

1998

## Bulletin of the University of Nebraska: Annual Catalog of the College of Medicine, 1998-1999

University of Nebraska Medical Center

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**College of Medicine**

**Bulletin**

**1998-99**



# University of Nebraska College of Medicine

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## A Welcome Message from the Dean

The mission of the University of Nebraska College of Medicine is to improve the health of Nebraskans through premier education programs, innovative research, the highest quality patient care and outreach to underserved populations. We strive to be a regional and national leader in the education of primary care health professionals, in the application of information technology to health care, and in research and clinical services related to cancer, transplantation, genetics, rural health and other major areas of health care need.

Health care in the U.S. is undergoing great change. There is little doubt that the future will bear little resemblance to the past. The future must comprise the underlying core values of excellence and innovation. Major forces that will promote excellence and innovation are the personal clinical relationship between the health professional and a patient, the direct relationship between medical research and medical progress and the education and dedication of the health professional.

Our goal is to prepare undergraduate, graduate and post graduate health profession students to be at the forefront of medicine whether they choose careers as medical practitioners, clinical or laboratory-based health sciences researchers, medical educators or public health servants. Moral integrity, high ethical values, compassion for the sick and poor, and a deep sense of commitment to lifelong dedicated service and self-directed learning are personal characteristics and humanistic qualities expected of health professionals. Intense professional and personal gratification is derived from helping to restore health to the mind and body of patients, or by pursuing scientific and teaching excellence, or through the social value of dedicated community service. The College of Medicine enjoys a distinguished record of excellence in medical education. Our innovative medical curriculum provides early exposure to patient care. The spectrum of these clinical experiences are carefully integrated into and correlated with basic medical sciences subject matter in the first two years. Traditionally, in the past, these two years of the curriculum have been dedicated almost exclusively to basic science courses. Unique components of the integrated clinical experience include clinical problem-based learning in small groups, the use of "standardized" patients as case examples, a longitudinal clinical experience assigned to a primary care physician and a block clinical rotation in rural Nebraska. The integration of subject matter continues in the last two years, but this time, basic sciences are woven into the clinical clerkships to reinforce their importance to the understanding of pathophysiology and therapeutics. A few selected students might choose a combined M.D./Ph.D. program that has a reputation of producing academic physicians and thus provides opportunities for research education. Beyond acquiring the knowledge, skills and experience, new roles and new behaviors will be required in a reformed health care system that emphasizes "customer" satisfaction, practice efficiency, cost management, preventive medicine, teamwork and spirit of collaboration of health professionals in the managed care setting. These are uniquely exciting and rewarding times to enter the field of medicine. The University of Nebraska College of Medicine is responsive to society's needs as an academic leader shaping the future of health care education, research and patient service through the accomplishment of its mission. We welcome qualified, talented and highly motivated applicants who view this challenge as their "calling" to serve

their fellow citizens.

Harold M. Maurer, M.D.

Dean, College of Medicine

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This page was last revised on July 23, 1998

Address all comments and suggestions to  
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Associate Dean for Curriculum  
College of Medicine

University of Nebraska Medical Center

981215 Nebraska Medical Center

Omaha NE 68198-1215

Phone: (402) 559-6069

Fax: (402) 559-6788

## University of Nebraska College of Medicine

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### Governance of the University of Nebraska

#### The Board of Regents

Donald S. Blank, D.D.S., McCook  
Charles Wilson, M.D., Lincoln  
Nancy O'Brien, Ph.D., Elkhorn  
Drew Miller, Omaha  
Robert M. Allen, Hastings  
Rosemary M. Skrupa, Omaha  
John W. Payne, Kearney  
James B. Milliken, Lincoln  
Chuck Hassebrook, Walt Hill  
Brian Reichmuth, UNK  
Curtis Ruwe, UNL  
Sarah Svoboda, UNMC  
Jason Winterboer, UNO

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#### University of Nebraska Central Administration

L. Dennis Smith, Ph.D., President  
Lee B. Jones, Ph.D., Executive Vice President and Provost  
James C. Van Horn, Ph.D., Vice President for Business and Finance  
Lee Rupp, Vice President and Director of Legislative Affairs

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#### University of Nebraska Medical Center Administration

William O. Berndt, M.D., Chancellor  
David Crouse, Ph.D. - Interim Vice Chancellor for Academic Affairs  
Donald Leuenberger, Vice Chancellor for Business and Finance  
David Crouse, Ph.D. - Associate Vice Chancellor for Academic Affairs  
Harold M. Maurer, M.D. Dean, College of Medicine  
Clarence T. Ueda, Ph.D., Dean, College of Pharmacy  
Ada Lindsey, Ph.D., Dean, College of Nursing  
William O. Berndt, Ph.D., Dean, Graduate Studies and Research  
Bruce A. Buehler, M.D., Director, Munroe-Meyer Institute for Rehabilitation and Medical Genetics  
Barry Gold, Ph.D., Interim Director, Eppley Institute  
Margaret Tempero, M.D., Interim Director, Eppley Institute  
TBA, Director, Center for Continuing Education  
Delmer D. Lee, B.S., Associate Vice Chancellor, Business and Finance

David S. Carver, Ph.D., Director of Student Counseling Services  
John McClain, Ph.D., Associate Vice Chancellor for Acad. Affairs/Chief Student Affairs Officer  
Robert D. Bartee, Executive Assistant to the Chancellor  
Reba A. Benschoter, Ph.D., Director, Biomedical Communications  
Nancy N. Woelfl, Ph.D., Director, Library of Medicine  
Judy Walker, B.A., Director, Office of Financial Aid  
David Jones, Executive Director, Human Resources

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### COM Administration

Harold M. Maurer M.D., Dean, College of Medicine  
Irene Klintberg, Ph.D., Associate Dean for Administration  
James Linder, M.D., Associate Dean for Academic and Faculty Affairs  
John J. Matoole, M.D., Associate Dean for Veterans' Affairs  
Timothy Galbraith, M.D., Associate Dean for Clinical Affairs  
Mary C. Haven, M.S., Associate Dean for School of Allied Health Professions  
Robert S. Wigton, M.D., Associate Dean for Graduate Medical Education  
C. Kirk Phares, Ph.D., Associate Dean for Research and Development  
Ward Chambers, M.D., Associate Dean for Outreach and Planning  
Jeffrey W. Hill, M.D., Associate Dean for Admissions and Students and Multicultural Affairs  
Gerald F. Moore, M.D., Associate Dean for Curriculum  
Jeffrey L. Susman, M.D., Associate Dean for Primary Care  
John R. Windle, M.D., Associate Dean for Continuing Medical Education  
Louis W. Burgher, M.D., Ph.D., Associate Dean for the Health System  
Stephen B. Smith, M.D., Assistant Dean for Ambulatory Services

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### Department Chairpersons

Anesthesiology - John H. Tinker, M.D.  
Biochemistry and Molecular Biology - Judith K. Christman, Ph.D.  
Cell Biology & Anatomy - Thomas H. Rosenquist, Ph.D.  
Family Medicine - Michael A. Sitorius, M.D.  
Internal Medicine - James O. Armitage, M.D.  
Obstetrics and Gynecology - John T. Repke, M.D.  
Ophthalmology - Michael E. Yablonski, M.D., Ph.D.  
Orthopedic Surgery and Rehabilitation - James R. Neff, M.D.  
Otolaryngology, Head and Neck Surgery - Anthony J. Yonkers, M.D.  
Pathology and Microbiology - Samuel M. Cohen, M.D., Ph.D.  
Pediatrics - Bruce A. Buehler, M.D.  
Pharmacology - David B. Bylund, Ph.D.  
Physiology and Biophysics - Irving H. Zucker, Ph.D.  
Preventive and Societal Medicine - James R. Anderson, Ph.D.  
Psychiatry - David G. Folks, M.D.  
Radiology - David D. Stark, M.D.  
Radiation Oncology - Charles A. Enke, M.D.

# University of Nebraska College of Medicine

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## The University of Nebraska

The University of Nebraska Medical Center is one of four campuses of the University of Nebraska: the University of Nebraska Medical Center (UNMC), the University of Nebraska-Lincoln (UNL), and the University of Nebraska at Omaha (UNO) and the University of Nebraska at Kearney (UNK). An eleven-member Board of Regents insures that the University meets its goals of quality instruction, research, and public service for the citizens of the state.

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## The University of Nebraska Medical Center

### Mission Statement

- *The mission of the University of Nebraska Medical Center is to improve the health of Nebraska through premier educational programs, innovative research, the highest quality patient care, and outreach to underserved populations*

This modern medical center is a major health resource for the State of Nebraska and surrounding areas. Several integrated units fulfill the mission of the University of Nebraska Medical Center: The College of Medicine, the College of Nursing, College of Pharmacy, College of Dentistry, Office of Graduate Studies and Research, the Meyer Rehabilitation Institute, the Eppley Institute for Research in Cancer and Allied Diseases, University Hospital, and University Medical Associates. The School of Allied Health Professions is part of the College of Medicine.

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## College of Medicine

**History** The Legislative Act of February 15, 1869 that created the University of Nebraska provided for a college of medicine. The University of Nebraska College of Medicine was established at Lincoln in 1883, but closed when the legislature withdrew support in 1887. The Omaha Medical College, started in 1881, was the forerunner of the present College of Medicine. It became a part of the University of Nebraska in 1902. From 1902 to 1913, the first two years of the four-year medical course were held in Lincoln and the last two years in Omaha. Since 1913, all four years have been taught in Omaha. The College has had a distinguished record of excellence in medical education and its graduates have excelled in all areas of medical practice, research and teaching.

**Standing** The College of Medicine meets all requirements of the most exacting state examining and licensing boards. It is fully accredited by the Liaison Committee on Medical Education. The University of Nebraska Medical Center is fully accredited by the North Central Association. The College has developed new programs to improve health services for the citizens of the State. The Geriatric Program meets needs of elderly patients and provides training for students. The Swanson Foundation Center for Human Nutrition promotes nutrition teaching and conducts research in nutrition and related fields. The Medical



Center's eating disorders program provides comprehensive medical and mental care. The liver and bone marrow transplant programs have become national leaders in patient care and research and draw patients from all over the world. The Sky-Med helicopter transport service speeds transfer of acutely ill patients from distances up to 200 miles from Omaha to the teaching services of the University Hospital. Clinical faculty members make consulting visits to smaller communities in Nebraska and residents and students do part of their training in these communities in order to gain experience in the community practice of medicine in addition to their training in the large medical center.

**Educational Goals** The goals of the College of Medicine are to provide the best possible training both in the science and art of medicine for students with the dedication and ability to become working practitioners of the healing arts. Education at the College of Medicine sets high standards for its students who, as a result, are recognized throughout the country as highly skilled practitioners with superior clinical ability. Over 85% of the graduates of the College of Medicine obtain one of their top three choices of residency programs nationwide.

**Educational programs** The College of Medicine offers several major educational programs: a course of medical studies leading to the degree of Doctor of Medicine; residencies and fellowships in the clinical specialties (Graduate Medical Education); and educational opportunities for physicians in practice (Continuing Medical Education), and training in allied health professions.

**Undergraduate Medical Education** The College of Medicine offers a fully accredited program leading to the degree of Doctor of Medicine. The College also offers the degree of bachelor of science in medicine to medical students who have completed one or two years of medical school and transfer credits from their undergraduate institution.

**Graduate Medical Education** Medical education is a continuing process that begins in medical school and continues through the professional life of the physician. Medicine offers many exciting career choices. Graduating seniors from UNMC participate in the National Resident Matching Program to obtain first year residency positions. They have been highly successful in obtaining the residency programs throughout the United States, with the majority choosing primary care training in Nebraska.

The College of Medicine offers residency programs in Anesthesiology, Child Psychiatry, Family Medicine, Internal Medicine, Neurology, Neurosurgery, Obstetrics and Gynecology, Ophthalmology, Oral Surgery, Orthopaedic Surgery, Otolaryngology, Pathology, Pediatrics, Primary Care, Psychiatry, Radiology, Surgery, and Urology. These programs are integrated with affiliated community hospitals to provide a broad experience in graduate medical education.

**Continuing Medical Education** The College provides continuing education for practicing physicians, nurses, and those in the allied health professions. The Medical Center offers over 125 on-campus courses each year. Medical students are welcome to attend most scheduled programs. The Medical Center also brings continuing medical education to physicians and other health workers in their own hospitals through off-campus courses, and two-way television and telephone conferences involving the College of Medicine faculty and hospitals throughout greater Nebraska.

**School of Allied Health Professions** The School of Allied Health Professions within the College of Medicine offers the following baccalaureate, masters, and post-baccalaureate certificate and certificate programs:

Clinical Perfusion Science Post-baccalaureate certificate

Cytotechnology Post-baccalaureate certificate  
Diagnostic Medical Sonography Bachelor of Science  
Medical Nutrition Education Post-baccalaureate certificate  
Medical Technology Bachelor of Science  
Nuclear Medicine Technology Bachelor of Science  
Physician Assistant Master of Physician Assistant Studies  
Physical Therapy Master of Physical Therapy  
Radiation Therapy Bachelor of Science  
Radiography Bachelor of Science

**Graduate College** The Graduate College of the University of Nebraska conducts programs on each of the four University of Nebraska campuses. Programs at the Medical Center campus leading to the M.S. and Ph.D. degrees are as follows:

Biochemistry and Molecular Biology M.S., Ph.D.  
Cell Biology and Anatomy M.S., Ph.D.  
Dentistry Interdepartmental Area M.S.  
Medical Sciences Interdepartmental Area M.S., Ph.D.  
Nursing M.S.N., Ph.D. Pathology and Microbiology M.S., Ph.D.  
Pharmaceutical Sciences M.S., Ph.D.  
Pharmacology M.S., Ph.D.  
Physiology M.S., Ph.D.

In addition, there are interdisciplinary Training Programs in Cancer Research, Environmental Toxicology and Carcinogenesis, and Pharmacological Sciences.

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## Curriculum

The four year course of studies leading to the degree of Doctor of Medicine is designed by the faculty to provide the best possible training for future practitioners. The curriculum ensures that students develop the understanding, clinical skills and knowledge needed for residency training and practice. The Nebraska graduate develops superior skills in problem solving and clinical reasoning, extensive knowledge of the biomedical and psychosocial sciences and learns skills needed for lifelong learning of medicine. Courses in the first two years introduce students to the basic sciences of medicine: anatomy, behavioral science, biochemistry, microbiology, pathology, pharmacology and physiology. Here students also begin to learn clinical skills and reasoning. In the third and fourth years students apply their knowledge on the hospital wards and clinical offices. Under faculty guidance students develop clinical diagnostic and management skills. They learn to select clinical tests and prescribe therapies. They learn to provide comprehensive care and learn the art of medicine. During the third year, students take clinical clerkships in Family Medicine, Internal Medicine, Obstetrics and Gynecology, Pediatrics, Psychiatry, and Surgery. In the fourth year, students select from a variety of clinical and basic science experiences. To qualify for graduation, students must show that they have acquired the knowledge, skills, and attitudes necessary for residency training. Students get early experience in medical problem solving through preceptorships and clinical case study in small groups. At the beginning of medical school, students work in small groups with a faculty member to solve clinical cases. This initial exercise helps develop the library and information retrieval skills they will need in their medical studies. Case study and small group teaching emphasizing problem-based learning are becoming more prominent features of all of the basic science courses. Since 1986, simulated

patients have been used to supplement the clinical experience of medical students. These trained patient simulators are used to teach and evaluate history taking and physical examination skills. All these changes are making medical education more relevant to patient care and medical practice. The Curriculum Committee, with student representation, is responsible for curricular change and evaluation. All courses must have written educational goals and objectives.

July 1996

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### **Learning Facilities:**

**Clinical Facilities** at the University of Nebraska Medical Center: University Hospital, University Medical Associates, and Meyer Rehabilitation Institute provide extensive in patient and outpatient services in which students participate as part of their clinical education. University Hospital is a 434 bed teaching hospital highlighting primary and tertiary care. UNMC is world-renowned in the treatment of lymphomas and leukemias, and has one of the two most active bone marrow transplant programs in the country. The U.S. News & World Report ranked UNMC as the country's 21st best cancer center in its guide to the nation's top 40 hospitals in 12 specialties. UNMC also has a strong reputation in solid organ transplantation and has the sixth busiest liver transplant program in the country. The Emergency Department is a regional trauma center and is an important part of the educational experience.

**University Medical Associates** operates over 60 primary care and subspecialty clinics at the main campus site and in sites throughout the greater Omaha metropolitan area. Clinics include Internal Medicine, Surgery, Pediatrics, Obstetrics and Gynecology, Ophthalmology, Otolaryngology, Orthopaedic Surgery and Rehabilitation, Neurology, Urology, Family Medicine, and Psychiatry plus University Medical Associates at Harvey Oaks, Mission Village, Benson Park, Eagle Run, and Summit Plaza.

The **Munroe-Meyer Institute for Rehabilitation and Human Genetics**, also located on the Medical Center campus on 44th Street, provides diagnosis and treatment for more than 6,000 children and adults with developmental disabilities each year. Numerous interdisciplinary specialty clinics and services are provided at UNMC, at UMA clinics across the state including Neurodevelopmental and Neurobehavioral clinics, Augmentative Communication Assessment, Gait Analysis, ADHD clinic, and Feeding and Swallowing clinic. MRI also houses the Hattie B. Munroe Center for Human Genetics which is the only comprehensive laboratory, research and clinical genetics program in the region, offering a complete range of services, including prenatal screening and diagnosis, and genetic counseling services.

**Affiliated Hospitals** To enhance its educational opportunities, the College has affiliations with community hospitals throughout the state. The Omaha Veterans Affairs Medical Center is fully integrated into the educational programs of the College of Medicine including two-way, closed-circuit television communication. Three private hospitals also are affiliated with the College of Medicine: Childrens Hospital, Immanuel Hospital, and Methodist Hospital.

**Library of Medicine** The Leon S. McGoogan Library of Medicine is one of the country's major health resource libraries. It occupies 64,800 square feet in Wittson Hall. Its central location reflects the concept of the library as a catalyst for all activities on the campus. The collection numbers over 200,000 volumes, with a current journal list of over 2,100 titles. The library's catalog of books, journal holdings, and a local network of Medline and other health related databases can be searched 24 hours a day from on campus and off, using a distributed campus computing network and by dialing in from homes and offices.

Multimedia materials for computer-assisted and self-instruction in curricular fields are collected and made available in the Sievers Facility for Interactive Instruction and its adjacent Learning Resources Center. Reference and educational services provide assistance and instruction with information needs, self-searching of numerous health related databases and in understanding the concepts and scope of medical information management. Document delivery and interlibrary borrowing are also available, as are special services such as dissertation binding and medical and consumer health information services for the state of Nebraska. The library is a management headquarters for a six-state region of the National Network of Libraries of Medicine in cooperation with the National Library of Medicine. This offers unlimited opportunity for the pursuit of research and study through the resources of the national network. User fees are charged for some of the services provided by McGoogan and the NN/LM.

**Laboratory Facilities** The gross anatomy laboratory is located on the second level of Wittson Hall. Nearby is a modern audiovisual room with a wide variety of auto-instructional materials. A multi-disciplinary laboratory located on the third floor of Wittson Hall is used for laboratory experience in histology, neuroanatomy, microbiology and pathology courses.

July 1996

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This page was last revised on July 22, 1998

Address all comments and suggestions to  
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Associate Dean for Curriculum  
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Phone: (402) 559-6069  
Fax: (402) 559-6788

# University of Nebraska College of Medicine

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## Admissions - Information

Jeffrey W. Hill, M.D.

Associate Dean of Admissions, and Student and Multicultural Affairs

Ms. Cheryl E. Scruggs, M.P.A.

Administrative Coordinator, Office of Academic and Student Affairs

402-559-6140/fax: 402-559-4148

email: [cscruggs@unmc.edu](mailto:cscruggs@unmc.edu)

Ms. Julie Meyers

Staff Assistant, Office of Academic and Student Affairs

402-559-2259/fax: 402-559-4148

email: [jmeyers@unmc.edu](mailto:jmeyers@unmc.edu)

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## General Information

- Filing of AMCAS application  
Earliest date: June 1  
Deadline: November 1
- Interview with Admissions Committee  
Earliest date: November 1  
Latest date: Mid-February
- Early Decision Program (EDP)  
Applications accepted: June 1- August 1  
Interview: August 1 - September 5  
Acceptance notice: October 1
- School application fee to all applicants: \$25
- Oldest MCAT scores considered: 1997 (series 13 & 14)
- Acceptance notice to regular applicants  
Earliest date: December 1  
Latest date: March 15
- Applicant's response to acceptance offer:  
Maximum time: 2 weeks
- Requests for deferred entrance considered: NO
- Deposit to hold place in class (applied to tuition): \$100, due within 30 days of acceptance offer
- Deposit refundable prior to: May 15
- Estimated number of new entrants: 123
- Classes start: August
- **Application Procedure** The University of Nebraska College of Medicine and most other medical schools participate in the American Medical College Application Service (AMCAS). This service assists students wishing to apply for possible admission to the first year of medical school. AMCAS

does not render any admissions decisions or advise applicants where to submit applications or provide any other admissions advice. Each participating school is completely autonomous in reaching its own decisions. Direct application to an AMCAS school is not possible. Application packet request cards may be obtained from and returned to:

American Medical College Application Service  
Association of American Medical Colleges  
Section for Student Services  
2501 M Street, NW, Lbby-26  
Washington, D.C. 20037-1131  
E-mail: [AMCAS@aamc.org](mailto:AMCAS@aamc.org)

**Electronic Application** - Applicants can complete their AMCAS application using a personal computer and software developed by the AAMC. To obtain a copy of AMCAS-E, visit the AAMC's World Wide Web home-page at <http://www.aamc.org>, or contact the School Relations Unit at (202)828-0635. Applicants wishing to obtain the AMCAS-E software may either download it from the AAMC Web Site, or order the package by contacting the Applicant Relations Unit (202) 828-0600, or E-mail to [AMCAS@aamc.org](mailto:AMCAS@aamc.org).

An application should be submitted to AMCAS after June 1. Prior to submitting an AMCAS application, you must request that a complete set of official transcripts be forwarded directly to AMCAS by the registrar of each U.S. and Canadian college and/or university you have attended. AMCAS will not process an application until they have received both the application and all required official transcripts.

**Requirements for Entrance** The MCAT and a minimum of 90 semester hours (three years of college work) from an accredited liberal arts and science college are required. To provide an opportunity for in-depth study, the completion of a college major or baccalaureate degree is strongly recommended. The undergraduate program must include the following course work with appropriate laboratory experiences:

- **Biology (with lab) 8-10 semester hours**
  - Two semesters of general biology or zoology meet this requirement.
- **General Chemistry (with lab) 8-10 semester hours**
  - Two semesters of general or inorganic chemistry will meet this requirement.
- **Organic Chemistry (with lab) 8-10 semester hours**
  - Two semesters of organic chemistry will meet this requirement.
- **Physics (with lab) 8-10 semester hours**
  - This requirement should include a two semester complete course in physics.
- **Humanities and/or Social Sciences 12-16 semester hours**
  - Courses in the following may be used to fill this requirement: art, dramatic arts/theater, literature, english, music, foreign language, sociology, anthropology, psychology, child development, journalism, economics, geography, geology, speech, communications, history, government, political science, philosophy, religion, women's studies, and any ethnic studies courses.
- **Calculus or Statistics 3 semester hours**
  - A one semester course in introductory calculus OR statistics will meet this requirement.

- **English Composition minimum of 3 semester hours**

- Students are required to have at least one semester of English composition or a comparable writing course. Students may not substitute a placement examination in lieu of this requirement.

In view of the rapidly broadening scope of medicine, courses in genetics, molecular biology, biochemistry, immunology and microbiology, though not required, are helpful in preparing for the basic science curriculum of medical school. Interpersonal communications, ethics, and personnel management are also good preparatory courses.

**Pass-Fail Courses** The Admissions Committee WILL NOT accept pass-fail grades toward the required courses (listed above). In a situation where an applicant does not have the option of grades and only pass-fail courses are available, special consideration will be given if the applicant can produce a written evaluation of each course taken on a pass-fail basis.

**CLEP and Advanced Placement (AP)** The Admissions Committee will accept advanced placement credit and CLEP Subject Examination credit toward the College of Medicine's specific group requirements if:

1. the reported scores meet UNMC's requirements for transfer
2. the undergraduate college has awarded credit which appears on the transcript
3. the applicant completes the subsequent course in the related discipline at his/her undergraduate college.

**Processing of Applications by UNMC** In accordance with University policy, UNMC prohibits the denial of admission to applicants on the basis of race, color, sex, national origin, age, handicap, or religious or political beliefs.

Upon receipt of an AMCAS application, the information is reviewed by the College of Medicine. An applicant will be notified of any course deficiencies and also will also be requested to furnish the following materials to supplement the application:

1. Two letters of recommendation from faculty members are required; one in the pre-medical science area. An official report of a pre-medical or pre-health advisory committee will fulfill this requirement. The deadline to submit all letters of recommendation is January 1. For EDP applicants, the deadline to submit letters of recommendation is September 1.
2. One recent photograph (2" x 2")
3. Interview

**DO NOT SEND LETTERS OF RECOMMENDATION UNTIL THEY ARE REQUESTED.**

**Selection Factors** Selection is based on a total assessment of each candidate's motivation, interests, character, demonstrated intellectual ability, previous academic record and its trends, personal interview, scores on the MCAT, and general fitness and promise for a career in medicine. Admission is based on individual qualifications without regard to age, sex, sexual preference, race, national origin, handicap, or religious or political beliefs. Academic credentials are evaluated on the basis of course level and load, involvement in co-curricular activities or employment, and other influential factors. Cutoff levels for GPAs or for scores on the MCAT are not utilized; however, applicants are reminded of the competition for entrance and are advised to be realistic. Personal attributes are assessed through letters of reference and in the interview.

Strong preference is given to Nebraska residents, but a limited number of applicants from other states may be accepted. The University of Nebraska encourages, in particular, applicants from rural areas, small towns, or disadvantaged backgrounds to apply. The potential for service to underserved communities is taken into consideration during the preadmission evaluation.

**Interview** An official interview with a member of the Admissions Committee of the College of Medicine is required for all Nebraska residents. Selected non-residents are interviewed by invitation only. Detailed information regarding interviews will be sent to an applicant when the AMCAS application is received. Interviews are necessary to complete your application file.

The primary objective of the interview is to focus on the applicant's personality, general functioning and capabilities; not upon intellectual achievements. Therefore, the applicant's academic credentials are not shared with the interviewer until the interview has been completed. Applicants can expect to be asked to respond to questions about the development of their thinking about a career in medicine, the positions of responsibility they have held, their leisure time pursuits or people who have been influential in their lives. Interviewers are especially interested in assessing candidates' abilities to develop rapport and to communicate ideas effectively. During the interview, applicants are given the opportunity to discuss or display those factors about which they feel particularly positive and also explain aspects of their application which may raise questions.

**Residency Status** For consideration of Nebraska residency, students who reside or whose parents reside in a state other than Nebraska or who have moved to Nebraska in the last three years, must apply for residency. Changes in residency status cannot be implemented during the time an application is being considered for admission. For full information, as well as application forms for residency, contact the following:

Office of Academic Records  
Mrs. Jo Wagner, Associate Director  
University of Nebraska Medical Center  
984230 Nebraska Medical Center  
Omaha, Nebraska 68198-4230  
(402) 559-6468

**Information for Re-Applicants** All re-applicants must reapply through AMCAS as outlined in the application procedure section. Re-applicants are strongly encouraged to identify, if possible, any factors which influenced the unfavorable decision and alter them before reapplying.

**Information for Multicultural Applicants** The University of Nebraska College of Medicine is committed to increasing the number of physicians from ethnic groups currently underrepresented in the medical profession. Applications are encouraged from resident and non-resident Black Americans, American Indians, Alaskan and Hawaiian natives, Mainland Puerto Ricans, and Mexican Americans. The accomplishments of applicants will be evaluated with due consideration for their background. The College makes every effort to retain multicultural students. For specific information, please contact:

Office of Multicultural Affairs  
University of Nebraska Medical Center



984275 Nebraska Medical Center  
Omaha, Nebraska 68198-4275  
(402) 559-4437

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This page was last revised on June 19, 1998

Address all comments and suggestions to  
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# University of Nebraska College of Medicine

## Academic Calendar 1998-1999

### Semesters

First Semester (M1-M2)	August 24, 1998 - December 18, 1998
First Semester (M3-M4)	July 6, 1998 - December 18, 1998
Second Semester (M1-M2)	January 4, 1999 - May 1, 1999
Second Semester (M3)	January 4, 1999 - June 27, 1999
Second Semester (M4)	January 4, 1999 - May 2, 1999

### Senior Elective Periods

July	July 6, 1998 - August 2, 1998
August	August 3, 1998 - August 30, 1998
September	August 31, 1998 - September 27, 1998
October	September 28, 1998 - October 25, 1998
November	October 26, 1998 - November 22, 1998
December	November 23, 1998 - December 18, 1998
January	January 4, 1999 - January 31, 1999
February	February 1, 1999 - February 28, 1999
March	March 1, 1999 - March 28, 1999
April	April 5, 1999 - May 2, 1999
Commencement	May 8, 1999 (Saturday)

### Recesses and Holidays

Independence Day	July 4, 1998 (Saturday)
Labor Day	September 7, 1998 (Monday)
Thanksgiving (CLINICAL)	November 26, 1998
Thanksgiving (PRE-CLINICAL)	November 26, 1998 - November 27, 1998
Winter Recess (CLINICAL)	December 19, 1998 - January 3, 1999
Winter Recess (PRE-CLINICAL)	December 19, 1998 - January 3, 1999
New Year's Day	January 1, 1999 (Friday)
Martin Luther King Day	January 18, 1999 (Monday)
Spring Recess (CLINICAL)	March 29, 1999 - April 4, 1999
Spring Recess (PRE-CLINICAL)	March 15, 1999 - March 21, 1999
Memorial Day	May 24, 1999 (Monday)
Summer Recess (CLINICAL)	June 28, 1999 - July 4, 1999

### Special Events

First Year Orientation	August 17-August 21, 1998
FIRST DAY OF CLASS (M1-M2)	August 24, 1998
Primary Care Day	TBA
Honors Convocation (M4)	May 7, 1999 (Friday)
Commencement (M4)	May 8, 1999 (Saturday)
CORE EXAMS (M1-M2)	TBA
M1 Comprehensive Examination	May 14, 1999 (tentative)
M1 Makeup Comprehensive Examination	August 3, 1999 (tentative)
USMLE Step 1	June 9-10, 1998 October 20-21, 1998
USMLE Step 2	March 3-4, 1999 August 25-26, 1999

**Class of 1999 - Junior Year Rotation Schedule**

<u>PERIOD NUMBER</u>	<u>DATES OF PERIOD</u>
INDEPENDENCE DAY *	July 4, 1998
PERIOD 01	July 6, 1998 - July 19, 1998
PERIOD 02	July 20, 1998 - August 2, 1998
PERIOD 03	August 3, 1998 - August 16, 1998
PERIOD 04	August 17, 1998 - August 30, 1998
PERIOD 05	August 31, 1998 - September 13, 1998
LABOR DAY *	September 1, 1998
PERIOD 06	September 14, 1998 - September 27, 1998
PERIOD 07	September 28, 1998 - October 11, 1998
PERIOD 08	October 12, 1998 - October 25, 1998
PERIOD 09	October 26, 1998 - November 8, 1998
PERIOD 10	November 9, 1998 - November 22, 1998
PERIOD 11	November 23, 1998 - December 6, 1998
THANKSGIVING *	November 26, 1998
PERIOD 12 - Service ends on Friday	December 7, 1998 - December 18, 1998
WINTER RECESS	December 19, 1998 - January 3, 1999
PERIOD 13	January 4, 1999 - January 17, 1999
MARTIN LUTHER KING DAY*	January 18, 1999
PERIOD 14	January 19, 1999 - January 31, 1999

PERIOD 15	February 1, 1999 - February 14, 1999
PERIOD 16	February 15, 1999 - February 28, 1999
PERIOD 17	March 1, 1999 - March 14, 1999
PERIOD 18	March 15, 1999 - March 28, 1999
SPRING RECESS	March 29, 1999 - April 4, 1999
PERIOD 19	April 5, 1999 - April 18, 1999
PERIOD 20	April 19, 1999 - May 2, 1999
PERIOD 21	May 3, 1999 - May 16, 1999
PERIOD 22	May 17, 1999 - May 30, 1999
MEMORIAL DAY *	May 24, 1999
PERIOD 23	May 31, 1999 - June 13, 1999
PERIOD 24	June 14, 1999 - June 27, 1999
SUMMER RECESS	June 28, 1999 - July 4, 1999

## \* LEGAL HOLIDAYS

May, 1998

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This page was last revised on May 06, 1998

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# University of Nebraska College of Medicine

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## Scholastic Evaluation Committee Guidelines

### Executive Summary - Class of 1999 & Beyond

Please see Scholastic Evaluation Committee Guidelines - Class of 1999 & Beyond for complete information.

*Role:* Evaluation of academic performance and progress

*Composition:* Combination of basic science & clinical faculty. Chair is Dr. Harold D. Schultz; Drs. Hill and Linder are ex-officio members

*Considerations:* Students are evaluated on fund of knowledge, ability to organize and logically present information, test-taking skills, understanding and judgment, clinical skills and professional behavior.

*Reporting Procedure:* Recommendations are forwarded to Dean for final decision.

*Grading System:* Honors (H); High Pass (HP), Pass (P), Marginal (M) and Fail (F) and Incomplete (I). Students must remove grades of Incomplete by the end of the subsequent term or grade automatically converts to Fail. Grades in repeated cores replace the previous grades. However, the original grades will remain in the student's transcripts.

*Review of Records:* All students receiving "Marginal" or "Fail" grades will have their academic performance reviewed by the Committee.

*Possible actions by the Committee are listed below:*

#### *Grades of Marginal:*

- A student who receives the grade of "Marginal" in one or two cores or clerkships, in view of their entire academic record, may be subject to remediation or termination.

#### *Grades of Fail:*

- A student who receives the grade of "Fail" in one or two cores or clerkships, in view of their entire academic record, will be subject to remediation or termination.

#### *"On Review"*

1. The Committee will utilize this designation for students whose performance is marginal during the course of an academic year.
2. Students will be required to discuss their difficulties with the Associate Dean for Admissions, and Student and Multicultural Affairs and may be required to enroll in the Academic Success Program.

3. Students may be removed from "On Review" with consistent improvement in performance or placed on Academic Probation if they remain marginal.

#### *Academic Probation*

1. Academic Probation may be imposed in any instance in which academic work or professional conduct has been or is unsatisfactory.
2. Performance of students on academic probation will be reviewed at the end of the academic year.
3. Student is prohibited from employment at UNMC while enrolled in classes and holding office.
4. Students will not be recommended for graduation while on academic probation.

#### *Comprehensive Examination:*

1. Examination given at the end of the first year of enrollment. Passage is a requirement for promotion to second year.
2. Grades are reported as "Pass" or "Fail."
3. Students who fail will be given the opportunity for a retest approximately one week prior to the start of the second year.
4. Failure to pass examination on the second attempt will either incur an obligation to repeat all cores taken in the academic year or lead to termination, at the discretion of the Committee.

#### *USMLE STEP 1 (M2)*

1. Requirement for progression into the senior year.
2. All students must take exam by end of second year (mid-June). If failure occurs, must re-take exam at the next administration (early fall).
3. First Failure: Automatic review with recommendation to SEC for removal from junior clerkships and/or required remediation in a board review course.
4. Second Failure: Student will be removed from clinical rotations. Repeat exam at next administration.
5. Failure of exam on 3 occasions will result in termination of enrollment.
6. Students enrolled in special programs (e.g. oral surgery or M.D./Ph.D.) must meet the requirements for the special program. These may be more exacting than the requirements for traditional medical students.

#### *Termination of Enrollment:*

1. Not attaining grades of "Pass" or better upon repetition.
2. Repeating a year secondary to failure of comprehensive, again failing comprehensive exam.
3. Marginal performance with 3 or more grades of "Marginal."
4. Two or more grades of "Fail."
5. Grade of "Fail" in one core accompanied by one or more grades of "Marginal" in others.
6. Three failures on USMLE Step 1.

September 3, 1997

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This page was last revised on September 04, 1997

# University of Nebraska College of Medicine

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## Scholastic Evaluation Committee Guidelines - Class of 1999 and Beyond

The Scholastic Evaluation Committee (SEC) is a standing committee of the University of Nebraska Medical Center, College of Medicine with the responsibility and prerogative for determining the fitness of a student to continue in the College. Any student who by quality of work, by conduct, or other reason indicates unfitness to enter the practice of medicine, may be dismissed from the College. The Guidelines which follow detail the working policies of the Scholastic Evaluation Committee. The criteria set forth in this document are guidelines for determining Scholastic Evaluation Committee recommendations; each student case requiring action by the Scholastic Evaluation Committee will be considered on its own merits.

### I. Charge, Structure and Action of Scholastic Evaluation Committee

**A. Role:** The primary responsibilities of the Scholastic Evaluation Committee are the evaluation of student academic performance and progress as well as the recommendation of scholastic criteria for consideration and incorporation into these guidelines. Secondary responsibilities include providing feedback on student performance to the Admissions and Curriculum Committees as well as reviewing and making recommendations concerning candidates for degrees and honors programs.

**B. Composition:** The Scholastic Evaluation Committee consists of representative faculty members involved in the cores or clerkships for which evaluation is required, house officers and students. The Associate Dean for Academic and Faculty Affairs, and the Assistant Dean for Student and Multicultural Affairs are non-voting members.

**C. Considerations:** While evaluating student performance and progress as reflected in the grade transcripts and Professionalism Checklist, the Scholastic Evaluation Committee takes into account such matters as fund of knowledge, ability to organize and logically present information, test-taking skills, understanding and judgment, clinical skills and professional behavior. Furthermore, when reviewing students in academic difficulty, the Scholastic Evaluation Committee may seek information about the student's personal and psychological adjustment as well as financial status.

**D. Reporting Procedure:** The Scholastic Evaluation Committee meets regularly to evaluate student progress. All recommendations (academic probation, termination, extended course of study, honors, etc.) of the Scholastic Evaluation Committee are forwarded to the Dean of the College of Medicine for action.

### II. Guidelines

#### A. Grades:

1. The grading system is as follows: Honors (H), High Pass (HP), Pass (P), Marginal (M), Fail (F) and Incomplete (I).

**Grade of "Marginal":** A grade of "Marginal" indicates borderline performance. A student who receives the grade of "Marginal" in one or two cores or clerkships in view of their entire academic record may be subject to remedial or termination action (see sections C and D below).

**Grade of "Fail":** A grade of "Fail" indicates unsatisfactory performance. A student who receives the grade of "Fail" in one or two cores or clerkships in view of their entire academic record will be subject to remedial or termination action (see sections C and D below).



**Grade of "Incomplete":** A core or clerkship which, for good reason, has not been completed at the end of a term, but in which progress has been satisfactory, may be reported as "I" (incomplete). A grade of incomplete can not be used as a method of remediation of marginal or failing performance in a core/clerkship. A core/clerkship issuing a grade of "I" will indicate by written record, with a copy to the student and to the Scholastic Evaluation Committee, how the "I" is to be removed. The core/clerkship must enact a plan that can be completed by the end of the term subsequent to which the "I" was received. A student must remove an "I" by the end of the term or the grade automatically will be converted to the grade of "Fail." A term is defined as an academic semester or summer session. The core/clerkship may petition the Scholastic Evaluation Committee to make individual exception to this rule.

2. **Repeated Cores/Clerkships:** Grades in repeated cores/clerkships replace the previous grades. However, the original grades will remain in the student's transcripts.

3. **"On Review":** The Scholastic Evaluation Committee will utilize the designation "On Review" to indicate a student whose performance is marginal during the course of the academic year. Students "On Review" will be advised of their status and will be required to discuss their difficulties with the Dean for Student and Multicultural Affairs and may be required to enroll in the Academic Success Program.

Academic performance of students "On Review" will be reviewed following posting of core or clerkship grades. Students may be removed from "On Review" with consistent improvement in academic performance or be placed on academic probation if they remain marginal.

4. **Academic Probation:** Academic probation may be imposed in any instance in which academic work or professional conduct has been or is unsatisfactory. While on academic probation, the student is prohibited from engaging in employment at the University of Nebraska Medical Center while enrolled in classes, and holding University-related elected offices or appointed positions.

The performance of students on academic probation will be reviewed at the end of the academic year. Academic probation may be removed at the discretion of the Scholastic Evaluation Committee after improvement in performance has been demonstrated. Students will not be recommended for graduation while on academic probation.

5. **Reporting Process:** Core and clerkship directors must provide the Scholastic Evaluation Committee with a written description of the decision making process used to assign grades to students receiving "Marginal" or "Fail" grades. This description must include any information given to students during the course of the core/clerkship describing examination and grading policies and any information (in addition to achievement scores on examinations) that was used in the decision making process of assigning the final grade.

## B. Examinations:

### 1. Comprehensive Examination (M1):

Passage of all cores and the Comprehensive Examination is a requirement for promotion to the second year. This examination is given at the end of the first year. Scores are reported only as "pass" or "fail."

a. Students who fail the comprehensive examination will be given the opportunity for a retest approximately one week prior to the start of the second year.

b. A student is required to pass the comprehensive examination on the

second occasion. Failure to do so will either incur an obligation to repeat all cores taken in the academic year or lead to termination, at the discretion of the Scholastic Evaluation Committee.

c. Students who repeat a year of medical school must pass the comprehensive examination for that year whether or not they passed the examination previously.

## 2. USMLE Step 1 (M2):

Passage of USMLE Step 1 is a requirement for graduation from the University of Nebraska College of Medicine, beginning with the Class of 1998.

a. All students must take the examination by the end of their second year (mid-June). Students who fail will be expected to re-take the examination at the next administration (early fall).

b. All students must pass the examination as a requirement for progression into the senior year.

c. First time failure of the examination will result in academic probation and automatic review by the Scholastic Evaluation Committee of the student's academic performance, extenuating circumstances and Step 1 score for action (i.e. removal of the student from junior year clerkships and/or required remediation of a core, participation in a board review course, repetition of the academic year, or termination of enrollment).

d. Remediation of second failure: The student will be removed from clinical rotations. Repeat examination must be taken at the next administration of Step 1. Students will be allowed to audit appropriate first and second year cores and participate in board reviews (if scheduled) in accordance with standard policies.

e. Failure of the examination on three occasions will result in termination of enrollment.

f. Students enrolled in a special program that requires a passing score on USMLE Step 1 as a condition for advancement into the particular medical curriculum (e.g. oral surgery) must meet the requirements for passing the examination as prescribed by the program.

## 3. OSCE (M4):

Students failing to pass the make-up Senior OSCE must remediate the failure by a proposed course of study (at least an additional 6 months in duration).

### C. Remediation of Marginal and Failing Grades:

The Scholastic Evaluation Committee considers the following criteria as primary justifications for recommending the remediation of core/clerkships or of the entire academic year.

#### 1. Remediation of a single core/clerkship:

a. A grade of "Fail" in a core (M1 and M2).

b. A grade of "Marginal" in a M1 core and failure to pass the Comprehensive Exam on the first attempt.

c. A grade of "Marginal" in a M2 core and failure to pass USMLE Step 1

on the first attempt.

- d. Failure to attain a grade of "Pass" or better in a clerkship (M3 and M4).

A single grade of "Fail" in any core or clerkship curriculum may require repetition of all cores taken in the same academic year. The Scholastic Evaluation Committee may permit the student to take a remedial course of study in an equivalent summer enrollment if the course is approved by the core director awarding the failing grade. Single failed clerkships may be repeated within one year with departmental and Scholastic Evaluation Committee approval. Any summer courses which are permitted by the Scholastic Evaluation Committee must be completed and passed in time for the student to take the next appropriate Comprehensive or USMLE Exam. Unless there are unusual circumstances, the only acceptable grades for a core or clerkship being repeated are "Pass" or better; grades of less than "Pass" are not acceptable and will result in termination of enrollment.

## 2. Repeating an entire academic year:

- a. A grade of "Fail" upon retesting of the Comprehensive Examination (M1).
- b. Two or more grades of "Marginal" or "Fail", each requiring remediation (see criteria above), during the same academic year.

Repetition of a year will require repeating the entire course load and earning a grade of "Pass" or better in all cores/clerkships. Grades of "Marginal" and "Fail" received in the initial enrollment will be part of the student's transcripts; it will remain despite re-registration and repetition.

## D. Termination of Enrollment:

The Scholastic Evaluation Committee considers the following criteria as primary justifications for recommending the termination of enrollment of students for performance in an academic year.

1. Not attaining a grade of "Pass" or better upon remediation of a core/clerkship.
2. Not attaining a grade of "Pass" or better in all cores/clerkships during repetition of an entire academic year.
3. Failing the comprehensive examination after repeating the year (M1).
4. Three failures on USMLE Step 1.
5. Grades of "Marginal" or "Fail" requiring remediation of more than one entire academic year.
6. Documentation of repeated unprofessional behavior.

## E. Extended Course of Study:

1. The normal medical curriculum is expected to be completed in four years. An extended course of study is not intended as an elected alternative pathway for the medical curriculum. It is limited to five years for the full curriculum.
2. Extension beyond the five year limit will be permitted only under very unusual circumstances. Extension beyond the five year limit will not be considered for students on "Review" or "Probation" status.

3. Students, who are in good academic standing, but because of family, personal or financial problems, are unable to complete the normal curriculum, may be moved from the regular program to an extended course of study only with prior approval of the Scholastic Evaluation Committee.
4. In general, courses from different academic years will not be mixed and the primary track followed by such students will be to repeat entire years. All students will be expected to carry a full academic load through the repetition of courses where the first enrollment resulted in a weak performance, or through additional electives. Formal requests to be considered for an extended course of study should be directed to the Dean for Academic and Faculty Affairs.

#### F. Personal Appearance Before the Scholastic Evaluation Committee:

1. Any student with academic difficulty manifested by grades of less than "Pass", failure of the Comprehensive or USMLE examinations, and/or questionable professional behavior will be subject to thorough review by the Scholastic Evaluation Committee.
2. The invitation for appearance before the Scholastic Evaluation Committee always will be extended to any student whose academic deficiencies are of major proportions. This includes students for whom such actions as termination of enrollment, repetition of an academic year or other major alteration in progress are likely possibilities. In other less severe cases, written statements provided by the student or supplied by others to clarify extenuating circumstances, may be sufficient for the review process.
3. All student appearances before the Scholastic Evaluation Committee shall be arranged by the Chairperson of the Scholastic Evaluation Committee, through the Office of Academic Affairs, and are confirmed in writing prior to the meeting. Likewise, the presence of an advisor or counselor for the student is permitted if prior arrangements with the Chairperson of the Scholastic Evaluation Committee have been made. (The purposes of providing the student access to the Scholastic Evaluation Committee are to guarantee that all of the information required by the Scholastic Evaluation Committee is provided, and to assure the student that judgment will not have been rendered in a remote or impersonal fashion.)

#### III. Appeal Procedures

A. Students recommended for dismissal or repeat of a year by the Scholastic Evaluation Committee for failure to meet the academic standards of the faculty, who believe that extenuating circumstances in their lives have been overlooked or misinterpreted or who can provide information not otherwise available to the Scholastic Evaluation Committee, have the right to appeal the decision to an Appeal Board appointed by the Dean of the College of Medicine. An appeal must be made in writing within two weeks after receiving notification of the recommendation by the Scholastic Evaluation Committee.

The Appeal Board shall consist of four members of the full time faculty and one student, all with equal voting status. The Board shall not include members of the Scholastic Evaluation Committee or other individuals who might have a conflict of interest.

B. The members of the Appeal Board shall select one of the members as Chairperson in a manner agreed upon by the members. The Chairperson shall, in all cases, vote as a member of the Board.

C. If the student requests a personal appearance before the Appeal Board, the request shall be granted.

D. The student requesting an appeal will be given at least one week's notice about the time and place of the hearing, the membership of the Appeal Board and the procedures to be followed.

E. The student wishing to appear personally before the Appeal Board may be accompanied by an advisor or counselor of choice. The name of the advisor must be provided at least 24 hours before the hearing. The student may be accompanied by legal counsel. The student must provide this information to the Office of Academic Affairs before the time and place for the hearing will be established. The role of the advisor, unless the Chairperson of the Appeal Board specifically permits, shall be limited to assisting the student. The Appeal Board may have the assistance of counsel for the University to advise the Board on procedural and other matters.

F. The Chairperson of the Appeal Board shall determine the order of the hearing, direct questioning of the student, if present, and any other witnesses, if present, and ensure that the student, his or her advisor and any other individuals appearing before the Appeal Board are treated fairly.

G. The Dean for Academic and Faculty Affairs, who is a non-voting member of the Appeal Board, shall act as secretary to the Board. The secretary shall keep minutes of the Board's proceedings. Although it will not be necessary to provide a verbatim transcript of testimony before the board, either the student or Appeal Board may request that the proceedings be tape recorded. Requests by students must be made 48 hours before the meeting. If the Appeal Board requests recording of the meeting, the student shall be notified prior to the meeting. If a request for a tape recording of the meeting is made, the secretary shall arrange for a tape recording of the student's testimony and the testimony of any other witnesses and also prepare a digest of the hearing. The student shall have access to the tape recording of his or her testimony and the testimony of other witnesses if any appear before the Board and to the digest.

H. After thorough consideration of all the presented written and/or oral testimony, the Appeal Board shall determine by secret ballot, either to sustain the original recommendation of the Scholastic Evaluation Committee or recommend its abrogation or modification. The decision of the Appeal Board, which will be based solely on the results of its investigation and, if a hearing has been held, the evidence presented at the hearing, shall be presented to the Dean of the College of Medicine as a recommendation. The Dean shall make the final decision.

In cases in which a student is reinstated as a result of the Appeal Board recommendation, a program of remediation to meet the academic expectations of the faculty shall be developed in one of two ways. Either the student shall be referred back to the Scholastic Evaluation Committee for this purpose or, the Appeal Board, in consultation with the Scholastic Evaluation Committee, may propose a program of remediation which becomes part of the action recommended by the Dean.

Further appeal by the student to the Dean shall be limited to matters of procedure and fairness and shall not involve merits of the case.

April 3, 1997 - Approved by Scholastic Evaluation Committee

July 3, 1997 - Approved by Faculty Council

August 6, 1997 - Approved by General Faculty

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This page was last revised on August 07, 1997

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## University of Nebraska College of Medicine

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### Graduation Requirements - Class of 1999 and Beyond

The degree of Doctor of Medicine is granted only to candidates who:

1. Are at least 21 years of age.
2. Possess a good moral reputation.
3. Have pursued the study of medicine for at least two years at the University of Nebraska College of Medicine.
4. Have successfully passed all departmental examinations, have received grades of "H", "HP", "P" or "M" in all courses.
5. Have successfully passed all examinations and USMLE Step 1.
6. Have passed a minimal competency examination with a patient simulator during the junior internal medicine rotation.
7. OSCE - An Objective Structured Clinical Examination is required to be taken and passed during your senior year.
8. BLS and ACLS: Certification in Basic Life Support (BLS) and Advanced Cardiac Life Support (ACLS) are requirements for graduation. A separate notification will be mailed to you prior to the start of the senior year.
9. Recorded all procedures performed during junior and senior years.
10. Have discharged all indebtedness to the University of Nebraska.

1997-98

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This page was last revised on July 21, 1997

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# University of Nebraska College of Medicine

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## Bulletin - General Policies

### Student Rights and Responsibilities

In accordance with Section 5.4 of the Bylaws of the Board of Regents, and in order to insure the protection of students' rights, the University of Nebraska Medical Center has established general procedures which must be followed if any disciplinary action is proposed against students. Disciplinary procedures may be instituted in instances of academic misconduct including but not limited to unauthorized collaboration or use of external information during examinations, plagiarism, falsifying records or clinical reports or engaging in any conduct which is intended to confer unfair advantage with respect to academic matters. Non-academic misconduct subject to disciplinary procedures includes but is not limited to belligerence towards others, sexual harassment, possession of explosive devices, distribution or sale of controlled substances having potential for abuse, violation of patient confidentiality and conduct on or off the campus that reflects poorly on the University of Nebraska College of Medicine. Students will be informed in writing by the Dean's Office of the specific charges, the supporting evidence, and the proposed disciplinary action. The Office of the Dean will also inform students of their right to appeal. The UNMC "Procedural Rules Relating to Discipline" may be found in the UNMC Student Handbook. The procedures insure that the rights of students have been carefully protected. University of Nebraska Medical Center students on clerkships in the Hospital or in Clinics must conform to all the regulations which apply to medical staff and personnel of that hospital.

July 1996

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## Absence Policies

### Student Records

- The academic record of a student is confidential. An official transcript of this record is sent only at the request or with the consent of the student or alumnus. The only information that will be released without the student's permission is name, dates of attendance, and degree(s) awarded. The student records kept in the Office of Academic Affairs are the official records of the College. They are available to the student and may be inspected upon request. The official records include the original application for admission with its supporting documents, unless the student has previously waived the right to see them; the narrative report describing the student's performance in the medical curriculum; grade sheets; any entries about him or her in the minutes of the Scholastic Evaluation Committee; and the Dean's letter of recommendation written in support of application for residency.

### Family Rights and Privacy Act

- The University of Nebraska complies fully with the Family Educational Rights and Privacy Act of 1974 which was designed to protect the privacy of educational records. Students have the right to

inspect and review their educational records in departmental offices and the Dean's Office, and to request the correction of inaccurate or misleading data through informal and formal hearings. The policy concerning student records may be found in the UNMC Student Handbook or in the Office of Student Services.

July 1996

### **Leave of Absence**

- Students may, under exceptional circumstances, be granted a Leave of Absence (LOA) from medical school. Any such LOA granted shall be solely within the discretion of UNMC based upon the merits of the request, evaluated on a case-by-case basis. The student who is considering a request for LOA should discuss this request with his or her academic advisor, and with the Associate Dean for Student and Multicultural Affairs. The following guidelines apply to all requests for LOA: The student must request the LOA in writing. The request should describe, in detail, the rationale for requesting LOA, and should be addressed to the Associate Dean for Academic Affairs.

A student who is the subject of an involuntary dismissal from medical school, for any reason, including but not limited to, academic performance or disciplinary action, may not be eligible to invoke the procedures contained in this policy.

Requests for LOA from students who are experiencing academic failure or who are not in good academic standing, for example, a student on academic probation, or a student with failing grades on conjoint examinations or clerkships, will be referred to the Scholastic Evaluation Committee. If that committee grants a Leave of Absence, it may require specific actions to be completed by the student as a condition for return to classes at a later date.

The student is responsible for initiating determination of the financial consequences of taking a LOA. For example, financial obligations regarding tuition payment and loan repayment as well as scholarships and grants need to be reviewed with the Business Office and the Office of Financial Aid.

If granted, a LOA will apply to the remainder of an academic year, and the student will be required to return no later than the beginning of the next academic year unless a shorter time is specified. Extension of LOA for longer than one year will require a request in writing directed to the Scholastic Evaluation Committee. Approval will depend upon the strength of the rationale for the request.

Students who have been granted LOA are responsible for notifying the Academic Affairs Office of their intention to return to classes on the appointed date no later than two months before the start of classes. If not so notified, the student's place in the class will be forfeited. Re-entry into the College of Medicine would require re-application through the usual admissions process of the American Medical College Application Service (AMCAS).

Students who withdraw from the College of Medicine without official LOA will be required to approach the college through the regular admissions/applications process, i.e., through AMCAS.



Upon re-enrollment following a Leave of Absence, the student will be subject to all rules and regulations which pertain to the class he or she is joining. Those rules and regulations may differ from those applying to the class into which the student initially matriculated.

Approved by Scholastic Evaluation Committee - 12/5/95

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This page was last revised on June 23, 1997

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# University of Nebraska College of Medicine

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## The Student Body and Student Organizations

There are approximately 120 positions in the first year class, with nearly 500 students enrolled in all four classes. Women and men constitute relatively equal proportions of the classes. The student body has representation on virtually all the planning and governing bodies of the College. Student members are appointed to the standing committees for Admission, Curriculum, and Scholastic Evaluation. Students are included on most special or ad hoc committees that affect student life.

**Medical Center Student Senate** The Medical Center Student Senate governs the organization and regulation of student activities of the College of Medicine, College of Nursing, College of Pharmacy, School of Allied Health Professions, and UNMC students in the Graduate College. It serves as a liaison group between students in the various disciplines and works toward the common goals of students at UNMC. Students in each college or school elect representatives to serve on the Medical Center Student Senate. The President of the Student Senate serves as a representative on the University of Nebraska Board of Regents.

**Organization of Student Representatives** The OSR, established by action of the Assembly of the Association of American Medical Colleges (AAMC), provides a mechanism for making student opinion known to the AAMC. Students have two votes on the AAMC Executive Council and are recommended to standing committees. An appointed representative from the University of Nebraska Medical Center attends the AAMC Annual Meeting.

**American Medical Student Association (AMSA)** Over twenty thousand medical students in American medical schools are AMSA members. The AMSA chapter of the University of Nebraska College of Medicine is the eighth largest in the country, and is one of the most influential. AMSA represents student views concerning health care delivery and all current medical issues. In addition, AMSA provides many valuable services. For example, through the MECO project, freshman students can go on a four-week clinical rotation with a practicing physician in the summer after their first year. AMSA arranges for freshman students to spend time in the University Hospital Emergency Room and organizes noon conferences and films of student interest. At Nebraska, AMSA has developed community services such as interdisciplinary health teams and health screening.

**Student National Medical Association** The SNMA is a nonprofit corporate association of multicultural students in pursuit of a medical education. SNMA is dedicated to leadership development, social awareness, service to humanity, and excellence as a physician.

**Student Association for Rural Health** SARH was organized by students at the Medical Center to promote interest in health careers in rural areas of Nebraska. Outreach programs encourage youth in rural areas to consider medical careers. The Association supports students who have expressed interest in rural health care delivery.

**Alpha Omega Alpha** A.O.A. is a nonsecret, national medical college honorary society. Membership is based upon scholarship and moral qualifications. Elections conducted by the membership are limited to those whose scholastic record places them in the upper 25% of their class, but the total number of new

members selected may not exceed one-sixth of the total number expected to graduate. The University of Nebraska chapter was organized November 2, 1914.

**Nebraska Medical Association - Medical Student Chapter** The Nebraska Medical Association - Medical Student Chapter (NMA-MSC) is the official student branch of the Nebraska Medical Association designed to initiate student participation in organized medicine at an early stage in the future physician's medical career. Through membership in NMA-MSC, students from all medical school classes can participate directly in NMA activities and work alongside practicing physicians throughout the state of Nebraska. In addition to student chapter activities, student representatives work on active NMA commissions and become personally acquainted with practitioners in all medical specialties.

**Student Section of Nebraska Academy of Family Physicians** The student section of the NAFP was formed to provide fuller exposure to the specialty of family practice and the education needed for this specialty. Meetings provide information about residency programs in the midwest area and elsewhere. This organization also allows student participation at the state level and exposes students to organized medicine.

**Student Alliance for Global Health** To promote local awareness of cultural and linguistic health issues, to provide more sensitive health services within Nebraska, to educate and inform students from all UNMC graduate programs about global health issues, to promote and facilitate placement of students on international rotations and exchanges.

**Whole Medicine: A Holistic Medical Group** This group is open to UNMC students who wish to explore alternative and complementary medical therapies and beliefs.

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This page was last revised on September 11, 1997

Address all comments and suggestions to  
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## University of Nebraska College of Medicine

### Fees and Expenses

Expenses of medical students include "educational expenses" and also "living expenses." In 1998-99 a Nebraska resident enrolled in medicine paid \$11,922 in tuition, \$1207 in fees, and approximately \$1,250 for equipment and books for the first two years. Juniors and seniors in medicine paid approximately \$1150 for equipment and books. "Living expenses" are an additional cost of being a student. They are estimated to be \$1,200 per month for students living off-campus (approximately \$600 per month for those living with parents).

Required Fees in 1998-99 include:

Student Health Service fee (outpatient coverage) per semester	\$ 69.75
Student Health Service fee (inpatient coverage) per semester (unless waived)	\$239.00
Hepatitis B Vaccination, first year students	\$ 60.00
TB Skin Testing (unless waived) yearly	\$7.00
Service charge for late payment of tuition	\$20.00
Service charge for issuance of "bad" check	\$20.00
Add/drop course	\$5.00
Anatomy laboratory use fee	prices vary
Medical instruments, name tags, white jacket (through the Bookstore)	prices vary
Transcripts of permanent record (first copy)	\$3.00
Transcripts of permanent record (Additional copies on same order)	\$1.00
Replacement of photo identification card	\$15.00
Microscope rental (one-time fee at matriculation)	\$40.00
Locker Rental (1 year)	\$5.00
Pre-enrollment deposit (applies to tuition)	\$100.00

Tuition, fees, and deposits are subject to change without notice. Additional laboratory fees may be established.

**Tuition Refunds** A student who withdraws from the University during a term for which he/she is registered is entitled to claim a refund of tuition. The University's current policy for a refund of tuition is: First week 100%, Second week 75%, Third week 50%, Fourth week 25%, Fifth week None

Microscopes University-owned microscopes are available for a small fee (\$40.00) for use in the teaching laboratory during scheduled laboratory and study sessions. If students chose to provide their own microscope, it should meet these qualifications: 3 objectives including 16mm, 4mm and oil immersion objectives, substage condenser and substage lamp or other illumination, at least 10x oculars and a mechanical stage.

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Information for...  
**Students/Residents**

*If you're a student looking to continue your education in the medical field, this is the place for you.*

## Financing your education

<a href="#">Welcome to UNMC</a>	<a href="#">You and Your Options</a>	<a href="#">Deferments</a>
<a href="#">10 Good Habits</a>	<a href="#">Is Your Education Affordable</a>	<a href="#">Payment of Charges</a>
<a href="#">Residency</a>	<a href="#">Living Expense Allowance</a>	<a href="#">Your Costs</a>
<a href="#">Terms of Enrollment</a>	<a href="#">Scholarship Information</a>	<a href="#">Selecting a Lender</a>
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<a href="#">Your Application</a>	<a href="#">Your Award/Notification of Award</a>	<a href="#">Deadlines</a>
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## University of Nebraska College of Medicine

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### Student Health Services

The Student Health Center is designed to provide routine outpatient health care and treatment of episodic illness for enrolled UNMC students and optional for their dependents.. If specialized care is needed, referrals will be written for those services on the UNMC campus only. In addition, the University of Nebraska Medical Center endorses an inpatient/major medical health insurance policy which is offered to all UNMC students through the Division of Student Services.

July 1996

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This page was last revised on June 23, 1997

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# University of Nebraska College of Medicine

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## Multicultural Affairs Office

The Office of Multicultural Affairs was created to assist the Medical Center in reaching its commitment to train health professionals for underserved communities in Nebraska as well as in other parts of the nation. Shortages of health professionals are particularly acute in minority communities. Therefore, Blacks, Chicanos and Native Americans are especially sought for careers in medicine, nursing, pharmacy, dentistry, and allied health. UNMC Office of Multicultural Affairs plans and implements programs for recruitment, admission, and retention, of ethnic minority students and economically disadvantaged students. Services include:

1. Personal and educational counseling on all UNMC colleges and programs including the College of Dentistry on the UNL Campus.
2. Assistance to accepted applicants in locating suitable housing and jobs for spouses.
3. An Academic Support Program for enrolled students.
4. Advisory support to the Student National Medical Association (SNMA).
5. Social and cultural functions for enrolled students and local preprofessional students.
6. Summer enrichment programs for college students interested in the health professions.
7. Motivational activities for local high school students.

Additionally, the Office of Multicultural Affairs serves as a resource for groups and departments sponsoring cultural awareness activities for all students and employees of the Medical Center and for the public.

For further information, please contact:

Multicultural Affairs  
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Omaha, NE 68198-4275  
(402) 559-4437  
July 1996

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This page was last revised on June 23, 1997

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# University of Nebraska College of Medicine

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## First and Second Year Curriculum

### Cores / Credit Hours

Instead of traditional courses in Anatomy, Biochemistry and Physiology, the curriculum presents topics in an integrated approach, termed "CORES" that tend to focus on one or more organ systems. Those cores for the first and second year are described below:

**525/526 Integrated Clinical Experience I & II Cores (5 s h cr. 1st semester)/(5 s h cr. 2nd semester)**

**635/645 Integrated Clinical Experience III & IV Cores (5 s h cr. 1st semester)/(5 s h cr. 2nd semester)**

The Integrated Clinical Experience (ICE) program is intended to help students recognize the clinical relevance of basic sciences and to gain an appreciation of the social, psychological, and ethical dimensions of the practice of medicine. Topics covered in this two year curriculum include: The history and physical examination, interviewing skills, behavioral sciences, ethics, preventive medicine, health care policy, and health care services research. In addition, students are given opportunities to participate in the practices of community and university based primary care physicians through the Longitudinal Clinic Experience and summer rural preceptorship (Primary Care Month) between the first and second years of medical school.

The Primary Care Month is a three-week required experience for all first year medical students. Each student is required to spend three weeks with a primary care physician (family physician, internist, or pediatrician) in a non-metropolitan area. The students may elect to do this at any time during the summer in the months of May, June, July or August. These three-week rotations may be scheduled at any point in time based on the convenience of the student and the preceptor. Most students will live in the rural community during this primary care experience.

**560 Cellular Processes Core (6 s h cr. 1st semester)** This six-week-long Core presents an integrated, comprehensive course which covers the basic information in the area of cellular processes necessary to form a foundation for subsequent application to normal and disease-related processes described in subsequent courses of the medical curriculum. A coordinated presentation of appropriate materials from the areas of cell biology and physiology, biochemistry, molecular biology, histology, and genetics will be included in this core. The format of the course will include lectures, question/answer sessions and laboratories. Evaluation will be based on lectures in the form of traditional objective, laboratory, and essay examinations. The Core will be presented in the last six weeks of the fall semester.

**570 Structure and Development of the Human Body Core (10 s h cr. 1st semester)** This ten-week-long Core features a study of the structure and development of the human body in sequence beginning with the back and then the upper limb, head, neck, thorax, pelvis, perineum, and lower limb. Structural features are studied by gross dissection, demonstration, cross section, radiographs and in scans and are correlated to the appropriate living anatomy. Systemic embryology lectures will provide an understanding of the development of definitive anatomical structures. Emphasis is placed on the structure: function correlation and the relationship of anatomic configuration to diagnosis of clinical

problems. The format of the course will include lectures, laboratories, demonstrations, small group discussions and many varieties of audiovisual aids. Evaluation will be in the form of traditional objective, laboratory, and essay examinations. The Core will be presented in the first ten weeks of the fall semester.

**580 Neuroscience Core (6 s h cr. 2nd semester)** This six-week-long Core presents an integrated, comprehensive study of neuroscience, including behavioral science, clinical neurology, neuroanatomy and neurophysiology. Topics presented in this course are selected to give students a basic understanding of the functioning of the nervous system in both health and disease. The format will include lectures, laboratories, problem based learning sessions and a selected number of clinical correlates. In addition, small groups of students will research, using computer assisted search methods and library materials, one topic in more depth and will present their findings as a poster. Grades will be established by objective, essay and laboratory examinations as well as by faculty evaluation of the poster presentations. The Core will be presented in the first six weeks of the spring semester.

**590 Function of the Human Body Core (10 s h cr. 2nd semester)** This ten-week-long Core presents an integrated, comprehensive course which covers the physiology, biochemistry, nutrition and histology related to various functions of the human body including: circulatory; renal; respiratory; endocrine/reproductive and digestive, absorptive and metabolic systems.

The format of the course will include lectures, histology laboratories and a cardiovascular laboratory. Evaluation will be in the form of traditional objective, laboratory, and essay examinations. The Core will be presented in the last ten weeks of the spring semester.

**630 Introduction to Disease Processes Core (10 s h cr. 1st semester)** This ten-week-long Core consists of introductory material in the areas of immunology, microbiology (bacteriology, virology, mycology, and parasitology), pathology (Clinical, anatomic, pediatric, and forensic), clinical medicine (geriatrics, pediatrics, basic life support, and nutrition), and pharmacology. The format includes lectures, large and small groups and laboratories. Evaluations are in the form of multiple choice, short answer, and short essay exams.

**631 Neurology, Ophthalmology, and Psychiatry Core (5 s h cr. 2nd semester)** This five-week-long core presents in an integrated and sequential fashion selected areas in neurology such as epilepsy and movement disorders; ophthalmology such as glaucoma and cataracts; and psychiatry such as anxiety, depression, and schizophrenia. In addition, the subjects of neuropsychopharmacology will be discussed after presentation of clinical entities. Each of the main three units will be heralded by presentation of biochemical and molecular mechanisms in signal transduction involving behavior, neurons, and vision. Each of the three units will culminate in case presentations dealing with proper usage of multiple medications in neurology, ophthalmology, and psychiatry. The assessment of successful acquisition of learning objectives will be based on traditional multiple choice questions and essay examinations.

**640 Hematology/Oncology, Musculoskeletal, Basic Life Support, and Skin Core (6 s h cr. 2nd semester)** This six-week-long core is intended to provide an introduction to diseases effecting several body systems and includes a multidisciplinary overview of musculoskeletal, dermatology, and basic life support as well as lymphoid and hematopoietic malignancies, anemia, transfusion medicine and coagulation abnormalities.

Each area will be covered by a combination of lecture, small group discussion, and problem-based learning. Students will be given several case scenarios to help direct their studying. Evaluation will be in

the form of traditional objective, laboratory, and fill-in-the-blank examinations as well as faculty evaluation of student performance in self-directed learning sessions.

**641 Cardiopulmonary, ENT and Endocrinology Core (6 s h cr. 1st semester)** This six-week-long core presents an integrated comprehensive study of cardiac, pulmonary, endocrine and ear, nose and throat diseases including clinical diagnosis and treatment, pathophysiology, pharmacology, and pathology correlates. Topics are selected to give students a basic understanding of the functioning of each organ system in health and disease. The format will include lectures, laboratories and small discussion groups. Evaluation will be in the form of traditional objective, laboratory and essay examinations.

**642 Genitourinary and Gastroenterology Core (5 s h cr. 2nd semester)** This five-week-long core includes instruction on the kidney and urinary tract, female genital system and breast, and gastrointestinal diseases. The series on the female genital tract consists of the pathologic basis intertwined with clinical approaches to the patient. The microbiology of venereal diseases is also presented. Pharmacologic considerations include contraception, fertility and hormone replacement. Social issues surrounding pregnancy are addressed. Breast disease is reviewed by small group discussion, lecture, and laboratories.

A comprehensive examination at the end of the first year will be given over the COREs and I.C.E.

July 1998

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## University of Nebraska College of Medicine

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### Integrated Clinical Experience Core (ICE)

The purpose of ICE is to expose students to clinical issues early in their medical education and to provide a clinical context for their training in the basic sciences. In ICE, students receive instruction on the history and physical examination, communication skills, behavioral sciences, ethics, humanistic aspects of medical practice, preventive medicine, and health care services research. ICE employs a biopsychosocial framework. In addition, students spend a minimum of one half day a month seeing patients in the offices of primary care physicians in the Omaha metropolitan area. In the summer between the first and second years of medical school, students spend three weeks in a primary care preceptorship in sites throughout the state of Nebraska. Two afternoons a week are dedicated to ICE in the first and second years.

#### ICE SUBJECTS FIRST YEAR:

- Semester 1
  - \* Professionalism and student ethical responsibilities
  - \* The physician-patient relationship
  - \* Clinical communication and interviewing skills
  
- Semester 2
  - \* The family system in health and illness
  - \* Human sexuality
  - \* Ethical principles of practice
  - \* "Survival skills" for the Summer Preceptorship Experience Instruction.

#### SECOND YEAR:

- Semester 1
  - \* Occupational and environmental medicine
  - \* Public health
  - \* Patient education
  - \* Clinical preventive medicine
  
- Semester 2
  - \* Social and cultural issues in medical practice
  - \* Clinical decision-making
  - \* Biostatistics and principles of clinical research
  - \* Challenging issues (e.g., Alcohol and other Drug Abuse, bad news delivery)
  - \* Transition into the clinical clerkships

#### ICE LEARNING FORMAT

A variety of teaching and learning modalities are employed in ICE. The entire class convenes once or twice a week for lectures, panel discussions, training videos, and/or demonstrations. Frequently, these didactic sessions are followed by small group learning. Composition of these groups is stable throughout

the year. The purpose of the small group is to give students opportunities practicing behavioral skills (e.g., interviewing patients, physical examination maneuvers) and to discuss challenging interpersonal and ethical issues in medical education and practice. Frequent use is made of patient simulators and students are given opportunities to videotape and review encounters with simulated patients. Self-directed and cooperative learning is facilitated through individual and small group projects that are required periodically throughout the year.

## FACULTY RESPONSIBILITY

ICE faculty are responsible to the students in their small groups for facilitating student learning by helping to create a safe and trusting atmosphere where challenging issues can be openly discussed and emotions freely expressed. Reticent students may need prompting and assistance to participate, while aggressive students may need help becoming sensitive to the needs of others. Faculty will be responsible for providing brief narrative comments and a grade for each student in the small group at the end of each semester. This grade will be included in a calculation of each student's overall ICE letter grade.

## FACULTY DEVELOPMENT

ICE faculty will be provided opportunities to learn small group facilitation skills through the faculty development program in the College of Medicine. These sessions are offered in the summer and early fall and typically occur in two to four hour blocks. In addition, ICE "teas" will be held each week to help orient faculty to the specific subjects addressed that week, and to assist in identifying and solving learners' difficulties as they arise in small group discussions.

## FOR FURTHER INFORMATION, CONTACT:

David J. Steele, Ph.D. Family Practice 559-6820

**HISTORY & PHYSICAL (H & P)** The History and Physical Diagnosis portion of ICE will provide instruction in the proper method of obtaining a pertinent medical history. It will also demonstrate techniques in performing a physical examination by focusing on normal findings. This is the foundation upon which the students will build as they continue to develop their history taking and physical diagnosis skills in the future.

First year student sessions are covered in an organ system format. Students receive a one hour introductory lecture followed by a two hour small group session headed by a clinical facilitator. Facilitators will regularly be provided with a handout stating objectives to be covered.

Second year students will take an organ-specific history from patients seen with their preceptors and then perform a write-up on each. The students will also be required to perform a history and physical on a patient during their longitudinal clinical experience with the write-up to be critiqued by the facilitator.

## FOR FURTHER INFORMATION, CONTACT:

Virginia Zacharias, M.D. Internal Medicine 559-6204

## LONGITUDINAL CLINIC

The Longitudinal Clinical Experience is a one-half day per month office experience with an Omaha primary care physician. This experience allows students early patient contact and an opportunity to practice examination and interviewing skills learned in other segments of ICE.

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# University of Nebraska College of Medicine

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## Problem-Based Learning (PBL)

Problem-Based Learning (PBL) is a method of small group learning in which students work through a clinical problem or case. The PBL problems are correlated with material that is presented in basic science CORES in the morning and in the Integrated Clinical Experience (ICE) in the afternoon. The goals of PBL are to learn basic science concepts in a clinical context, to develop life-long, self-directed learning skills, and to develop clinical reasoning skills.

**PBL LEARNING FORMAT** Each small group consists of eight to ten students and a faculty facilitator. Each case is presented over a two-week interval during which the group usually meets three times for one-two hour sessions. Information about each case is presented in stages. As facts are accumulated, students develop hypotheses as to the nature of the patient's problem and make decisions about diagnostic testing and therapeutic management. Learning issues become apparent when members of the group are unable to explain a fact or the underlying basic science principles that are involved.

Between small group sessions, students independently investigate learning issues utilizing textbooks, scientific literature, consultants, and other resources. When students return to the case in small group, learning issues are discussed. The case continues until a final resolution is reached and the objectives of the case are met.

**PBL CASE SUBJECTS** Cases for PBL are developed prior to the beginning of the CORE by various faculty members of the College of Medicine. Cases are reviewed by the Faculty Development Committee prior to their final preparation by the Educational Support Office.

There is a list of general guidelines for case development in the red Faculty Guide to Problem-Based Learning handbook.

**FACULTY RESPONSIBILITY** The function of the PBL facilitator is not to be a source of information, but to ensure that the group accomplishes the objectives of the case. The major tasks that need to be accomplished by the PBL facilitator are to: 1) help establish a positive learning climate within the group, 2) engage students in the learning process by encouraging active participation and self-directed learning, 3) "manage the chaos", and 4) provide on-going feedback to the group and the individuals who comprise the group. The facilitator is also responsible for the evaluation of performance of the students.

**FACULTY DEVELOPMENT** To assist faculty in their preparation for their role as a PBL facilitator, there is a PBL Facilitator's Workshop scheduled at the beginning of every semester. At this time, the faculty will be given a brief overview of PBL and a Faculty Guide to Problem-Based Learning for their future reference. In addition to this workshop on facilitation, there are also case orientation sessions scheduled for the beginning of each CORE to acquaint the facilitator with the cases, objectives, etc.

**FOR FURTHER INFORMATION, CONTACT :**

Jean Saigh, M.D. Radiology 559-8353



## University of Nebraska College of Medicine

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### Universal Goals and Objectives for Clerkships

1. Perform and record a comprehensive history and physical examination appropriate for the specialty (pertinent for age, sex, and presenting complaint).
  - A. Demonstrate ability to synthesize data from the history and physical into a concise assessment of the patient's problems.
  - B. Develop an appropriate evaluation and treatment plan.
  - C. Demonstrate appropriate follow-up of patients to include daily progress notes, satisfactory interpretation of test results and procedures, appropriate understanding of the use of medications and other treatment regimens.
2. Develop an appropriate knowledge base for the specialty to include knowledge of both common and high impact condition.
3. Demonstrate professional behavior at all times.
4. Demonstrate an awareness of the changing character of health care delivery to include medical economics and the team approach to medical care.

Approved by Clerkship Directors - March 19, 1996.  
Affirmed - June 16, 1998

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This page was last revised on July 23, 1998

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# University of Nebraska College of Medicine

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## Year Three

The third year of the curriculum (48 weeks) consists of the following required clinical clerkships.

Internal Medicine (12 weeks)

Family Practice ( 8 weeks)

Surgery ( 8 weeks)

Pediatrics ( 8 weeks)

OB/GYN ( 6 weeks)

Psychiatry ( 6 weeks)

### **Family Medicine Community Preceptorship - FAPR-705 Community Preceptorship**

**Periods offered: Each 8 weeks**

- **Student limit: None**
- **Semester hours: 8**
- **Prerequisite: Junior Status**

**This is a clerkship which allows junior students an "immersion" experience in Family Medicine in a rural Nebraska community. The student will participate in the care of the preceptor's patients under the direct supervision of the preceptor. Students will care for patients in the office, hospital, and extended care facilities. A written report about a community health project is required.**

### **IMED- 705 Basic Medicine Required Clerkship**

- **Periods offered: Each 12 weeks**
- **Student limit: 30-33**
- **Semester hours: 12**
- **Where to Report: T.B.A.**

The student spends one half of the twelve week clerkship as an integral member of a health care team responsible for the care of inpatients on the Internal Medicine service at either the Omaha Veterans Administration Hospital or UNMC. During the other half of the clerkship, students may elect a variety of medicine subspecialties and outpatient clinical experiences at the University of Nebraska Medical Center, the Omaha Veteran's Administration Hospital and private practice internists. Throughout the clerkship, students will assume responsibility for the initial patient assessment and daily care commensurate with their level of training, supervised by Internal Medicine residents and attending faculty. Skills in patient interaction, decision making, and the fundamentals of Internal Medicine will be reviewed in formal sessions and daily attending rounds.

### **OB-GYN - 705 Junior Clinical Clerkship**

- **Periods offered: Each 6 weeks**
- **Student limit: 20**
- **Semester hours: 6**

Junior-year students are assigned to the University Hospital and affiliated hospitals for inpatient experience and to the University Hospital Clinics for outpatient obstetric and gynecologic clinics. They will follow the progress of patients in labor, assist at operative procedures, and maintain a complete record until the patient is discharged from the hospital. Outpatient experience will include participation in the following clinics: normal and complicated obstetrics, gynecology, and family planning. Seminars, conferences, and ward rounds are scheduled regularly.

### **PEDS - 707 Required Primary Clerkship in Pediatrics**

- **Periods offered: Each 8 weeks**
- **Student Limit: 20**
- **Semester Hours: 8**
- **Where to report: TBA**

The Pediatrics clerkship is divided into two tracts, the "University" track and the "Community" track. The University track is taught in Omaha and consists of a two-week block on the inpatient service and a three-week block in the outpatient clinic. In addition, one-week blocks are spent at Munroe-Meyers Institute, the newborn nursery, and at a private clinic in Omaha. The Community track is taught at various sites across Nebraska and consists of an intensive exposure to primary care Pediatrics as practiced in a rural setting. The goals and curriculum for the clerkship are the national standard curriculum for Pediatrics established by the Council on Medical Student Education in Pediatrics. The curriculum is delivered through lecture, self-study, computer-aided instruction, and clinical teaching. The curriculum is available at <http://www.unmc.edu/Pediatrics/educ/pedhmpg.htm>.

### **PSYC - 705 Required Psychiatry Clerkship**

- **Periods offered: Each 6 weeks**
- **Student limit: 14**
- **Semester hours: 6**

A full-time, six-week required clinical clerkship is to be taken in the junior year. Students are assigned to instructors on a tutorial basis and under this detailed supervision are assigned patients on the adult inpatient service, adult outpatient service, consultation service, the Veterans Administration Hospital, and St. Joseph Center for Mental Health. Although assigned to a specific service, a core-curriculum of didactic lectures of common psychiatric disorders provides each student with experiences on all services of the Department of Psychiatry.

### **SURG - 708 Primary Clerkship**

- **Periods offered: Every 8 weeks**
- **Student limit: 20**
- **Semester hours: 8**

The third year student will have a eight week rotation on surgery. The surgical clerkship is divided between a structured educational curriculum (didactic lectures, computer-aided learning, and skills workshops), a four week clinical rotation on general surgery, and two week rotations on two of five surgical specialties (urology, orthopedics, ophthalmology, neurology, and ENT). The general surgical portion of the clerkship will place students at the Nebraska Health System, VA Medical Center, Immanuel, or the Nebraska Methodist Hospital. Students will be involved as an integral part of the ward team and will participate in morning and afternoon rounds. Mandatory attendance at lectures and skills workshops presented throughout the rotation is required and takes precedence over clinical activities.

Grading/evaluation will be based fifty percent on clinical assessment and fifty percent on a final examination. The examination is a multiple choice format/subject examination prepared by the NBME.

#### **M-ID - 705 Required Interdepartmental - Education for Managed Care Competencies**

- **Periods offered: Continuous over third and fourth year**
- **Student limit: None**
- **Semester hours: 4**

Education for Managed Care Competencies (E = MC<sup>2</sup>) is a two-year interdisciplinary course whose goals are: 1) to have learners better practice patient-centered, evidence-based, cost effective medicine which is accountable to the needs of populations, 2) understand principles and ethical dilemmas underlying the reform of health care finance and delivery, 3) work effectively in a medical environment which is team-based, value driven and dependent on system of care.

Teaching strategies include the use of web based modules, workshops, integrated clerkship experiences, projects and managed care practicums. Emphasis is placed on self-directed learning and selective activities.

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This page was last revised on July 24, 1998

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## University of Nebraska College of Medicine

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### Year Four Requirements - Class of 1999 and beyond

During the forty-weeks of the senior year, students will take a required four-week basic science selective and eight four-week electives (plus one four-week vacation).

Basic Science Selective\* ( 4 weeks)  
Elective - Eight four-week electives (32 weeks)  
Vacation ( 4 weeks)

\* Basic Science Selective - one four-week selective experience in a specific self-limited basic science area. This selective is not meant to be a repeat of basic science information from the first two years, but rather will be an opportunity for students to correlate basic science subjects with clinical materials. Each selective will be under the direction of a basic scientist or basic/clinical scientific team.

June 1998

### Year Four Requirements - Class of 1998

During the forty-weeks of the senior year, students will take two four-week required rotations and seven four-week electives (plus one four-week vacation).

Required Surgery II ( 4 weeks)  
Basic Science Selective\* ( 4 weeks)  
Elective - Seven four-week electives (28 weeks)  
Vacation ( 4 weeks)

\* Basic Science Selective - one four-week selective experience in a specific self-limited basic science area. This selective is not meant to be a repeat of basic science information from the first two years, but rather will be an opportunity for students to correlate basic science subjects with clinical materials. Each selective will be under the direction of a basic scientist or basic/clinical scientific team.

July 1996

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Address all comments and suggestions to  
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