposed to blood borne pathogens. These same guidelines are posted on the student affairs website

(http://www.ttuhsc.edu/fostersom/studentaffairs/documents/needle exposure safety.pdf).

2) Procedures for care and treatment after exposure, including definition of financial responsibility:

The protocol for addressing these types of exposures is part of the infection-control and emergency-room standard operating procedures and includes procedures for HIV testing and monitoring. The Health and Safety Office monitors all follow up treatments.

Students who have an "exposure event" to human blood or body fluid are required to report the exposure to their supervisor and receive immediate screening and blood testing at either the University Medical Center of El Paso Occupational Health Clinic, if it is during work hours, or the University Medical Center

of El Paso Emergency Room if after hours. The patient who is the source of the exposure will also be tested. Follow up blood tests will be done to check for possible disease transmission. Medications may need to be taken in some cases.

The student's health insurance will be billed for emergency room care. Student illness or disability that results from environmental exposure, including infectious agents, will be addressed on a case-by-case basis. Financial burdens are ameliorated with activation of the benefits from the student's required disability insurance (see MS-28).

Exposures to infectious and environmental hazards are addressed in the policies and procedures of the Paul L. Foster School of Medicine. These policies are found at:

<u>http://www.ttuhsc.edu/elpaso/opp/numericalindex.aspx</u> (policy 7.07B: Needle-stick Injuries/Exposure to Body Fluids: Treatment and Reporting Policy and 7.07C Bloodborne Pathogen Exposure Protocol) and in the Medical Student Handbook on page 9:

http://www.ttuhsc.edu/fostersom/studentaffairs/documents/SA_Handbook_12_9_11.pdf

Students are also provided a laminated information card with instructions on what to do if exposed to bodily fluids or patient blood.

3) The effects of infectious and environmental disease or disability on student learning activities.

If a student, through a needle-stick or exposure event or resulting disease or disability, must miss a learning activity there are several policies in place.

If a student must miss a learning activity, particularly a graded activity, he/she must first notify the office of Student Affairs who will give appropriate notice to faculty instructors. The student emails his/her absence to plfabsence@ttuhsc.edu. They may also access that email site through the office of student affairs: http://www.ttuhsc.edu/fostersom/studentaffairs/absence.aspx. Arrangements will be made to assist the student in making up missed materials or graded events.

If a student's disease or disability requires them to be absent for a longer period of time, he/she may choose to take advantage of either the short-term or longer term medical leave of absences that are offered. The policies for leaves of absence are found on page 29 of the Medical Student Handbook which can be found at: http://www.ttuhsc.edu/fostersom/studentaffairs/documents/SA Handbook 12 9 11.pdf . A student may request accommodation as described in the student catalog if the disability will persist throughout the time the student is enrolled. See MS-9 for this process.

b. Briefly summarize any protocols that must be followed by medical students regarding exposure to contaminated body fluids, infectious disease screening and follow-up, hepatitis-B vaccination, and HIV testing. Describe when and how students, including visiting students, learn about the procedures to be followed in the event of exposure to blood-borne or air-borne pathogens (e.g., a needle-stick injury).

As previously described, students who have an "exposure event" to human blood or body fluid are required to report the exposure to their supervisor and receive immediate screening and blood testing at either the University Medical Center of El Paso Occupational Health Clinic if it is during work hours or the University Medical Center of El Paso Emergency Room if after hours. The patient who is the source of the exposure is also tested. Follow up blood tests are done to check for possible disease transmission. Medications may need to be taken in some cases. As noted above, these policies are on the student affairs website and students are given a laminated card that describes the process.

c. Describe when in the course of their medical educations medical students learn how to prevent exposure to infectious diseases, especially from contaminated body fluids.

Students receive training as described above from their initial orientation to medical school as well as on a yearly basis.

age, creed, gender identity, national origin, race, sex, or sexual orientation in any of the program's activities.

MS-31. In a medical education program, there should be no discrimination on the basis of

a. Include a copy of the medical school's anti-discrimination policy.

The policy is found on page 8 of the Student Handbook Code of Professional and Academic Conduct that applies to all students at TTUHSC. The students are directed to this handbook at orientation and it is found on the student affairs website at:

http://www.ttuhsc.edu/fostersom/studentaffairs/documents/hsc_2010_2011_hndbk.pdf

This is an excerpt from page 8 of the Student Handbook:

D. Policy on Non-Discrimination

The University brings together, in common pursuit of its educational goals, persons of many backgrounds and experiences. The University is committed to the principle that in no aspect of its programs shall there be differences in the treatment of persons because of race, creed, national origin, age, sex or disability and that equal opportunity and access to facilities shall be available to all. Non-discrimination is observed in the admission, housing, and education of students and in policies governing discipline, extracurricular life and activities.

For more information, visit http://www.ttuhsc.edu/hsc/op/op51/op5101.pdf, Equal Employment Opportunity Policy and Affirmative Action Plan.

b. Describe any circumstances in which medical school applicants or students may receive differential consideration on the basis of gender, sexual orientation, age, race, creed, or national origin.

The Paul L. Foster SOM Catalog begins with the school's policy on non-discrimination stating:

"The Paul L. Foster School of Medicine is committed to a policy of equal opportunity. It will not discriminate on the basis of race, color, sex, age, religion, sexual orientation, national origin or physical handicap."

There is no circumstance where an applicant or a student would receive differential consideration on the basis of gender, sexual orientation, age, etc.

MS-31-A: A medical education program must ensure that its learning environment promotes the development of explicit and appropriate professional attributes in its medical students (i.e., attitudes, behaviors, and identity).

The medical education program, including its faculty, staff, medical students, residents, and affiliated instructional sites, shares responsibility for creating an appropriate learning environment. The learning environment includes both formal learning activities and the attitudes, values, and informal 'lessons' conveyed by individuals who interact with the medical student. These mutual obligations should be reflected in agreements (e.g., affiliation agreements) at the institutional and/or departmental levels.

It is expected that a medical education program will define the professional attributes it wishes its medical students to develop in the context of the program's mission and the community in which it operates. Such attributes should also be promulgated to the faculty and staff of the medical education program. As part of their formal training, medical students should learn the importance of demonstrating the attributes of a professional and understand the balance of privileges and obligations that the public and the profession expect of a physician. Examples of professional attributes are available from such resources as the American Board of Internal Medicine's Project Professionalism or the AAMC's Medical School Objectives Project.

The medical education program and its faculty, staff, medical students, and residents should also regularly evaluate the learning environment to identify positive and negative influences on the maintenance of professional standards and conduct and develop appropriate strategies to enhance the positive and mitigate the negative influences. The program should have suitable mechanisms available to identify and promptly correct recurring violations of professional standards.

a. Provide a list or table of the professional attributes that medical students are expected to develop over the course of their education. Describe how the list of desired attributes was developed, including any groups responsible for their approval (faculty as a whole, curriculum committee, student government). Describe the means by which the list of desired attributes is being made known to medical students, faculty members, residents, and others?

From the student handbook:

MEDICAL STUDENT CODE OF PROFESSIONAL AND ACADEMIC CONDUCT

Medical professionals are expected, not only by patients but also by society as a whole, to possess certain attributes, which include, but are not limited to:

- Altruism, whereby they subordinate their own interests to take care of their patients
- High ethical and moral standards
- Honesty, integrity, trustworthiness, caring, compassion and respect in their interactions with patients, colleagues and others.
- Accountability, not only for their own actions, but also for those of their colleagues, which is the basis for the autonomy of the profession.
- Maintaining confidentiality concerning the patient and the patient's records.

The Paul L. Foster School of Medicine TTUHSC expects medical students to exhibit these attributes. Each student must read and sign a document pledging themselves to these attributes as stated in the medical student honor code:

Medical Student Honor Code

In my capacity as a Paul L. Foster School of Medicine medical student, I will uphold the dignity of the medical profession. I will, to the best of my ability, avoid actions which might result in harm to my patients. I will protect the dignity of my patients and the deceased, and will protect their confidential information in accordance with the prevailing standards of medical practice. I will not lie, cheat, or steal. I will enter into professional relationships with my colleagues, teachers, and other health care professionals in a manner that is respectful and reflective of the high standards and expectations of my profession. I will not tolerate violations of this code by others and will report such violations to the appropriate authorities.

These are the attributes published in the PLFSOM Student handbook. The students are also expected to be familiar with the **TTUHSC Code of Professional and Academic Conduct** which can be found in its entirety on the PLF Student Affairs website at:

http://www.ttuhsc.edu/fostersom/studentaffairs/documents/hsc 2010 2011 hndbk.pdf. This statement was adapted from the TTUHSC Code of Professional and Academic conduct. It was modified from the AAMC Medical Student Objectives Project.

The policy was developed by an ad hoc faculty committee based on national professional standards and approved by the Student Affairs committee, the Curriculum and Education Policy Committee and the Faculty Council. The students are oriented to this material at orientation and are directed to it on the Student Affairs website.

These attributes and policies are also published in each course syllabus that is distributed to all students and all faculty that are involved with those courses. The associate dean for student affairs meets with each department on an annual basis to reinforce the expectations for professionalism. Clerkship directors share these attributes with their respective residents. The clerkship directors and the associate dean for student affairs meet regularly to discuss student issues related to these attributes.

Finally, the attributes described above are also reflected in the Institutional Learning Objectives outlined in Section II Educational Program (ED-1-A).

b. Describe where in the curriculum medical students learn about these professional attributes and the importance of attaining and regularly demonstrating them. Include in this description examples of formal instructional efforts by which medical students learn about the professional behaviors and attitudes expected of them.

During year 1 and 2 students discuss professionalism issues in the Master's Colloquium course. As described in the course syllabus: "The Goal of the Masters' Colloquium is to promote:

- critical thinking and reflective mindfulness in discourse and decision making
- tolerance of ambiguity
- empathy

- appreciation of system complexity in medicine
- a constant approach to ethical issues
- consideration of sustainability as it applies to medicine."

The Masters Colloquium includes sessions on honesty, confidentiality, the ethics of pain management, equity in the allocation of scarce resources, cultural awareness and sensitivity, and the role of empathy in the doctor-patient relationship.

Desired professional attributes are also reinforced and assessed in the Medical Skills and in the Society, Community, and Individual courses.

During the third and fourth year, professionalism continues to be stressed as one of the "integration treads that cut across all of clerkships. These include formal didactic sessions highlighting professionalism in each of the clerkship blocks. Each student also completes a reflective paper describing a personal encounter with an ethical issue. All students are evaluated for professionalism during the third and fourth year clinical experiences. It is a 17 item professionalism check list that is completed on each student by faculty, residents, and the clerkship directors and is a part of their clerkship grade. A copy of the professionalism checklist can be found in Section III, Appendix 8.

c. Briefly summarize the methods used to assess medical students' attainment of appropriate professional attributes. Include copies of any assessment instruments. Describe the means by which identified deficiencies are remediated.

Medical students' professionalism is assessed in multiple venues throughout the curriculum. In the first two years, students receive feedback from each small group that they participate in whether that occurs in Society, Community and the Individual or Scientific Principles of Medicine. The small group evaluation forms include the following questions related to "professionalism:"

- Demonstrated respect for group members.
- Appropriately admitted lack of knowledge.
- Demonstrated acceptance of diverse cultures, life stage, lifestyles, etc.

These evaluations are placed on the individual students' e-portfolio for their own review. They have the opportunity to make a comment on the evaluation form if they feel that there was a difference in opinion with the faculty evaluator.

Community preceptors are also asked to assess student professionalism on each student visit to their practice settings. The rating forms preceptors complete include the following professionalism items:

- Demonstrates good interpersonal skills (e.g., demonstrates courtesy when communicating with preceptor and staff.
- Demonstrates professionalism (e.g., demonstrates respect and professional demeanor).

The college masters also assess student professionalism within the Masters Colloquium and prepare an evaluative narrative that is included in the students' e-portfolios.

If a course director has concerns about a student's professionalism, s/he first discusses the issue directly with the student and shares his/her expectations regarding future conduct. If the problem persists or new professionalism issues arise, the course director will then discuss the problem with the student's college master who will meet with the student. Should the problem persist; or if it is egregious in magnitude, the problem is brought to the attention of the associate dean for student affairs and may be referred to the Grading and Promotion Committee for its consideration and action.

At the end of each of the first two years of the curriculum, the college masters, associate dean for student affairs, and the senior associate dean for medical education meet to review the small group evaluations and college masters comments for each student. Based on this review, a summary statement commenting on strengths and areas for possible improvement is drafted and placed in each student's e-portfolio. The second year professionalism commentary is included in the pre-clerkship progress statement in the MSPE.

In years 3 and 4, professionalism is evaluated every time a faculty member or resident completes an assessment on the student's clinical progress. This form can be seen in its entirety in Section III, Appendix 8. If there are areas of concern, the clerkship director meets with the student to discuss the issue. If the problem is recurrent, the student meets with the associate dean for student affairs to review the situation, solicit the students' perspective and to discuss ways to improve. Persistent problems that do not improve with counseling and feedback can be referred to the Grading and Promotion Committee.

d. Describe the mechanisms used by the medical school and its clinical affiliates/partners to identify positive and negative influences on medical student professional behavior, particularly in the clinical environment. Summarize all available options by which medical students, faculty members, and/or housestaff are able to report observed incidents of unprofessional behavior exhibited by anyone in the learning environment (students, faculty, residents, others). Identify the individual(s) to whom reports of unprofessional behavior can be made.

The faculty of TTUHSC Paul L. Foster School of Medicine are dedicated to maintaining a professional environment. They have endorsed the AAMC Compact between Teachers and Learners. They have also created their own professionalism statement that was developed by a task force of faculty. That statement, PLFSOM Declaration of Faculty Professional Responsibility has been ratified by the Faculty Council and is available on the faculty affairs website:

http://www.ttuhsc.edu/fostersom/facultyaffairs/ebook.aspx#humanresources.

Students have the opportunity to report positive and negative influences on professionalism through faculty and resident assessments. Each student is given the opportunity to assess faculty in years 1 and 2 after each unit of SPM. During the third year, students are asked to evaluate eight faculty per block. These evaluations are anonymous and when a faculty member has accumulated five student reports, they are sent to the faculty member, the clerkship director, the chair of the department and the senior associate dean for medical education. If there is a concern about professionalism or the learning environment that could impact the students reported on these evaluations, then they are also forwarded to the associate dean for student affairs. She would then meet with the respective department chair to assist in developing a plan for improvement for the faculty or resident.

An ad hoc committee of faculty and students also developed a process by which professional behavior could be shared by the learning community. "Professionalism stories" is a tool that allows faculty, residents, students or staff to give feedback on exemplary or troublesome professional behavior. The

template is found on the PLFSOM home web page (http://www.ttuhsc.edu/fostersom/prof_stories.aspx). The stories are sent to the student's college master and may be shared with the community, if they are exemplary, to promote appreciative inquiry. If troublesome behavior is described, the college masters discuss the situation with the student. The associate dean for student affairs receives a quarterly report on all professionalism stories that have been submitted. This enables her to monitor the kinds of positive and negative behaviors and actions that are being reported and to track the students about whom stories (positive or negative) are being submitted.

If an egregious professionalism issue arises in the clerkship years, the person who noted the event would report that to the clerkship director. In each of the affiliation agreement, the affiliates agree to abide by the expectations for a positive learning environment and to report any time a student fails to meet those expectations. If a medical student notices an affiliate staff member who is violating the expectations of a positive environment, they would report that to their clerkship director or to the associate dean for student affairs. When necessary, the associate dean for student affairs will meet with the leadership of the affiliate to discuss and resolve issues related to unprofessional conduct on the part of affiliate staff.

e. Identify the individual(s) who is/are responsible for ensuring that appropriate canons of professional behavior established by the medical school are maintained in all educational settings. Describe any policies or procedures (e.g., excerpts from affiliation agreements) establishing the shared responsibility for an appropriate learning environment in clinical settings. Describe any mechanisms (e.g., joint hospital/medical school committees) that exist to foster an appropriate learning environment.

The following wording is included in the affiliation agreements with each institution:

The Paul L. Foster School of Medicine is committed to providing our students with a learning environment that is conducive to the acquisition of skills, knowledge and behaviors that will enhance development of an excellent physician. As stated in the Student Handbook, students are held to a code of conduct that promotes altruism, honesty, accountability and the maintenance of confidentiality. Faculty, residents and staff also are expected to display the highest ethical standards that promote duty, integrity and respect as stated in the AAMC Compact between Teachers and Learners of Medicine. [Each learning site name filled in] agrees to uphold these high standards. If a student violates this code of conduct, the hospital will notify the clerkship director responsible for the student in that clinical experience. If a student notes a violation of this code of conduct by faculty, residents or staff of the respective institutions, they will report this violation to their clerkship/course director or to the Associate Dean for Student Affairs at the PLFSOM.

Regardless of setting, all community based faculty members have faculty appointments at the PLFSOM. Each faculty member is expected to know they are responsible for maintaining a learning environment that is supportive of the students (as described in the Compact between Teacher and Learner). Each clinical department has this compact posted in a prominent location to remind all staff and residents of the expected environment. The same wording is included in the affiliation agreements at the major teaching hospitals.

Our largest teaching hospital (University Medical Center) has a written policy that describes the expected attitude toward the learners in the institution. (H-3-9: Performance and Conduct Standards). This policy requires staff to report poor behavior of students but it also outlines the process for students to report poor

behavior by staff. Such behavior would be reported to the clerkship director or to the associate dean for student affairs. She would then meet with Human Resources of UMC to discuss the incident and negotiate the next steps to rectify the situation.

See also information for standards MS-32 and ER-9.

MS-32. A medical education program must define and publicize the standards of conduct for the faculty-student relationship and develop written policies for addressing violations of those standards.

The standards of conduct need not be unique to the medical education program; they may originate from other sources (e.g., the parent institution). Mechanisms for reporting violations of these standards (e.g., incidents of harassment or abuse) should ensure that the violations can be registered and investigated without fear of retaliation.

The medical education program's policies also should specify mechanisms for the prompt handling of such complaints and support educational activities aimed at preventing inappropriate behavior.

a. Provide a copy of any formal medical school or university statements of the standards of conduct expected in the teacher-learner relationship, including student mistreatment policies. Describe the means by which medical students, residents, faculty (full-time, part-time, and volunteer), and staff are informed about these institutional statements of expected conduct.

The AAMC "Compact between teachers and learners" was adopted by the faculty of the PLFSOM as our commitment to a positive learning environment. The compact is found in the Student Handbook on page 16 available at: http://www.ttuhsc.edu/fostersom/studentaffairs/documents/SA_Handbook_12_9_11.pdf. Students are made aware of this compact at orientation. Copies are also posted throughout the campus. This policy was proposed in the Student Affairs Committee and then approved by the Curriculum and Educational Policy Committee and the Faculty Council. Community faculty are expected to complete a training module that describes the commitment of faculty to learner and related policies. The associate dean for student affairs meets with each department on an annual basis to present these expectations. Residents are informed of the school's expectations and requirements regarding the learning environment and treatment of students as part of their required Residents as Teachers program described in ED-24.

b. Describe and provide a copy (or Web site URL) of any formal or informal policies and procedures for handling allegations of medical student mistreatment, including the avenues for reporting such incidents and the mechanisms for investigating them. Describe any available evidence that documents the effectiveness of such policies.

Please see the Student – Faculty dispute resolution Policy on page 36: http://www.ttuhsc.edu/fostersom/studentaffairs/documents/SA_Handbook_12_9_11.pdf.

Students are encouraged to try to resolve conflicts informally with the faculty member(s) involved. However, if this is not successful or if a student does not feel comfortable doing so, s/he may report the conflict or mistreatment to any number of individuals including the college masters, course and clerkship directors, the associated dean for student affairs, and the senior associate dean for medical education. Depending on the nature of the allegation the individual to whom the student confides may contact the faculty member involved to discuss the situation and try to formulate a resolution to the problem, or this person may consult with the associate dean for student affairs and request that she follow-up on the matter. If the student is not satisfied with the outcome of this "early resolution" phase, s/he may contact the faculty member's department chair to investigate the complaint and to arrive at a satisfactory resolution. If this step is not successful, the student has the right to request a formal hearing.

Upon receipt of a formal written request for a hearing, the associate dean for student affairs appoints a "Hearing Committee" consisting of a faculty member selected from a list of 4 faculty members submitted by the student and a faculty member selected from a list of four faculty members nominated by faculty member in question. These two faculty members in turn select a third member of the Hearing Committee from the combined list of potential hearing committee members. The disputants meet with the committee and are given an opportunity to make a statement, present testimony, and offer other relevant evidence. The hearing committee is responsible for establishing the validity of the grievance and for preparing written recommendations for resolving the issue. If the student is not satisfied with the hearing committee's findings and recommendations, s/he may appeal to dean in writing within five working days of receipt of the committees' report. In all instances, the dean reviews the committee findings and recommendation and renders a final and binding decision.

c. How is the frequency of medical student mistreatment monitored? Include data from the AAMC GQ or the AAMC CGQ, course and clerkship rotation evaluations, the independent student analysis, and/or internal school surveys that illustrate the recent percentage of students who perceive that they have themselves experienced mistreatment or who have witnessed the mistreatment of another medical student.

Students evaluate the learning environment in each of their course and clerkship evaluations. They may comment on a faculty member's professional behavior on faculty evaluations. There is also a question in the clerkship block evaluation that asks if a student was subjected to negative or offensive behaviors. Student may also make comments at the end of the evaluations of course, clerkships or faculty. Complaints of mistreatment or indicative of a compromised learning environment are forwarded to the Associate Dean for Student Affairs who meets with the appropriate department chair to review the concern and plan for improvement.

The following questions dealing with student mistreatment were included in the survey conducted by the students as part of their independent LCME student analysis. As previously noted, we do not yet have school specific information from the AAMC GQ data. The percentages reported in the table below represent those students indicating that they "agreed" or "strongly agreed" with a question item. The response rate is as follows: Class of 2012 = 72.5%, Class of 2014 = 100%, Class of 2015 = 99%.

| | Class of 2013 | Class of 2014 | Class of 2015 | Total (168) | National GQ data 2011 |
|--|---------------|---------------|---------------|-------------|--------------------------|
| I know where to go for help in case of mistreatment | 89.7% | 89.3% | 95.1% | 92.2% | 86.2% |
| Educational activities to prevent mistreatment are adequate | 86.2% | 89.5 | 93.9% | 91.6% | |
| I have been mistreated in medical school | 20.7% | 21.1% | 6.1% | 13.7% | 16.8% |
| I have witnessed mistreatment of another student | 27.6% | 28.6% | 7.3% | 19.1% | 15.5% |

d. What actions has the medical school taken to address the level of medical student mistreatment? Describe any educational programs provided by the medical school or the parent university to prevent medical student mistreatment.

Since reviewing the information in the student self study, the office of student affairs has taken a number of steps to understand issues of mistreatment and make plans to improve the learning environment. An anonymous survey was given to the classes of 2013 and 2014 to understand the nature of the mistreatment experienced. Most of the class of 2014 cited instances of mistreatment by other students. The class of 2013 had concerns about mistreatment by faculty, residents and staff.

To address these issues, a focus group consisting of members of the class of 2013 met to discuss issues of mistreatment and recommendations for student and faculty education to prevent these incidents. The focus group recommended that a Student Advocacy Group be formed to meet on a monthly basis to hear directly from students. If instances of mistreatment arise, the Student Advocacy Group can encourage the student to pursue the issue or the group can inform the Associate Dean for Student Affairs about the concerns.

The focus group also recommended that the Faculty-Student dispute policy be revised to define student mistreatment and to spell out the steps for reporting such treatment. That will be completed by July 2012.

The student evaluations are also monitored for signs of mistreatment or violation of the learning environment. Instances are forwarded to the Associate Dean for Student Affairs who meets with the chair of the involved faculty, staff or resident.

Please see response to MS-32 'a' above for a description of how the institution strives to educate faculty and residents about student mistreatment and how to prevent it.

standards and procedures for the assessment, advancement, and graduation of its medical students and for disciplinary action.

MS-33. A medical education program must publicize to all faculty and medical students its

Attach a copy of, or the Web site URL for, the medical school's standards and procedures for the assessment, advancement, and graduation of medical students, and the procedures for disciplinary action. Describe the means by which these standards and procedures are publicized to faculty members and medical students.

Student Handbook – Grading policy begins on Pg 25 to 33 found at this website:

http://www.ttuhsc.edu/fostersom/studentaffairs/documents/SA Handbook 12 9 11.pdf

The Grading and Promotion policy described in the Student Handbook was proposed by the Student Affairs Committee with input from the Course Directors and the Curriculum and Education Policy Committee. The policy was approved by the Curriculum and Education Policy Committee and then approved by the full Faculty Council.

The Student Handbook is discussed at orientation and students are directed to the website for future reference. Grading policies and procedures are also included in each course and clerkship syllabi and reviewed at the time of the "administrative" orientation to each course and clerkship.

Faculty and residents have access to these materials as well. The clerkship directors are responsible for reviewing clerkship grading policies with the faculty and residents who supervise and assess student performance in their respective clerkships.

MS-34. A medical education program must have a fair and formal process in place for taking any action that may affect the status of a medical student.

The medical education program's process should include timely notice of the impending action, disclosure of the evidence on which the action would be based, an opportunity for the medical student to respond, and an opportunity to appeal any adverse decision related to promotion, graduation, or dismissal.

a. Summarize the due process protections in place at the medical school when there is the possibility of the school's taking an adverse action against a medical student for academic or professionalism reasons. Include a description of the process for appeal of an adverse action, including the groups or individuals involved at each step in the process.

The Grading and Promotion committee reviews every student's progress through the curriculum. It considers consider both grades and issues of professionalism. The committee decides if the student will progress or needs to complete remediation before progression. The committee also makes the decision to dismiss a student. Grading and Promotion Committee decisions are forwarded in writing to the student and to the dean of the School of Medicine. If a student is dismissed, s/he may appeal the GPC decision within five days of receiving the notification. The letter of appeal is directed to the Dean who may decide the issue himself or refer the matter to an Appeals Committee. The Appeals Committee meets with the student, who may have an attorney or other representative present. At the conclusion of the Appeals Committee hearing, it will forward its recommendation to the student, to the GPC chair, and to the dean. The dean would consider the Appeals Committee decision and determine the student's course. The dean's decision is final and binding.

If a student is accused of misconduct that violates the code of conduct (as defined in the Student Affairs Handbook: Code of Professional and Academic Conduct), then an Ad Hoc committee (Student Conduct Board) will be appointed by the associate dean for student affairs to hear the case. The Ad Hoc committee that finds that misconduct has occurred can impose requirements of the student which if not met would be reported to the Grading and Promotion Committee who may consider further action. If the Ad Hoc committee does not find misconduct then no further action occurs.

b. Describe the means by which these protections are made known to medical students.

Medical Students are notified of the Student Handbook and the Student Affairs Handbook: Code of Professional and Academic Conduct at orientation. Both handbooks are found at the website for Student Affairs: http://www.ttuhsc.edu/fostersom/studentaffairs/. The grading and promotion policies are likewise reviewed at orientation and annually with each class at mandatory class meetings.

MS-35. Medical student educational records at a medical education program must be confidential and available only to those members of the faculty and administration with a need to know, unless released by the medical student or as otherwise governed by laws concerning confidentiality.

Describe the general content of the medical student's academic record file. Identify the location at which medical students' academic records are maintained. Identify the institutional official(s) who is/are authorized to examine or review such records.

The official record of matriculation and course registration are maintained by the registrar in Lubbock. Course grades are maintained on a web based program WebRaider. Every student has access to their own transcript and matriculation information. The associate dean for student affairs, the director of student affairs and the director of academic support can view this website.

Paper records are kept in the office of student affairs in a locked file cabinet. These records encompass immunizations, student correspondence and signed documents such as the medical student honor code. The student may request to review these records during regular business hours. Student affairs officials have access to those records as well. These records are destroyed after the student graduates.

Each student also has electronic access to their test scores, evaluations and other information in their individual e-portfolios. College masters have access to their students' e-portfolios. The associate dean for student affairs, the director of academic support and the senior associate dean for medical education have access to all students' e-portfolios. Grading and promotion committee members have access to grades and evaluations at the time of student progress review. FERPA is adhered to both in the electronic version and in any written documents.

MS-36. A medical student enrolled in a medical education program must be allowed to review and challenge his or her records.

a. Describe the components of the student record and identify any component(s) of the record that students are not permitted to review. Provide the rationale for the institutional review policy that precludes students' review of that material.

The student record includes all official grades to include components of the clerkship grade, narrative comments by the clerkship directors and any official letters to the student from administration. These parts of the record are stored in Lubbock with the registrar. Copies are available in the Office of Student Affairs. The transcript is also an official student record. The student may review all of this material either in person in the office of Student Affairs in El Paso or the registrar's office in Lubbock; or online for the transcript. The student may request an official transcript as well. There are no components of the student record that may not be viewed by the student.

b. Describe the procedure that medical students must follow in order to review or challenge their records. Describe the process in place at the medical school that ensures medical students' timely access to their records.

As described in the Student Handbook

(<u>http://www.ttuhsc.edu/fostersom/studentaffairs/documents/SA_Handbook_12_9_11.pdf</u>) on page 34, a student may review and challenge their records by following the procedures listed below:

- The student submits a request to the custodian of the records to review his/her records.
- The student reviews these records and if there are changes or updates that cannot be responded to informally, then the student must notify the custodian in writing and specifically identify the item that they are challenging and the basis for the challenge.
- The custodian has seven working days to respond in writing to the student. This response is sent to the student and to the associate dean for student affairs.
- If the student is not satisfied with the custodian's response, s/he may request that the dean of students convene a hearing by an institutional official, appointed by the associate dean for student affairs. This individual must not have a direct interest in the outcome of the hearing.
- The student presents evidence relevant to his/her challenge of the accuracy and appropriates of information contained in the record.
- The individual hearing the challenge renders a decision within 5 working days following the conclusion of the meeting. This would be the final decision.

c. Describe the means by which the medical school's policies and procedures regarding students' access to, review of, and challenges to student academic records are made known to faculty and medical students.

Faculty have approved this policy through the Student Affairs Committee, the Curriculum and Education Policy Committee and the Faculty Council. Medical students are briefed on this policy at orientation and are encouraged to review the Student Handbook on a yearly basis.

c. Does each required course provide students with an opportunity to review their performance, and if necessary, appeal an examination or course grade?

Performance criteria for arriving at student grades is described in detail in the required course and clerkship syllabi and reviewed at the initiation of a course or clerkship as part of the course/clerkship orientation. Students can "challenge" in writing individual examination items at the time they take their examination if they feel a question is flawed for any reason. Students may also discuss any aspect of their performance with course or clerkship directors, the associate dean for student affairs and/or the senior associate dean for medical education.

Each course posts their grades on the student e-portfolio and course directors communicate with students via email to notify them when grades are posted. Students are welcome to discuss examination concerns or course grades with the course director, the senior associate dean for medical education, or the associate dean for student affairs.

If a student wants to challenge an assigned grade beyond discussion with course or clerkship directors, they would follow the procedure as described in "b" above.

MS-37. A medical education program should ensure that its medical students have adequate study space, lounge areas, and personal lockers or other secure storage facilities at each instructional site.

a. Describe the quantity, quality, and accessibility of medical student study space and lounge, recreation, and relaxation areas at each instructional site/campus. Indicate whether medical students share such space or facilities with students in other programs.

Students have a large student lounge in the medical education building (MEB) that includes areas for relaxation, exercise, and a kitchen. This encompasses 2,700 square feet of space. This space is strictly limited to medical students.

There is study space in the library in the MEB that includes 4 small study rooms for a total of 490 sq ft, a reading room of 450 sq ft and an instruction room of 264 sq ft. School of Nursing students, allied health and the community of the medical school may use the study spaces within the library during usual business hours. Students also have access to the MEB building 24 hours a day for studying, which includes many small group rooms that may be used for studying when there are no classes assigned to that room. These rooms may be accessed by any TTUHSC student. Students also have access to the second library in the Administration building that is available to all HSC students and residents. Medical students also have key card access to the large group room on the 4th floor 4120 that has tables that are ideal for individual or group study.

b. Summarize the storage facilities for medical students' personal possessions and valuables (e.g., microscopes, computers, wallets/purses, clothing), both at the main or home campus and at other instructional sites/campuses.

Each student has a locker in their college area for storage of their personal items and computers if needed. They are not issued microscopes because they have computer access to the virtual microscopes (Bacus).

When the student is in a community clinic, they leave their belongings in the preceptors' office. There are lockers at University Medical Center that are available to the students. In the Family Medicine Clinic (off site) there are lockers as well. During other clinical rotations, there is an identified area for personal belongings in the nurses' station to leave backpacks and books.

c. Provide data from the AAMC GQ or the AAMC CGQ, the independent student analysis, and or internal school surveys on student satisfaction with study and relaxation space.

In preparation for their independent analysis for the LCME, the medical students conducted a survey (93% overall response rate) that included the following questions. Percentages reported are those

indicating they "agreed" or "strongly agreed" with the statement summarized in the first column. The response rate is as follows: Class of 2012 = 72.5%, Class of 2014 = 100%, Class of 2015 = 99%.

| | Class of 2013 | Class of 2014 | Class of 2015 | Total (168) | National GQ data 2011 |
|---|---------------|---------------|---------------|-------------|--------------------------|
| Satisfaction with study space | 82.8% | 75.4% | 85.4% | 81.5% | 78.2% |
| Satisfaction with relaxation space | 86.2% | 82.1% | 95.1% | 88.7% | 67% |
| Satisfaction with amenities in lounge and gym | 96.6% | 89.5% | 93.9% | 92.9% | NA |

END OF SECTION III

PLFSOM Interview Assessment

| Name of Applicant: | Date: |
|---|---|
| Each category requires a point sc within the categories are recomme character minimum). | core which will be used to calculate the total score. Comments ended but optional. Overall comments are required (200 |
| MOTIVATION FOR MEDICA Issues to evaluate and con | asider: ss of current problems affecting medicine and society in general in health care delivery vities |
| CATEGORY SCORE: 1. 2. 3. 4. 5. Comments on applicant's interest | □ Motivation questionable, no inquiry into medicine □ Limited inquiry into medicine □ Reasonable motivation, some inquiry into medicine □ Well motivated quite aware of issues □ Solid motivation: great awareness of issues est, knowledge and motivation: |
| | |

II. PERSONAL CHARACTERISTICS.

Issues to evaluate and consider:

- Positive attitude, warmth, compassion, empathy
- Communication skills
- Poise during interview and general demeanor
- Involvement with people
- Depth of experience
- Perseverance and the ability to work hard
- Academic Rigor
- Participation in athletics, art, music
- Leadership skills and positions of responsibility
- Hobbies, avocations, diversity of interests
- Travel/International Experience
- Current Reading
- Maturity and ability to deal with life situations/stresses

(Personal Characteristics continued)

| CATEGORY | SCC | RE | : |
|---------------------------------------|-------------------------------|------------------------------------|---|
| | 1. | | Poor interpersonal skills, limited life experiences |
| | 2. | | Less than fair interpersonal skills, limited life experiences |
| | 3. | | Fair interpersonal skills, limited life experiences |
| | 4. | | Somewhat good interpersonal skills, a few interests and life experiences |
| | 5. | | Good interpersonal skills, reasonable interests, caring |
| | 6. | | Good interpersonal skills, varying interests, caring, awareness of issues |
| | 7. | | Very good interpersonal skills; warm, caring and aware of issues |
| | 8. | | Very good interpersonal skills; warm, caring, well read, awareness of |
| | issı | | 7 44 44 44 44 44 44 44 44 44 44 44 44 44 |
| | 9. | | Excellent interpersonal skills awareness/experiences, well read, warm |
| | | | d caring |
| | 10. car | □ ing | Superior interpersonal skills awareness/experiences, well read, warm and |
| Comments on | app | lica | ant's personal characteristics: |
| | | | |
| | | | |
| | · | | |
| | | | |
| Issues t res res abi | to ev pons pons lity | valua ses to ses to to ac | OLVING ate and consider o empirical questions on society o ethical issues ddress problems in research evelop own hypothesis and explain how hypothesis could be tested |
| CATEGORY | SCC | RE | : |
| | | | No analytic skills, unaware of problems |
| | | | Weak analytical skills, difficulty in analyzing issues |
| | _ | | |
| | 4. | | Good analytical skills, able to "think on their feet" |
| | 5. | | Excellent analytical skills, great logical train of thought |
| Comments on a | ıppli | cant | c's problem solving ability: |
| | | | |
| · · · · · · · · · · · · · · · · · · · | | | |

STANDARDS FOR CURRICULAR COMPLETION

The TTUHSC Paul L. Foster School of Medicine faculty has developed minimum standards for entry into and progression through the medical curriculum. These standards provide guidance to achieve the Doctor of Medicine degree in preparation for licensure as a practicing physician and for postgraduate training. Throughout the medical education process, patient safety is of primary consideration.

The School of Medicine recognizes that certain disabilities can be accommodated without compromising the standards required by the school or the fundamental integrity of its curriculum. The school is committed to the development of innovative and creative ways of opening its curriculum to competitive and qualified disabled candidates.

Background:

In 1979 the Association of American Medical Colleges (AAMC) convened a Special Advisory Panel on Technical Standards for Medical School Admission. The summary recommendations of that panel are:

The medical education process, which focuses so largely on patients, differs markedly from postsecondary education in fields outside the health sciences.

The primary responsibility for the selection of students and for the content of the curriculum rests with the medical school and its faculty.

The M.D. degree is, and must remain, a broad and undifferentiated degree attesting to the acquisition of general knowledge in all fields of medicine and the basic skills requisite for the practice of medicine.

The guidelines for the admission of students and for the education of students as set forth by the Liaison Committee on Medical Education (LCME) must continue to govern the decisions of medical school faculties.

All students of medicine must possess those intellectual, ethical, physical and emotional capabilities required to undertake the full curriculum and to achieve the levels of competence required by the faculty.

Although certain disabilities or combinations of disabilities will prevent some candidates from meeting these minimum technical standards, individual schools should take all necessary steps to prevent discrimination against the disabled.

The 1979 report was based on the proposition that the educational objective of a medical school was to prepare undifferentiated students to enter graduate medical training, and that students admitted to a medical school should have the intellectual and physical powers to gain the knowledge, behaviors, and clinical abilities that they would need to pursue any pathway of graduate medical education. These assumptions took note of the increasing involvement with patients during medical training and reflected concern for the safe care that students must render.

Preparation of the Physician:

The education of a physician includes the following phases:

- a preparatory phase with at least 90 hours of credit in an accredited U.S. or Canadian college;
- a rigorous professional education leading to the M.D. degree;
- postgraduate (residency) training; and
- lifelong continuing education after completion of residency training.

Unlike most professions, Medicine awards its formal degree midway through the education process, and the awarding of the degree certifies that the student has acquired a broad base of general knowledge and skills requisite for further training in postgraduate work. The process whereby the degree is gained prepares an individual to be a physician rather than a surgeon, psychiatrist, or other specialist. A common body of knowledge, skills, and behaviors thus underlies and is necessary for entry into specialized postgraduate training programs.

Standards for Accreditation of a Medical School:

The following information is excerpted from the Functions and Structure of a Medical School published by the Liaison Committee on Medical Education. This body is a joint committee constituted by the American Medical Association and the Association of American Medical Colleges. The Liaison Committee is the official accrediting body for American and Canadian medical schools. A complete copy of the guidelines for accreditation may be found in the Office of Student Affairs.

Medical education required that the accumulation of scientific knowledge must be accompanied by the simultaneous acquisition of skills and professional attitudes and behaviors. It is in the care of patients that the physician learns the application of scientific knowledge and skills.

It is impossible to consider changes in medical education without considering their impact on patients, who are an integral part of the educational process. Faculties of schools of medicine have immediate responsibility to society to graduate the best possible physician. Admissions standards for medical school must be rigorous and exacting, and admissions must be extended only to those who are qualified to meet the performance standards of the profession.

Development of Medical Curriculum:

The medical faculty is charged to devise a curriculum that allows the student to learn the fundamental principles of medicine, to acquire skills of critical judgment based on evidence and experience, and to develop an ability to use principles and skills wisely in solving problems of health and disease. In designing the curriculum, the faculty must introduce current advances in the basic and clinical sciences, including therapy and technology, changes in the understanding of disease, and the effect of social needs and demands on medical care. The faculty should foster in students the ability to learn through self-directed, independent study throughout their professional lives.

Finally, the faculty of each discipline should set the standards of achievement by all students in the study of that discipline. Examination should measure cognitive learning, mastery of basic clinical skills, the ability to use data in realistic problem solving, and respect for the rights and dignity of patients. Institutions must develop a system of assessment which assures that students have acquired and can demonstrate on direct observation the core clinical skills and behaviors needed in subsequent medical training.

Abilities and Skills Requisite for Medical School Completion:

In the selection of students and in their progress through the curriculum, medical school faculty are guided by LCME standards. The faculty place strong emphasis on the academic achievements of applicants, including performance in the sciences relevant to medicine. This includes evidence of satisfactory scholastic achievement as indicated by grade point averages (GPA) and scores on the Medical College Admissions Test (MCAT). Breadth of education and life experience are deemed important in the selection process.

The faculty is equally cognizant of its responsibilities to patients who will be a part of the educational process and to future patients who will entrust their welfare and lives to medical school graduates. They therefore consider carefully the personal and emotional characteristics, motivation, industry, maturity, resourcefulness, and personal health appropriate to the effective physician.

Because the M.D. degree signifies that the holder is a physician prepared for entry into the practice of medicine within postgraduate training programs, it follows that graduates must acquire a foundation of knowledge in the basic and in the clinical sciences that will permit the pursuit of any of the several careers that medicine offers.

Candidates for the M.D. degree must have somatic sensation and the functional use of the senses of vision and hearing. Candidates' diagnostic skills will also be lessened without the functional use of the senses of equilibrium, smell, and taste. Additionally, they must have sufficient exteroceptive sense (touch, pain, and temperature), sufficient proprioceptive senses (position, pressure, movement, stereognosis and vibratory) and sufficient motor function to permit them to carry out the activities described in the sections which follow. They must be able consistently, quickly, and accurately to integrate all information received by whatever sense(s) employed, and they must have the intellectual ability to learn, integrate, analyze and synthesize data.

A candidate for the M.D. degree must have abilities and skills in six essential areas: (1) observation, (2) communication, (3) motor, (4) conceptual, integrative and quantitative, (5) behavioral and social, and (6) ethical. Technological compensation can be made for disabilities in certain of these areas; but a candidate should be able to perform in a reasonably independent manner. The use of a trained intermediary to observe or interpret information or to perform procedures is deemed to compromise the essential function of the physician and may jeopardize the safety of the patient. The six areas of abilities/skills are detailed as follows:

- I. Observation: The candidate must be able to observe demonstrations and experiments in the basic sciences. A candidate must be able to observe a patient accurately at a distance and close at hand. Observations necessitates the functional use of the sense of vision and somatic sensation. It is enhanced by the functional use of the sense of smell.
- II. Communication: A candidate should be able to speak; to hear; and to observe patients in order to elicit information, to describe changes in mood, activity and posture; and to perceive non-verbal communications. A candidate must be able to communicate effectively with patients. Communication includes not only speech but reading and writing. The candidate must be able to communicate effectively and efficiently in oral and written form with patients and with all members of the health care team.
- III.Motor: Candidates should have sufficient motor functions to elicit information from patients by palpation, auscultation, percussion, and other diagnostic maneuvers. A candidate should be able to execute motor movements reasonably required to provide general care and emergency treatment to patients. Examples of emergency treatment reasonably required of physicians are cardiopulmonary resuscitation, administration of intravenous medication, application of pressure to stop bleeding, opening of obstructed airways, suturing of simple wounds, and performance of simple obstetrical maneuvers. Such actions require coordination of both gross and fine muscular movements, equilibrium and functional use of the senses of touch and vision.
- IV.Intellectual-Conceptual, Integrative and Quantitative Abilities: These abilities include measurement, calculation, reasoning, analysis, and synthesis. Problem solving, the clinical skills demanded of physicians, requires all of these intellectual abilities. In addition, the candidate should be able to comprehend three-dimensional relationships and to understand the spatial relationships of structures. In recent years, certain learning disabilities have been recognized as a subset of integrative patterns. The details for definition and diagnosis of learning disabilities follow these Standards for Curricular Completion.
- V. Behavioral and Social Attributes: A candidate must possess the emotional health required for full utilization of his/her intellectual abilities; the exercise of good judgment; the prompt completion of all responsibilities attendant to the diagnosis and care of patients; and the development of mature, sensitive, and effective relationships with patients. Candidates must be able to tolerate physically taxing workloads and to function effectively under stress. They must be able to adapt to changing environments, to display flexibility and to learn to function in the face of uncertainties and ambiguities inherent in the clinical problems of many patients. Compassion, integrity, concern for others, interpersonal skills, interest and motivation are all personal qualities that should be assessed during the admissions and education process.
- VI. Ethical Standards: A candidate must demonstrate professional demeanor and behavior, and must perform in an ethical manner in all dealings with peers, faculty, staff and patients. Questions of breech of ethical conduct will be referred to the Student Affairs Committee for resolution under the Code of Professional and Academic Conduct.

In determining the minimum standards for completion of the medical school curriculum, the TTUHSC-PLFSOM recognizes that certain disabilities can be accommodated without compromising the standards required by the school or the fundamental integrity of the curriculum. The school is committed to development of innovative and creative ways of opening the curriculum to competitive and qualified disabled candidates. At the same time, the school recognizes the essential need to preserve the standards and integrity of curriculum requisite for the competent and effective physician. Since the treatment of patients is an essential part of the educational program, the health and safety of those patients must be protected at all costs. Therefore, it is not only reasonable but essential for good patient care to require minimum standards for the education of physicians.

If a student is offered and accepts an admissions offer from the School of Medicine, the student must then sign a form acknowledging that he/she has read and understands that the Standards for Curricular Completion must be met with or without accommodation. A request for accommodation along with supporting documentation about the disability from an appropriate specialist and the proposed accommodation(s) must be presented in writing to the TTUHSC ADA Compliance Officer in the HSC Office of Student Services. Copies of the request and documentation will then be forwarded to the SOM Office of Student Affairs. The deadline for requests with supporting documentation is normally 30 days prior to the beginning of the first semester of enrollment. The School may also seek independent review from a specialist of its choice. The decision on whether or not an accommodation request will be granted is made by a committee composed of the Associate Dean for Medical Education, the Associate Dean for Admissions, the Student Affairs Committee, and ad hoc faculty knowledgeable regarding the area of disability. Such decisions are subject to review and approval by the Dean. If reasonable accommodation is feasible, effort will be made to provide the accommodation as classes begin. If the request for accommodation is denied, the student will be notified in writing prior to the start of classes. For requests with documentation received prior to April 15, effort will be made to notify the student of the decision regarding their request prior to May 15.

The Faculty through the Grading and Promotions Policy has determined that students will be expected to complete the curriculum within four years from the time of initial matriculation and take all designated courses as appropriate for that stage of the curriculum. Exceptions to the requirement that students take all designated courses as appropriate for that stage of the curriculum may be sought and processed as other requests for accommodation, as noted above. Such a request will be based on 1.) a specific disability certified by a qualified professional and accompanied by a specific recommendation for accommodation, i.e., a decompressed curriculum based on such a disability and 2.) a written request from the matriculant for such an accommodation based on that disability. As noted above, while students will be expected to complete the curriculum in four years, such as an accommodation will not invalidate the requirement that a student must complete all curricular requirements in no more than six years from the time of initial matriculation.

In the area of learning disabilities, the student should note that he/she will have to petition the National Board of Medical Examiners for any accommodation on the United States Medical Licensing Examinations (Steps I, II CS and CK, and III) and that this process is an addition to and separate from any request for accommodation by the TTUHSC-PLFSOM.

Criteria for Diagnosis of Learning Disability

Definition:

A learning disability (as defined by the Rehabilitation Services Administration, RSA PPD-85-1, 1985, p.2) is, "A disorder in one or more of the central nervous system processes involved in perceiving, understanding, and/or using concepts through verbal (spoken) or written language or nonverbal means." The term learning disabilities is used to refer to a heterogeneous group of disorders characterized by significant difficulties in spelling, reading, expressing ideas in writing, or solving mathematical problems. They are presumed to be due to a dysfunction in the central nervous system and can occur across the life span. While difficulties with social and behavioral problems may coexist with learning disabilities, they do not constitute a learning disability in themselves.

Guidelines:

The Ad Hoc Committee on Learning Disabilities of the Association of American Medical Colleges (AAMC) has promulgated guidelines for the assessment of learning disabilities and these are used as a basis for the guidelines at TTUHSC-PLFSOM.

A. Comprehensive Assessment - A comprehensive assessment must have been done within the last three years. A qualified professional, e.g., a licensed psychologist, a learning disabilities diagnostician, an educational psychologist, with experience in assessing adults must conduct the assessment.

The assessment must address the areas of aptitude, achievement, and information processing.

The assessment must provide clear and specific evidence and identification of a learning disability. "Learning styles" and "learning differences" do not constitute a learning disability.

Information regarding vocational interests and aptitudes may be included.

Students are responsible for the costs of any and all testing done with regard to learning disabilities.

If the student has already matriculated and applies for accommodation, the student must be assessed by a professional approved by the institution.

The following tests are considered acceptable.

- Aptitude. The Weschler Adult Intelligence Scale-Revised (WAIS-R) with subtest scores is preferred. Also acceptable are the Woodcock-Johnson Psychoeducational Battery-Revised and the Stanford-Binet Intelligence Scale-Fourth Edition.
- Achievement. Levels of functioning in reading, mathematics, and written language are required. Acceptable instruments include:
 - o Woodcock-Johnson Psychoeducational Battery-Revised Tests of Achievement
 - Stanford Test of Academic Skills (TASK)
 - o Scholastic Abilities Test of Adults
 - Or specific achievement tests such as
 - o the Test of Written Language-2 (TOWL-2)
 - o Woodcock Reading Mastery Tests-Revised
 - Stanford Diagnostic Mathematics Test.

The Wide Range Achievement Test-Revised is not acceptable.

Information Processing. Use of subtests from the WAIS-R or the Woodcock-Johnson Tests of Cognitive Ability to assess specific areas of information processing (e.g., short- and long-term memory, sequential memory, auditory and visual perception and processing, and processing speed) are acceptable.

All reports must contain the following information:

- The name, degree, title, address, and telephone number of the assessor;
- o Information on the professional credential of the evaluator and the areas in which the individual specializes;
- The date of the assessment;
- The names and results of the tests (i.e., scores);
- The nature and effect of the learning disability;
- An appraisal of the student's academic strengths and weaknesses;
- o Recommendations for strategies and accommodations.

Students who claim learning disability must review the guidelines with the professional who does the assessment,

The diagnosis for learning disability must confirm less than expected academic functioning as demonstrated by a converted score of 15 or more points less than a full scale IQ on individually administered standardized achievement tests.

A history of substantial long-term functional impairment must be present.

B. Evaluation and Accommodation

If a student is offered and accepts an admissions offer from the School of Medicine, the student must then sign a form acknowledging that he/she has read and understands that the Standards for Curricular Completion must be met with or without accommodation. A request for accommodation must be presented in writing to the Office of Student Affairs along with supporting documentation about the disability from an appropriate specialist and the proposed accommodation(s). Generally the deadline for requests with supporting documentation is 30 days prior to the beginning of the first semester of enrollment. The School may also seek independent review from a specialist of its choice. The decision on whether or not an accommodation request will be granted is made by a committee composed of the Associate Dean for Educational Programs, the Assistant Dean for Admissions and Student Affairs, the Student Affairs Committee, and ad hoc faculty knowledgeable regarding the area of disability in question. Such decisions are subject to review and approval by the Dean. If reasonable accommodation is feasible, effort will be made to provide the accommodation as classes begin. If the request for accommodation is denied, the student will be notified in writing prior to the start of classes. For requests with documentation received prior to April 15, effort will be made to notify the student of the decision regarding their request prior to May 15.

The student is responsible for any and all costs associated with the evaluation, including any additional testing that is found to be indicated after matriculation. If testing is indicated after matriculation, the student can be assessed by a professional of the student's choice whom the school shall also approve. Such approval will not be unreasonably withheld.

Accommodation by the National Board of Medical Examination for Steps I, II and III of the United States Medical Licensing Examination is an independent and additional process and must be pursued by the individual student when applying for the examinations.

All files and documentation regarding learning disabilities and accommodation will be kept confidential and in the Office of Student Affairs.

Procedure for Students with Disabilities

Without compromising the standards required by the School or the fundamental integrity of its curriculum, the School recognizes that persons with disabilities, as that term is defined in the Americans with Disabilities Act, may fulfill the standards with reasonable accommodation. The School of Medicine is committed to developing innovative and creative ways of opening its curriculum to competitive and qualified candidates with disabilities. Requests for accommodation under the Standards for Curricular Completion will be considered on an individual basis and reasonable accommodation will be arranged if appropriate. The use of a trained intermediary to observe or interpret information is considered to compromise the essential function of the physician.

When an applicant comes for an interview at the El Paso School of Medicine, a copy of the detailed Standards for Curricular Completion will be included in the Orientation Packet. Questions about the Standards are welcomed and interviewees will be informed that they must be qualified to meet all of the Standards, with or without accommodation.

If a student is offered and accepts an admissions offer from the El Paso School of Medicine, the student must then sign a form acknowledging that he/she has read and understands that the Standards for Curricular Completion must be met with or without accommodation. An application for accommodation may be obtained from the Office of Student Services and must be presented in writing to the Office of Student Affairs along with supporting documentation about the disability from an appropriate specialist and the proposed accommodation(s). The deadline for requests with supporting documentation is normally 30 days prior to the beginning of the first semester of enrollment. The School may also seek independent review from a specialist of its choice. The decision on whether or not an accommodation request will be granted is made by a committee composed of the Associate Dean for Medical Education, the Associate Dean for Admissions, the Student Affairs Committee, and ad hoc faculty knowledgeable regarding the area of disability. Such decisions are subject to review and approval by the Dean. If reasonable accommodation is feasible, effort will be made to provide the accommodation as classes begin. An application that is subject to disapproval will be discussed with the Health Sciences Center's ADA Compliance

Office and the Office of General Counsel. If the request for accommodation is denied, the student will be notified in writing prior to the start of classes.

For requests with documentation received prior to April 15, effort will be made to notify the student of the decision regarding their request prior to May 15. The Application for Accommodation and supporting documentation will be sent to the ADA Compliance Officer for official record keeping.

In the area of learning disabilities, the student should note that he/she will have to petition the National Board of Medical Examiners for any accommodation on the United States Medical Licensing Examinations (Steps 1, 2 CS and CK, and 3) and that this process is in addition to and separate from any request for accommodation by the Texas Tech School of Medicine.

Graduate Medical Education. Students who come to the Paul L. Foster School of Medicine can be assured of training in an environment that will enable them to develop the knowledge and skills necessary to provide the citizens of Texas and the nation with the highest quality of health care.

OFFICE OF ADMISSIONS

Paul L. Foster School of Medicine Office of Admissions

| Associate Dean for Admissions | Manuel Schydlower, MD |
|---|-----------------------|
| Director of Admissions | John Snelling, MA |
| Assistant Director of Admissions | Lorraine James, MBA |
| Lead Advisor/Recruiter | Yolanda Jauregui, BS |
| Unit Coordinator | |
| Senior Data Analyst | Laura Olivas, BS |
| Senior Medical Administrative Secretary | |

General Philosophy

Texas Tech University Health Sciences Center Paul L. Foster School of Medicine invites applications from qualified residents of the state of Texas and the adjacent counties of eastern New Mexico and southwestern Oklahoma that comprise the service area of the Texas Tech University Health Sciences Center. Out-of-state residents will be considered on an individual basis. Only 10% of the class can be from out-of-state, therefore, out-of-state applicants should have competitive credentials to apply. Initially, 40 students were selected for the charter class, but ultimately there will be 80 students per class. The Admissions Committee carefully examines each application for the personal qualities and proven academic ability to determine potential for becoming an effective and competent physician. If all other qualifications are equal, some preference may be given to West Texas residents. While evidence of high intellectual ability and a strong record of scholastic achievement are vital for success in the study of medicine, the Admissions Committee recognizes the essential role of compassion, motivation, maturity, personal integrity, and the ability to communicate effectively as traits of the consummate physician.

In the screening process, applicants will be evaluated not only on their cognitive merits, but also on non-cognitive or non-academic factors as well. This will include evaluations of their personal statements, letters of recommendation and other life, extracurricular or employment experiences. The interview is specifically designed to focus on non-academic criteria. Interviewers will assess the applicant's medical experiences, motivation to enter medicine, knowledge of issues in medicine, personal characteristics and problem solving ability.

TTUHSC-Paul L. Foster School of Medicine in El Paso is committed to helping meet the needs of an increasingly diverse population by recruiting a diverse medical school class that exhibits qualities indicative of academic success. The School of Medicine admission guidelines call for no discrimination on the basis of race, sex, age, ethnic origin, religion, sexual orientation or disability.

Revised: November 11, 2011

To facilitate diversity, our Admissions Committee will consider factors to determine whether or not an applicant comes from a financially or educationally disadvantaged background, such as the applicant's status as a first generation college graduate; multilingual proficiency; socioeconomic background while attending elementary/secondary school; responsibilities while attending school, such as employment or assisting in the care of family members; community involvement; and other life circumstances. These factors will be considered in the selection of candidates, in accordance with recent legislation that allows schools to consider evidence of applicants' disadvantaged status as part of the total evaluation process.

In summary, a number of both cognitive and non-cognitive factors are used in the evaluation of applicants to medical school. No single factor is used exclusively to admit or to eliminate admission of an applicant to medical school at Texas Tech. Each applicant is examined for overall suitability. The Admissions Committee makes an effort to select a class with varied backgrounds, interests, and life experiences so that there is a stimulating and broadening learning environment for the medical curriculum.

Undergraduate Course Requirements

A baccalaureate degree is required, and at least three years of study (90 semester hours or the equivalent in quarter hours) from an accredited United States or Canadian college or university must be completed before the individual applies for admission.

Course work from non-U.S. or Canadian schools will be accepted only if it appears, with a grade, on the transcript of a U.S. or Canadian college or university as an individual course. All prerequisite courses for medical school must have been taken for credit at an accredited U.S. or Canadian college or university.

Specific course requirements have been kept at a minimum to allow and encourage the student to have a broad and well-rounded education. There are no specific requirements for undergraduate majors. The

Admissions Committee reviews the academic challenge provided by course selection and gives preference to students with a broad educational background.

Admission Requirements

Successful applicants for admission to the Paul L. Foster School of Medicine at Texas Tech University Health Sciences Center at El Paso (PLFSOM)



must have completed an undergraduate curriculum and must have been awarded a baccalaureate degree or its equivalent before matriculation. Ninety semester hours, including all prerequisite courses must have been completed at a U.S. or Canadian accredited college or university.

The Prerequisite Courses Are:

| COURSES | HOURS |
|-------------------------------------|-------------------|
| Biology | 12 semester hours |
| Biology laboratories | 2 semester hours |
| General chemistry with laboratories | 8 semester hours |
| Organic chemistry with laboratories | 8 semester hours |
| Physics with laboratories | 8 semester hours |
| Calculus or statistics | 3 semester hours |
| English | 6 semester hours |

Grades of C or better are required for all prerequisite courses or AP credit.

Successful applicants also should have pursued a broad educational experience, including topics outside of chemistry, biology, physics and mathematics. Although PLFSOM will have no prescribed course of study beyond the required courses identified above, the Admissions Committee will consider the breadth of the candidate's educational experience in their determination of admission. Additional recommended courses include the following:

Humanities, Social Sciences, or Behavioral Sciences: 12 semester hours.

Coursework in Biochemistry, Biostatistics, and Cellular/Molecular Biology is also encouraged. Competence in spoken and written English will be necessary. A facility in conversational Spanish will be an advantage for students intending to remain in the Southwest.

Medical College Admissions Test (MCAT)

The MCAT is also a requirement for admission. The applicant's best score from the last five years will be considered. Information about the MCAT and registration for the exam can be accessed at http://aamc.org/students/mcat/.

APPLICATION PROCESS

Applications for admission will be processed through the Texas Medical and Dental Schools Application Service (TMDSAS). Application forms and procedural information are available on the TMDSAS website at http://www.utsystem.edu/tmdsas. TMDSAS will notify applicants when their applications have been sent to the school.

Applications will be reviewed for completeness. In addition, applications will be reviewed for adherence to the admissions requirements established by the school. Those candidates whose files are complete and who are considered to be competitive for admission, based on the admissions criteria established by the school, will be invited to interview. These criteria include scores from the MCAT; academic performance as reflected by the science GPA and overall GPA; rigor of the undergraduate curriculum, including course selection, extracurricular activities (medical and non-medical),

and employment and their impact on performance and maturation; recommendations from premedical advisors or faculty; socioeconomic and disadvantaged background; personal statement and its reflection of communication skills, personal qualities, leadership, maturity, determination, and motivation for a career in medicine; regional origin.

Candidates who are selected for interview will be invited for a full day of orientation to the school and interviews. The interview is designed to evaluate their interest and knowledge of the health care field and motivation for a medical career; personal characteristics; and problem-solving skills. The interview can also address questions by the candidate that may have arisen during the application process. These interview sessions will be conducted weekly from early August to the middle of January. All successful candidates must participate in the interview process.

Following each interview session, the Admissions Committee will review the credentials and interview evaluations for each of the candidates and will make decisions for or against admission. The decisions of the Admissions Committee are final. Based upon these decisions, a list of acceptable candidates will be prepared ranking those judged to be best qualified for the study and practice of medicine. Following TMDSAS guidelines, we will make offers to superior candidates between November 16 and December 31. All other candidates will be offered positions through the TMDSAS matching process. All candidates, whether holding an offer or not, must submit preferences to the TMDSAS match by January 10. Match results are announced on February 1. A rolling admissions process will then be used to fill remaining positions.

Students who are accepted for admission will receive a packet of information during the summer before their matriculation. This packet will contain information about the community of El Paso and the school, including lists of books and materials required, class schedules, housing opportunities, and contact information. Additionally, the packet will include information and forms regarding various requirements that the students will need to complete before matriculation, such as acknowledgement of the standards for curricular completion, immunization forms, documentation of health insurance, documentation of a pre-entry physical examination, and a criminal background check.

The TTUHSC Registrar is the custodian of criminal background checks. All reports indicating a criminal record are forwarded to the Associate Dean for Student Affairs for review by a committee consisting of him/herself, the Associate Dean for Admissions, and the Director of Student Affairs. This review will determine if the violations would preclude the student from training in the clinical affiliates based on exclusion lists provided by these institutions.

Admissions Policies for Non-Residents of Texas

Non-resident applicants to the participating TMDSAS Texas schools are not subject to the Texas Match. Acceptance of non-resident, interviewed applicants begins on October 15. Texas Tech University Paul L. Foster School of Medicine is a Texas state school and is required by law to have 90% of the entering class made up of qualified Texas residents. Residency is determined according to the Texas Higher Education Coordinating Board Rules and Regulations for Determining Residency. Residency information is available on the TMDSAS website. TMDSAS will make an initial determination of each applicant's residency status.

<u>APPLICATIONS</u>

Please submit your application on line through TMDSAS http://www.utsystem.edu/tmdsas
Texas Medical and Dental Schools Application Service 702 Colorado, Suite 6400
Austin, Texas 78701

The Paul L. Foster School of Medicine does not require a secondary application.

Qualified applicants will be invited to interview.

2011 Interview Schedule

Application Timeline

Filing of Applications
Earliest Date: May 2, 2011
Latest Date: October 1, 2011

Interview Period August 2011 – January 2012

Acceptance Notice
Pre-Match Open Acceptance Period:
November 15, 2011 – December 31, 2012

Texas Match

Applicants will rank all schools where they have interviewed regardless of whether or not they are holding a pre-match offer.

Applicant preference list due to TMDSAS: January 10, 2012 Applicant Match Day: February 1, 2012

There are 80 seats in the class. Any seats left open after the match will be filled from the alternate list.

Immunizations, Health Insurance, and Disability Insurance

The Association of American Medical Colleges states that all students should be immunized against a number of infectious diseases for their own safety and the safety of others. All matriculating students must be compliant with the school's immunization requirements in order to register for classes.

Students will be required to be up to date on their immunizations and provide documentation of immunization against tetanus, diphtheria, pertussis, measles, mumps, rubella, hepatitis A and B. Because of the

school's location on the border and requirement by the principal teaching hospital, students must also demonstrate serologic protective titers against varicella, rubella and rubeola. A tuberculin or equivalent

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test will also be required in the six-month period prior to beginning the curriculum and annually thereafter. A chest radiograph will be accepted only if the student is known to be skin-test positive.

Students are expected to have health insurance coverage for each semester enrolled. Students should be prepared to provide proof of coverage at the time of registration. The Office of Student Affairs will make available information on student health insurance providers for all registered students of the School of Medicine. Students may investigate other insurance plans or be enrolled in a parent's or spouse's plan.

Each student is assessed a fee of \$40.00 per year to purchase long-term disability insurance. The amount of coverage is negotiated annually. Additional disability insurance may be purchased by the student if desired.

Special Considerations

1. Deferment of Matriculation

Under extenuating circumstances, an applicant who has been accepted for enrollment in the fall may request, in writing, deferment until the following fall. Such request will be considered by the Associate Dean for Admissions and may be granted for a period not to exceed one year. During the year of deferment, the student may not make application to any other medical school. PLFSOM scholarships do not carry over if the student is deferred.

2. Application for Admission in Advanced Standing

An official policy on transfers will be considered by the Admissions Committee in June 2010. It is anticipated to include the following: Texas residents enrolled in good standing in LCME accredited medical schools; written permission from their Dean of Student Affairs; and must have passed Step 1 of the United States Medical Licensing Examination (USMLE 1) as conditions for acceptance in advanced standing. Additionally, transfer candidates may be interviewed before acceptance.

All applicants for advanced standing must be bona fide Texas residents with at least 90 hours of undergraduate study in an accredited U.S. or Canadian college or university. The school does not anticipate acceptance of transfer applications from students or graduates of schools not accredited by the Liaison Committee on Medical Education.

Academic Scholarships

The Paul L. Foster School of Medicine offers a number of competitive academic scholarships. The scholarships are based on merit as determined by the Paul L. Foster School of Medicine Scholarship Committee. Many scholarships do not require an application, are based on a merit rank order list derived from decisions by the Admissions Committee and are awarded prior to matriculation. These scholarships are renewable for up to four years contingent on successful advancement to the next year of medical studies. Numbers of scholarships and award amounts may vary.

Professionalism

- Describe fundamental ethical principles and how they apply in patient care and medical practice.
- Recognize and avoid the conflicts of interest that can arise in medical practice
- Display compassion in interactions with all patients regardless of race, gender, ethnicity, sexual orientation,
- socioeconomic status and disability
- . Apply the highest ethical standards in all professional activities
- Demonstrate respect for the beliefs, opinions and privacy of patients, families, and members of the health care team
- · Demonstrate scrupulous honesty in all professional matters
- Provide compassionate and culturally appropriate care in all stages of the life cycle
- Preserve patient's dignity in all interactions
- Demonstrate advocacy for the interests and needs of patients

Practice-Based Learning

- Use inductive and deductive reasoning as appropriate in the diagnosis and management of disease
- · Use epidemiological and bio-statistical methods to analyze and solve clinical problems
- Identify the need to employ self-initiated learning strategies (problem definition, resource identification, critical appraisal) when approaching new challenges, problems, or unfamiliar situations
- . Recognize when to take responsibility and when to seek assistance based on one's position, training, and
- Demonstrate sophistication in the use of digital resources for patient care, self-education, and the education of patients and their families
- Demonstrate the application of a scheme inductive approach to arrive at a focused differential diagnosis
- Demonstrate self-awareness and the skills necessary for life-long fearning

Systems-based Practice

- Describe the components of social structure (e.g., lamily, neighborhood, community) and the role each plays in health behavior, disease prevention, and the treatment of Illness
- Describe the components of the national health system and its funding and how this system affects individual and community health

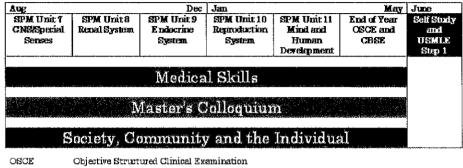
Pre-Clerkship Curriculum (years 1-2)

The first two years of the curriculum consists of four required courses: Scientific Principles of Medicine; Medical Skills; Society, Community, and the Individual; and the Masters' Colloquium. A description of each of these courses follows.

Curriculum Overview: Year 1

| July | Aug | | Dec | Jan | | | Ма |
|------|------------------------------------|---|-------------------------|---------------------------------------|-------------------------------------|-------------------------------------|------------------|
| BCI | SPM Unit 1 Health & Disease | SPM Unit 2 Musculo- she letal/ Decon | SPM Unit 3 GI System | SPM Unit 4 Liver and Hematology | SPM Unit 5 Cardio! Pulmon say | SPM Unit 6 Integrated Systems | C E Y E |
| | | | | al Skills Colloquiu | | | |
| | | | A STATE OF THE PARTY | y and the | | áĺ | |
| SPM | | Scientific Pri | nciples of Medi | aine | | | |
| SCI | Society, Community, and Individual | | | | | | |
| CEXE | | Comprehens | ive End of the Y | est Exam | | | |

Curriculum Overview: Year 2



CBSE

Comprehensive Basic Science Examination

The Scientific Principles of Medicine (SPM) is a two year course divided into "systems" units as illustrated above. Each unit is organized around a number of "clinical presentations" representing the various ways a patient might present to the physician (e.g., sore throat, headache, referral for abnormal laboratory findings). The clinical presentation serves as the spring-board for the study of the basic sciences (e.g., anatomy, biochemistry, microbiology, pathology, and pharmacology) needed to understand that presentation. Over a two year period, students are exposed to approximately 100 clinical presentations associated with over 3000 individual diagnoses. The Scientific Principles of Medicine course employs a variety or teaching and learning modalities including interactive lectures, small groups, laboratory exercises, team-based leaning and self-directed study. A one-week period is scheduled at the end of each unit for individual review and examination.

Medical Skills is a two year course in which students develop the knowledge, attitudes, and skills necessary for the optimal care of the patient. This course addresses communication skills, history taking, physical examination skills, and basic procedural skills. This course is aligned with the units of the Scientific Principles of Medicine course. For example, when students learn about the patient presenting with chest discomfort in the Cardiovascular/Pulmonary unit of SPM, in Medical Skills they learn how to conduct a focused history and physical examination on a patient who presents to the doctor with chest discomfort, enabling them to distinguish between cardiac, pulmonary, and musculoskeletal causes of chest pain. During this period they will also learn to distinguish between normal and abnormal heart sounds and how to administer and interpret ECGs. Training in Medical Skills will take place primarily in a state-of-the-art Clinical Skills and Clinical Simulation Center employing standardized patients, partial task trainers, high tech human body simulators, and virtual reality simulators.

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Society, Community, and the Individual (SCI) is a two year long learning experience designed to expose students to population health, public health, the community, and the delivery of health care in the community. SCI is comprised of seven themes that are threaded throughout the first two years: biostatistics, epidemiology, community, family, culture, environmental and occupational health, and finally, Spanish. Given the medical school's location on the Texas-Mexico border and the fact that over 80% of the population in the El Paso area is of Hispanic origins, familiarity with conversational and medical Spanish is integrated into the curriculum. In addition to language instruction, all students will learn about the Border community and culture through a variety of field experiences and exercises. Through SCI, students learn principles of evidence based medicine and they will be given opportunities to participate in service learning projects, and community based research.

The <u>Masters' Colloquium</u> rounds out the four courses spanning the first two years of the curriculum. In the Masters' Colloquium students discuss topics related to professionalism, ethics, controversies in medicine, and the "artistry" associated with the practice of medicine. Masters' Colloquium topics will be linked to the clinical presentations in the Scientific Principles of Medicine course. The Masters' Colloquium will also provide a venue for students to share community experiences derived from participation in the Society, Community, and Individual course.

The Scholarly Activity and Research Requirement

The Paul L. Foster School of Medicine Scholarly Activity and Research Program provides medical students with an opportunity to design and execute an independent scholarly project or research project under the guidance of an expert faculty mentor. A wide variety of topics and research areas are available in three broad categories, allowing for a project to be tailored to a student's background and interests: 1) basic, clinical and translational research; 2) epidemiology, community-based, behavior, public and environmental health; and 3) medical humanities, qualitative research and medical education research. This is a 3 credit (pass/fail) mandatory curriculum requirement, with one credit awarded for selection of a mentor and preparation of a Project Plan, one credit for execution of the project itself, and a final credit awarded for a poster summarizing the project presented at an annual student symposium held in the Fall semester. Students can choose between one of two tracks: Track 1 concentrates execution of the project into the summer between the first and second year with a poster presented in the Fall of the second year; whereas Track 2 provides the student more flexibility, allowing execution of the project anytime during the first 3 years followed by a poster presentation at the next student symposium. For both Tracks, selection of a mentor and preparation of a Project Plan is due at the end of the first year. Students in both Tracks have the option of writing an Honors Thesis on their project in the fourth year. This introduction to the methodology and analytic thinking involved with scholarly activity and research is designed to enhance the medical training experience and provide an appreciation for the tight integration between scholarship, research and clinical practice.

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| Year 1 and 2 Courses | Credits |
|--|----------------|
| Scientific Principles of Medicine 1 | 10 |
| Scientific Principles of Medicine II | 10 |
| Scientific Principles of Medicine III | 10 |
| Scientific Principles of Medicine IV | 10 |
| Society, Community, and Individual I | 4 |
| Society, Community, and Individual II | 4 |
| Society, Community, and Individual III | 4 |
| Society, Community, and Individual IV | 4 |
| Medical Skills I | 2 |
| Medical Skills II | 2 |
| Medical Skills III | 2 |
| Medical Skills IV | 2 |
| Masters' Colloquium I | 2 |
| Masters' Colloquium II | 2 |
| Masters' Colloquium III | 2 |
| Masters' Colloquium IV | 2 |
| Scholarly Activity Project I | 1 |
| Scholarly Activity Project II | 1 |
| Scholarly Activity Project III | 1 |

The Clerkship Curriculum (years 3-4)

Year 3 of the PLFSOM curriculum consists of three, 16 week blocks. Two clerkship disciplines share each of these blocks as follows: Internal Medicine/Psychiatry; Obstetrics and Gynecology/Pediatrics; and Family Medicine/Surgery. Although students receive individual grades for each clerkship discipline, they will participate in both clerkship disciplines throughout. The blocks are designed to include "integration experiences" across the disciplines in the block, and "shared teaching" teaching experiences. For example, in the Internal Medicine/Psychiatry block, a student who is caring for a diabetic patient who has also been diagnosed with a mental illness will address both conditions; psychiatrists and internists will round together with students on occasions; and selected topics will be addressed by internists and psychiatrists (e.g., substance abuse, sleep disorders) in the didactic component of the curriculum. The overall goal of the block structure is to encourage students to think about patient problems from the standpoint of multiple disciplines and perspectives. In addition, each of the blocks has been charged with "revisiting" a number of the clinical presentations (CP) presented in years 1-2 to review underlying basic science concepts and diagnostic reasoning. In addition, in the course of revisiting the CP additional attention will be directed at addressing treatment and management considerations. As part of the end of block assessment, students will participate in a multi-station OSCE that will include "integrated" cases (e.g., an anxious patient presenting with chest pain, a pregnant adolescent, pre-operative assessment of elderly patient). Finally, the following topics are "threaded" throughout the required components of the year 3-4 curriculum: Geriatrics, basic science correlations, ethics, professionalism, EBM, patient safety, pain management, palliative care, quality improvement, communication skills, diagnostic imaging, clinical pathology, and clinical research.

The organization of the third year curriculum is illustrated in the following course schematic:



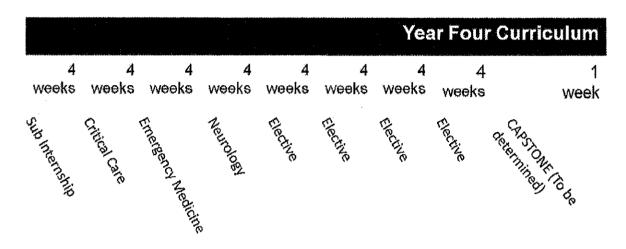
Year 3 Integrated Block Curriculum

| (6)Weeks | ili 6 (Włoreikie) | ार्टा,Wkcakksा = == |
|--|--|--|
| Internal Medicine general (8 weeks) selective (2 weeks) Psychiatry (6 weeks) | Obstetrics-Gynecology (8 weeks) Pediatrics (8 weeks) | Family Medicine (6 weeks) Surgery general (6 weeks) selective (4 weeks) |
| Integrated Teaching and Learning Experiences | - Integrated Teaching and Learning Experiences | Integrated Teaching and Learning Experiences |
| Longitudinal Selective in Psychiatry | ⁻ Maternal/Fetal/Neonate Experience | ⁻ Longitudinal Selective and Family Medicine |

Threads: Geriatrics, Basic Sciences, Ethics, Professionalism, EBM, Patient Safety, Pain
Management, Chronic Illness Care, Palliative Care, Quality Improvement, Communication
Skills, Diagnostic Imaging, Clinical Pathology, Clinical and Translational Research.

| Year 3 Courses/Clerkships | Credits |
|---|---------|
| Internal Medicine | 10 |
| Psychiatry (plus Longitudinal Selective) | 8 |
| Obstetrics/Gynecology | 8 |
| Pediatrics | -8 |
| Family Medicine (plus Longitudinal Selective) | 8 |
| Surgery | 10 |

The fourth year curriculum, as illustrated below, consists of four required clerkship experiences—a sub-internship, critical care medicine, emergency medicine, and neurology. During the fourth year students also are provided time for elective experiences (both at home and away) and time to travel to other medical centers to interview for residency positions. Finally, at the close of the fourth year all students will participate in a capstone experience designed to "tie together" the four year medical school experience and to prepare the student for the transition from being a medical student to being a first year resident in the specialty of their choice.



Threads: Geriatrics, Basic Sciences, Ethics, Professionalism, EBM, Patient Safety, Pain Management, Chronic Illness Care, Palliative Care, Quality Improvement, Communication Skills, Diagnostic Imaging, Clinical Pathology, Clinical and Translational Research

Students will be required to pass the USMLE Step 2 CK (clinical knowledge) and CS (clinical skills) to be certified for graduation from the Paul L. Foster School of Medicine.

Departments of the School of Medicine

Department of Anesthesiology

Department of Emergency Medicine

Department of Biomedical Sciences

Department of Family and Community Medicine

Department of Medical Education

Department of Internal Medicine

Department of Ophthalmology

Department of Psychiatry

Department of Obstetrics & Gynecology

Department of Orthopedic Surgery

Department of Pathology

Department of Pediatrics

Department of Radiology

Department of Surgery

Academic Scholarships

The Paul L. Foster School of Medicine offers a number of competitive academic scholarships. The scholarships are based on merit, as determined by the Paul L. foster School of Medicine Scholarship Committee. Many scholarships do not require an application, are based on a merit rank order list derived from decisions by the Admissions Committee, and are awarded prior to matriculation. These scholarships are renewable for up to four years contingent on passing all subjects and successful advancement to the next year of medical studies. Numbers of scholarships and award amounts may vary.

||Revised: November 11, 2011

FOSTER SCHOOL OF MEDICINE RESOURCES...

About Our School

El Paso Admissions

El Paso Administration

Education

Patient Care

Research

LCME Accreditation

OFRD SharePoint Site

Clinical Presentations (Schemes and Process Worksheets)

Professionalism Stories

El Paso Campus

HEALTH SCIENCES CENTER...

HSC Home

Welcome to the HSC

Office of the President

Campuses

Schools

HSC Info For

Centers & Institutes

Research

Administration

Human Resources

Libraries

Accreditation

The Daily Dose

Emergency Preparedness

Compliance Hotline

Paul L. Foster School of Medicine





From the Desk of the Founding Dean

Residency Graduation - On Thursday, June 7, 66 Texas Tech residentphysicians walked across the stage of the Chamizal National Mamorial Theater for commencement exercises. This marks the completion of their specialty training on the Texas Tech/UMC campus. Eighteen of the 68 graduating resident physicians have chosen to stay in El Paso--six as faculty members at TTUHSC.Others will complete additional fellowship training here or go into group or private practice. Another 18 doctors chose to stay in Texas to practice medicine or continue in other fellowships. Five will fulfill military obligations. The rest have chosen to practice medicine elsewhere or complete fellowships at other medical institutions nationwide. At the event, I gave the charge to the residents. I congratulate each and every physician, as well as their family members for completing this important journey in their medical career.

Quality Service Awards – Congratulations to the eight TTUHSC El Paso Quality Service Awardwinners: Sylvia de la Cruz, Claudia E. Fuentes, Georgina Grado, Irma Hernandez, SusantMancha, Yolanda Romero, Belen P. Zambrano, and Rosa I. Hernandez. The Quality ServiceAwards Program was implemented in 1996 to recognize and reward individuals and groups whoexcel in support of the SERVICEplus philosophy. Read more about our winners in this Tech View.

New Faces — During the next few months our campus will again see many new faces—the facesof new medical students, new nursing students, new residents, and now, new biomedical sciences students. They are the primary reason we come to work every day. If you are directlyinvolved with any of these groups, thank you, if you are not, thank you anyway because it takesa village (or in this case, a campus and a community) to educate and train our future doctors, nurses and researchers. Please help them all feet welcome during their arrival and orientation.

Sincerely, Jose Manuel de la Rosa, M.D.

INFORMATION FOR ...

Prospective Students

Student Affairs

Current Students

Faculty and Staff

Patients and Visitors

Residency Education

Giving to TTUHSC



NEWS & ANNOUNCEMENTS...

CPRIT Release 2012

CPRIT Project Aims to Reduce Cancer Deaths in El Paso

TTUHSC Gayle Greve Hunt School of Nursing Approved

Major Appointments Announced for TTUHSC at El Paso

Texas Tech Physician Commentary in JAMA

New Chair Appointed for Paul L. Foster SOM OB/GYN Department

Next Class of Paul L. Foster SOM Students Chosen

Three More Fellowships Approved for Paul L, Foster SOM

TTUHSC PLFSOM Kicks Off Healthy Lunchbox Initiative

TTUHSC Moves Forward With Plan for a Freestanding School of Nursing in El Paso

Texas Tech's Internal Medicine's GI Division Named National Center of Excellence by ANMS

Tech View

SEARCH...

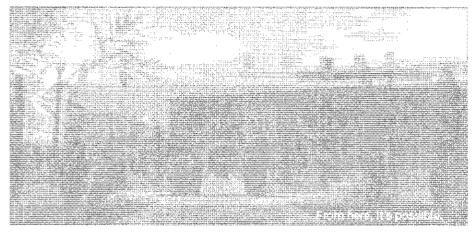
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directory maps general contacts site map

Online Institutional Resumes

Campus Webmasters | Recommended Web Site Viewing Requirements | General Policy Information
State of Texas Web Site | SAO Fraud Reporting | DMCA Compliance | Compliance Hotline | Texas Homeland Security | "ITUHSC Energy Conservation Report
TTUHSC Home | Texas Tech University System | Texas Tech University | Angelo State University
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Office of Admissions





Admission Information for Prospective Students

Among the goals of the Paul L. Foster School of Medicine is the provision of a medical education that is consistent with modern scientific principles, supportive of strong ethical principles, sensitive to the needs of the community, and committed to excellence.

We invite you to take the next step and explore our website to discover how the Paul L. Foster School of Medicine is right for you. Along the way, we can answer questions on the application process, the standards for completion of the curriculum, expenses, or any other admissions questions you might have. Please feel free to contact us at 915.783.1250 or by e-mail at

Fostersom.Admissions@ttuhsc.edu*

FEATURED INFORMATION

Paul L. Foster School of Medicine featured in TexasMedicine Magazine October 2009.



Local Information

Printable Campus Map for Visitors
Getting to Campus

Ground Transportation

Hotels near Paul L Foster School of Medicine

Tech View

If you have any questions or want to meet an admissions advisor, please contact us at 915.783.1250 or by e-mail at Fostersom.Admissions@ttuhsc.edu*



Dates & Deadlines

May 2, 2011

Earliest date to file application with Texas Medical and Dental Schools Application Service (TMDSAS)

August 2011 - January, 2012 Interview Period

October 1, 2011
Latest date to file application with TMDSAS

November 15, 2011 - December 31, 2011

Pre-Match Open Acceptance Period

January 15, 2012

Deadline to declare/decline medical school through TMDSAS Applicant/Medical School preference list due to TMDSAS

February 1, 2012
Applicant Match Day

May 15, 2012
Deadline for \$100 deposit to hold place in class



Admission Checklist

- Texas Medical & Dental Schools Application Service (TMDSAS) online application
- 2. All supporting documents (signature page, fee receipts, etc.)
- 3. All declared Letters of Evaluation
- 4. All MCAT Scores (the best from the past 5 years will be evaluated)



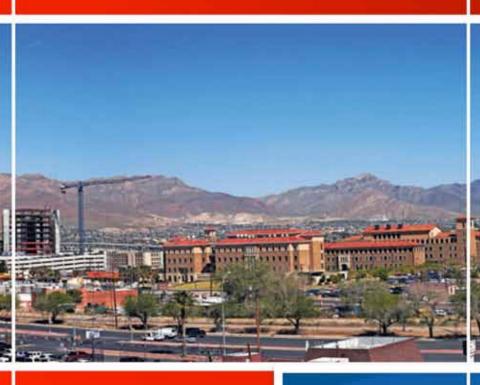
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TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER

Paul L. Foster School of Medicine "



El Paso's Medical School





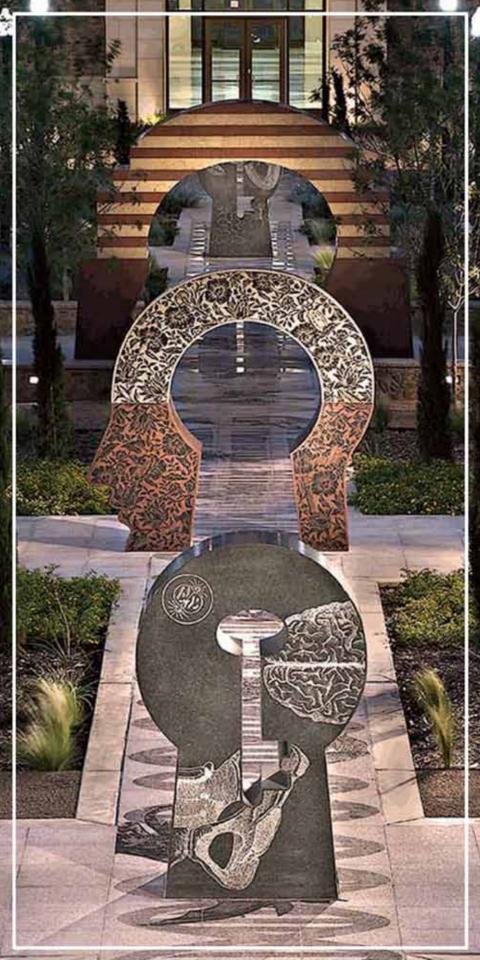




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 - 10 Medical College
 - Admission Test
 - 10 Application
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 - 11 Admissions Process
 - 11 Interview
 - 11 Tuition and Fees

12 CONTACT INFORMATION



CAMPUS COMMUNITY

The Paul L. Foster School of Medicine, the first four-year medical school on the US/Mexico border, is located in El Paso, Texas. Our unique setting provides exposure not only to traditional medicine, but also to international, bi-cultural and border health care issues. El Paso is a vibrant city where the mild climate provides year round cultural, intellectual, social and recreational opportunities.

Once on campus, students will enjoy our state-of-the-art educational, research and clinical facilities. The new Medical Education Building is 125,000 square feet of auditoriums, classrooms, laboratories, group meeting rooms, a clinical skills/ simulation center, fitness room, lounge areas and a library. The Medical Sciences Building houses leading research currently conducted in chronic kidney disease, breast carcinogenesis, and infectious disease. Research focuses on health disparities and diseases that affect the region including diabetes, obesity and depression.





The University Medical Center (UMC) of El Paso, our main teaching hospital, is located on campus and is the only Level I Trauma Center in the region. The UMC is currently undergoing significant growth as construction of a new children's hospital is underway with plans to open in 2012. In addition, students are also trained throughout the El Paso community at other clinical training affiliations which include El Paso Psychiatric Center, William Beaumont Army Medical Center, Texas Tech University Health Sciences Center ambulatory clinics and off-campus community sites.



OUR FACULTY

The Paul L. Foster School of Medicine faculty combines quality in research, teaching and patient care. We have a proud history prior to becoming a four year medical school. Since 1973, Texas Tech University Health Sciences Center-El Paso has been a primary location for educating third and fourth year Texas Tech medical students. Teaching has been and remains the focus of the faculty. They include over 170 physicians in our hospitals and clinics; and Medical Education Department members (Basic Science-PhD & Clinical-MD educators). All combine many years of teaching experience and numerous awards for teaching excellence. Our internationally recognized researchers, educators and clinicians stress interdisciplinary collaboration and are dedicated to creating outstanding diagnosticians and compassionate physicians.









MEDICAL CURRICULUM

The Paul L. Foster School of Medicine is committed to excellence in medical education founded on modern scientific principles, strong ethical values and sensitivity to our community needs.

Our integrated curriculum, which received a commendation from the Liaison Committee on Medical Education for its clinical orientation, teaches the basic sciences with relevance to clinical presentations assigned to organ-system based units. Clinical presentations are the ways in which a patient presents to a physician. Students learn the anatomy, biochemistry, physiology and other basic science concepts and content needed to understand specific clinical presentations. Guided instruction by discipline experts through lecture, small group and laboratory exercises is utilized to establish this relevance. This approach has demonstrated enhanced knowledge comprehension, improved retention and promoted the development of diagnostic reasoning skills like those used by experienced physicians.

The first two years of the curriculum consists of four major courses; Scientific Principles of Medicine (organ-system units), Medical Skills, Masters' Colloquium, and Society, Community and the Individual (SCI). The grading system is pass/fail. Preparation for the United States Medical Licensing Examinations includes cumulative unit exams and periodic use of the Comprehensive Basic Sciences Exam. In an effort to support our medical students along the way, each class is divided into learning communities called colleges, where College Masters monitor student performance on a weekly basis. All students engage in a language immersion course in conversational and medical Spanish. Application of skills and knowledge learned is applied early, as students are exposed to patient care within a month of arriving on campus. The third and fourth year of the curriculum provide richly diverse and varied patient care experiences in major specialties and subspecialties.



Key to Integration

ADMISSION REQUIREMENTS

PREREQUISITE COURSES/APPLICATION/INTERVIEW

PREREQUISITE COURSES

Minimum of 90 undergraduate semester hours at an accredited US or Canadian college or university. A grade of "C "or better is required/AP credit accepted.

BIOLOGY W/LABORATORY

14 Semester hours (12 lecture, 2 lab)

GENERAL CHEMISTRY W/LABORATORY

8 Semester hours (6 lecture, 2 lab)



ORGANIC CHEMISTRY W/LABORATORY

8 Semester hours (6 lecture, 2 lab)

PHYSICS W/LABORATORY

8 Semester hours (6 lecture, 2 lab)



CALCULUS OR STATISTICS

3 Semester hours

ENGLISH

6 Semester hours



RECOMMENDED COURSES



BIOCHEMISTRY

BIOSTATISTICS



CELLULAR/MOLECULAR BIOLOGY

IMMUNOLOGY

GENETICS



HUMANITIES

SOCIAL SCIENCES

MEDICAL COLLEGE ADMISSION TEST

The Medical College Admission Test (MCAT) IS REQUIRED. The applicant's best score from the last five years is considered in the admissions process. Visit www.aamc.org/mcat for registration and additional testing information.

APPLICATION

Complete the online application through the Texas Medical and Dental Schools Application Service (TMDSAS) at http://www.utsystem.edu/tmdsas/

The Paul L. Foster School of Medicine does not require a secondary application.

APPLICATION TIMELINE

MAY 1

First date to file TMDSAS application

AUGUST

Interview period begins

OCTOBER 1

Last date to file TMDSAS application

NOVEMBER 15

Pre-match open acceptance period begins
Pre-match offer period for Texas Residents begins

DECEMBER

Interview period ends December 31st, Pre-match offer period ends

JANUARY

Submission deadline for match preference rank list

FEBRUARY 1

Applicant match results announced

MAY 15

Deadline to submit deposit to hold seat in class

ADMISSIONS PROCESS

In addition to cognitive merits, each applicant's personal statements, letters of recommendation, life experience, extracurricular activities, volunteerism and employment experience are considered. No single factor is used to select or eliminate an applicant to the Paul L. Foster School of Medicine. Each applicant is examined for overall suitability to ensure a class possessing a variety of backgrounds, interests and life experiences that contribute to a stimulating learning environment.

INTERVIEW

Qualified applicants may be invited to an on-campus interview.

APPROXIMATE TUITION AND FEES

| Texas Resident Tuition & Fees | \$15,000 | | |
|-------------------------------|----------|--|--|
| Nonresident Tuition & Fees | \$28,000 | | |

The Board of Regents adjusts tuition and fees annually.



Images By Robert Canfield Photography

CONTACT INFORMATION



TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER.

Paul L. Foster School of Medicine

Office of Admissions

Medical Education Building Suite 3314

5001 El Paso Drive

El Paso TX 79905

Phone: 915.783.1250

Fax: 915.783.1265

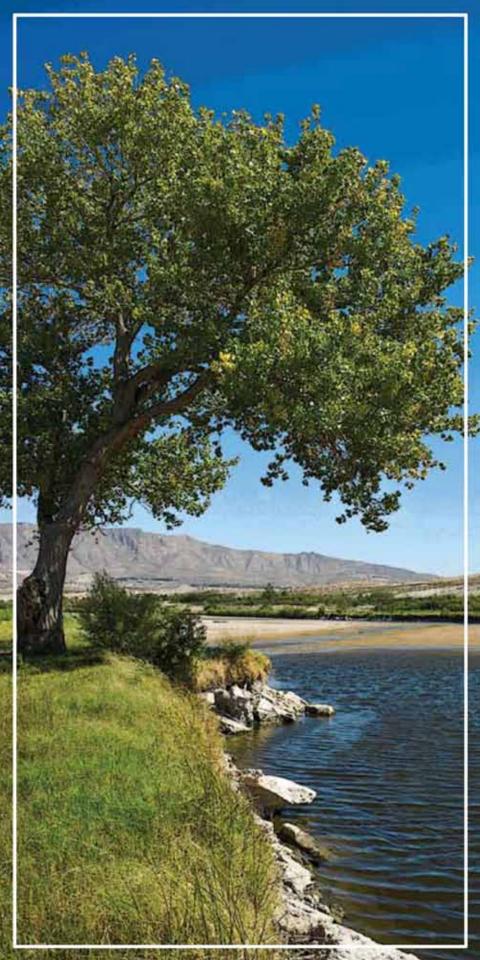
Email: FosterSOM.Admissions@ttuhsc.edu

For more information about the Paul L. Foster School of Medicine Please visit our website:

http://www.ttuhsc.edu/fostersom/admissions/



Images By Robert Canfield Photography



http://www.ttuhsc.edu/fostersom/admissions

If you've ever considered
a career in medicine but
thought medical school
Was beyond your reach.

was beyonto your read... consider this: Singe 2003

the Joint Admission
Medical Program (JAMP)

has been heloing Texas

students adhleve their

Olfeanns, Wilth guaranteeol

admission to one of

the state's nine meoloal

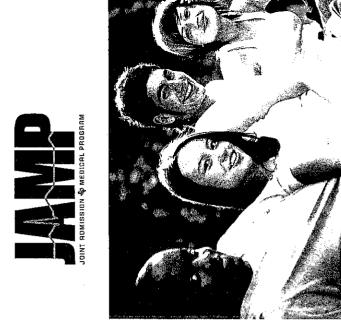
Schools and financial and

academic subsolutio

ensuire tiney excel



702 Colorado, Suite 6.400



Making the path to medical school a reality for Texans.

What is JAMP?



economically disadvantaged egislature to support and encourage highly qualified, was created by the Texas Medical Program (JAMP) The Joint Admission

pursuing a medical education. The goal of JAMP is to help Texas students become tomorrow's medical professionals by providing:

Texas resident students

- Financial Support through undergraduate and medical school scholarships
- Mentoring and personal assistance to prepare students for medical school while attending college
- Hands-on experience at medical schools through summer internships
- school if all program requirements are met. Guaranteed admission to a Texas medical

Which School Can I Attend?

schools and sixty-five public and private four-year undergraduate institutions. For a complete list of JAMP partners with all nine Texas medical participating undergraduate schools, visit www.texasjamp.org.

The participating medical schools include:

- Baylor College of Medicine
- The Texas A&M Health Science Center
- **Texas Tech University Health Sciences Center**
- Texas Tech University Health Sciences Center/ Paul L. Foster School of Medicine
- Center/Texas College of Osteopathic Medicine The University of North Texas Health Science
- The University of Texas Southwestern Medical Center at Dallas
- The University of Texas Medical Branch at Galveston
- The University of Texas Health Science Center at Houston
- The University of Texas Health Science Center at San Antonio

Questions?



how JAMP can help you visit www.texasjamp.org more information about We're here to help. For attend medical school, or contact us:

JOINT ADMISSION MEDICAL PROGRAM 702 Colorado, Suite 6.400

Austin, TX, 78701

iamp@utsystem.edu 512-499-4352

Fwitter: @TexasJAMP Facebook: Texas JAMP

money for my undergraduate education me a spot in medical school, but also The JAMP program not only offered

learn more about the field of medicines and summer internships where I could

-Audrey Sato, JAMP Medical School Graduate

Start Early! Becoming part of the JAMP program is easy.

AS A SENIOR IN HIGH SCHOOL

Apply to College. Apply to a Texas college or university to enroll for the first fall semester school program:

- Take the SAT or ACT. Applicants must earn a score hot less than the mean for the State of Texas.
- Apply for Financial Aid. Applicants must complete the FAFSA and have an Estimated Family Contribution. (EFC) of 8000 or less to be considered.

AS A FRESHMAN IN COLLEGE:

- Meet with the JAMP Faculty Director (JFD). Each nstitution's JFD will provide academic advising and assistance in applying to JAMP
- 400ly to 14MP. The application is available online starting in the spring semester.
- undergraduate credit during the freshman year with Complete at least 27 hours of undergraduate credi Applicants must complete at least 27 hours of a 3.25 GPA or higher and 3.25 GPA in science

HOW DO I GET STARTED?

Make the decision to study

medicine today. Get complete

details about JAMP by visiting www.texasjamp.org.



Office of Admissions

Pipeline Programs

Shadow-a-Physician is a program that provides opportunity for undergraduate pre-medical students to be mentored by a practicing physician. 15 to 20 students per semester are accepted from the University of Texas at El Paso (UTEP) to experience the profession of medicine from the perspective of a PLFSOM physician. Participants in this observer-ship program receive a one-on-one interaction with physicians in the clinical setting, and are able to see patients with the physician mentor. The program is reserved for UTEP undergraduate students; however, local pre-med students at other universities may apply on a space-available basis. This is an ongoing program throughout the year.

Summer Enrichment for Pre-med Students is a program in partnership between PLFSOM and UTEP held in June for four weeks. Students are provided academic enrichment preparation for their upper level coursework, an introduction to the Medical College Admissions test (MCAT) and critical thinking at UTEP. In addition, students spend mornings on the Texas Tech-University Medical Center (UMC) campus shadowing PLFSOM faculty physicians in a variety of clinical experiences and attend a daily one-hour lecture on topics related to applying to medical school, preparation for interview, library research and perspectives on clinical topics. Class size is 20-30 students. Students from regional universities are given priority; others may apply on a space-available basis. This year's program will be from June 1st through July 1st.

Summer Camp for High School Students is a program for rising high school students in any of the nine independent school districts in El Paso and the surrounding area. This camp is also open to the various private schools. Four camps are offered that last two-weeks each. Each camp can accommodate up to 30 students and takes place on the TTUHSC PLFSOM campus. The curriculum consists of SAT preparation, interactive presentations with health career professionals, field trips, mock crime scene investigation, financial aid information and a Reality Store exercise (simulation of life expenses). This year's dates are from May 31st through July 29th.

School Visits are done on invitation by the city's schools. Attendance at career fairs and presentations to particular classes are given such as science and anatomy classes and pre-med clubs. Tours are also given on a limited basis for schools that request them.

Rene Andre, MBA
School Liaison
Office for Promotion of Community Educational Achievement
Office of Admissions
Paul L. Foster School of Medicine
Texas Tech University Health Sciences Center
(915)783-5697
rene andre@ttuhsc.edu



Office for Promotion of Community Educational Achievement Office of Admissions Date: Starting 06/25/2012 Through 08/03/2012

Time: M-F, 8:00am-4:00pm Duration: two weeks (each of three camps)

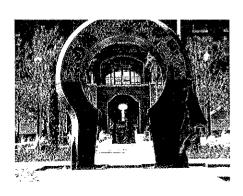
Summer High School Med Camp



Two weeks of interesting field trips to facilities such as the Children's Intensive Care Unit, Rehab Centers and our state of the art medical school Simulation Center. Guest Speakers from different medical areas. College preparation workshops.

Request an application from your counselor or call

Rene Andre:783-5697; e-mail: rene.andre@ttuhsc.edu



Highlights

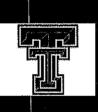
- ♦ Field Trips
- ♦ Guest Speakers
- ♦ Labs
- ♦ Résumé workshop

Application Deadline: May 30th

5001 El Paso Drive El Paso, Texas 79905

Phone: 783-5697 Fax: 783-1265

E-mail: rene.andre@ttvhsc.edu





Medical School Admission Requirements (MSAR®)

? Classes Begin July 9, 2013

Special Programs

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School Details - Back to search results

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Egyprite

Texas Tech University Health Sciences Center Paul L. Foster School of Medicine El Paso, Texas Public

| About | School Information | | | |
|--|---|-------------------------------|--------------------------------|--|
| Contact | Founded 2008 | First Year Matriculants | Total Enrollment 180 | |
| Education | | 81 | | |
| Student Life | Est, Num 80 | ber of New Entrants | Early Decision Program 0 | |
| Research | | | · | |
| Facilities | Links | | | |
| Financial | Medical School www.ttuhsc.edu/fostersom/ | | | |
| Combined Degrees and Special Programs | Admissions Office www.ttuhsc.edu/fostersom/admi | issions/ | | |
| Matriculant Demographics | Financial Ald Office | | | |
| Specialty Choice | www.ttuhsc.edu/financialaid/ | | | |
| Selection Factors | About this Medical School | | | |
| Application Deadlines and Requirements | General Information The Paul L. Foster School of Me Our unique setting provides exp | | | |
| Acceptance Information | issues. El Paso is a vibrant city | where the mild climate provid | les year round cultural, i | |

The Paul L. Foster School of Medicine, the first four-year medical school on the US/Mexico border, is located in El Paso, Taxas. Our unique setting provides exposure not only to traditional medicine, but elso to international, bi-cultural and border health care issues. El Paso is a vibrant city where the mild climate provides year round cultural, intellectual, social and recreational opportunities. Once on campus students enjoy our state-of-the-art educational, research, and clinical facilities. The new Medical Education Building is 125,000 square feet of auditoriums, classrooms, laboratories, group meeting rooms, a clinical skills/simulation center, fitness room, lounge areas and a library. The Medical Sciences Building houses leading research currently conducted in chronic kidney disease, breast carcinogenesis and infectious disease. Plans for research focus on health disparities and diseases that affect the region and are based in rapidly growing research Centers of Excellence in Infectious Diseases, Neurosciences, Obesity and Diabetes, and Cancer. The University Medical Center (UMC) of El Paso, our main teaching hospital, is located on campus and is the only Level 1 Trauma Center in the region. The UMC is currently undergoing significant growth as construction of a new children's hospital is underway with plans to open in 2012. In addition, students are also trained throughout the El Paso community at other clinical training facilities which include El Paso Psychiatric Center, William Beaumont Army Medical Center, Texas Tech University Health Sciences Center ambulatory clinics and off-campus community sites.

Mission Statement

The school's mission is to provide exceptional opportunities for students, trainees, and physicians; to advance knowledge through innovative scholarship and research in medicine with a focus on international health and health care disparities; and to provide exemplary patient care and service to the entire El Paso community and beyond.



Medical School Admission Requirements (MSAR®)

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School Details - Back to search results

Notes

Favorite

Texas Tech University Health Sciences Center Paul L. Foster School of Medicine El Paso, Texas Public

| About | Admissions Office Contact Information |
|--|---|
| Contact | Admissions Office Mailing Address |
| Education | 5001 El Paso Drive El Paso, Texas USA 79905 |
| Student Life | Phone 915 783 1250 |
| Research | Fax |
| Facilities | 915 783 1265 Admissions Office Email Address |
| Financial | http://fostersom.admisslons@ttuhsc.edu |
| Combined Degrees and Special Programs | Medical School Staff Dr. Jose Manuel de la Rosa, Dean Dr. Manuel Schydlower, Associate Dean for Admissions |
| Matriculant Demographics | E. Marcus Wilson, Director, Financial Aid Dr. German R. Nunez, Vice President for Diversity and Multicultural Affairs |
| Specialty Choice | John Snelling, Director of Admissions Lorraine James, M.B.A, Assistant Director of Admissions |
| Selection Factors | |
| | |
| Application Deadlines and Requirements Acceptance information | |



Medical School Admission Requirements (MSAR®)

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Favorite

Texas Tech University Health Sciences Center Paul L. Foster School of Medicine El Paso, Texas Public

| About | Curricular Highlights | |
|--|--|--|
| Contact | About the Curriculum | ine is committed to excellence in medical education founded on modern scientific principles, |
| Education | strong ethical values and sensitivity Liaison Committee on Medical Educ | to our community needs. Our integrated curriculum, which received a commendation from the cation for its clinical orientation, teaches the basic sciences with relevance to clinical |
| Student Life | physician. Students learn the anato | stem based units. Clinical presentations are the ways in which a patient presents to a my, biochemistry, physiology and other basic science concepts and content needed to ations. Guided instruction by discipline experts through lecture, small group and laboratory |
| Research | exercises is utilized to establish this | relevance. This approach has demonstrated enhanced knowledge comprehension, improved ment of diagnostic reasoning skills like those used by experienced physicians. The first two |
| Facilities | years of the curriculum consists of t Master's Colloquium, and Society, (| our major courses; Scientific Principles of Medicine (organ-system units), Medical Skills, Community and the Individual (SCI). The grading system is pass/fail. Preparation for the |
| Financial | Sciences Exam. In an effort to supp | aminations Includes cumulative unit exams and periodic use of the Comprehensive Basic ont our medical students along the way, each class is divided into learning communities called onitor student performance on a weekly basis. All students engage in a language immersion |
| Combined Degrees and Special Programs | course in conversational and medic exposed to patient care within a mo | all Spanish. Application of skills and knowledge learned is applied early, as students are in the skills and knowledge learned is applied early, as students are in the farriving on campus. The third and fourth year of the curriculum provide richly diverse in major specialties and subspecialties. |
| Matriculant Demographics | Commitment to primary care | |
| Specialty Choice | Students are provided the appropria | ate breadth and depth of exposure to the blomedical sciences, social/behavioral sciences, idal disciplines required for a general professional education and preparation for all career |
| Selection Factors | Academic System | Are video or online lectures offered? |
| Application Deadlines and | Semesters | On a case-by-case basis |
| Requirements | Is community service during med | fical school required? |
| Acceptance Information | Required. In Society, Community a | nd the Individual course. |
| | is research or a thesis during me | dical school required? |
| | Required. Completion of a research | project is required. |
| | | |
| | United States Medical Licensing E | camination (USMLE) Policies |
| | Policies | |
| | Step 1: Required, Students must re | |
| | | id. Students must record a passing total score to graduate equired. Students must record a passing total score to graduate |



Medical School Admission Requirements (MSAR®)

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School Details - Back to search results

Notes

Favorita

Texas Tech University Health Sciences Center Paul L. Foster School of Medicine El Paso, Texas Public

| About | Student Life | | | | |
|---|---|--|--|---|--|
| Contact | The Paul L. Foster School of Mo | societies, ativities, and athletics at this redicine is noted for the open friendliness of | its student body and faculty. | | |
| Education | of life for students and student f | and the college system makes for an enhanced ability to get acquainted with each other. The city of El Paso offers good quality of life for students and student families. The geographic location of the School of Medicine provides a wealth of recreational and cultural experiences both in the city and the surrounding area. Housing is easily available and relatively economical and the semi- | | | |
| Student Life | arid climate is an agreeable one | . Thus, the unstructured "quality of student at are designed to facilitate the ability to enjo | life" is generally a good one. | There are a number of | |
| Research | Availability of office hours an | d/or tutoring programs | | | |
| Facilities | | port & Enrichment provides services that ar any resources to students that will help ther | | | |
| Financial | Information about diversity p | rograms | | | |
| Combined Degrees and Special Programs | | and diverse student body that reflects the divantaged background are among the many | | | |
| Matriculant Demographics | Diversity Information | | | • | |
| | Contact | Phone | Email | URL | |
| Specialty Choice | Yoli Jauregul | 915 783 1250 | Email | | |
| Selection Factors | Leave of absence policy | | | | |
| Application Deadlines and Requirements | Student Affairs upon written rec the conditions for return and the | e for periods not to exceed one academic y quest by a medical student in good academic o student will indicate understanding by sign | standing. The Associate De ing and returning a copy of t | ean will specify in writing he written tetter. If the | |
| Acceptance Information | consideration and disposition. I elect of the Grading and Promo conditions for re-entry. Reason | , the request for leave of absence will be for ithe need for decision is urgent, the Associations Committee may make a joint decision, is for administrative leave may include, but a endeavor at another institution of higher edu- dical leaves of absence. | ate Dean for Student Affairs, They will determine and pre re not limited to: financial dis | the Chair, and the Chair- esent in writing the stress necessitating full- | |
| | Global health experiences ? | | | | |



Medical School Admission Requirements (MSAR®)

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| School Details · Back to search results | Notes Notes | Favorite |
|--|--|----------|
| Texas Tech University H El Paso, Texas Public | ealth Sciences Center Paul L. Foster School of Medicine | |
| About | Research | |
| Contact | Total direct federal research grants and contracts ? \$2,213,136 | |
| Education | Research opportunities available | |
| Student Life | Core laboratories in proteomics, genomics, histology, and cytometry support four research Centers of Excellence in Infectious Diseases, Neurosciences, Cancer, and Diabetes and Obesity. | |
| Research | | |
| Facilities | | |
| Financial | | |
| Combined Degrees and Special Programs | | |
| Matriculant Demographics | | |
| Specialty Choice | | |
| Selection Factors | | |
| Application Deadlines and Requirements | | |
| Acceptance Information | | |



Medical School Admission Requirements (MSAR®)

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Search

| chool Details · Back to search resu | Notes Notes | Favori |
|--|--|--------|
| exas Tech University I I Paso, Texas Public | Health Sciences Center Paul L. Foster School of Medicine | |
| About | Facilities | |
| Contact | Regional and satellite campuses | |
| Education | Regional campus locations ? | |
| Student Life | | |
| Research | Setting The medical school is located in South Central El Paso a few hundred yards north of the international border with Mexico. The University Medical Center, El Paso Children's Hospital, El Paso Psychiatric Center and Texas Tech Medical Center ambulatory | |
| Facilities | clinics are within a short walking distance. | |
| Financial | Housing No on campus housing. Ample affordable housing available within 20 mile radius. | ٠ |
| Combined Degrees and Special Programs | Special Features In addition to the latest in modern medical education and research facilities, the University Medical Center is the only Level I Trauma Center in the region. Construction of a new children's hospital is on schedule for opening in 2012. | |
| Matriculant Demographics | Affiliated Hospitals | |
| Specialty Choice | University Medical Center of El Paso, El Paso Psychiatric Center, William Beaumont Army Medical Center. | |
| Selection Factors | | |
| Application Deadlines and Requirements | | |
| Acceptance Information | | |



Medical School Admission Requirements (MSAR®)

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| chool Details · Back to search res | ults | | | Notes | Favorite |
|---|---|----------------------------|-------------------------------|---------------------------------|----------|
| exas Tech University I Paso, Texas Public | Health Sciences Center Pau | I L. Foster Scho | ol of Medicine | | |
| About | Financial | | | | |
| Contact | Financial Aid Information Once accepted, financial aid assistance | e can be obtained from the | o Office of Student Financial | Aid. Employment is discouraged. | |
| Education | Guaranteed Tuitlon? ? | | | | |
| Student Life | No | | | | |
| Research | Tultion Policy | | | | |
| Facilities | Cost of Attendance ? | | | | |
| Financial | Description | In-state : 0 | Out-of-state | | |
| Combined Degrees and | Total Cost of Attendance | \$41,574 | \$54,674 | | |
| Special Programs | Tultion and Fees | \$15,500 | \$28,600 | | |
| | Other (includes living expenses) | \$24,534 | \$24,534 | | |
| Matriculant Demographics | Health Insurance | \$1,540 | \$1,540 | | |
| Specialty Choice | Average graduate indebtedness: \$0 | | · | | |
| Selection Factors | Percent of enrolled students receiving a | aid; 95% | | | |
| Application Deadlines and Requirements | | | | | |
| Acceptance Information | - | | | | |



Medical School Admission Requirements (MSAR®)

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| chool Details · Back to search resul | ts | | | | Notes | Favorite |
|--|--------------------------------------|-----------------|------------------------------|---------------|-------------|----------|
| exas Tech University I I Paso, Texas Public | lealth Sciences | Center | Paul L. Foster Schoo | l of Medicine | | |
| About | Special Programs | | | | | |
| Contact | is a Postbaccalaur No | eate progra | m available? '?' | | | |
| Education | | school offe | r summer programs? | | | |
| Student Life | No | | | | | |
| Research | Additional progran | ns avaliable | at this medical school | | | |
| Facilities | Combined Degree 9 | Programs Of | fered at this Medical School | | | |
| Financial | Program | Offered? | Contact Name | Phone | . Email URL | |
| Combined Degrees and Special Programs | Baccalaureate/MD MD/MPH MD/MBA | No Yes No | Dr. Mary Ann Smith | 713 500 9236 | Email | |
| Matriculant Demographics | MD/JD | No | | | | |
| Specialty Choice | MD/PhD Additional Program | No No | | | | |
| Selection Factors | | | | | | |
| Application Deadlines and Requirements | | | | | | |
| Acceptance Information | | | | | | |



Medical School Admission Requirements (MSAR®)

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School Details - Back to search results

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Favorite

Texas Tech University Health Sciences Center Paul L. Foster School of Medicine El Paso. Texas Public

| About | Matriculant Demographics | | |
|--|-------------------------------------|---------------------|--|
| Contact | Number of men / women 44 / 37 | | Percent of science / math majors ? 38% |
| Education | Percentage of matriculants with a g | raduate degree | Percentage of medical students who attended thi institution as an undergraduate |
| Student Life Research | 64% | accalaureate degree | N/A |
| Facilities | M | ; Ť | |
| Financial | Race / Ethnicity | Number | |
| Combined Degrees and | Mexican American | 1 | |
| Special Programs | Cuban | 0 | |
| ······································ | . Puerto Rican | 0 | |
| Matriculant Demographics | Other Hispanic | 4 | |
| Secretary Obstacles | Total Hispanic | 5 | |
| Specialty Choice | Chinese | 5 | |
| Selection Factors | Asian Indian | 11 | |
| | Pakistani | 2 | |
| Application Deadlines and | Filipino | 3 | |
| Requirements | Japanese | 1 | |
| Acceptance Information | Korean | 5 | |
| | Vietnamese | 2 | |
| | Other Asian | 9 | |
| | Total Asian | 34 | |
| | Native American | 1 | |
| | Black | 1 | |
| | Native Hawaiian | 1 | |
| | White | 47 | |
| | Unduplicated Number of Matriculants | 81 | |



Medical School Admission Requirements (MSAR®)

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| chool Details · Back to search rest | ults | | Notes | Favorite |
|--|---|---|-------|----------|
| exas Tech University File Paso, Texas Public | Health Sciences Center P | aul L. Foster School of Medicine | | |
| About Contact Education Student Life Research Facilities | Specialties Chosen by Graduates of Specialty Anesthesiology Emergency Medicine Pamily Practice Internal Medicine Obstatrics/Gynecology Orthopaedic Surgery Pediatrics | of this Medical School ¹ ? Percent : | | |
| Financial Combined Degrees and Special Programs | Psychlatry Radiology Diagnostic Surgery General | | | |
| Matriculant Demographics Specialty Choice | | | | |
| Selection Factors | | | | |
| Application Deadlines and Requirements | | | | |
| Acceptance Information | | | | |



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| chool Details · Back to search resu | | | | | Notes | Favor |
|--|---|-----------------------|-------------------------|------------------|-------------------------------------|-------|
| exas Tech University I Paso, Texas Public | Health Sciences Center Pau | il L. Foster S | School of Med | lcine | | |
| About | Selection Factors ? | | | | | |
| Contact | Information about applicant selection | n | | | | |
| · | Candidates who are considered to be of interview. These criteria include scores | | | | | • |
| Education | of the undergraduate curriculum, extra | curricular activities | (medical and non-med | lical) and emplo | syment and their impact on | |
| Student Life | performance and maturation; recomme background; personal statement and it | | | | | |
| | and motivation for a career in medicine | ; and regional origi | in. The interview evalu | ates the applica | ant's interest and knowledge of the | |
| Research | health care field and motivation for a m | iedical career, pers | onal characteristics; a | nd problem sol | ving skills. | |
| Facilities | Is AP credit accepted? | | | | | |
| Financial | Is online coursework accepted in fu | Ifillment of prerea | uisites? | | | |
| | • | | | | | |
| Combined Degrees and | is community college coursework a | accepted in fulfiller | ant of organizations | • | | |
| Special Programs | · | ccepted in idillisis | ent of prefequates i | | | |
| Matriculant Demographics | What is the Interview formati Aug vo | alonal Interviews | Is a video inte | antau affaund | Coldolinus un | |
| | What is the interview format? Are re available? | igional interviews | No No | rview oliered | or available? | |
| Specialty Choice | Two individual 30 minute interviews. | | | | | |
| Selection Factors | Regional Interviews are not available. | | | | | |
| Application Deadlines and | GPA for Accepted Applicants ? | | | | • | |
| Requirements | A | | Science | | | |
| Acceptance Information | 10th Percentile; 3,49 | | 10th Percentile | : 3.36 | | |
| Acceptance information | | | Median: 3.67 | | | |
| | 90th Percentile; 3,94 | | 90th Percentile | ; 3,93 | | |
| | | | | | | |
| | Percentage of Accepted Applicants w | ith Relevant Medic | cal, Volunteer and / o | r Research Exp | erlence | |
| | Community Service / Volunteer - | | ervice / Volunteer - | Researc | h | |
| | not Medical / Clinical 78% | Medical / Clin 91% | ICAI | 72% | | |
| | 10% | | | | | |
| | Required / Recommended Premedica | l Coursework | | | | : |
| | Course | Required | Recommended | Laboratory | Semesters / Quarters / Hours | |
| | Inorganic Chemistry | V | | ~ | 8 hours | |
| | Behavioral Sciences | | Z | | | ٠. |
| | Biochemistry | | <u> </u> | | | |
| | Biology | V | | Z | 14 hours | |
| | Biology/Zoology | <u> </u> | | pean | | |
| | Calculus | | | | | ** |
| | College English | ~ | | | 6 hours | .: |
| | College Mathematics | | | | | |
| | Computer Science | | | | | |
| | Genetics | | | | | |
| | Humanities | | V | | | |
| | Organic Chemistry | ✓ | | Ÿ. | 8 hours | |
| | Physics | Z | | \checkmark | 8 hours | |
| | Psychology | | | | | |
| | Social Sciences | | V | | | |
| | Calculus or Statistics | ✓ | | | 3 hours | : |
| | Cellular/Molecular Biology | | \checkmark | | | |

| MCAT® Scores for Accepted Applicants ? | | |
|--|--------|-------------|
| Category | School | U.S. Median |
| Total Numeric Score 10th Percentile | 26 | 27 |
| Total Numeric Score Median | 30 | 32 |
| Total Numeric Score 90th Percentile | 33 | 37 |
| Writing sample 10th Percentile | М | |
| Writing sample Median | P | Q |
| Writing sample 90th Percentile | R | |
| Verbal Reasoning 10th Percentile | 8 | |
| Verbal Reasoning Median | 10 | 10 |
| Verbal Reasoning 90th Percentile | 11 | |
| Physical Sciences 10th Percentile | 8 | |
| Physical Sciences Median | 10 | 11 |
| Physical Sciences 90th Percentile | 12 | |
| Biological Sciences 10th Percentile | 9 | |
| Biological Sciences Median | 10 | 11 |
| Biological Sciences 90th Percentile | 12 | |



Medical School Admission Requirements (MSAR®)

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School Details - Back to search results

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Favorite

Texas Tech University Health Sciences Center Paul L. Foster School of Medicine El Paso, Texas Public

| About | Primary Application | | | |
|--|--|--|---|--|
| Contact | Primary application service ? TMDSAS | Primary application can be submitted May 1, 2012 | Primary application deadline October 1, 2012 | |
| Education | | | | |
| Student Lifé | Secondary Application | | | |
| Research | is a secondary application required? | Who is sent a secondary application? N/A | For more information, contact N/A N/A | |
| Facilities | Secondary application fee | ls a fee waiver available? | N/A | |
| Financial | Secondary application can be submitted | Secondary application deadline | Secondary application URL N/A | |
| Combined Degrees and Special Programs | N/A | N/A | | |
| Matriculant Demographics | Early Decision Program (EDP) | | | |
| Specialty Choice | Does this school have an EDP? | EDP is available for | Applicants will be notified N/A | |
| Selection Factors | | | | |
| Application Deadlines and | Application Policies | | | |
| Requirements | Participates in AMCAS Letters? No | Minimum Number of Letters Accepted | Maximum Number of Letters Accepte | |
| Acceptance Information | AMCAS Letters - additional text | Can applications from Out-of-State applicants be accepted? | Can applications from International applicants be accepted? | |
| | Criminal background check | Yes | No | |
| | Required | Latest MCAT® considered | Oldest MCAT® considered | |
| | MCAT® Required? Yes | September 1, 2012 | January 1, 2008 | |



Medical School Admission Requirements (MSAR®)

Edit Profile(s)

Search

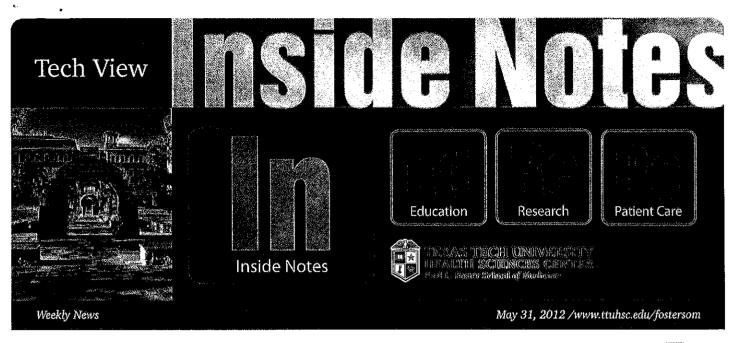
School Details · Back to search results

Notes

Favorite

Texas Tech University Health Sciences Center Paul L. Foster School of Medicine El Paso, Texas Public

| About | Acceptance Information | | | | |
|--|--|--|---|---|-------------|
| Contact | | | Acceptance Notice - latest date sent Until class is full | | |
| Education | | | | Are Requests for Deferred Entrance Considered? Yes | |
| Student Life | Two weeks | | | | |
| Research | | | | | |
| Facilities | Deposit Information ? Is a deposit required to hold the place in class? | Deposit (In-state) \$100 | | Deposit (Out-of-state) \$100 | |
| Financial | Yes | , | | • | |
| Combined Degrees and Special Programs | When is the Deposit Due? May 15, 2013 | Will the deposit be applied to the tuition? No | | is the deposit refundable? Yes | |
| Matriculant Demographics | What Date is the Deposit Refundable | | | | |
| Specialty Choice | May 15, 2013 | | | | |
| Selection Factors | Matulaulakian Data fay Fiyak Vong Class | ř | | | |
| Application Deadlines and | Category | In-state | Out-of-state | International | Total |
| Requirements | Verified Applications | 2,354 | 330 | 0 | 2684 |
| Acceptance Information | Interviewed | 565 | 24 | 0 | 589 |
| , 1000braneo macini | Deferred | 2 | 0 | 0 | 2 |
| | Early Assurance Program | 0 | 0 | 0 | 0 |
| | Early Decision Program | 0 | 0 | 0 | 0 |
| | 8accalaureate/MD | 0 | 0 | 0 | 0 |
| | MD/PhD | 0 | 0 | 0 | 0 |
| | Matriculated | 78 | 3 | 0 | 81 - |

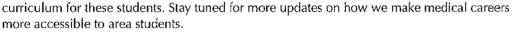






From the Desk of the Founding Dean

Summer Camps - Summer season is here. Like many other educational institutions, we will be hosting a series of summer camps and learning opportunities on the campus. We welcomed 39 Joint Admission Medical Program (JAMP) students to the campus. The JAMP program was established by the Texas Higher Education Coordinating board to assist disadvantaged students in accessing medical school careers. The students will be participating in a five-week summer experience. Dr. Manuel Schydlower and Dr. Tanis Hogg have put together a challenging



SWEC- We would like to welcome *Drs. Wilbur Strader* and *Robert Young* and their Southwest Endocrine Consultants group to the Texas Tech family. This represents a wonderful opportunity for our patient care program in diabetes and metabolic diseases. We look forward to learning from their private practice model.

Awards – Please join me in recognizing our employees at the annual TTUHSC Employee Service and Quality Service Awards which will be held Friday, June 1 at the Misenhimer Auditorium at 3 p.m. This year we will recognize 51 employees with five years of service, 25 with ten years of service, 23 employees with 15 years of service, 10 with 20, three with 25 years, four with 30 years and three employees, *Dr. David Briones*, *Dr. Garrett Levin*, and *Dr. William Scragg*, celebrate 35 years of service.

Endocrinology Group and Texas Tech Physicians Continue Caring for the Community

Texas Tech Purchases Group Practice

The endocrine specialists of Texas Tech Physicians of El Paso will join with Southwest Endocrine Consultants to bring almost 75 years of dedication to El Pasoans struggling with diabetes and other chronic endocrine disorders. Texas Tech Physicians will merge with Southwest Endocrine Consultants (SWEC)—a practice that has dedicated more than 35 years of caring for El Pasoans with metabolic problems, thyroid conditions, diabetes, growth concerns, hormone problems and more.

The merge is a perfect pairing according to Vice President for Health Affairs, Texas Tech University Health Sciences Center and Founding Dean of the Paul L. Foster School of Medicine *Jose Manuel de la Rosa, M.D.* Over thirty five years ago, *Wilbur Strader, M.D.*, began a solo endocrine practice after leaving the military as chief of endocrine and nuclear medicine at William Beaumont Army Medical Center. *Dwight Deter*, a physician assistant (PA) joined the

practice as one of the first certified PAs in 1976. *Robert L. Young, M.D.*, who had just retired as chief of endocrinology at Wilford Hall Air Force Hospital in San Antonio, joined the practice and Southwest Endocrine Consultants was formed.

"For almost 40 years, the physicians at Texas Tech University Health Sciences Center at El Paso, now Texas Tech Physicians, have cared for El Pasoans, and remains committed to continuing that care now with Southwest Endocrine Consultants," said Dr. de la Rosa.

Texas Tech University HSC has purchased the group practice. The physicians, physician assistants and staff of Southwest Endocrine Consultants are set to join Texas Tech El Paso as employees June 1, 2012. The location will still be at 1201 Schuster, Building 7. The only difference patients will notice to the location is the addition of the Texas Tech Physicians sign. Patients seen by the endocrinology group have been mailed notices of the change as required by the Texas Medical Board.

"Patients will continue to be provided with the best possible care. Caring for our patients is our love and what has kept us going all of these years. We believe that this partnership with Texas Tech will continue to help our community become healthier," said Dr. Strader.

New Texas Tech Graduate School of Biomedical Sciences Offers Master's of Science Degree

A new graduate program in biomedical sciences under Texas Tech University Health Sciences Center (TTUHSC) Graduate School of Biomedical Sciences (GSBS) in El Paso will offer students a master's of science degree.

Every student enrolled in the GSBS program will complete their coursework in El Paso. Biomedical research students will also have the benefit of studying alongside experts in four areas of significant need along the U.S./Mexico border. They are the Centers of Excellence in Infectious Disease, Diabetes and Obesity, Cancer, and Neurosciences. Typically, graduates with bachelor's degrees lack the advanced knowledge and technical expertise necessary for conducting laboratory research, so the primary goal of the biomedical sciences track is to provide students with the skills and technical knowledge required for success in a laboratory work environments.

According to the Medical Center of the Americas (MCA) Foundation, a nonprofit organization that works to advance the development of the MCA campus and advance the Paso del Norte region's biomedical innovation pipeline, careers in the biomedical industry in the broader El Paso metropolitan area can help accelerate and expand El Paso County's economy. It can also help generate jobs.

The two-year program will offer students core curriculum courses in biochemistry, cell biology, genes and functions, with seminars in biomedical sciences, biochemical methods, responsible conduct of research and introduction to biomedical research. For the first year, courses will not be offered in the summer.

"Here at the Texas Tech University Health Sciences Center, programs are dedicated to improving health through the discovery of basic mechanisms of disease, development of new treatments, and translation of research finding to innovative medical practice," said Charles Miller, Ph.D., associate dean for research, TTUHSC El Paso, and associate dean, TTUHSC Graduate School of Biomedical Sciences, El Paso.

"What we learn today in El Paso, will apply to the rest of Texas in a decade and to the rest of the nation over the next 20 years," he said.

For more information on Graduate School of Biomedical Sciences requirements and to apply, visit http://ttuhsc.edu/gsbs/elpaso/, or call (915) 783-5247.

Transplanted Aussie Surgeon Sight Set on Healthy Eyes

As the only full time oculoplastics and oribofacial surgeon in El Paso, *Benjamin Burt, M.D.*, enjoys the impact he's able to have on the El Paso community. "I came to El Paso because I thought I can make the most difference here, especially when it comes to children. It used to be that families would have to travel to San Antonio for these types of surgeries and now, we can take care of their children here," said the native Australian who regularly conducts eyelid, watery eye and eye socket surgery.





TTUHSC Paul L. Foster School of Medicine Employee Service and Quality Service Awards 3 p.m., Friday, June 1, Misenhimer Auditorium, AEC Everyone welcome to attend!

TTUHSC Hispanic Center of Excellence FREE Cultural Competence Seminar

June 8, 8 a.m. to 5:15 p.m. TTUHSC Paul L. Foster SOM Medical Education Bldg L. Frederick and Ginger Francis Aud. 1200 (915) 783-6204 It was a mixture of wanderlust and a familiar feeling of home that encouraged Dr. Burt, an assistant professor in the Department of Surgery, TTUHSC Paul L. Foster School of Medicine, to make El Paso his home, "I first came to El Paso when I was 19 on a whim. I wanted to visit Mexico, so I flew into El Paso, visited Juarez and drove into Chihuahua. There's something about this area that feels like home to me. The landscape is a lot like Australia, and the heat is familiar. I love the patients and family-oriented culture of El Paso," said Dr. Burt. His original plan was to return to Australia after completing his specialty training at University of California, Los Angeles, but then an advertisement about a job in the southwest put a kink in his plan.

"When I was in California, I saw a patient that had a major tumor that went from the eye socket to the brain and I couldn't believe that people would travel from Texas to California to have surgery. It made me think that moving to the southwest where I was needed was the right decision for me," he said.

Dr. Burt recently conducted the first ophthalmology surgery at El Paso Children's Hospital. His patient was a 15-month-old boy who underwent silicone sling rod insertion surgery for severe blepharoptosis, (drooping eyelid).

Dr. Burt's specialties don't stop at eye surgeries. He's currently enrolled in the accelerated MBA program at UTEP and is set to graduate in a month. He also spends about 40 percent of his work week as a researcher at the TTUHSC Department of Biomedical Sciences where he mainly serves as the clinical connection for ocular research projects. His next milestone? "I'm thinking about pursuing a master's in public health, perhaps as Texas Tech becomes a Health Sciences University, I'll be able to do that here," said Dr. Burt.

"You Make a Difference" Employee of the Quarter Award Announcement

The Employee Council will announce the quarterly (June - August) "You Make a Difference" Employee Award recipient on Monday, June 4 at 11 a.m. in the courtyard of the Medical Education Building and everyone is invited to attend.

This award was established to recognize employees who have demonstrated a specific action/behavior of excellent customer service. Each quarter presents challenges in the recipient selection for the council as many excellent nominations are submitted but only one can be chosen.

The recipient will receive:

- An engraved award
- A designated VIP employee parking space in the Medical Education Building parking lot (for the corresponding quarter)
- Name engraved on two campus plaques
- One work-day off (eight hours) without a deduction of vacation time
- Name and photo announcement in Tech View newsletter

Please take a few minutes to attend the award announcement to congratulate the June Quarterly Employee recipient. Refreshments will be served. The next quarterly award is for September, 2012. The deadline to submit nominations is July 31st.

For more information email: Elp.employeecouncil@ttuhsc.edu.



Hooding and Ceremony for Dr. Peter Uong

Former medical student and now doctor, *Peter Uong* poses with his family at Hendrik Hospital's chapel after his hooding ceremony. Peter lost his mother in a car accident when the family was on their way to his convocation and graduation ceremony May 18. Other family members were hospitalized. After graduation ceremonies in Lubbock, TTUHSC School of Medicine Dean *Steven Berk, M.D.*, drove to the hospital to present Peter his diploma. Peter's brother is a graduate of the Lubbock internal medicine residency and his sister-in-law is a TTUHSC SOM 2009 graduate. They hooded Peter from their wheelchairs as they planned to do during convocation. Another injured brother is a Texas Tech University graduate in architecture. "Peter is incredibly strong, resilient and has the spirit of a great physician," said Dr. Berk.



Medical Student Profile



Name: Nathan Speer Age: 32 Hometown: O'Fallon, IL

PLFSOM Class of 2015

What made you decide that medicine was the career for you?

When my wife told me that deployments to Iraq were too difficult for her, I was forced to leave the Army and reconsider my life. I felt medicine would be a satisfying career with which I could continue to serve my country and humanity.

Where do you see yourself five years after your residency training?

Hopefully, my family and I are still in El Paso after residency here.

What do you do in your downtime?

Study some more, play with my kids, or go running with my wife while pushing the kids in a running stroller.

What's your favorite thing to do in El Paso?

Not study. I have not had a chance to get out yet. I look forward to exploring the mountains and all the national parks & forests in the area.

If you could travel anywhere in the world, where would you go and why?

The mountains in Alaska during the summer and fall. I lived there for four years when I was a kid and there is just so much beautiful wilderness to explore there.

Something about you that not too many people may know:

Even though I was a very successful collegiate distance runner, my best sport is wrestling. I could not continue practicing wrestling in college because Title IX limited the male sports at all the universities I have attended.

Tech View

Tech View Inside Notes is published weekly by Communications & Marketing,
Texas Tech University Health Sciences Center Paul L. Foster School of Medicine.
Please submit news in writing to Communications & Marketing,
200 N. Concepcion, El Paso, Texas, 79905; fax (915) 783-5605 or email lisa.ruley@ttuhsc.edu.
Deadline is 10 a.m., Wednesday for the following week's newsletter. For information, call 783-5627.





SECTION 1 - Financial Assistance Obtained by Students for Academic Year 2010-201

Instructions:

Column A) Student counts are extracted from your school's 2010-2011 LCME Part II Annual Medical School Ques counts from the Part II questionnaire are collected in the middle of the academic year, there is a chance that the student data available. Please make any modifications necessary.

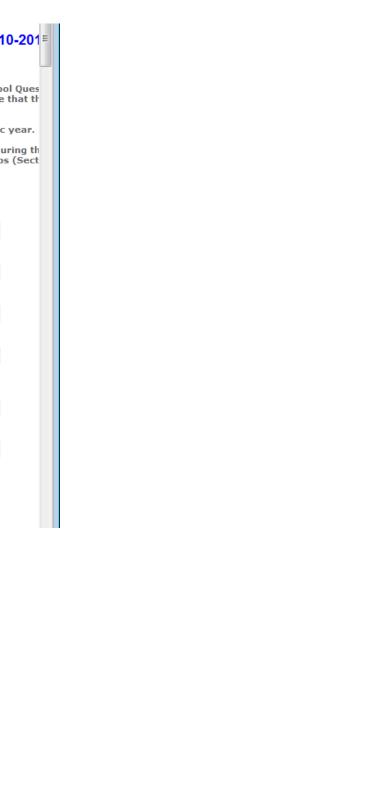
Column B) Indicate the number of students who received financial assistance in the 2010-2011 academic year.

Column C) Indicate the total dollar amount of aid that students who are reported in Column B received during th amount of aid reported below does not agree with the sum of the awards reported in Grants/Scholarships (Sect explanation must be given for the discrepancy in Section 5 of the questionnaire.

| A) Number of Students | B) Number of Students Receiving Aid | C) Total Dollar Amount of Aid |
|--------------------------------|--|--|
| 62 | 59 | 1928148 |
| enrolled in the MD program, in | cluding those repeating the fi | rst year.) |
| 37 | 35 | 1280741 |
| ts enrolled in the MD program | , including those repeating the | e second year.) |
| 0 | 0 | 0 |
| enrolled in the MD program, in | ncluding those repeating the t | hird year.) |
| 0 | 0 | 0 |
| | | |
| 0 | 0 | 0 |
| no graduated during the 2010- | -2011 academic year.) | |
| 99 | 94 | 3208889 |
| | enrolled in the MD program, in 37 ts enrolled in the MD program 0 enrolled in the MD program, in 0 the fourth year MD program duate during the 2010-2011 and 10 enrolled in the MD program of the fourth year MD program of the fourth year MD program of the during the 2010-2011 and 10 enrolled in the MD program of the fourth year MD progr | Receiving Aid 62 59 enrolled in the MD program, including those repeating the first senrolled in the MD program, including those repeating the to 0 0 enrolled in the MD program, including those repeating the to 0 enrolled in the MD program, including those repeating the to 0 the fourth year MD program or duate during the 2010-2011 academic year.) 0 0 0 0 0 0 0 0 0 0 0 0 0 |

If you have any difficulty with the survey, please contact Geoffrey Redden at qredden@aamc.orq.

SECTION 2 - Grants/Scholarships



Instructions:

Please report the number of students who received grants/scholarships, the number of grants/scholarships awarded, and the dollar amount of grants/scholarships awarded to all students in the 2010-2011 academic year in each category below.

I. Grants/scholarships without a service commitment

| | Total number of medical students receiving grants/scholarships ¹ | Total number of grants/scholarships ² | Total dollar amount of grants/scholarships ³ |
|--|---|---|---|
| A. Scholarships for Disadvantaged Students (SDS) | 0 | 0 | 0 |
| B. Other grants and scholarships (school-funded) $\frac{4}{}$ | | | |
| 1) Need-based | 62 | 124 | 84600 |
| 2) Non-need-based | | | |
| M.D Ph.D. support | 0 | 0 | 0 |
| Tuition remission for employees and/or staff | 0 | 0 | 0 |
| Other | 54 | 135 | 854830 |
| C. Other grants and scholarships, including stipends (outside-funded) $^{\underline{5}}$ | | | |
| 1) Need-based | 0 | 0 | 0 |
| 2) Non-need-based | | | |
| MSTP Funding | 0 | 0 | 0 |
| Other | 6 | 10 | 18950 |
| TOTAL Dollar Amount of Grants/Scholarships in Section 2. I | | | 958380 |

II. Grants/scholarships with a service commitment

In reporting grants/scholarships with a service commitment, please include the dollar amount of tuition and other reimbursable expenses (e.g., books, health insurance, and supplies). It is recognized that exact amounts for reimbursable expenses may not be known; in such cases, provide estimates. Do not include living expense stipends.

| National Health Service Corps | 0 | 0 | 0 |
|---|-------|---|---------|
| Armed Forces Health Professions | 4 | 8 | 57628 |
| State-funded | 0 | 0 | 0 |
| Other | 0 | 0 | 0 |
| TOTAL Dollar Amount of Grants/Scholarships in Section 2. II | 57628 | | |
| TOTAL Dollar Amount of Grants/Scholarships in Sections 2. I and 2. II | | | 1016008 |

SECTION 3 - Loans

Instructions:

Please report the number of loans and the dollar amount of loans awarded to all students in the 2010-2011 academic year in each category below.

| | Total Number of Medical Students Receiving Loans ¹ | Total number of loans ² | Total dollar amount of Ioans ³ |
|---|--|------------------------------------|--|
| Federal Unsubsidized Stafford Loan (school lender) | 0 | 0 | 0 |
| Federal Unsubsidized Stafford Loan (other lender) | 0 | 0 | 0 |
| Federal Subsidized Stafford Loan (school lender) | 0 | 0 | 0 |
| Federal Subsidized Stafford Loan (other lender) | 0 | 0 | 0 |
| Federal Direct Subsidized Student Loan | 76 | 153 | 603143 |
| Federal Direct Unsubsidized Student Loan | 66 | 155 | 1473776 |
| Grad PLUS Loan (direct) | 14 | 32 | 110962 |
| Grad PLUS Loan (FFELP) | 0 | 0 | 0 |
| Federal Perkins Loan | 1 | 2 | 5000 |
| Primary Care Loan (PCL) ³ | 0 | 0 | 0 |
| State-funded Loans | 0 | 0 | 0 |
| Private/Alternative Loan Programs <u>4</u> | 0 | 0 | 0 |
| Loan for Disadvantaged Students (LDS) | 0 | 0 | 0 |
| Total other loans (outside-funded) ⁵ | 0 | 0 | 0 |
| Total other loans (school-funded) ^{<u>6</u>} | 0 | 0 | 0 |
| TOTAL Dollar Amount of Loans in Section 3 | | | 2192881 |

^{1.} Please include the number of medical students who received each loan in the 2010-2011 academic year. Only count each student once per category, even if the student has received multiple loans.

^{2.} Please include the number of loans awarded to all students in each category in the 2010-2011 academic year. One student could have received multiple loans in each category.

SECTION 4 - Work-Study

Instructions:

Please report all college work-study payments in the "federally funded" category (include both federal and school contributions). Enter "NA" if the program is not offered.

| | Total number of students receiving payments | Total dollar amount of work-study payments |
|--|--|---|
| Federally funded | 0 | 0 |
| Non-federally (e.g., school-only) funded | 0 | 0 |
| Total Dollar Amount of Work-Study Payments | | 0 |

If you have any difficulty with the survey, please contact Geoffrey Redden at gredden@aamc.org.

SECTION 5 - Grand Total Dollar Amount of Grants, Scholarships, Loans and Work-Study

Instructions:

Sections 1 through 4 must be completed before Section 5 can be completed. The Grand Total of Sections 2, 3, and 4 is a sum of the grand total dollar amounts as reported in Grants/Scholarships (Section 2), Loans (Section 3), and Work-Study (Section 4). The Total from Section 1, Column C is the total dollar amount of aid as reported in Financial Assistance (Section 1). If the Grand Total of Sections 2, 3, and 4 does not equal the Total from Section 1, Column C, an explanation must be provided in the text box below.

| | lotal dollar amount of awards |
|-------------------------------------|-------------------------------|
| Grand Total of Sections 2, 3, and 4 | 3208889 |
| Total from Section 1, Column C | 3208889 |
| Difference | 0 |

The Grand Total of Sections 2, 3, and 4 MUST agree with total dollar amount of assistance reported in Total from Section 1, Column C. If the totals do not agree, please provide an explanation below:



If you have any difficulty with the survey, please contact Geoffrey Redden at gredden@aamc.org.

SECTION 6 - Educational Indebtedness

SECTION 6 - Educational Indebtedness

I. To the best of your knowledge, please report the total *pre-medical* educational indebtedness of all members of the 2010-2011 first year class prior to their medical school matriculation. National Student Loan Data Systems (NSLDS) data are acceptable. If you are unable to report the number of students with pre-medical educational debt or the amount of pre-medical educational debt, please enter "NI" in the appropriate box and provide an explanation in the text box below.

| Number of indebted students | N |
|------------------------------|----|
| | |
| Total amount of indebtedness | NI |

If you entered "NI" in the boxes above, please provide an explanation below:

| We | do | not | track | the | pre-med | debt. | ٨ |
|----|----|-----|-------|-----|---------|-------|---|
| | | | | | | | ÷ |

II. Please report the total cumulative medical school educational indebtedness (excluding debt associated with enrollment in joint, dual, or combined degree programs) per class of indebted students as of the end of the 2010-2011 academic year. If you are unable to report the number of students with medical school educational debt or the amount of medical school educational debt, please enter "NI" in the appropriate box and provide an explanation in the text box below. Please note that the values in the "Percentage Graduate With Medical School Debt" and the "Average Graduate Debt" boxes will be automatically calculated and displayed for your convenience. You will not need to make these calculations.

| | Number of students with medical school debt | Total medical school debt amount for all students |
|-----------------------------|--|---|
| First year | 50 | 1556576 |
| Second year | 31 | 1647452 |
| Third year | 0 | 0 |
| Fourth year 1 | 0 | 0 |
| 2011 Graduates ² | 0 | 0 |
| Total | 81 | 3204028 |
| | Percent of Graduates with Medical School Debt | Average Graduate Debt |
| | | |

If you entered "NI" in the boxes above, please provide an explanation below:



III. Please report the number of graduating students with total educational debt in each of the ranges below. Total educational debt includes pre-medical educational debt and educational debt incurred while in medical school. The total number of graduates will be automatically calculated and must equal the number reported in Section 1 of the survey.

Number of Graduates with

- **Hepatitis B:** Series of three (3) and serologic proof of immunity. The third dose must be received no later than December 1 of the entering semester. If a student does not develop immunity after the initial series a second series and re titer will be required as recommended by the CDC.
- H1N1 Flu vaccine &/or Seasonal Vaccine if H1N1 combined

Student immunization records are kept on file in TTUHSC Occupational Health. As immunizations are updated, students must provide written documentation to them.

Exposure Events:

Students who have an "exposure event" to human blood or body fluid will report the exposure to their supervisor and receive immediate screening and blood testing. The patient who is the source of the exposure will also be tested. Follow up blood tests are done to check for possible disease transmission. Medications may need to be taken in some cases. The students' health insurance will be billed. If the insurance does not cover these costs Student Affairs will be contacted. You will receive further orientation to the pertinent policy at orientation and periodically thereafter. The policy can be found at: http://www.ttuhsc.edu/fostersom/studentaffairs/documents/needle exposure safety.pdf

Medical Care

A limited number of health services are covered by Student Health fees and are available to students in the Department of Family and Community Medicine. Spouses or other dependents are not covered by student health fees. These covered services are discussed in detail in a separate brochure available on the Student Affairs website at: http://www.ttuhsc.edu/fostersom/studentaffairs/documents/health_services_brochure_final09_10.pdf

Personal / Psychological Counseling (Program of Assistance for Students)

As a member of the Texas Tech University Health Sciences Center community you are provided with FREE, CONFIDENTIAL COUNSELING through the Program of Assistance for Students (PAS). You may self-refer to this program by calling 1.800.327.0328 or 806.743.1327, Monday-Friday, 8:00 am - 5:00 pm. Ask to speak with the PAS Director, who will give you the list of community mental health providers in El Paso to access confidential counseling. The PAS numbers also serve as a crisis hotline. Your student services fee provides up to five free visits per academic year (Sept-Aug) and anyone in your household may use these visits. "If something is bothering you, whatever the issue, call PAS to see how we can help. PAS counselors are trained in addressing all types of problems: Family and Relationship Problems; Depression; Excessive Stress or Anxiety; Alcohol and Drug Abuse: Other Problems in Living"

A pamphlet explaining the program further is be available on the Student Affairs website at: http://www.ttuhsc.edu/fostersom/studentaffairs/documents/pas_medical_school_brochure_jun09.pdf

Also, the list of El Paso providers is maintained on the Student Affairs website: http://www.ttuhsc.edu/fostersom/studentaffairs/secure/Student.Assistance.Providers2010 2011.p

CARING CONFIDENTIAL PROFESSIONAL

IS PAS EASY TO USE?

Yes! To make an appointment with a PAS counselor in Lubbock, simply call the PAS number (806-743-1327) and identify yourself as a TTUHSC Medical Student or family member. A receptionist will schedule your appointment.

Daytime and evening appointments are available Monday through Friday (except holidays).

For more information about the services available for medical students, or if you have significant concerns regarding confidentiality, call the number above and ask to speak to the PAS Director. (If needed, the PAS counselor will arrange for you to bypass the Psychiatry waiting room when you come for your appointment.)

Students in Amarillo or El Paso should call one of the following numbers to receive counseling services:

Amarillo students should contact: The Counseling Center (806) 356-0404

El Paso students should contact: 1-800-327-0328 for a list of counselors or refer to the provider list included in your orientation packet compiled by the Office of Student Affairs.

WHERE ARE THE PAS OFFICES?

In Lubbock, PAS offices are located in the Department of Psychiatry at the Texas Tech University Health Sciences Center, 3601 4th Street, East Wing room 1A122. Daytime parking is available in any visitor's lot. Please call our office for directions or visit our website at www.eap.ttuhsc.edu for directions.

Students in Amarillo and El Paso will need to ask for directions to the office of the PAS counselor when scheduling an appointment.



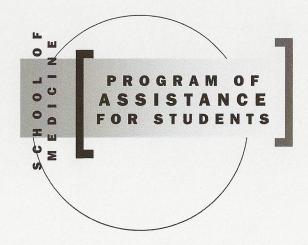
24-Hour Crisis Line

The PAS numbers also serve as a 24-hour crisis line that is available when PAS offices are closed. In the event of an emergency, the answering service will connect you with a counselor.

PROGRAM OF ASSISTANCE FOR STUDENTS

Texas Tech University Health Sciences Center Department of Psychiatry 3601 4th Street Room 1A122 Lubbock, Texas 79430-8103 806-743-1327 / 1-800-327-0328

WWW.EAP.TTUHSC.EDU



Texas Tech University Health Sciences
Center provides the Program of Assistance
for Students (PAS) as a resource to promote
health and wellness in your personal and
academic life. If something is bothering
you, whatever the issue, call PAS to see
how we can be helpful. PAS counselors are
trained in treating all types of problems,
including:

- Family and Relationship Problems
- Depression
- · Excessive Stress or Anxiety
- Alcohol and Drug Abuse
- Other Problems in Living

8 0 6 - 7 4 3 - 1 3 2 7

WHAT IS PAS AND WHAT BENEFITS ARE INCLUDED?

PAS is a program that enhances wellness by providing you and any dependents you have the opportunity to manage life's problems before they become serious and impair your academic and professional performance.

PAS benefits include:

- Individual, Couple, and Family Counseling or Consultation
- Financial Counseling (Lubbock only)
- Health & Wellness Information
- 24-Hour Crisis Hotline

Who Can Use PAS and How Much Does it Cost?

TTUHSC provides up to five (5) free counseling sessions per household per fiscal year (September 1 - August 31). Any medical student or dependent living in the student's household can receive assistance through PAS at no cost. Counseling services consist of assessment, brief therapy, and follow-up. If it is determined that a person needs extended treatment, long-term therapy, or other psychiatric or psychological services, a referral will be made to the appropriate professional. Fees for those services will be your responsibility; any insurance benefits will be considered when making the referral.

STRENGTH IS THE COURAGE TO ASK FOR HELP

WHO PROVIDES PAS SERVICES?

PAS Counseling and Assistance is provided by licensed mental health professionals. All PAS counselors have the knowledge and experience to help you with your concerns.

Financial Counseling Services (available in Lubbock only) are provided by advanced graduate-level students (Masters and Doctoral) in the Personal Financial Planning program at Texas Tech. Financial counselors have received extensive training and are well prepared to address your financial concerns.

WHAT HAPPENS IN A PAS COUNSELING SESSION?

In Lubbock, you will be asked to arrive about 15 minutes early to fill out paperwork that will help the counselor understand your problem. During the session the counselor will discuss your problem with you and create a plan to help you. PAS sessions are usually 50 minutes in length. (Note: If desired, the paperwork can also be obtained ahead of time; call or email Dr. Korinek, the PAS Director, if you want to exercise this option.)

For services in Amarillo and El Paso, please call for details.

IS USE OF PAS CONFIDENTIAL?

Absolutely! Your use of PAS is private and professional. You do not need to go through the School of Medicine to access PAS services. You may call PAS directly to ask a question or schedule an appointment with a PAS counselor.

Confidentiality is regulated by federal guidelines. Without your formal written permission, no information whatsoever is released to the School of Medicine concerning your use of PAS or the nature of your concerns. Therefore, if you seek assistance on your own, your use of PAS will not become a part of your academic record and it will not compromise your reputation or future opportunities.

Call *Today* 806-743-1327 1-800-327-0328

PROFESSIONALISM

| Demonstrates honesty in professional matters (Prof-6) Recognize when to take responsibility and when to seek assistance (PBL-4) Appropriately acknowledges mistakes Recognizes and avoids conflicts of interest(Prof -2) Displays compassion in interactions with patients regardless of age, race, gender, ethnicity, culture, sexual orientation, socioeconomic status and disability(Prof - 3) Preserves patient's dignity (Prof-8) Handles confidential information discretely (ICS-3) Behaves respectfully to others(ICS9) Unable to Assess Is nonjudgmental (ICS9) Ves No Unable to Assess | | | | |
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| Answers emails, pages, etc (ICS-3) Is on time Yes No Unable to Assess Ves No Unable to Assess | Is receptive to constructive criticism | Yes | No | Unable to Assess |
| Is on time Yes No Unable to Assess | Follows through with tasks (ICS-3) | Yes | No | Unable to Assess |
| | Answers emails, pages, etc (ICS-3) | Yes | No | Unable to Assess |
| Dress and grooming are appropriate for the setting Yes No Unable to Assess | Is on time | Yes | No | Unable to Assess |
| - 1222 and g. 1211111 g are appropriate to the detailing | Dress and grooming are appropriate for the setting | Yes | No | Unable to Assess |