2025–2026 Catalog

Updated Spring 2026

School of Medicine

Trinity Medical Sciences University Catalog and Student Handbook 2025–2026

This combination catalog and handbook is an official publication of Trinity Medical Sciences University (TMSU) and Trinity School of Medicine (TSOM). It is intended to provide general information. This document contains information about the institution, institutional governance, accreditation, administration, admissions, curriculum, graduation requirements, and course descriptions as well as other information and policies. Every effort has been made to ensure that the information in the catalog is accurate at the time of publication. The catalog is not intended to address all the possible applications of, or exceptions to, the policies and procedures of TMSU, some of which are addressed in other official documents.

Students are responsible for observing any policies and regulations contained herein or in the policy course on Canvas, the university's learning management system (LMS); they must read this document carefully. This document does not contain all institutional rules, regulations, or policies for which students are responsible. Other university sources discuss expectations for and policies applicable to students.

TMSU reserves the right, through its established procedures, to modify the requirements for admission and graduation and to change other rules, regulations, and provisions, including those stated in this document and other publications, and to refuse admission to any student, or to require the withdrawal of a student if it is determined to be in the interest of the student or the university. All students, full time or part time, who are enrolled in Trinity courses are subject to the same policies.

If the student has a question about a specific policy or procedure, they should address your question to the Vice President of Marketing if they are in the admissions process; or to the Associate Dean of Student Affairs if they are members of the student body.

Publication of this catalog/handbook does not create a contractual relationship between TMSU and any other individual or organization. The contents of the catalog are subject to change without notice. The catalog/handbook is the authoritative source of information and, in cases where this document conflicts with any other publication or policy of TMSU, the information in this catalog/handbook shall prevail and be considered the final official published policy of the institution. Only the Provost or Dean may grant or make exceptions to the information in the catalog/handbook based on their decision of what is best for the student and the university.

The publication of the *2025–2026 Student Handbook/Catalog* supersedes all previous publications. Please always refer to the most recent publication.

Trinity Contact Information

Trinity Medical Sciences University
Trinity School of Medicine
Ratho Mill
Kingstown, St. Vincent and The Grenadines
West Indies

Trinity Medical Sciences University
Trinity School of Medicine Medical Education Center
233 North Houston Street, Suite 310
Warner Robins, Georgia 31903
USA

Administration Office
925 Woodstock Road, Suite 200
Roswell, Georgia 30075
470.256.0225

Website
www.trinityschoolofmedicine.org

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Contents

Trinity Medical Sciences University Catalog and Student Handbook 2025–2026 i
Trinity Contact Information i
Contents iii
Academic Calendars ix
About TMSU 1
History 1
Mission Statement 1
Vision Statement 1
Strategic Goals 2
Accreditations, Recognitions, and Authorizations 2
Approach to Learning 3
Teaching Approach and Didactic Methods 3
Faculty Teaching Approach 3
Defined Course Objectives 4
Early Clinical and Community Medicine Experience 4
Hours of Operation 4
Main Campus in Ratho Mill, St. Vincent & the Grenadines 4
Medical Education Center in Warner Robins, Georgia 4
Administrative Office in Roswell, Georgia 4
Board of Trustees 5
Faculty and Academic Leadership 5
Administrative Leaders 7
MD Pathways 8
Traditional MD Pathway 8
Executive MD Pathway 8
Global MD Pathway 8
External (Standardized) Exams 9
Graduation Requirements for Doctor of Medicine 9
Graduation with Academic Honors 10
Trinity School of Medicine — Doctor of Medicine 10
Admissions 10
New Admissions Policy 10

Transfer Admissions Policy 12
Admissions and non-discrimination 16
Academic Prerequisites 17
MCAT 17
Application and Supporting Documentation 17
Transfer Policy Summary (see complete POlicy pages 11-15) 18
Readmission Policy 19
Previous Attendance at Foreign Institutions 19
Transferability of Credit Earned at Trinity Medical Sciences University 20
Transcript request 20
Add/Drop Policy 20
Course Add/Drop Period 20
Tuition and Fees 21
Tuition and Fees for 2025-2026 21
Orientation Programming 21
Terms 1–4 and Review Course 21
Step 1 Prep and Terms 7–10 22
Fees 23
HEALTH INSURANCE 23
MALPRACTICE INSURANCE 23
BOOKS 23
Credit/Refund Policy 23
CREDIT EVENTS 23
WITHDRAWAL/DISMISSAL AND APPROVED LEAVE OF ABSENCE—REFUND EVENT 24
TUITION CREDITS AND OTHER STUDENT ACCOUNT ADJUSTMENTS 25
STUDENT REFUND PROCEDURES 25
Student Funding Sources 25
U.S. STUDENTS — STUDENT LOANS 25
U.S. STUDENTS — VETERANS BENEFITS 25
Canadian Students - Loans 26
Scholarships and Grants 26
SCHOLARSHIPS 26
GRANTS 26

Student Support Services 26
Career Counseling 26
Learning and Program Management Services 26
Canvas 26
One45 27
Medical Student Competency, Safety, and Minimal Technical Standards 27
Process and Procedures 27
TECHNICAL STANDARDS 27
BEHAVIORAL AND SOCIAL ATTRIBUTES 28
EQUAL ACCESS TO TSOM MEDICAL EDUCATION PROGRAM 28
Academic Program – MD 29
Competency-Based Objectives 29
MEDICAL KNOWLEDGE 30
PATIENT CARE 30
PRACTICE-BASED LEARNING 30
COMMUNICATION SKILLS 30
Professionalism 31
Systems-Based Practice 31
Academic Program Delivery 31
Academic Standing 32
Campus Safety and Emergency Protocols for Adult Learners 32
Spiral Integrated Curriculum (Term 1–4) 33
The Review Course (and Clinical Transition Term) 35
Independent Study/Remediation 35
USMLE Step 1 Prep 36
Clinical Clerkships (Core and Electives) – Terms 7–10 36
Clerkships and Electives 36
NBME Shelf Failure Policy 36
Elective Clerkships 37
DRESS CODE 37
Examination Policy 38
General Examination Policies 38
Internal Examinations 38

Examination Review 39
External Examinations – NBME Subject Exams 39
TMSU-SOM Course Grading 39
DEAN'S LIST 39
APPROVAL OF GRADES 40
FAILED COURSE REMEDIATION 40
INCOMPLETE GRADE 41
ACADEMIC APPEAL 41
EXCLUSIONS FROM ACADEMIC APPEAL 41
Conflicts of Interest 41
Conflicts of interest must be avoided. Students, faculty (including deans), and staff are recused from participation in deliberations or voting of the Academic Progress Committee (APC), ad hoc Disciplinary Review Committees, and student appeal bodies when an actual, potential, or perceived conflict of interest exists (e.g., serving as the student's advisor, having a personal relationship with the student, or other circumstances that could compromise objectivity). 42
WITHDRAWAL 42
GRADING SYSTEM FOR CLERKSHIPS 43
GRADING SCALE FOR NBME SUBJECT EXAMS 43
GRADING OF ELECTIVE CLERKSHIPS 44
United States Medical Licensing Examination (USMLE) Preparation and Testing 44
Trinity Clinical Skills Assessment – M4 Objective Structured Clinical Examination (OSCE) 44
Qualities of Graduates 44
Core Competencies (Medical Program Objectives) 44
Entrustable Professional Attributes 44
Graduation 45
OFFICIAL DATE OF GRADUATION ..... **Error! Bookmark not defined.**
Course Descriptions 45
Course Requirements for MD Degree Program (>137 weeks / 137 total credits over >4 calendar years) 46
Terms 1–4 (Integrated Spiral Curriculum) 46
TERM 1 SPIRAL CURRICULUM 46
TERM 2 SPIRAL CURRICULUM 46
TERM 3 SPIRAL CURRICULUM 46
TERM 4 SPIRAL CURRICULUM 46

Clinical Clerkships 47
Elective Clerkships 47
SUBINTERNSHIP OPPORTUNITIES 53
Research methods / bioethics 54
diversity and inclusion in medicine and healthcare 54
Explanation of Weeks of Instruction versus Credit Hours 54
Grading and Remediation Policies 55
Grading Policy and NBME Examination Policies 55
Academic Integrity Policy 62
Attendance Policy 64
Attendance Policy for Clinical Years 65
Other Important Policies (more policies available in Canvas) 66
Code of Professionalism Policy 66
Professionalism Policy II 69
Student Grievance and Complaint Policies 71
Student Complaints regarding non-academic or non-professionalism issues 74
Student Health and Wellness 76
Tobacco and Smoke Free Campus 78
Extenuating Circumstances Policy 78
Quality Assurance Policy 80
Strategic Planning, Governance, and Continuous Quality Improvement Committee 82
Infectious Agents / Blood-Borne Pathogens / Exposure Policy 84
Sexual Harrassment 85
Trinity Drug and Alcohol Policy 85
Contact Information 85
Telephone 85
Email 85
MAILING Address 86
Facilities and Equipment 87
Computer Requirements 88
Mobile Phone Requirements 88
Access to Resources / Electronic Resources on Leave of Absence 88
During an LOA, the student will have access to their Trinity email account as well as the 89

HelpDesk and Student Resources in Canvas. However, the student will not have access 89
to meetings with academic leadership, faculty, SGA, SGA activities or the school psychologist until they 89
return from an LOA. 89
Access to Resources / Electronic resources if dismissed 89
Guests in St. Vincent Housing 89
Student Agreements 89
Student releases 90
Disclosures 91
International (non-US citizens or green card holders) 91
School of Biomedical Sciences (SBS) (undergraduate studies) 92
How many undergraduate credit hours are required to enter Trinity School of Medicine 92
Educational Workload 92
Prerequisite Courses 92
60 Credit Premed Schedule 92
SBS Course Descriptions 94

Academic Calendars

TMSU

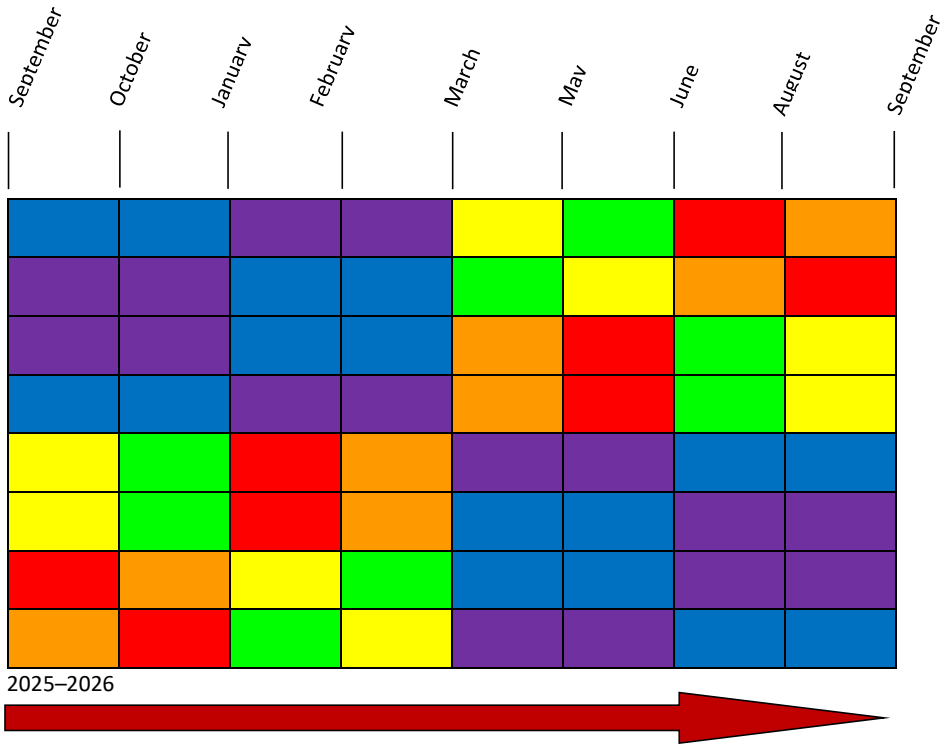
Undergraduate, Preclinical (Terms 1-4), Clinical (Terms 5-10)

Term Dates	2025	2026
JANUARY Spring TERM		
New Student Orientation	January 2, 2025	January 8, 2026
White Coat Ceremony		January 8, 2026
First day of classes	January 13, 2025	January 12, 2026
Last day to register	January 17, 2025	January 16, 2026
Last day of regular term	April 25, 2025	April 24, 2026
Student Break	April 28 – May 9, 2025	April 27 – May 8, 2026
Commencement		May 17, 2026
MAY Summer TERM		
New Student Orientation	April 25, 2025	May 7, 2026
White coat ceremony		May 7, 2026
First day of classes	May 12, 2025	May 11, 2026
Last day to register	May 16, 2025	May 15, 2026
Last day of regular term	August 22, 2025	August 21, 2026
Student Break	August 25 – September 5, 2025	August 24 – September 4, 2026
SEPTEMBER Fall TERM		
New Student Orientation	August 22, 2025	September 3, 2026
White coat ceremony	September 4, 2025	September 3, 2026
First day of classes	September 8, 2025	September 7, 2026
Last day to register	September 12, 2025	September 11, 2026
Last day of regular term	December 19, 2025	December 18, 2026
Student Break	December 22, 2025 – January 7, 2026	December 21, 2025 – January 8, 2026

Preclinical Terms 1–4 follow Vincentian holidays.

the Review Course follows U.S. holidays

Clinical Rotations (Terms 5-10)



IM	SURG	Ob/Gyn	FM	Peds	Psych

Clinical terms follow the U.S. holiday schedule.

About TMSU

History

Trinity School of Medicine (TSOM) was established in 2008 in St. Vincent and the Grenadines (SVG), with its main campus located in the town of Ratho Mill in the Parish of Saint George. The founders, with the support of the Government of St. Vincent and the Grenadines, were committed to developing a high-quality medical education program designed to prepare future physicians while meeting internationally recognized academic standards. This commitment remains aligned with the institution's mission to educate competent, compassionate physicians who are prepared to serve diverse patient populations and contribute meaningfully to global health care. In 2012, TSOM graduated its charter class.

Since its founding, the institution has steadily expanded its academic resources, educational infrastructure, and student enrollment. In addition to the core Doctor of Medicine (MD) degree program, TSOM offered a premedical (non-degree) pathway designed to prepare students for entry into medical school. TSOM is accredited by the Caribbean Accreditation Authority for Education in Medicine and Other Health Professions (CAAM-HP). Trinity Medical Sciences University (TMSU) is also working with the University Council of Jamaica (UCJ), the accrediting body for graduate education in the Caribbean, to develop additional graduate-level academic programs that support the institution's mission of expanding educational opportunities in the health sciences.

In 2017, TSOM began transitioning to a broader university structure. As part of this transition, the institution's legal name was changed to Trinity Medical Sciences University (TMSU). The university now consists of two academic units: the School of Medicine and the School of Biomedical Sciences. The former premedical pathway was incorporated into the School of Biomedical Sciences, where the undergraduate curriculum is designed to provide students with the academic credits and foundational coursework necessary to matriculate into medical school.

The transition to a university structure allows the institution to support a broader range of academic pathways and outcomes for its diverse student population. The organizational and curricular changes were reviewed and approved by the University's Board of Trustees as part of its governance responsibility for institutional strategy, academic oversight, and long-term sustainability. The formal transition to Trinity Medical Sciences University was publicly announced in July 2018.

Because the School of Medicine continues to represent the majority of enrollment at TMSU, the terms TMSU and TSOM may be used interchangeably throughout this document where appropriate. Institutional functions and services that apply across the university are described in sections referring to TMSU, while matters specific to the School of Medicine and the School of Biomedical Sciences are addressed in their respective sections.

The institution's historical development—from its founding as a single medical school to its evolution into a university structure—has supported continued growth in academic resources, curriculum development, and student support systems. These developments contribute directly to the educational outcomes of the medical program, including student progression, performance on qualifying examinations, and preparation for licensure and postgraduate medical training.

Mission Statement

Trinity Medical Sciences University is a community of professionals committed to excellence in medical education, research, scholarly activity, and community service.

Vision Statement

To produce distinctive, caring, physician-leaders who will transform the health of their patients through lifelong learning, research, and service.

Strategic Goals

Three strategic goals form the foundations of commitment to the core values:

Goal 1: Enhance student success — TMSU is committed to excellence in the education of its students. The faculty and administration seek to identify initiatives and strategies that will continue to provide and improve opportunities for students to achieve success.

Goal 2: Enhance research and scholarly activity — TMSU recognizes that research and scholarly activity demonstrate a commitment to educational growth by faculty and model lifelong learning for students. The university is committed to strengthening support for initiatives, particularly in medical education, that create an environment open to personal growth.

Goal 3: Promote service to the community — TMSU believes that students will make a difference in the world beginning with participation in opportunities and connectivity to communities. TMSU is committed to developing these opportunities.

Accreditations, Recognitions, and Authorizations

Trinity School of Medicine (TSOM) is registered with the National Accreditation Board of St. Vincent and the Grenadines (NAB), the governmental body responsible for the registration and oversight of higher education institutions in St. Vincent and the Grenadines.

Trinity is also authorized to operate within the State of Georgia in the United States by the Georgia Nonpublic Postsecondary Education Commission (GNPEC). In addition, TSOM meets the standards of the Georgia Composite Medical Board as an approved medical school for purposes of licensure eligibility in the State of Georgia.

TSOM is accredited by the Caribbean Accreditation Authority for Education in Medicine and Other Health Professions (CAAM-HP), the legally constituted body responsible for accrediting medical education programs in the Caribbean region. The accreditation standards used by CAAM-HP have been determined by the U.S. Department of Education to be comparable to those applied to U.S. medical schools accredited by the Liaison Committee on Medical Education (LCME). At present, TSOM is the only medical school in St. Vincent and the Grenadines accredited by CAAM-HP.

Trinity School of Medicine is listed in the World Directory of Medical Schools (WDMS), a directory developed through a partnership between the World Federation for Medical Education (WFME) and the Foundation for the Advancement of International Medical Education and Research (FAIMER). FAIMER was established in 2000 by the Educational Commission for Foreign Medical Graduates (ECFMG).

Listing in the World Directory of Medical Schools with the appropriate ECFMG sponsor note permits graduates of Trinity School of Medicine to apply for certification through the Educational Commission for Foreign Medical Graduates and to register for the United States Medical Licensing Examination (USMLE) Step 1, Step 2 Clinical Knowledge (CK), and Step 3 examinations. Students who successfully complete Step 1 and Step 2 CK and meet all graduation requirements may obtain ECFMG certification and subsequently participate in residency placement through the National Resident Matching Program (NRMP) in the United States or the Canadian Resident Matching Service (CaRMS).

Trinity School of Medicine is compliant with the 2024 accreditation requirement established by the Educational Commission for Foreign Medical Graduates requiring international medical graduates to graduate from a medical school appropriately accredited by a recognized accrediting authority.

Questions or concerns regarding TMSU's accreditation should be directed to
CAAM-HP at CAAM-HP Secretariat
Suite #7 Pinnacle Point

53 Lady Musgrave Road
Kingston 10, Jamaica
875-927-4765

Georgia Nonpublic Postsecondary Education Commission
2082 East Exchange Place
Tucker, GA 30084
Phone: (770) 414-3300
Website: https://gnpec.georgia.gov/student-resources/complaints-against-institution

The purpose of publishing the commissions' contact information is to enable interested parties

1. to learn about the accreditation status,
2. to file a third-party comment at the time of the institution's review, or
3. to file a complaint against the institution for alleged noncompliance with a standard or requirement.

Approach to Learning

Trinity Medical Sciences University (TMSU) is committed to delivering a contemporary, evidence-based medical education program that incorporates proven instructional methods through a multimodal approach to teaching and learning. The medical curriculum is organized as a systems-based spiral curriculum that promotes both horizontal and vertical integration of the biomedical, neurobehavioral, and clinical sciences.

During the early phases of the program, students study normal human structure and function across organ systems**,** integrating foundational disciplines such as anatomy, physiology, biochemistry, genetics, and behavioral science. In subsequent phases, these same organ systems are revisited with emphasis on pathophysiology, microbiology, pharmacology, and clinical correlations**,** allowing students to build progressively deeper understanding through repeated exposure to key concepts.

This spiral design ensures that foundational scientific knowledge is continually reinforced and expanded as students progress through the curriculum. Clinical reasoning and application are incorporated throughout the program through case-based learning, clinical skills training, and other active learning strategies, culminating in direct patient care experiences during the clinical clerkships**.** This integrated curricular structure supports the progressive development of medical knowledge, clinical skills, and professional competencies required for the practice of medicine.

Teaching Approach and Didactic Methods

A comprehensive description of formats, didactic concepts, and educational methodology used in TSMU/TSOM courses can be found in the individual course syllabi. In clinical clerkships, these are found in the Clinical Clerkship Manual for each core clerkship. TSOM follows an integrated spiral curriculum. This advanced educational approach leads to educational success by integrating basic sciences with clinical sciences and repeating concepts.

Faculty Teaching Approach

1. Establish and maintain the highest academic standards in keeping with best international practices.
2. Create a productive, collegial, transparent, fair, and honest teaching environment of the highest caliber that strives for excellence in academic content and in methods of its delivery.
3. Embrace the values of the medical profession and incorporate those values into our curriculum.
4. Integrate basic and clinical sciences throughout the Doctor of Medicine program utilizing Milton Cato Memorial Hospital and its clinics on St. Vincent and the Grenadines.
5. Continuously improve Trinity Medical Sciences University curriculum so that it responds to and incorporates changes in education, educational methods, science, medical knowledge, and medical practice.

Defined Course Objectives

Each course includes clearly defined learning objectives and an instructional plan designed to guide students toward mastery of those objectives. Course objectives are aligned with the **2024 United States Medical Licensing Examination (USMLE) Content Outline** to ensure that the curriculum reflects nationally recognized expectations for foundational and clinical medical knowledge.

In addition to course-level objectives, each instructional session includes specific, session-level learning objectives appropriate to the topic being taught. These objectives guide both instruction and assessment.

Student achievement of course and session objectives is evaluated through a comprehensive assessment strategy that includes:

- Formative, summative, and narrative assessment tools designed to monitor student progress and ensure attainment of the required learning objectives.
- Examinations and structured learning activities that assess student preparation, participation, critical-thinking skills, and the application of medical knowledge.
- Multiple evaluation formats**,** including written assessments, case-based exercises, and other performance-based activities, that evaluate each student's ability to demonstrate problem-solving skills and clinical reasoning.

This structured approach ensures that student learning is continuously assessed and that evaluation methods are aligned with the educational objectives of the curriculum.

Early Clinical and Community Medicine Experience

Clinical exposure begins in the first term of the Doctor of Medicine (MD) program and continues throughout all phases of the curriculum. These early and longitudinal clinical experiences provide students with opportunities to develop essential clinical and communication skills required for effective patient care during the clinical clerkships and subsequent postgraduate training.

Through structured clinical skills instruction, simulated patient encounters, and case-based learning activities, students progressively build competency in patient interviewing, physical examination, clinical reasoning, and professional communication. This early and continuous exposure helps ensure that students enter the clinical phase of the curriculum prepared to engage effectively in direct patient care.

This longitudinal approach reflects the vertical integration of clinical skills throughout the curriculum**,** allowing students to progressively develop and demonstrate competency as foundational scientific knowledge is applied to increasingly complex clinical scenarios and patient care experiences.

Hours of Operation

MAIN CAMPUS IN RATHO MILL, ST. VINCENT & THE GRENADINES

Staff are available from 8am - 4pm, Monday - Friday. Select spaces, including the library, are available for independent and group study 24/7.

MEDICAL EDUCATION CENTER IN WARNER ROBINS, GEORGIA

Staff are available 8am - 5pm, Monday - Friday. The facility is open for independent and group study 24/7.

ADMINISTRATIVE OFFICE IN ROSWELL, GEORGIA

Staff are available 9am - 5pm, Monday - Friday.

Board of Trustees

Name and Credentials	Position on Board
C. Ross Berry	Chair
Donna D. Brown, MD	Trustee
Michael F. Hemsey	Trustee
G Montgomery Maule	Trustee
Raj Vasudeva, MD	Trustee

Faculty and Academic Leadership

Name	Level	Area(s) of Expertise
John P Geisler, MD, MSPharm	Professor	Dean / Provost Chief Academic Officer Ob/Gyn; Gyn Oncology; Surgery; Curriculum Development; Biostats; Research; Ethics; Pharmacoeconomics
Kelly J Manahan, MD, MBA	Professor	Associate Dean of Clinical Sciences and Curriculum Principal Academic Officer - USA Ob/Gyn; Gyn Oncology; Surgery; Physician Communication; Student and Faculty Development; Curriculum Development; Research; Ethics; Business of Medicine
Nagadharshan Devendra, MD	Professor	Associate Dean of Basic Sciences and Curriculum Principal Academic Officer – St. Vincent and the Grenadines Biochemistry and Genetics
Frances Jack-Edwards, MD	Associate Professor	Associate Dean of Student Affairs / Admissions Clinical Medicine; Admissions; Student Affairs
Mignonette Sotto, MD	Associate Professor	Associate Dean of Testing - External Clinical Medicine; External Testing (NBME; USMLE)
Bernadette Scott, MD	Associate Professor	Associate Dean of Testing - Internal Clinical Medicine; Internal Standardized Testing
Shashikant Adlekha, MD	Professor	Pathology
Julia Akcayli, MD	Assistant Professor	Director – Global MD Pathway Clinical Medicine; Behavioral Sciences
Uma Sankar Akula, PhD	Associate Professor	Biochemistry and Genetics
Suresh Bisaya Bidarkotimath, MD	Professor	Anatomy
Marcus Caine, MS	Assistant Professor	Biostats and Epidemiology
Tandra Chadha, PhD	Associate Professor	Microbiology and Immunology
LaFerne Fraser, MS	Assistant Professor	Psychology; Executive Function

Jamil Ibrahim, MD	Associate Professor	Clinical Medicine
Nabanit Jha, PhD	Assistant Professor	Pharmacology
Dragan Jovanic, MD, PhD	Professor	Pathology
Shilpa Karkera, PhD	Associate Professor	Assistant Dean – Premedical Studies Anatomy / NeuroScience
Ramesh Lolla, MD	Associate Professor	Pharmacology
Godfred Menezes, MD	Professor	Microbiology and Immunology
Yulia Modna, MD, PhD	Professor	Physiology
Avinash Rawal, MD	Associate Professor	Biochemistry and Genetics
Dev Shah, MD	Professor	Physiology
Pushparaj Shetty, MBBS	Associate Professor	Anatomy and Histology
Santanu Das, MD	Clinical Associate Professor	Chair, Pediatrics
Jason M Jian, MD	Clinical Associate Professor	Chair, Psychiatry
Joseph S Lomboy, MD	Clinical Associate Professor	Chair, Internal Medicine
Kerry C Rogers, MD	Clinical Associate Professor	Chair, Surgery
Jayish Patel, MD	Clinical Associate Professor	Chair, Family Medicine
Byron Brooks, MD	Clinical Assistant Professor	Chair, Ob/Gyn

Administrative Leaders

Name and Credentials	Position
Steve Wilson	**CEO**
Dean Sippel, MBA	**President**
Melissa Burns, CPA	**Chief Financial Officer**
Tonya Warner	**VP, Marketing**
Kiley Warren	**Director, Human Resources**

MD Pathways

TMSU offers several MD degree pathways stemming from different goals. All pathways have the same graduation requirements; however, some pathways have additional requirements. All pathways start medical school with the same integrated spiral curriculum and required National Board of Medical Examiners (NBME) examinations in the first four terms (all taught in SVG). After passing the Comprehensive Basic Science Examination (CBSE) or other qualifying examinations, the pathways differ.

Traditional MD Pathway

The traditional pathway is what most students coming from U.S., Canada, and other countries will follow. It starts with the same integrated spiral curriculum but, after achieving a mark high enough on qualifying examinations to anticipate passing Step 1 at >90% within 1-week, Traditional MD pathway students sit for Step 1. After passing Step 1, students are scheduled by the Office of Clerkships into core clerkships (Family Medicine, Internal Medicine, Ob/Gyn, Pediatrics, Psychiatry, and Surgery). After successful completion of all clerkships and their respective NBME Clinical Subject Examinations, students will take Comprehensive Clinical Science Examination (CCSE) to ensure students are best prepared to sit for USMLE Step 2. After passing Step 2, students start 27 weeks of electives and prepare for the NRMP Match Program for residency.

Executive MD Pathway

The Executive MD pathway is for students who want the rigors of an MD program but do not plan on practicing medicine or entering medical residency in the U.S., Canada, or CARICOM countries immediately upon completion of their degree. The same requirements as those of the Traditional MD program need to be met (see Graduation Requirements), but the students do not have to pass USMLE Step 1 or Step 2 to graduate. With this degree, students could pursue roles in healthcare administration, the pharmaceutical industry, the medical device industry, or the insurance system. If they have not used their attempts to pass USMLE Step 1 or 2, they could pursue these later, if desired, on their own to fulfill ECFMG requirements. Although it is not frequent, there may be times that Executive MD pathway students may have to wait for a rotation, due to prioritization of Traditional MD pathway students*.

*Per the Federation of State Medical Boards website (FSMB.org): "*It should be noted that acquisition of an MD or DO degree does not automatically confer a license to practice medicine in the United States. The medical practice act in most jurisdictions restricts individuals holding a physician credential from publicly representing themselves as physicians unless they hold a medical license in that jurisdiction*."

Global MD Pathway

The Global MD pathway is for students wishing to practice medicine in CARICOM countries or other countries in the world where USMLE Step 1 or 2 is not required. All medical school training is in one geographic area (CARICOM countries); therefore, this pathway allows students who are from countries that require all medical school training to be done in one geographic area to obtain their MD degree. The same rigorous training (see Graduation Requirements) of the Traditional MD pathway is required but, through an agreement with a partner, the core clerkships and electives can be completed within the CARICOM countries. If students on this pathway pass Step 1 and Step 2, they may apply for a residency in the US following the NRMP guidelines. Students can obtain a license in the United States if they meet all the requirements of the ECFMG.

External (Standardized) Exams

Medical subject exams created by the U.S. NBME are administered in the spiral curriculum to Trinity students in Term 2 (Biochemistry, Anatomy), Term 3 (Neuroscience and Behavioral Science), and Term 4 (Pathology, Pharmacology, Microbiology, Physiology). Exam security is approved by the NBME. Results provide unbiased and direct evidence of the performance of TMSU medical students compared with their U.S. peers at LCME accredited schools. Students are required to take the exam at the scheduled time.

Skipping an NBME, CBSE, CCSE or qualifying exam that was scheduled is counted as forfeiting that attempt (it counts as a failed test).

A passing score on a standardized assessment (i.e., CBSE, other qualifying exams, etc.) is required to sit for the USMLE Step 1. The score required to sit for Step 1 is 67 on CBSE or 74 on another qualifying exam. Anomalous score increases in an exam (i.e., increase of >20 points from previous CBSE (>2 SD increase)) may require re-examination with a different qualifying exam. This enhances student success by ensuring scores were real and not anomalous. Taking Step 1 without a qualifying exam score that meets the school's minimum requirements will result in disciplinary action from an ad hoc Disciplinary Review Committee (up to and including dismissal) whether or not Step 1 is passed.

Currently, a 218 on CCSE is required on to sit for Step 2. Taking Step 2 without a CCSE Score of ≥218 will result in disciplinary action from an ad hoc Disciplinary Review Committee (up to and including dismissal) whether or not Step 2 is passed.

Students on the traditional path to a U.S. residency are required to take Step 1 within 4 weeks of passing qualifying exams (CBSE and/or others). Studies have shown that those who take Step 1 immediately following the qualifying exam have a higher passing rate. Students on the Traditional MD pathway must pass USMLE Step 1 before beginning the core clerkships. Furthermore, students on the traditional path to a U.S. residency are required to take Step 2 within 4 weeks of passing qualifying exams (CCSE and/or others).

Students who cannot pass USMLE Step 1 or Step 2 within the NBME-allowed 4 times will not be able to train in the U.S. in a residency or obtain a medical license in U.S. In the Traditional MD pathway, students take Step 2 after core clerkships, after scoring a high enough score on CCSE to qualify to take Step 2 and before electives. Please see Graduation Requirements.

Due to the elimination of USMLE Step 2 CS, in the 4th year, students are required to take and pass an Objective Structured Clinical Examination (OSCE), integrating (virtual or live) standardized patients into a clinical skills examination. This is called the Lifelong Learning OSCE. The results of this, paired with clinical evaluation in rotations, provides the summative evaluation for clinical skills needed for the ECFMG certification of TSOM graduates.

Graduation Requirements for Doctor of Medicine

1. Pass all courses in preclinical years
2. Pass all NBME Basic Science Subject exams administered (does not apply to students transferring into Trinity in clinical years)
3. Pass all NBME Clinical Science Subject exams administered
4. Pass all six core clerkships (Family [Community] Medicine, Internal Medicine, Ob/Gyn, Pediatrics, Psychiatry, Surgery)
5. Pass all 27 weeks of electives
6. Pass CBSE at posted level (see Canvas LMS) — currently 57 to graduate; 67 or higher to sit for USMLE Step 1; if another qualifying exam is used, a score of 64 to graduate and a score of 74 is needed to sit for Step 1.
7. Pass CCSE at posted level (see Canvas LMS) — currently 197 to graduate; 218 or higher to sit for USMLE Step 2.
8. Pass Lifelong Learning OSCE (or equivalent) in year 4
9. Pass a minimum of 130 weeks of academic instruction over 4 (or more) calendar years
10. GPA of ≥2.0
11. Be fully paid regarding tuition and fees
12. Additional requirements if considering U.S. medical residency (Traditional MD pathway)
    a. 67 or higher on CBSE or equivalent score (74) on another qualifying examination to sit for Step 1
    b. Pass USMLE Step 1

c. 218 or higher on CCSE to take Step 2
d. Pass USMLE Step 2
e. Fulfill ECFMG requirements

Graduation with Academic Honors

1. GPA ≥ 3.5
2. Pass Step 1 on first attempt
3. Pass Step 2 on first attempt
4. Step 2 score ≥ 240

Trinity School of Medicine — Doctor of Medicine

Admissions

NEW ADMISSIONS POLICY

Policy Statement

The primary goal of Trinity School of Medicine (TSOM) is to produce outstanding, skilled, and humanistic physicians to serve the broad healthcare needs of the world. The educational program strives to instill within our medical students a deep concern for continuing intellectual growth that will lead to a lifelong commitment to learning. Having a diverse student body is essential to enhance teaching and learning for all students, and establishes foundations for expansive educational and health care related benefits.

Reason for Policy

Our admissions process evaluates and selects individuals who demonstrate the capacity to meet both the academic rigor and personal challenges they may encounter in the career of medicine, which are fundamental to the making of a physician of excellence. Selection is based on evaluation of both intellectual and personal characteristics that the committee feels are desirable to produce excellent physicians.

Our Admissions Committee considers the total qualifications of each applicant without regard to sex, race, color, creed, national origin, religion, age, sexual orientation, marital status, political views, socioeconomic status or disability.*** Decisions regarding admission are based on multiple factors including prior academic performance; completion of the courses required for admission; the potential for academic success including performance on standardized tests such as the Medical College Admission Test (MCAT); communication skills, character, personal skills, health related experiences, and motivation for a career in medicine.

Our admissions process involves broadening the range of admission criteria to help us advance our core educational goals and mission while giving balanced consideration to the important aspects of each applicant. All applications receive individualized consideration. Criteria for candidacy and selection are based on academic criteria with greatest emphasis placed on Cumulative GPA, Prerequisite GPA, MCAT score and the professional criteria as supported by letters of recommendation and the Interview Report. At no time is a candidate's age, gender, race, ethnicity, socio-economic status, citizenship, religion or any other such characteristic used to make a determination as to whether a candidate is offered admission to TMSU. In no event will an offer of Admission be based on a quota.

Trinity Medical Sciences University (TMSU) prides itself in considering the unique qualifications of each individual applicant. Consistent with this philosophy, TMSU accepts students with a wide range of undergraduate pursuits and accomplishments. Student selection is based on an appraisal of those intellectual and personal characteristics that the admissions committee regards as desirable for prospective medical students and physicians. Both cognitive (primarily academic) and non-cognitive factors, such as the applicant's statement, extracurricular activities, and letters of recommendation play an important part in the selection process.

Process & Procedures

1. Applicants who meet the following minimum academic criteria and submit all the application documents required by TSOM may be processed and sent to the Admissions Committee (AC) for their consideration.
2. Prerequisite courses (Required Subjects)
    1. General Biology – two academic terms or equivalent
    2. General Chemistry – two academic terms or equivalent

3. Behavioral Science – one academic term or equivalent. An Introduction to Sociology or Psychology, for example, would fulfill this requirement. Other courses may also fulfill this requirement.
4. General Physics - one academic term or equivalent.
5. Mathematics – one academic term or equivalent of college level mathematics (trigonometry, analytic geometry, pre-calculus, or biostatistics highly recommended)
6. English Composition: – two academic terms or the equivalent. Courses other than composition with significant expository writing requirements will satisfy this requirement. ESL or TESOL courses may not be used to satisfy this requirement.
7. AP credits and CLEP credits can be used for these prerequisites
8. Two years (4 terms of college credit). Must also have 60 credit hours.

3. All new applicants will be evaluated with the admissions rubric (please see attached table).
    1. New students will be evaluated based upon MCAT score, overall GPA, BCPM (biology, chemistry, physics, math) GPA, interview, letters of recommendation, time since last college enrollment, and additional postsecondary coursework in science.
    2. An applicant must have achieved either of the following: a minimum total score of 480 on the MCAT. Applicants with MCAT scores of less than 480 will be considered on a case-by case basis.
    3. Ideally, MCAT scores must reflect a balance in strength across all sections of the MCAT exam.
    4. MCAT scores must be from exams taken within the last 10 years.
    5. MCAT scores from exams taken in the last 10 years are required for all U.S citizens and permanent residents (green card holders) and encouraged for all applicants.*
    6. The minimum GPA in required subjects is 2.0 on a 4.0 scale, currently calculated as the BCPM. Applicants with a GPA below this standard will be considered on a case-by-case basis. Admissions may use the transcript key on official transcripts to assist in GPA calculation when is a non-standard convention is used.
    7. The minimum overall GPA is 2.5 on a 4.0 scale. Applicants with a GPA between 2.0 -2.49 will be considered on a case-by-case basis. Admissions may use the transcript key on official transcripts to assist in GPA calculation when a non-standard convention is used.
    8. Official transcripts must be received from all academic institutions where credits were earned. Official documentation must be provided of MCAT scores. Student copies of transcripts or MCAT Scores will not be considered official.
    9. Conditional Acceptance: Students who are accepted prior to the receipt of all official documentation will be Conditionally Accepted. These documents must be received no later than four weeks after matriculation. If the missing documents are not received, the students will be referred to the APC and will be discussed for possible dismissal.
4. Required Subjects may not have been completed more than 10 years prior to the date of application. Exceptions may be considered for the English Composition requirement if the applicant can demonstrate that the language of instruction in their home country was English. Exceptions may be made to the above if an applicant has:
    1. Taken the MCAT and scored at the required level within one year of application.
    2. A more recent advanced degree in a medically related or medical science related field.
5. Applicants who do not meet the above academic criteria will be processed and submitted for consideration on a case-by-case basis following a detailed review of their life experiences and potential for success.
6. Evidence of clinical experience, participation in medical research, volunteering in medical settings, a broad liberal arts education, experiences in the arts, and community service are viewed as positive.
7. During the interview, all applicants should exhibit qualities of leadership, determination, strength of character, responsibility, compassion and the desire to serve.
8. All applicants must submit a minimum of two Letters of Recommendation (LOR) or one Committee letter from their Pre-Health Advising office. LORs must come only from pre-health advising offices, professors, and physicians who have worked with the applicant and who are not family relatives of the applicant. The content of the letters must confirm the applicant's academic ability and provide evidence of positive character traits related to the practice of medicine.
9. Applicants with a felony conviction will not be considered.
10. Should an applicant meet the academic criteria above, yet reveal on their application that they have been convicted of a misdemeanor and/or have received an academic sanction, these will be discussed with the applicant during the interview, documented, and sent to the admissions committee for their judgment.
11. The admissions committee will consider all complete applications per the above requirements

12. Final authority with acceptance rests with the admissions committee**. The Committee may ask the Dean to evaluate and weigh in on an applicant
13. Applicants who are not accepted will be sent a notification indicating the reason they were not accepted and any remediation or alternatives that the Admissions Committee deem appropriate to suggest.
14. Deferral applies to a student who has deposited to the original term to which they were accepted but must subsequently move their matriculation to a later term. Deferral does not apply to a student who wants to start earlier than the original term to which they were accepted.
    1. Deferral is available for a maximum of two terms only and can be utilized only one time.
    2. Scholarships do not automatically follow with a deferral and may be subject to reassessment or removal of the offer.
    3. Students must designate the term they will defer to and adhere to it. It cannot be any more than two terms after their original acceptance, or they must reapply.
    4. A student may request deferral for reasons of their own until four months before the first day of class of the term to which they were originally accepted.
    5. Deferral after the four-month notification requirement is only allowed for financial reasons or family emergency. Financial deferral acceptance is at the discretion of the CFO.
    6. All incoming students must be aware of and be willing to comply with all health requirements and deadlines.
15. Appeals regarding applications that are turned down should be made to the Dean of Trinity School of Medicine. Appeals should only be made if some one (applicant or Admissions counselors) believes that an applicant was turned down despite meeting all criteria. However, final authority rests with the admissions committee per CAAM-HP Standards for Accreditation of Medical Education Programmes MS-3

Disclaimer

Admission is contingent on verification of all submitted information and successful completion of background checks; the school reserves the right to rescind admission if material misrepresentation or disqualifying conduct is discovered.

Forms and Related Documents / Appendices

***CAAM-HP Standards for Accreditation of Medical Education Programmes - August 2024**

MS-2: Admission Criteria and Applicant Performance on Pre-entry Examinations

The faculty of each school develop appropriate criteria and implement effective policies and procedures for the selection of students, and make these readily available to potential applicants and other interested parties.

Admission criteria used by the school may include non-academic requirements in addition to the results of relevant national, regional or international examinations.

Medical schools that admit US citizens and US permanent residents are required to include performance on the MCAT among the criteria for their admission and accept for admission applicants who sat for the MCAT more than three times only in rare and extraordinary personal circumstances.

****CAAM-HP Standards for Accreditation of Medical Education Programmes - August 2024**

MS-3: Final Authority of Admission Committee

The final responsibility for accepting students to a medical school rests with a formally constituted admission committee. The authority and composition of the committee that includes faculty, administrators, and students and the rules for its operation, including voting privileges and the definition of a quorum, are specified in bylaws or other medical school policies. Faculty members constitute the majority of voting members at all meetings.

*****CAAM-HP Standards for Accreditation of Medical Education Programmes - August 2024**

MS-4: Avoidance of Political or Financial Considerations in Admission

The selection of individual medical students for admission is not influenced by any political or financial factors.

TRANSFER ADMISSIONS POLICY

POLICY STATEMENT

The primary goal of Trinity School of Medicine (TSOM) is to produce outstanding, skilled, and humanistic physicians to serve the broad healthcare needs of the world. To that end, Trinity will accept a limited number of transfer applications from well-qualified students who are interested in continuing their education with Trinity School of Medicine.

REASON FOR POLICY

Our admissions process evaluates and selects individuals who demonstrate the capacity to meet both the academic rigor and personal challenges they may encounter in the career of medicine, which are fundamental to the making of a physician of

excellence. The inclusion of students who transfer into Trinity with some or all basic science education completed at another university requires additional scrutiny and needs specific policy guiding the acceptance of both the student and potential academic credits. At no time is a candidate's age, gender, race, ethnicity, socio-economic status, citizenship, religion or any other such characteristic used to make a determination as to whether a candidate is offered admission to TMSU. In no event will an offer of Admission be based on a quota.

PROCESS & PROCEDURES

Transfer Candidates will be considered as follows:

1. All transfer applicants will be evaluated with the admissions rubric (please see attached table).
    1. Transfer students will be evaluated based upon medical school GPA, medical school term performance, interview, letters of recommendation, reason for transfer (essay), time since last schooling, and additional science degree. The reason for transfer essay, limited to 300 words, should explain the reasons for requesting a transfer, such as academic, professionalism, or other contributing factors. All information will be needed from the transfer school including but not limited to grades, transcripts, class descriptions, and any disciplinary or professionalism documents.
2. Transfer students must be transferring from an accredited US or Canadian medical school or an international school that is appropriately accredited and certified by NCFMEA. The RDA/AC/recruitment team will provide a list of accredited medical schools once per year with relevant updates as needed (per term) to the Admissions Committee.
3. If transferring from an international school, the school must be certified by NCFMEA and the student must have earned their credits within the time frame that ECFMG has provided as eligible to apply for certification (see Sponsor Notes section of the medical school on the WDMS website). If the medical school is in a country that has adopted CAAM-HP as the accrediting body, the school must have CAAM-HP accreditation.
4. If transferring from a school that has obtained ACCM accreditation (ACCM Accredited Schools) students may apply if the school is located in one of the following countries: Saint Maarten, Cayman Islands, Federation of St. Kitts and Nevis, Aruba, Curacao, or Anguilla. Students who have been enrolled in medical schools in these countries are not eligible to apply to Trinity unless their school has ACCM or at least provisional CAAM-HP accreditation.
5. In accordance with ECFMG policy, credits from the most recent school prior to Trinity would be the only credits accepted.
6. A transfer student should not have been out of school for more than one year *at the time of application*. This includes time a student may be on leave to study. If a student can document that he/she has been out longer than one year on medical leave, this one-year limit may be waived. Exceptions are at the discretion of the Dean and/or Provost.
7. Applications for Transfer will be considered for students who will enter in Term 3 for preclinical terms, the Review Course or in Term 7 **only** if the applicant has passed Step 1. (Applicants with Step 1 failures may be considered if there are verifiable extenuating circumstances. Review of those "extenuating circumstances" should be done by the Admissions Committee and the Dean/Provost before discussing this with the applicant.) No transfers will be considered for Terms 7 through 10. No transfers will be considered for Term 2 or 4 pursuant to CAAM-HP Standards for Accreditation of Medical Education Programmes (August 2024) MS-9 unless the following statement is met.
    1. Transfer into Term 2 or 4 is not possible, unless students must come from a school with a similar curriculum so that major areas of focus are not missed by transferring. This is required by CAAM-HP. The Associate Dean of Basic Sciences, Dean of TSOM, or Provost of TMSU should evaluate the equivalency of curriculum to stay compliant with CAAM-HP.
8. All accepted transfer students may defer for one term only for financial reasons as determined by the Enrollment Services Manager, but only if they have secured their seat deposit within the time frame listed in their acceptance agreement. All others who do not enroll to the term to which they apply will need to reapply.
9. Transfer applicants must document/submit the following:
    1. Transfer Candidates to the MD Program must have an overall minimum GPA of 2.0. In a Pass/Fail curriculum a Pass or P is a 2.0/4.0 and a Fail is a 0.0/4.0.
    2. No credit will be accepted for courses with a grade of less than C or for courses that are not part of the Trinity curriculum.
    3. Transfer applicants must request a letter from the Dean or ranking member of the leadership of the previous school to be sent directly to the Dean of Trinity that addresses the student's academic and professional performance. For students dismissed, this letter should include a description of the events leading to dismissal.
    4. Students must submit 2 letters of recommendation from medical school professors or deans.

5. Although an MCAT score is not required of a transfer applicant unless they matriculated into medical school Fall 2024 or later (and are a US citizen or green card holder), if the applicant has taken the MCAT in the past, the score should be included in the information submitted to the Admissions Committee.
6. If an applicant wishes to transfer into term 7, they must not be sent to the Admissions Committee until the official USMLE score transcript has been received directly from ECFMG.

10. Transfer students must submit a complete application along with their transcripts from their current or previous medical school, along with their undergraduate / graduate transcripts. A Dean's Letter is required from all transfer applicants. If the applicant was dismissed for unprofessional conduct/behavior., further information regarding the incidence is required from the committee that recommended dismissal of the student before the applicant is forwarded to the Admissions Committee. Applications **will not** be reviewed prior to the receipt of all documents.
11. An interview will be arranged with a Regional Director of Admissions. Following the interview, a recommendation will be made to the Admissions Committee (AC) through the Associate Dean for Admissions.
12. It must be determined by the Registrar or Deans, and officially documented in the student file by the determiner, that the student will have enough weeks of study (including weeks of study from transfer school and Trinity) to meet the CAAM-HP standard of 130 weeks of study (*not including remediation*) CAAM-HP Standards for Accreditation of Medical Education Programmes (August 2024) ED-8 and Trinity's required 137 weeks of instruction.

Preclinical Transfer Students

13. Students will be reviewed for acceptance into Trinity School of Medicine on the basis of their application packet. No confirmation of transfer course credit will be given upon initial review.
    1. If the student is accepted into Trinity School of Medicine, students requesting transfer credit for courses must submit the following information along with the Request for Transfer Credit Evaluation form in order for an evaluation to be completed and any eligible credit to be awarded.
        1. Course syllabi for all requested courses
        2. Level of course work (transfer credit can only be awarded for courses come from another medical school)
        3. The institution's grading scale / system. Note: if a course has a 'P' or 'Pass' grade listed, then the grading scale must explicitly state what the minimum grade is to earn a passing grade. Pass grades are accepted only for courses for which the standard of passing is 'C' (or better) quality work.
        4. Weeks of study are used by CAAM-HP, COCA, and LCME not credit hours.
        5. The previous institution's accreditation must be officially recognized by NCFMEA
        6. Because of the nature of the integrated spiral curriculum, students transferring into the preclinical spiral curriculum must take the entire course offered per term. There is only one integrated course per term.
14. General guidelines for course credit for Transfers into Terms 4 (no longer relevant after Summer Term 2025):
    1. Any classes in which a student has earned a 2.0 or above, and has provided a syllabus, will be considered for transfer provided there is alignment with the TSOM curriculum in terms of content, duration, and credit hours.
    2. If a class carries significantly more credit hours at TSOM than at the student's transfer school, a student must repeat the course.
    3. If a class taken at a prior school is a block course and the subject represents a portion of a course at TSOM, no credit will be awarded for the subject.
    4. Transfer credits may not be awarded for course work from an enrollment to study medicine that was completed or discontinued more than 2 years before the date of the transfer application.
    5. If a transfer student has so few credits to transfer that they start in Term 1, they must start over and apply as a new student.
    6. If any transfer student needs to take a course that spans two terms, they MUST start in Terms 1 or 3.
15. *The Associate Dean for Admissions in consultation with the Admissions Committee will develop a study plan to be sent to the student with any offer of acceptance. No plan may be shared with a student until the aforementioned is completed.* This means that the Associate Dean of Admissions and the Admissions Committee determine what term that a transfer student is accepted into. Transcripts will be subject to review prior to a complete application being submitted to the Admissions Committee. The Registrar's office verifies official documents and completes transfer credit evaluations All incoming transfer students must be aware of, be willing to comply with and sign off on all Trinity School of Medicine health requirements and deadlines as outlined in the Student Guide and the Student Health Form.

16. Once a transfer student has been accepted into Terms 1-4, Trinity School of Medicine will further evaluate course progression and potential overlaps in class schedules when finalizing a transfer student's schedule. To deal with and to organize around potential scheduling overlaps is the responsibility of the transfer student.
17. Transfer Students into the Review Course (Clinical term with test preparation also):
    1. If an applicant has successfully completed a course of study in the basic sciences, but has not been cleared to take Step 1 of the USMLE, that student must start in the Review Course and take both CLMD 405 (Introduction to Clinical and Community Medicine V) and CLMD 406 (Integrated Systems Review).
    2. If an applicant has successfully completed a course of study in the basic sciences and has been cleared to take the USMLE Step 1 by their previous school, but was dismissed for missing the deadline, that student must start in the Review Course both CLMD 405 (Introduction to Clinical and Community Medicine V) and CLMD 406 (Integrated Systems Review).
    3. Students transferring into the Review Course may be assessed for clinical skills and be required to take additional clinical skills remediation as deemed necessary by an approved clinical faculty member.
    4. Students transferring into the Review Course will be provisionally or conditionally admitted (applicants who have not submitted official documents or are missing documents) to the Review Course. Continued enrollment is contingent upon the following requirements:
18. Term 7 transfers
    1. Credit will not be given for any core or elective clerkships or rotations completed while enrolled at another school.
    2. Only applicants who have passed Step 1 on the first attempt will be considered for transfer into Term 7.
    3. Applicants must be able to submit an official transcript from their previous undergraduate and medical school at the time of application.
    4. No clerkship will be scheduled until all official transcripts are received.
    5. If an applicant took the MCAT (see 9.e.), applicants must provide MCAT scores at the time of the application.
    6. No applicant will be considered who has been dismissed/withdrawn from his/her previous school for more than 1 year and/or has taken Step 1 more than one year prior to application (unless the applicant has been continuously enrolled in clerkships).
    7. If a transfer applicant has been dismissed from the previous school because of poor performance in clerkships, he/she must furnish a letter from the Dean or member of the leadership explaining the circumstances.
    8. An applicant will not be considered if they were dismissed for violations of professionalism from another school
    9. All accepted Term 7 transfer students may defer for one term only and only for financial reasons as determined by the Trinity School of Medicine administrator in charge of financial aid. All others who do not enroll to the term to which they apply must reapply.
    10. All Term 7 transfers must be prepared to submit background checks, certifications, visas and all other documents as required by Trinity School of Medicine and the hospitals where they will be working a minimum of one month prior to beginning clerkships.
    11. No clerkships will be scheduled until all credentialing documents are received and processed by the appropriate clinical offices.
    12. Transfer students into Term 7 must be aware of, be willing to comply with, and sign off on all applicable Trinity School of Medicine and hospital health requirements, completely and in a timely manner, prior to beginning Term 7.
19. Transfers will be accepted based on their individual applications and the availability of adequate educational resources to accommodate their needs without compromising the needs of other students. The availability of resources will be communicated by the Dean's office to the admissions committee on an annual basis. In the latter instance, an applicant may be waitlisted or offered a delayed entry.
20. Appeals regarding applications that are turned down should be made to the Dean of Trinity School of Medicine and the Admissions Committee. The Dean will decide whether the is enough information to ask the Admissions Committee to re-evaluate. As per CAAM-HP standards for accreditation, the final decision for admission rests with the committee, not the Dean or any other administrator Appeals should only be made if someone (applicant or Admissions counselors) believes that an applicant was turned down despite meeting all criteria.

Disclaimer

Admission is contingent on verification of all submitted information and successful completion of background checks; the school reserves the right to rescind admission if material misrepresentation or disqualifying conduct is discovered.

Forms and Related Documents / Appendices

CAAM-HP Standards for Accreditation of Medical Education Programmes - August 2024

MS-2: Admission Criteria and Applicant Performance on Pre-entry Examinations

The faculty of each school develop appropriate criteria and implement effective policies and procedures for the selection of students, and make these readily available to potential applicants and other interested parties.

Medical schools that admit US citizens and US permanent residents are required to include performance on the MCAT among the criteria for their admission and accept for admission applicants who sat for the MCAT more than three times only in rare and extraordinary personal circumstances.

MS-3: Final Authority of Admission Committee

The final responsibility for accepting students to a medical school rests with a formally constituted admission committee. The authority and composition of the committee that includes faculty, administrators, and students and the rules for its operation, including voting privileges and the definition of a quorum, are specified in bylaws or other medical school policies. Faculty members constitute the majority of voting members at all meetings.

MS-4: Avoidance of Political or Financial Considerations in Admission

The selection of individual medical students for admission is not influenced by any political or financial factors.

MS-9: Transfer Students

A medical school ensures that any student accepted for transfer or admission with advanced standing has (a) completed prior course/clinical curriculum from a school accredited by CAAM-HP, LCME, COCA, or schools that are certified by the NCFMEA as an accredited agency; and (b) has demonstrated academic achievements, completion of relevant prior coursework, and other relevant characteristics comparable to those of the medical students in the class that he or she would join.

ADMISSIONS AND NON-DISCRIMINATION

Our admissions process involves broadening the range of admission criteria to help us advance our core educational goals and mission while giving balanced consideration to the important aspects of each applicant. All applications receive individualized consideration. Criteria for candidacy and selection are based on academic criteria with greatest emphasis placed on Cumulative GPA, Prerequisite GPA, MCAT score and the professional criteria as supported by letters of recommendation and the Interview Report. At no time is a candidate's age, gender, race, ethnicity, socio-economic status, citizenship, religion or any other such characteristic used to make a determination as to whether a candidate is offered admission to TMSU. In no event will an offer of Admission be based on a quota. Final authority with acceptance rests with the admissions committee. The Committee may ask the Dean to evaluate and weigh in on an applicant

ADMISSION TO ENROLLMENT

Admission, Post-Acceptance, and Enrollment Requirements

Admission to Trinity School of Medicine is solely based on academic and holistic review criteria and is not contingent upon an applicant's financial circumstances or ability to pay. Applicants may be accepted upon successful completion of the following requirements:

- Completed application
- Completion of prerequisite coursework
- Letters of recommendation (and Dean's Letter for transfer applicants, if applicable)
- Successful admissions interview
- MCAT (required for U.S. applicants and permanent residents)

Following acceptance, students enter a Post-Acceptance Phase, during which they must complete all remaining steps required to secure their place and prepare for matriculation.
These requirements include:

- Submission of a seat deposit
- Completion and verification of any outstanding admissions items and official documents
- Securing and obtaining approval for a Method of Payment (MOP)

Submission of a seat deposit alone does not guarantee enrollment.

Enrollment is defined as eligibility to begin classes and is contingent upon the successful completion of all admission and post-acceptance requirements. Trinity School of Medicine reserves the right to withhold enrollment if any requirement remains incomplete.

Students who submit a seat deposit but fail to complete post-acceptance requirements may forfeit their seat. In such cases, the University may place the student on a waitlist or defer consideration to a future term at its discretion.

Tuition and fees must be paid prior to matriculation and the start of the term. Certain clerkship terms require payment at least 30 days in advance to secure placement.

ACADEMIC PREREQUISITES

The following courses are required to give a broad undergraduate education prior to matriculation to TSOM. These include humanities, natural sciences and social sciences as well as proficiency in the language of instruction at Trinity (English). Please see also How many undergraduate credit hours are required to enter Trinity School of Medicine and Prerequisite Courses. AP credits and CLEP may be used for these prerequisites (AP of ≥3, CLEP ≥50 per 3 semester hour class)

General Biology: 1 academic year or equivalent.

General Chemistry: 1 academic year or equivalent.

General Physics: 1 academic term.

Behavioral Science: 1 academic term. An Introduction to Sociology or Psychology would fulfill this requirement.

Mathematics: 1 semester of college-level mathematics (trigonometry or analytic geometry), precalculus, or statistics **highly recommended.**

English: two non-science/non-foreign language courses that involve expository writing will satisfy this requirement.

Labs: no wet labs or virtual labs are required but they are recommended to broaden knowledge

Statistics: not required but recommended to broaden knowledge and understanding of scientific literature

Organic chemistry: not required but recommended to broaden knowledge and depth of analysis and application

At least **4 academic terms** totally **60 hours** are also required even if AP or CLEP are used

MCAT

Medical College Admissions Test (MCAT) scores are required for U.S. applicants (both citizen and green card holders) but are encouraged for all applicants. Scores must be from exams taken within the last 10 years. Affiliate Institution waivers are acceptable, where applicable, through program assessment.

An access code for release of certified test results is requested from the Association of American Medical Colleges (AAMC). The MCAT requirement is applicable for transfer applicants who matriculated into med school after Fall 2024.

APPLICATION AND SUPPORTING DOCUMENTATION

The following items must be provided for admissions consideration:

- **Completed Application for Admission —** Applicants my submit copies of common applications (AMCAS, AACOMAS, TMDSAS, OMSAS) or complete the **Online Application** on the TSOM website.
- **Application fee** — $50 (U.S.)

- **Letter(s) of Recommendation** — These must come directly from the letter writer. Recommended sources are the university pre-health advising office, professors, physicians, and supervisors who are not family members and who can confirm the applicant's academic ability and/or provide evidence of positive character traits. A committee that prepares such letters may satisfy this requirement with one packet; otherwise, two letters must be provided, one of which must be from an academic source.

Transcripts must be submitted from all undergraduate colleges as well as graduate and/or professional programs attended. If previous credits have been evaluated and awarded by an accredited university, official transcripts from prior programs may not be necessary as determined by the Registrar's office. Unofficial transcripts are acceptable to initiate the admissions process. Prior to matriculation, however, official transcripts must be submitted to the Office of Admissions and Registrar.

TRANSFER POLICY SUMMARY (SEE COMPLETE POLICY PAGES 11-15)

1. Transfer students must be transferring from an accredited U.S. or Canadian medical school or an international school that is appropriately accredited and accepted by NCFMEA. If transferring from an international school, the school must be listed certified by NCFMEA and the student must have earned their credits within the period that ECFMG has provided as eligible to apply for certification (see Sponsor Notes section of the medical school on the WDMS website).
2. If the medical school from which the student is transferring is in a country that has adopted CAAM-HP as the accrediting body, the school of record must have CAAM-HP or equivalent accreditation.
3. If transferring from a school that has obtained Accreditation Commission on Colleges of Medicine (ACCM) accreditation, it must have at least ACCM provisional accreditation on ACCM website.
4. Transfer credits are accepted from a maximum of one medical school outside of Trinity.
5. Applications for Transfer will be considered for students who will enter in Terms 1, 3, or 5. If applying for transfer into clerkships, student must have passed USMLE Step 1 on the first attempt and send the official document to admissions or not plan on practicing medicine in the U.S. No previous core clerkship credits will be honored.
6. Any student transferring into the Review Course must submit all previous CBSE scores and documentation.
7. All accepted transfer students may defer for no more than 1 term for financial or other reasons.
8. Transfer students must submit a complete application along with their transcripts from their current or previous medical school, along with their undergraduate /graduate transcripts.
9. Applications will not be reviewed prior to the receipt of all documents.
10. Interviews should be scheduled with an Admissions Counselor. Following the interview, a recommendation will be made to the Admissions Committee.
11. To transfer into the integrated curriculum, a student must have come from a school with a similar curriculum.
12. Transfer credits may not be awarded for course work for classes not required at Trinity.
13. The Associate Dean for Admissions, in consultation with the Admissions Committee and Office of the Registrar, will develop a study plan to be sent to the student with any offer of acceptance. Transcripts will not be subject to review prior to a complete application being submitted to the Admissions Committee.
14. All incoming transfer students must be aware of and be willing to comply with and sign off on all TSOM health requirements, deadlines, and policies as outlined in the catalog/student handbook.

General Guidelines for Transfer Students

1. If an applicant has successfully completed their course of study in the basic sciences but has not been cleared to take Step 1 of the USMLE, that student must starting the Review Course and take both CLMD 405 (Introduction to Clinical and Community Medicine) and CLMD 406 (Integrated Systems Review).
2. If an applicant has successfully completed a course of study in the basic sciences and has been cleared to take the USMLE Step 1 by their previous school, but was dismissed for missing the deadline, that student must start in the Review Course and take both CLMD 405 (Introduction to Clinical and Community Medicine) and CLMD 406 (Integrated Systems Review).
3. Continuing into clerkships is contingent upon the following:

a. Successful completion of both CLMD 405 (Introduction to Clinical and Community Medicine V) and CLMD 406 (Integrated Systems Review).
b. Successfully meeting the minimum score on the standardized qualifying examinations requirement for CLMD 406/407/408.
c. Passing USMLE Step 1 if seeking to go into U.S. medical residency.

General Guidelines for Clinical Term Transfer Students

(Transfers into Term 7):

1. No credit will be awarded for any core rotation completed while enrolled at another school.
2. Students must submit an official transcript from their previous undergraduate and medical schools at the time of starting clerkships.
3. No clerkship will be scheduled until all official transcripts are received.
4. Medical College Admission Test (MCAT) scores are required of a transfer applicant; if the applicant has taken the MCAT in the past, the score should be included in the information submitted to the Admissions Committee.
5. If a transfer applicant has been dismissed from the previous institution for any reason, they must furnish a letter from the Dean or member of the school leadership explaining the circumstances.
6. All accepted Term 7 transfer students may defer for 1 term with a letter explaining the reason wishing a deferral or leave of absence. Each circumstance will be reviewed on a case-by-case basis.
7. All Term 7 transfers must be prepared to submit background checks, certifications, visas, and all other documents as required by TSOM and the hospitals where they will be working a **minimum of 1 month prior to beginning clerkships**.
8. No clerkships will be scheduled until all credentialing documents are received and processed by the appropriate clinical offices.
9. Students transferring into Term 7 must be aware of, be willing to comply with, and sign off on all applicable TSOM and hospital health requirements, completely and in a timely manner, prior to beginning Term 7.

Transfers will be accepted based on their individual applications and the availability of adequate educational resources to accommodate their needs without compromising the needs of other students. In the latter instance, an applicant may be waitlisted or offered a delayed entry.

READMISSION POLICY

Any student who has withdrawn in good standing (separate from a requested leave of absence) from TMSU and wishes to reapply for the undergraduate or MD programs must follow all of the processes and procedures of the regular admissions process. In addition, applications for readmission must be accompanied by transcripts for any academic work since leaving TMSU.

Consideration is given to the complete record of each applicant, the length of absence, the activities undertaken during the absence and the number of student places available in the class. Readmission is not guaranteed and, if approved, may be conditional. Readmission may require performance of specific tasks at a specific standard, prior to or following readmission.

Any student who was dismissed from TMSU for professionalism reasons will not be considered for readmission.

PREVIOUS ATTENDANCE AT FOREIGN INSTITUTIONS

Applicants with college credit at foreign institutions, or institutions teaching in a language other than English, must submit official foreign transcripts to one of the following evaluation services as part of the admissions processes. Applicants who have attended a previous medical school that is outside the US (includes Caribbean medical schools, Canadian medical schools, etc.) must also submit official foreign transcripts to one of the following evaluation services as part of the admissions processes*. If the transcript English, and there is enough information per the school of medicine registrar on the transcript key to document that school uses something comparable to the US, then this does not need to be sent for evaluation services.

Transcripts in Spanish have to be evaluated even from a US territory.

Those applicants may apply in either of the following situations:

1. As a new, first-time student who has attended a non-U.S. college or university for any portion of their undergraduate degree, or
2. As a transfer student from a non-U.S. medical school whose curriculum differs from U.S. medical education curricular standards must have their college/university level courses evaluated by one of the listed consultants:

- **Educational Credential Evaluators, Inc.**
  PO Box 514070
  Milwaukee, WI 53203-3470
  Phone: 414-289-3400

- **Josef Silny and Associates**
  International Education Consultants
  7101 SW 102 Avenue
  Miami, FL 33171Phone: 305-273-1616

- **World Education Services, Inc.**
  PO Box 745
  Old Chelsea Station
  New York, NY 10113-0745
  Phone: 212-966-6411

TMSU will consider credit only if a review or the evaluation service has indicated the coursework taken was similar to coursework taken at an institution that is comparable to an accredited U.S. institution of higher learning.

TSOM will maintain the right to conduct background and educational credential verification at any time during student enrollment with the institution. These reviews may include, but are not limited to, identity verification, visa viability review, employment verification, credit history, driver's history, criminal records, and educational credential confirmation.

*GNPEC minimum standards

TRANSFERABILITY OF CREDIT EARNED AT TRINITY MEDICAL SCIENCES UNIVERSITY

Students who wish to transfer credit from TMSU to another institution should contact that institution regarding their policies for the acceptance of transfer credit. It is at the discretion of the receiving institution to determine whether they will accept credits earned at other institutions. Be advised that most institutions limit the number of credits allowed for transfer.

TRANSCRIPT REQUEST

Final grades for each term will be released to students no later than four weeks following the last official day of a term. Upon written request by the student, official transcripts will be presented in secured digital format and/or mailed to the requested recipient. Requests for official transcripts can be submitted using the Request for Official Documentation form. Please allow up to 5 business days for processing and mailing of official transcripts.
Students may obtain unofficial transcripts via MyTrinity.

Add/Drop Policy

COURSE ADD/DROP PERIOD

A student may drop or add a class or classes without academic penalty until day 7 of the term. The procedure for requesting to drop or add a course is to log into MyTrinity at login.TMSU.edu and complete the specific request through the HelpDesk.

Tuition and Fees

Tuition and Fees for 2025-2026

Tuition	Per Term	No. of Terms	Total for Degree Program
Basic Sciences (Terms 1, 2, 3, 4)	$16,000	5	$80,000
Basic Sciences – Tuition per Credit Hour for Repeated Courses**	$1,067		As incurred
Basic Science – Spiral Curriculum Remediation	$8,000		As incurred
Review Course, 1st Remediation	$16,000		As incurred
Review Course, 2nd Remediation	$8,000		As incurred
Step 1 Prep, 1st Remediation	$8,000		As incurred
Step 1 Prep, 2nd Remediation	$100		As incurred
Step 1 Prep, 3rd Remediation	$100		As incurred
Clinical Terms in Warner Robins (Terms 6, 7, 8, 9, 10)	$17,700	5	$88,500
Clinical Terms for sites outside Warner Robins (Terms 7, 8)*	*	2	As incurred
Fees			
Records Administration Fee	$475	10	$4,750
Student Activity Fee	$50	10	$500
Student Health Insurance	$1,300	10	$13,000
the Review Course garment fee (Transfers)	$120	1	$120
Malpractice Insurance	$240	5	$1,200
NBME Test Fees	$175	10	$1,750
USMLE Exam Prep Fees	$150	10	$1,500
New Student Fee (Initial Term)	$600	1	$600
Equip and Supplies Fee (Term 1–4)	$150	5	$600
Total Tuition and Fees			$193,020
Undergraduate course from 1-5 credits in a term	$375 per credit hour		
≥6 credit hours per term	$3700		
Undergraduate (premed) full-time	$3700		

**Refers to students in our legacy curriculum

*Additional tuition may be charged for clerkships and electives outside of Warner Robins

ORIENTATION PROGRAMMING

Pre-Orientation Activities

Students accepted for admission to Terms 1-4 will be invited to participate in a virtual pre-orientation session to prepare them to relocate to St. Vincent and begin medical education. This session will cover topics including billing and financial aid, health insurance, travel, immigration to St. Vincent & the Grenadines, student housing, Welcome Week activities and transportation, planning for the White Coat Ceremony.

New Student Orientation

New Student Orientation is offered in St. Vincent at the beginning of each term in January, May, and September. This session will include an introduction to the Deans and Faculty, introduction to medical school curriculum, an overview of success strategies and stress management techniques, technology support and orientation. Other topics will be addressed.

the Review Course Orientation

All students, both those who completed their Basic Sciences in St. Vincent with TSOM and those who transfer to the institution, will be invited to attend orientation in Warner Robins where they will be introduced to the Deans and the Clinical Sciences Curriculum and process. Other topics will be addressed.

Terms 1–4 and Review Course

All active students will pay the full-time tuition rate in effect for each Calendar Term in which they are classified as full-time students. All students on the St. Vincent campus must complete financial obligations before arriving on campus. In accordance with the St. Vincent government, students not registered for classes may not remain in the country.

Currently, The total tuition for Academic Terms 1–4 and the Review Course will be capped at an aggregate amount equal to 5 academic terms at the full-time tuition rate then in effect for each completed term, plus repeated credit hours at the hourly tuition rate in effect in the calendar term in which they are billed. The first repetition of the Review Course (CLMD 407) is billed at full tuition; the second repetition of the Review Course (CLMD 408) is billed at half tuition.

Step 1 Prep and Terms 7–10

To advance into Clinical Core Clerkships (Year 3), each student must pass a qualifying assessment, such as the Comprehensive Basic Sciences Exam (CBSE) or other qualifying exam. CBSE and other qualifying exams are offered twice in the Review Course. If a student passes CBSE or other qualifying exam in the 3rd week of either remediation term for CLMD 407 or CLMD 408, the tuition is applied to Step 1 Prep term. If not passed, it is offered for a total of three more times (five total). Students who do not pass appropriate qualifying exams during the Review Course must remediate Academic the Review Course. The tuition amount shown in the previous table is incremental to the cap applied to tuition for Academic Terms 1–5. Students who pass qualifying exams will advance to to prepare and sit for the USMLE Step 1 Exam and, if successful, to proceed to Clerkships. Students who do not pass USMLE Step 1 during must remediate and retake an pass a qualifying exam to sit for Step 1 again.

If a failure of qualifying exams, USMLE Step 1, or USMLE Step 2 occurs, students meet with the Associate Dean of Clinical Sciences and Curriculum to assess learning style, evaluate where deficits exist, and devise a plan. They will be enrolled in CLMD 407 or IDIS 501, respectively, and follow a learning plan based on the determination of their individual learning style. They must pass another qualifying exam to sit for the appropriate Step exam.

Students who fail Step 1 must repeat Step 1 prep by attending IDIS 501 (noncredit). This is the first remediation of Step 1 Prep. Students must pass an objective exam equivalent to the NBME CBSE exam if the student has no further CBSE exams available (for example, five available and five were used). TSOM will provide an objective exam that it considers the equivalent of the CBSE exam for students who have no CBSE exam attempts available. If the student passes a qualifying exam, the student will be allowed to sit for the Step 1 exam again, until all four attempts allowed by the USMLE have expired following the same or similar procedure as approved by the Associate Dean of Clinical Sciences and the Dean. To remain an active student, students will be billed for Step 1 prep remediation course(s) (IDIS 502) at the tuition price of $100 and the Records Administration Fee (currently $475) for remediation terms.

Full-time tuition will be billed for each consecutive Calendar Term in which a student is classified as an active student. Total tuition for the academic terms Step 1 prep and 7–10 will be capped at an aggregate amount equal to 5 terms plus repeated courses or clerkships and their associated credit hours at the hourly tuition rate in effect in the Calendar Term in which they are billed (see Tuitions and Fees).

All academic terms in which a student is enrolled at Trinity are tuition-paying terms pursuant to the foregoing tuition table, unless the student has requested and been granted a leave of absence or has reached applicable tuition caps. For preclinical terms, tuition is due before the beginning of the term. For clerkships and electives, tuition is due 30 days before the start of the rotation. Students reaching tuition caps will be assessed the records administration fee per Academic Term ($425 currently) plus $100 in tuition to qualify as an active student for student loan purposes.

Clerkship students on the Traditional path will have the opportunity to take and pass the Step 2 CK exam in each of the three courses (IDIS 600, IDIS 601, and IDIS 602). Students who have not passed their Step 2 CK exam by the end of the third course will be registered for IDIS 603 until such time as they have either passed the exam or exhausted their allowable attempts by USMLE rules. Students may be directed by APC or deans to proceed in the Executive Pathway (and take Step 2 after graduation) at any time.

Students who are dismissed, withdrawn, or otherwise cannot advance will not be eligible for a refund of tuition or fees.

Fees

Standard fees include the following: Records Administration Fee, New Student Fees, Student Activity Fee, NBME Exam Fees, Equipment and Supply Fee, and USMLE Step Exam Prep Fees.

HEALTH INSURANCE

Students are required to maintain university-provided health insurance during all periods of active enrollment in course activities conducted in St. Vincent and the Grenadines, as well as during the Clinical Transition Term and all U.S.-based clerkships (including electives).

Students enrolled exclusively in online courses within the School of Biomedical Sciences are not eligible to participate in the student health insurance plan.

Disability insurance is available to all Trinity students.

Citizens of St. Vincent and the Grenadines are exempt from mandatory enrollment in the health insurance plan while studying in SVG.

Eligible students will be automatically enrolled in individual coverage. Where available, students may elect dependent coverage for an additional premium. Dependent coverage is not guaranteed and may be modified or discontinued in the future based on program availability.

MALPRACTICE INSURANCE

At all times that a student is engaged in clinical rotations (Years 3 and 4), students are required to carry malpractice insurance. For students on the Traditional MD Pathway and Executive MD Pathway, the university provides the coverage through its insurance carrier and bills students for each academic term in which the student is continuing in clerkship rotations. For students on the Global MD Pathway, students must obtain their malpractice insurance from a provided source. Students must share their certificate of insurance with Trinity and Trinity's partner institutions before rotations may begin. Students are then credited in the form of a tuition credit as reimbursement.

Note: The above-mentioned fees are charged at the beginning of each term. Tuition and fees are subject to change at the start of each academic year. The tuition refund shall follow the Institutional Refund Policy; please review the policy for details.

BOOKS

Most textbooks are available digitally at no additional cost to students. Purchase of print copies of those texts is optional for students. Each student in the Doctor of Medicine program is also given Kaplan Subject Review books in preparation for Step 1 and then again in preparation for Step 2. Purchase of some books some textbooks such as ***Bates*** *Guide to Physical Examination and History Taking*, and *Essentials of Family Medicine* is **HIGHLY** recommended.

Credit/Refund Policy

CREDIT EVENTS

Students may be eligible to receive credits of previously billed tuition and fees in the following circumstances (Credit Events):

1. Course registration changes resulting in adjustment of applicable tuition (see Tuition policy)
2. Approved leave of absence
3. Withdrawal/dismissal from the university
4. A credit balance resulting from overpayment of billed tuition and fees

WITHDRAWAL/DISMISSAL AND APPROVED LEAVE OF ABSENCE—REFUND EVENT

Upon the effective date of withdrawal, dismissal, or leave of absence, tuition and fee credits will be determined as follows:

1. Prior to the start of a Calendar Term. A full credit will be applied to the student's account statement for all tuition, housing, and fees billed for the upcoming Calendar Term.
2. During the 1st week of a Calendar Term:
    a. Tuition – Full credit
    b. Housing – Full credit, less U.S. $500 housing deposit
    c. Other student fees – No credit
    d. Student health insurance – Prorated credit
    e. Malpractice insurance – Prorated credit.
3. After the 1st week but before the end of the 6th week of a Calendar Term:
    a. Tuition – Prorated credit
    b. Housing – Prorated credit, less U.S. $500 housing deposit
    c. Other student fees – No credit
    d. Student health insurance – Prorated credit
    e. Malpractice insurance – Prorated credit
4. After the end of the 6th week of an Academic Term:
    a. Tuition – No credit
    b. Housing – No credit
    c. Other student fees – No credit
    d. Student health insurance – No credit
    e. Malpractice insurance – No credit
5. Prior to the start of a Calendar Term. A full credit will be applied to the student's account statement for all tuition, housing, and fees billed for the upcoming Calendar Term.
6. During the 1st week of a Calendar Term:
    a. Tuition – Full credit
    b. Housing – Full credit, less U.S. $500 housing deposit
    c. Other student fees – No credit
    d. Student health insurance – Prorated credit
    e. Malpractice insurance – Prorated credit
7. After the 1st week but before the end of the 6th week of a Calendar Term:
    a. Tuition – Prorated credit
    b. Housing – Prorated credit, less U.S. $500 housing deposit
    c. Other student fees – No credit
    d. Student health insurance – Prorated credit
    e. Malpractice insurance – Prorated credit
8. After the end of the 6th week of an Academic Term:
    a. Tuition – No credit
    b. Housing – No credit
    c. Other student fees – No credit
    d. Student health insurance – No credit
    e. Malpractice insurance – No credit

TUITION CREDITS AND OTHER STUDENT ACCOUNT ADJUSTMENTS

Tuition adjustments for reduction of course credits below the full-time tuition threshold and any other student account credits shall be credited to the student's account. Such credits are not refundable except in the event of withdrawal, dismissal, or approved leave of absence (see Withdrawal/Dismissal and Approved Leave of Absence—Refund Event). Credits will be applied against future Calendar Term invoices.

STUDENT REFUND PROCEDURES

If tuition and fee credits and adjustments as described previously result in a credit balance in the student's account, the credit balance will be retained and applied to tuition and fee billings in the next academic term, except in the event of withdrawal or dismissal from the university (Refund Event).

The maximum amount refundable upon the occurrence of a Refund Event is the net credit balance in the student's account after application of all allowed tuition and fee credits (see Withdrawal/Dismissal and Approved Leave of Absence—Refund Event). The student must submit a refund request form to initiate refund processing, which shall be completed by the university within 10 days.

1. If the credit balance results from payment from a student loan provider, TMSU will apply the applicable refund as follows:
   - First, up to the amount of allowed tuition and fee credits, to the applicable loan provider.
   - Then, any remainder to the student in accordance with electronic payment instructions from the student.

2. If the credit balance results from payment by the U.S. Department of Veterans Affairs (VA), any refund will be administered in accordance with VA policies.
3. If the credit balance results from payment by any other third party (grant, sponsorship, etc.), TMSU will require written instructions from the third party before release of the refund to the student or the third party.
4. If the credit balance results from payment by the student, the refund will be issued to the student by electronic payment to the account from which the applicable payment was made.

Student Funding Sources

U.S. STUDENTS — STUDENT LOANS

TMSU does not participate in U.S. Title IV Federal Loan Programs. Students are not required to complete a FAFSA form. TMSU has made arrangements with certain private student loan organizations to offer student loan programs for TMSU students. Program descriptions and corresponding application and disbursement instructions are available through the online resources of the Office of Student Services.

TMSU has no affiliation with any student loan organizations and earns no fees or other compensation for the placement of student loans through these organizations.

The Office of Student Services provides advisory assistance to students in budgeting, planning, and applying for student loans to improve their likelihood of success in securing loan funds. However, the availability of credit through these student loan organizations is based solely on the credit quality of the loan applicant. TMSU has no involvement or responsibility in credit approval decisions and makes no representations or warranties regarding the availability of credit to any student.

U.S. STUDENTS — VETERANS BENEFITS

TMSU is recognized by the United States Veterans Administration for the administration of Post-911 GI Bill and other related benefits programs.

Students eligible for veterans' benefits should review the U.S. Veterans GI Bill Program in the online resources of the Office of Student Services for information on securing benefits while attending TMSU. Benefits can include funds for tuition, fees, housing, and textbooks.

CANADIAN STUDENTS - LOANS

Students can submit applications for provincial and federal financial assistance for all Canadian provinces and territories with the exception of Quebec, which does not fund international schools outside of Canada.

Students should contact their respective Provinces and Territories for a complete explanation of the various financial aid and loan programs that may be available to them. Please note that TSOM's Canadian Loan Institution Code is ZUCF.

Many Canadian banks have Medical Student Lines of Credit or similar programs and may offer funding for MD degree programs. The Office of Student Services can provide assistance in identifying participating banks and can also provide verification of enrollment letters and other documents as necessary to support loan applications.

Scholarships and Grants

Trinity School of Medicine offers a variety of scholarships and grants to students, in addition to student awards available from third party sources (VA, Mustique, SVG Bursary, etc.). The Office of Student Services will assist incoming students in identifying available awards and submitting applications for those awards. This section covers TMSU-provided awards.

SCHOLARSHIPS

Scholarships are criteria-based awards for the duration of the degree program, subject to minimum performance criteria to retain the scholarship each term.

- President's Scholarship
- Chairman's Scholarship
- Dean's Scholarship
- Physician's Scholarship
- Trinity Award for Excellence
- Vincentian Scholarship

GRANTS

Grants are awards to address hardship, to recognize prior meritorious service in health fields, and to address specific economic conditions such as currency fluctuation, etc.

Applicants and students desiring to apply for scholarships and grants should contact the Office of Student Services.

Student Support Services

Career Counseling

Career counseling takes place primarily during the clinical years of a medical student. Informal career counseling is obtained from preceptors and physician mentors. Formal career counseling is handled by the clinical deans in Warner Robins. Virtual appointments are available. Students are encouraged to discuss career options with the Associate Dean of Clinical Sciences and Curriculum or the Dean. Their guidance will be instrumental in gaining a residency placement postgraduation. This guidance is noted in the Trinity Clinical Handbook with appropriate links to set up meeting times to address questions and receive guidance.

Learning and Program Management Services

CANVAS

Canvas is our learning management system (LMS) – an orientation is provided before entering school. It is used throughout a student's time at trinity. Course information and syllabi as well as the student resources and this catalog/handbook are housed in canvas.

ONE45

One45 is our program management system – an orientation an orientation is provided before entering school. One45 is used throughout your time at trinity and houses schedules and evaluation of courses, faculty, professors and preceptors.

Medical Student Competency, Safety, and Minimal Technical Standards

TMSU/TSOM has developed technical standards to assist in determining whether applicants for admission or candidates seeking the MD degree are qualified to pursue a career in medicine. This section contains the technical standards of the School of Medicine. The technical standards are based on guidelines produced by the Association of American Medical Colleges (AAMC). All applicants who reach the interview stage will be required to read the Technical Standards and to sign a copy to indicate that they understand its contents. The signed form is kept as part of the record of all matriculating students.

Candidates for the MD degree at the Trinity School of Medicine must be capable of completing core educational requirements and achieving the TSOM competencies and entrustable professional activities essential for the delivery of high-quality medical care. TSOM has an ethical responsibility for the safety of patients with whom students and graduates will come in contact. Although students learn and work under the supervision of the faculty, students interact with patients throughout their medical school education. Patient safety and well-being, therefore, are major factors in establishing requirements involving the physical, intellectual, and emotional abilities of candidates for admission, promotion, and graduation. The essential skills and abilities described herein are also referred to as technical (or nonacademic) standards. The goal of the medical education program is to graduate physicians who possess high ethical and professional attributes, deep and thorough medical knowledge, and outstanding clinical skills, with the ability to appropriately apply these skills, effectively interpret information, and contribute to decisions across a broad spectrum of medical situations in varied settings. Therefore, all students are expected to meet the standards for admission, retention, promotion, and graduation as described.

Process and Procedures

TECHNICAL STANDARDS

Observation

A candidate must be able to acquire information from demonstrations and participate in laboratory exercises. A candidate must be able to assess and comprehend the condition of all patients assigned to them for examination, diagnosis, and treatment. These skills require the use of vision, hearing, and touch or the functional equivalent.

Communication

A candidate must demonstrate proficiency in the English language such that they can communicate in both oral and written form effectively and sensitively with patients and members of the healthcare team. This includes the ability to speak, hear, and observe patients by sight to elicit information, describe changes in mood, activity and posture, and perceive nonverbal communications. In a case where a candidate's ability to communicate is compromised, the candidate must demonstrate alternative means and/or abilities to communicate with patients and members of the healthcare teams.

Motor

A candidate must be able to attend and participate in classes and activities that are a part of the curriculum. A candidate's motor and sensory functions must be sufficient to diagnose and deliver patient care consistently, quickly, and accurately. A candidate must be able to perform physical exams and diagnostic procedures using techniques, such as palpation, auscultation, percussion, and other diagnostic maneuvers. A candidate must be able to respond in a timely manner and safely execute motor movements reasonably required to provide general care and emergency treatments to patients. A candidate must be able to participate in physically taxing duties over long hours.

Intellectual-Conceptual, Integrative, and Quantitative Abilities

A candidate must have sufficient cognitive abilities and effective learning strategies to assimilate the detailed and complex information presented in the medical school curriculum. A candidate must be able to learn through a variety of modalities: class instruction; small group, team, and collaborative activities; and independent study. A candidate must have the ability to learn, memorize, measure, calculate, reason, organize, analyze, and synthesize complex information in a coherent manner. A candidate must be able to comprehend three-dimensional relationships and understand the spatial relationships of structures. A candidate must be able to formulate a hypothesis, investigate the potential answers and outcomes, and formulate appropriate and accurate conclusions in a timely manner.

BEHAVIORAL AND SOCIAL ATTRIBUTES

A candidate must demonstrate the maturity and emotional stability required for full utilization of their intellectual abilities, the exercise of good judgment, and the timely completion of all responsibilities attendant to their academic work, teamwork, and patient care. A candidate must demonstrate the ability to develop mature, sensitive, and effective professional relationships with faculty members and peers, patients, and all members of the healthcare team. A candidate must be able to function effectively under stress and proactively make use of available resources to help maintain both physical and mental health. A candidate must be able to adapt to changing environments, display flexibility, and function in the face of uncertainties inherent in the educational and patient care setting. Professionalism, compassion, integrity, concern for others, interpersonal skills, interest, and motivation are expected throughout the education process. The candidate must be willing to interview, physically examine, and provide care to all patients regardless of their race/ethnicity, gender, sexual orientation, religion, or disability.

EQUAL ACCESS TO TSOM MEDICAL EDUCATION PROGRAM

TSOM is committed to providing all students with opportunities to take full advantage of the medical education program. It recognizes that students with documented disabilities may require reasonable accommodations to meet the technical standards previously described. During the Admissions process, candidates with a disability are encouraged to discuss their disability with the Associate Dean of Admissions so that, jointly, they may consider technological and other facilitating mechanisms necessary to train and function effectively as a physician. Upon admission, the Office of Student Affairs is committed to removing potential barriers that may prevent a student from accurately reflecting their abilities in the medical education program. The goal of the multi-perspective approach described is to support medical students with disabilities to provide reasonable and accessible opportunities to complete the medical education program.

Requesting Disability Accommodations

1. A candidate must comply with the following process for requesting and receiving appropriate reasonable accommodations, in a timely manner, to enable the candidate to have the opportunity to meet TSOM requirements for completion of the medical education program.
2. It is the responsibility of a candidate with a disability, or a candidate who develops a disability, who requires accommodations to meet TSOM technical standards, to self-disclose to the Office of Student Affairs and request accommodations. The candidate must provide requested documentation of the disability to the Office of Student Affairs during the registration process. A candidate who fails to register with the Office of Student Affairs or who fails to provide the necessary documentation shall not be considered to be claiming or receiving accommodations under federal or state disability laws. A candidate is encouraged to register with the Office of Student Affairs prior to the beginning of their first or subsequent semester or as soon as a disability is established to ensure access to accommodations to the fullest extent possible. Candidates are accountable for their performance, with or without accommodation. No candidate will be assumed to have a disability based on poor performance alone. Accommodations are not applied retroactively, and a disability-related explanation will not negate poor performance.

3. Any request, design, and implementation of accommodations for an individual candidate to participate and complete the medical education program must include full collaboration with the Office of Student Affairs, as well as review by the TSOM Accommodations Committee
4. In review of a student's accommodation request, the Office of Student Affairs will make every effort to recommend the appropriate accommodation for academic success. Upon receipt of a student's request for accommodations, TSOM will convene the TSOM Accommodations Committee. The Accommodations Committee is an ad hoc committee reporting directly to the TSOM Curriculum Committee. The Accommodations Committee is responsible for reviewing requests for accommodations in light of the TSOM appropriate course standards and learning objectives. Membership consists of the Assistant/Associate Dean of Student Affairs and two volunteer faculty members approved by the Assistant/Associate Dean of Student Affairs.
5. Following review by the Accommodations Committee, the implementation of accommodations for 1st- and 2nd-year students will be facilitated by the TSOM Office of Student Affairs. The Associate Dean of Student Affairs will notify the student and the Office of Testing and Evaluation of the approved accommodation. The Assistant Dean of Assessment and Testing will inform the faculty about a student's accommodation for internal exams.
6. Rising 3rd-year students with current academic accommodations should review their accommodations with the Office of Student Affairs in advance of their clinical years. This review is important for all students requesting accommodations, especially for students who may request the support of nonacademic accommodations. Following review by the Accommodations Committee, the implementation of accommodations for 3rd- and 4th-year students will be facilitated by the TSOM Office of Student Affairs. If accommodations are requested for NBME exams, the school's NBME administrator/executive chief proctor is responsible for ensuring that the approved accommodation is included when the student's information is uploaded in the NBME roster management system.
7. Each student is responsible for following USMLE guidelines for requesting accommodations for USMLE Step examinations. This takes a new evaluation and may take 60–90 days or longer. **This is completely separate from internal Trinity accommodations.** Trinity is not involved in USMLE accommodations. The accommodations granted by Trinity are completely separate from any accommodations granted or not granted by USMLE.
8. The Office of Student Affairs will notify clerkship directors of requested accommodations via a student's accommodation letter.
9. An accommodation may be deemed unreasonable if it poses a direct threat to the health or safety of the student, patients, or others; causes a fundamental alteration of the medical education program; does not meet TSOM academic or technical standards; or poses an undue hardship on TMSU or TSOM. In review of a student's request, the Committee will work to request additional assessment or evaluation, as needed, and provide a determination of the review to the Office of Student Affairs.
10. Accommodation through the use of a trained intermediary or other aid may be appropriate or reasonable if the intermediary or aid functions as an information conduit. The intermediary or aid may not provide a selective function, cognitive support, or medical knowledge or act as a substitute in performing essential skills or supplement clinical and ethical judgment.
11. Despite reasonable accommodation (whether the candidate chooses to use the accommodation or not), should a candidate's existing or acquired disability interfere with patient or peer safety, or otherwise impede the ability to complete the TSOM medical education program and advance to graduation, residency, training, or licensure, the candidate may be denied admission or may be separated, discontinued, or dismissed from the program.
12. While the Office of Student Affairs works to determine and coordinate approved accommodations, disability documentation remains confidential and housed at the Office of Student Affairs.
13. Dr. Frances Jack-Edwards, MD is the Associate Dean of Admissions and Student Affairs.

All applicants to TMSU will be required to attest to their ability to meet all technical requirements prior to review by the Admissions Committee. Advancing students from Trinity's premedical pathway must attest to the same.

Academic Program – MD

Competency-Based Objectives

TMSU/TSOM faculty members are charged with teaching the following competency-based objectives through all courses and clerkships.

MEDICAL KNOWLEDGE

Goal Statement: Medical students are expected to master a foundation of clinical knowledge with integration of basic sciences and the translation of that knowledge to the clinical setting. Graduates from TSOM will be able to

- Demonstrate knowledge of normal and abnormal structure and function of the human body on the macroscopic, microscopic, and molecular levels.
- Identify the pathology and pathophysiology of various diseases and correlate them with clinical signs and symptoms.
- Demonstrate knowledge of common or significant, acute, and chronic clinical problems.
- Differentiate between normal and abnormal development and age-related changes across the life span.
- Demonstrate comprehension of clinical interventions and agents, including pharmaceutical, surgical, genetic, complementary and alternative medicines, and other therapies. Demonstrate knowledge and ability to interpret epidemiological and public health contributions to understanding health and disease.
- Demonstrate knowledge of preventive medicine and current guidelines for health promotion and disease screening.

PATIENT CARE

Goal Statement: Medical students, as members of the healthcare team, are expected to provide patient- and family-centered care that is compassionate and effective for the promotion of health and the management of illness. Graduates from TSOM will be able to

- Treat patients using a patient- and family-centered care approach.
- Obtain a complete and accurate medical history that covers essential aspects, also addressing issues related to age, gender, and culture; use of complementary medicine; family dynamics; and socioeconomic status.
- Perform both complete and symptom-focused physical examinations, including mental status examination.
- Perform or participate in routine technical procedures (procedures determined by core clerkships).
- Construct a differential diagnosis for common clinical presentations.
- Identify and interpret the most useful clinical, laboratory, imaging, and pathologic testing for common clinical presentations.
- Construct appropriate and efficient therapeutic management and prevention strategies for patients with common conditions, both acute and chronic, including medical, psychiatric, and surgical conditions, and those requiring short- and long-term rehabilitation.

PRACTICE-BASED LEARNING

Goal Statement: Medical students are expected to investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their practice of medicine. Graduates from TSOM will be able to

- Develop strategies for continuous individual improvement through monitoring performances, reflection, engaging in new learning, applying new learning, and monitoring impact of learning.
- Accept constructive criticism and modify behavior based on feedback.
- Develop clinical questions related to patients' problems and demonstrate skills to find evidence that is relevant and valid information to answer clinical questions using medical information technology.

COMMUNICATION SKILLS

Goal Statement: Medical students are expected to demonstrate skills that result in effective communication and collaboration with patients, families, and professional associates. Graduates from TSOM will be able to

- Demonstrate the ability to establish a therapeutic patient-doctor relationship based on mutual trust and respect for patients' privacy, dignity, individual integrity, and culture.
- Communicate with others in a respectful, professional, and nonjudgmental manner and demonstrate effective listening skills (e.g., maintaining eye contact, body posture, verbal and nonverbal facilitation skills).
- Demonstrate the ability to give a clear, concise, and organized oral presentation and written documentation of a history and physical exam with basic elements of assessment and a plan that addresses the psychosocial and biomedical needs of the patient for a focused or complete patient encounter.
- Conduct an interview with a patient who has limited English-speaking ability with the appropriate use of an interpreter.
- Recognize barriers to effective communication and implement strategies to overcome these barriers (e.g., health literacy, vision/hearing impairment, disability, pediatric or geriatric patient).
- Educate patients on preventive strategies and medical risks and benefits in medical decision making.

PROFESSIONALISM

Goal Statement: Medical students are expected to demonstrate professional behavior, commitment to ethical principles, commitment to lifelong learning and sensitivity to diverse patient populations. Graduates from TSOM will be able to

- Demonstrate honesty, integrity, and ethical behavior in all interactions with patients and other healthcare professionals.
- Describe the importance of protecting patient privacy and identifying personal health information, including when and when not to share information.
- Demonstrate commitment to lifelong learning by attendance at all classes, labs, clerkships, electives, and required school activities.
- Identify ethical hazards and respond appropriately in situations such as
    - Acceptance of gifts or collaboration with industry when courted to prescribe/use their products,
    - Being asked to practice beyond legal limits or personal comfort (e.g., when asked to provide medical care to friends or relatives; use of "doctor" title).
- Fulfill professional commitments in a timely and responsible manner.
- Maintain appropriate professional appearance and composure.
- Recognize and address personal limitations, attributes, or behaviors that might limit one's effectiveness as a physician and seek help when needed. This would include being able to describe personal responses to stress and employ appropriate stress reduction interventions as needed.
- Demonstrate sensitivity and responsiveness to a diverse patient population, including but not limited to, diversity in gender, age, race, religion, disabilities, and sexual orientation and investigate the impact of those on clinical care and medical decisions.

SYSTEMS-BASED PRACTICE

Goal Statement: Medical students are expected to develop an awareness of available healthcare system resources and demonstrate an ability to use them appropriately to provide optimal quality patient care. Graduates from TSOM will be able to

- Demonstrate the ability to work within a multidisciplinary patient care team, with an understanding of the physicians' role as team leader and the importance of ancillary staff.
- Examine medical errors and quality problems using a health systems approach and describe available methods to minimize them.

All required courses, with the exception of some 4th-year electives, will have a corresponding online course component in the Canvas™ LMS and One45™ Program Management system. The Canvas course houses the syllabus, details of the course, and timeline for material delivery including assessments. The course also houses the grade within the term so that the student can see their current standing. Each student will receive an orientation to Canvas and One45, as well as detailed instructions on how to access course materials during orientation.

Academic Standing

Medical students are expected to maintain a 2.0 or higher GPA to remain in good academic standing in the medical school based on the published grading scale. A student must be in good academic standing to graduate.

Students on academic probation or academic warning are not considered in good academic standing. Students with a professionalism warning only are still in good standing. Any further adverse professionalism action may result in a status of poor standing until the student graduates.

Campus Safety and Emergency Protocols for Adult Learners

Ensuring a safe and secure learning environment is a top priority at TMSU. As adult learners, it is essential to stay informed and prepared for any potential emergencies or difficult situations that may arise on campus. The student's vigilance and cooperation are critical in maintaining the safety and well-being of the entire academic community.

In the event of an emergency or any challenging situation, it is imperative to follow the guidance and instructions provided by university administration and campus security personnel. These trained professionals are equipped with the knowledge and resources necessary to handle various types of incidents effectively. Their directives are designed to protect each student and their fellow students, staff, and faculty members. Follow their instructions!

Key points to remember:

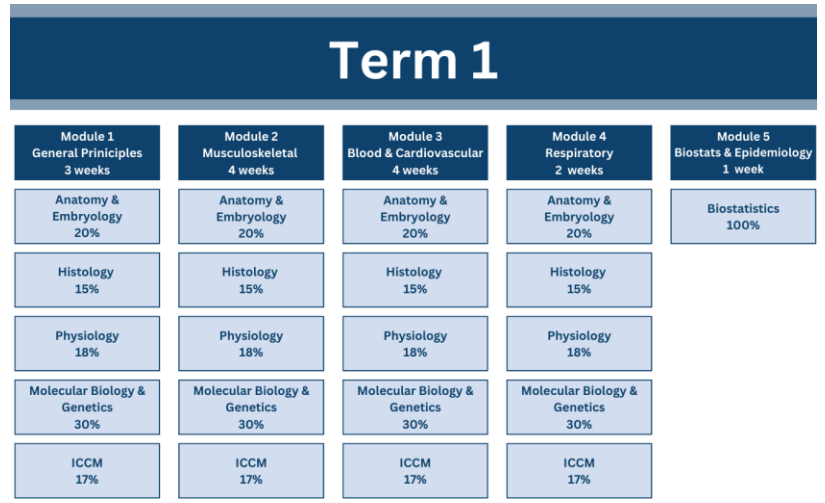
1. **Stay Informed**: Students should familiarize themselves with the university's emergency procedures and protocols, which are available on the Student Resources page in Canvas LMS, and in printed materials distributed during orientation. Pay attention to campus-wide alerts and notifications.
2. **Follow Instructions**: During an emergency, follow the instructions of campus security and administration without hesitation. This may include evacuating a building, sheltering in place, or other safety measures. Compliance with these directives is crucial for each student's safety and the safety of others.
3. **Report Suspicious Activity**: If students observe any suspicious behavior or potential threats, they should report them immediately to campus security. Proactive involvement can help prevent incidents and ensure a swift response.
4. **Stay Calm**: In any emergency situation, remaining calm and composed is essential. Clear thinking and adherence to established protocols will help the student and those around them navigate the situation more effectively.
5. **Participate in Drills**: Engage in scheduled safety drills and training sessions. These exercises are designed to prepare students for real-life scenarios and enhance their readiness to respond appropriately.
6. **Check the Student Resources page in *Canvas***: Before an emergency occurs, review the information on Emergencies, Emergency Procedures, and Emergency Protocols

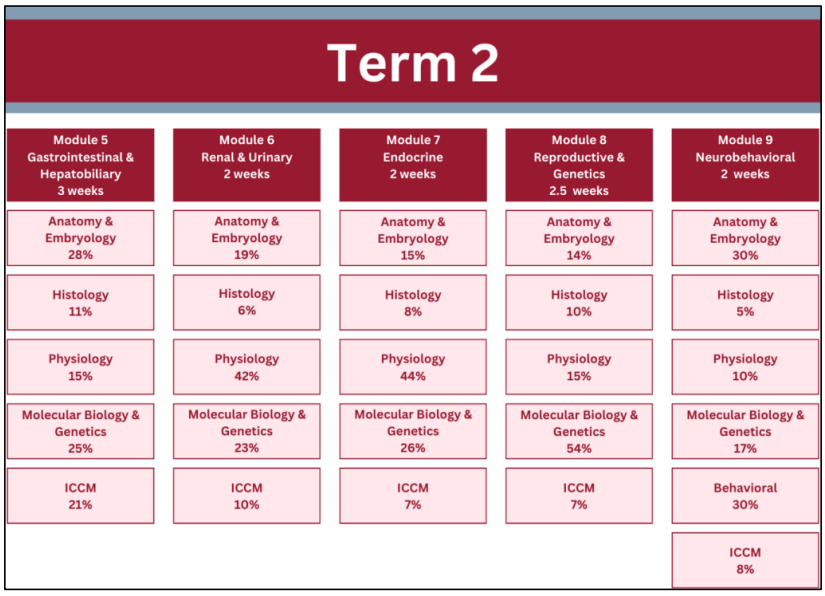
Remember, safety is a shared responsibility. By staying informed, vigilant, and cooperative, each student contributes to a secure and supportive learning environment for all. If students have any questions or concerns about campus safety, they should not hesitate to reach out to the campus security office or university administration. Together, we can ensure a safe and conducive atmosphere for academic and personal growth.

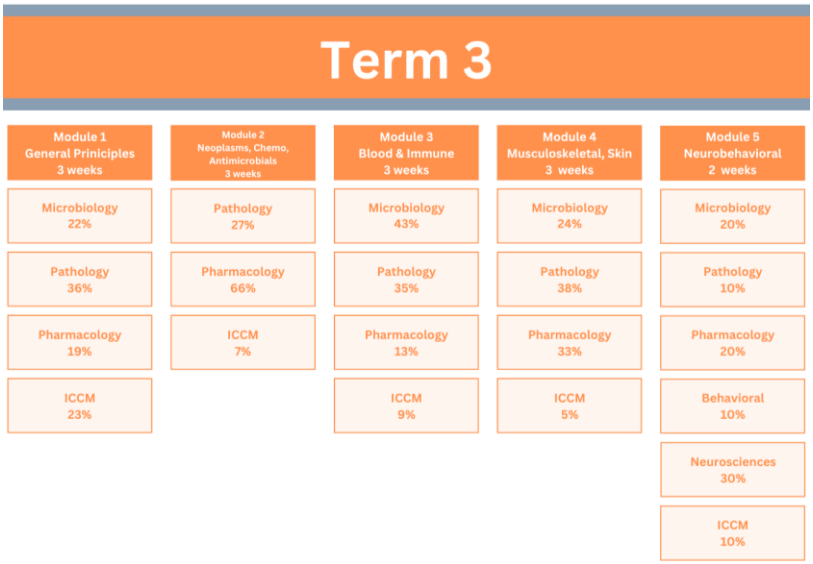
Commented [SP1]: Is it possible to add a link to the Student Resources page in Canvas?

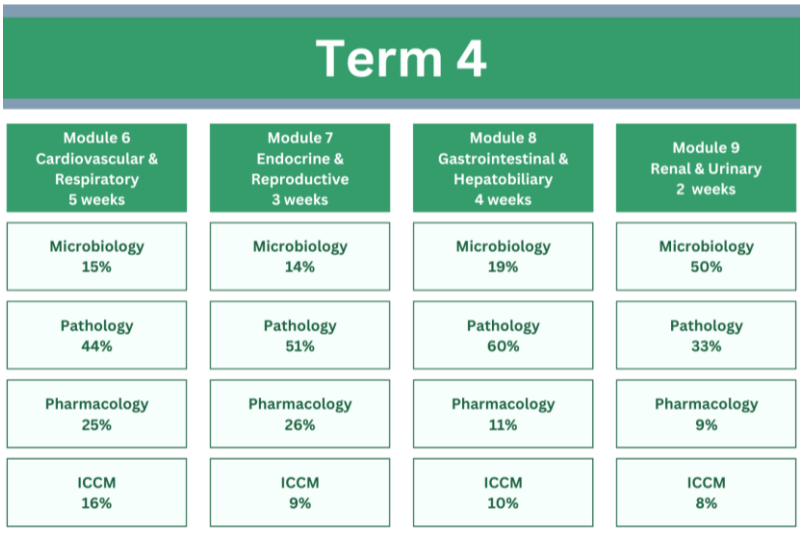
Commented [jg2R1]: In order to access a Canvas page, a person has to have a role in that course shell as an instructor, student, developer, observer, and so on. You cannot link out from Canvas this way. We are going to have to find an alternative way to provide this information.

Spiral Integrated Curriculum (Term 1–4)









Term	Weeks / Credits
1	16/16
2	16/16
3	16/16
4	16/16
TOTAL	**64/64**

The Review Course (and Clinical Transition Term)

At the completion of all preclinical (Basic Science) coursework, including the successful completion of all NBME Basic Science Subject Examinations, students will be promoted. The will begin a Clinical Transition Term and Review Course. During this term, students will complete their CLMD 405 (Introduction to Clinical and Community Medicine V) and CLMD 406 (Integrated System Review) courses. The Integrated System Review Course combines an introduction to clinical diagnosis and management and the understanding of basic sciences. There is no standard grade for the Review Course or CLMD 406. However, students who fail both CBSEs or other qualifying exams (QEs) given during this 15-week period of time required will repeat the Review Course as CLMD 407 (Integrated Systems Review remediation). Success in passing CBSEs during CLMD 407 requires the student to make the minimum passing score on standardized qualifying examinations. Failure to pass both CBSEs or QEs will lead to entrance into CLMD 408 (second remediation of the Review Course; an alternative is getting a one-on-one professional medical education tutor. The specific tutor must be discussed with the Associate Dean. This is done toensure you have chosen a tutor that has the best chance of aiding your success). Failure of getting a passing score on a 5th on standardized qualifying examinations will result in your inability to begin clinical rotations (see Pathways and Graduation Requirement). To go into the Global MD or Executive MD pathway, a minimum score of 57 on CBSE or 64 on qualifying examination is required. To sit for Step 1, a 67 on CBSE and/or 74 on other qualifying examination is required. Please see graduation requirements for any updates.

Independent Study/Remediation

Passing all NBME subject examinations is a requirement for being promoted into following terms:

- Students who require remediation of NBME examinations taken in Term 2 will be enrolled in a remediation term and placed in course IDIS 200 with additional study support. This requires students to be present on campus in St. Vincent and the Grenadines for that term. Students will be required to attend all didactics. Following successful remediation of the exams, students will be promoted to Term 3 the following term. A total maximum of three attempts on each term NBME is allowed and must be taken within one remediation term. Failure to pass the required NBME examinations will result in dismissal.
- Students who require remediation of NBME examinations taken in Terms 3 or 4 will be enrolled in a remediation term and placed in course IDIS 300 with additional study support. This requires students to be present on campus in St. Vincent and the Grenadines for that term. Students will be required to attend all didactics. Following successful remediation of the exams, students will be proceed to the Review Course the following term. A total maximum of three attempts on each Term 3 or 4 NBME is allowed and must be taken within one remediation term.
- Students preparing for the USMLE Step 1 will be enrolled in IDIS 500. Students failing Step 1 will be enrolled in remedial terms IDIS 501, or IDIS 502 (see USMLE testing policy). For Step 2 CK preparation, students will be enrolled in IDIS 600. Students failing Step 2 will be enrolled in remedial courses IDIS 601 or IDIS 602. Students desiring additional exam preparation time may request a Leave of Absence only after the completion of three consecutive failures of Step 1 or Step 2. IDIS Prep leaves are only granted after the completion of three Step attempts in the specific exam (see Canvas LMS of this document.)
- All IDIS students are required to pay tuition (see Tuition and Fees).
- Regarding the Review Course remediation, this remediation course will provide you with opportunities to participate in comprehensive reviews of Basic sciences with subject matter experts. You will supplement your learning and preparation for exams through independent learning and formative examinations. During the course, several benchmark exams will be scheduled to assess your preparedness to advance to their clinical rotations. Attendance is mandatory and will be documented daily. Students in remediation have continued access to Kaplan materials, continued access to the Deans, continued access to the school psychologist, and continued access to all support services including access to the MEC. Students may also participate in any SGA activities or outreach events.

IDIS courses will not count toward the credit required for graduation but will appear on the transcript.

USMLE Step 1 Prep

What used to be known as Term 6 is now called for Step 1 Prep. Step 1 should be taken as quickly as possible as soon as a passing score is received for a qualifying examination and no later than 20 weekdays after receiving a passing score on CBSE or a QE.

Clinical Clerkships (Core and Electives) – Terms 7–10

A student must meet the following criteria to be cleared for advancement to clinical clerkships:

- Qualifying score on standardized qualifying examinations, also pass Step 1 for the Traditional U.S. MD path
- Completion of life support training as required by hospitals in which the student attends clerkships, HIPAA certifications
- Nine-panel drug screen (some hospitals may require another)
- Criminal background screen
- Other documentation requirements as specified by hospital

In addition to the listed requirements, students must at all times maintain financial clearance with the Finance Office to be scheduled for clerkship rotations. Tuition and fees during clinical clerkships will be billed on an academic term basis in Step 1 Prep and terms 7–10. Once a student has gained financial clearance for an academic term, the student is eligible to be scheduled for any rotations starting within that academic term. After Term 10, students will be billed the student administration fee (currently $475) plus $100 tuition for each successive academic term until graduation. Additionally, students must carry malpractice insurance through the academic term in which they complete their final elective rotation. Students may petition the finance office for a prorated credit of the malpractice insurance premium in the event their final elective rotation is completed within the first 6 weeks of an academic term.

Clinical clerkships cannot be executed under the VISA Waiver Program. Additional information may be found at VISA Waiver Program on the travel.state.gov website. Under current United States law, non-U.S. citizen students entering the U.S. for educational purposes (noncitizens) must secure a B-1/B-2 visa. (9 FAM 402.2-5(E)(3) (U) Clerkship) Non-U.S. citizens must consult the Visitor Visa web page of the United States Department of State (https://travel.state.gov/content/visas/en/visit/visitor.html). Questions regarding visa applications should be directed to the Office of Student Services.

Clerkships and Electives

All clerkship rotations are scheduled in affiliated hospitals with which TSOM/TMSU have signed agreements, primarily in the state of Georgia. Students will be assigned to rotations over a 48-week rotation cycle, normally completed within 52 calendar weeks. The rotation curriculum is as follows:

FMED 500	Family Medicine	6 weeks
IMED 500	Internal Medicine	12 weeks
OBGY 500	Obstetrics & Gynecology	6 weeks
PEDS 500	Pediatrics	6 weeks
PSYC 500	Psychiatry	6 weeks
SURG 500	Surgery	12 weeks

Students are required to pass the NBME Clinical Subject (Shelf) Exam given at the end of each core clerkship. Shelf exam grading is based on the most recent normative data published by NBME. Please see each core rotation's Canvas page for specifics.

Additionally, Trinity sets higher scores to indicate High Pass and Honors. Those are reviewed annually and adjusted if indicated.

NBME Shelf Failure Policy

All medical students must take and pass NBME Shelf exams required for each clerkship.

Any student who fails any clerkship exam on the first attempt will receive a grade of "Incomplete" until they have passed the exam. No grade higher than Pass ("C") will be achievable after failing a clinical subject exam. Any student who fails a rotation but passes the NBME Shelf exam will receive an "F" and has to repeat the entire clerkship.

The following items relate to a failure on the first attempt of the NBME Shelf Exam:

- A repeat exam must be taken before elective clerkships can begin. It may be taken as early as 3 weeks after failure but must be taken before electives begin.
- The student, Associate Dean of Clinical Sciences and Curriculum (ADCSC), and Associate Dean of Assessment and Testing (ADAT) will determine an appropriate date for the retake. The final decision for the retake exam rests with the Associate Deans. The Clerkship Coordinator will coordinate scheduling of the exam in consultation with the Associate Deans.
- Once the date of the retake exam has been finalized, any request by the student to reschedule the exam must be made, in writing, to the ADCSC no fewer than 14 calendar days before the scheduled retake. Approval of the request is at the discretion of the ADCSC.

The following items relate to a failure on the second attempt of the same NBME Shelf Exam:

- Any student who fails the retake exam will receive a grade of "Fail" for the clerkship and must repeat the clerkship.
- The students must follow a prescribed plan of study during the repeat clerkship, designed in collaboration with the ADCSC.
- The need for a student to repeat a clerkship may affect their graduation date.

The following items relate to a second separate NBME Shelf failure before the first has been remediated:

- If a second separate NBME Shelf is failed before an earlier shelf has been remediated, the student is removed from clinical rotations and is given 6 weeks to pass both exams.
- The student, ADCSC and ADAT, and Testing will determine an appropriate date for the retakes. The final decision for the retake exams rests with the Associate Deans. The Clerkship Coordinator will coordinate scheduling of the exams in consultation with the Associate Deans.
- Once the date of the retake exam has been finalized, any request by the student to reschedule the exam must be made, in writing, to the ADCSC no fewer than 14 calendar days before the scheduled retake. Approval of the request is at the discretion of the ADCSC.

Any student who fails a specific NBME Shelf Exam on their third try (after repeating a clerkship due to two NBME Shelf Exam failures) will be discussed with the APC and be recommended for dismissal since they are failing to progress. Any student who fails Shelf exams in three (3) different core clerkships will be discussed by the APC and be recommended for dismissal since they are failing to progress. Students may not exceed the 6-year maximum time allotment for the completion of the MD degree. Tuition will be affected if repeat clerkships are required to pass clerkships or electives and may exceed 10-term limit.

Elective Clerkships

Upon successful completion of all core clerkships, students will be enrolled in IDIS 600 – Step 2 Prep Independent Study to allow the student the opportunity to prepare for USMLE Step 2. During this time, students will also take the M4 OSCE exam, which will allow for the assessment of Clinical Skills. Student elective plans must be approved by the ADSC or Senior Associate Dean. Students are reimbursed for fees paid to elective clerkship providers (application and instruction fees), subject to a cap of $400 per rotation week.

DRESS CODE

Classroom attire is expected to be appropriate and not offensive to others. On special occasions, such as for guest speakers, ceremonies, presentations, and clinical exams, professional attire is expected (for instance, when dressing business professional, one should appear neat and well groomed, wearing dresses of modest length, slacks, skirts of modest length, and/or dark-colored suits and ties. Business professional tops include neat button-down shirts or blouses with a blazer. Business professional shoes include 3-inch or shorter heels, loafers, or flats). Tattoos (or body art) should not be on the face or upper neck. Other tattoos should be covered to the extent possible. Piercings that involve the nasal septum, tongue, face, neck, or head (other than ear) should not be worn while on clinical rotations.

In all clinical settings, attire and grooming should conform to the standards for physicians at those sites. Attire, grooming, and demeanor with patients will have a major influence on patient and physician perception of students. Certain clerkship preceptors and hospitals may have specific requirements, and students must comply with those requirements.

Examination Policy

General Examination Policies

The following policies shall apply for all internal and standardized examinations for TMSU/TSOM students:

- Review the testing policy in the TMSU section of this document.
- Place all personal belongings not required for the exam (hats, backpacks, bags, phones, or other electrical devices) in the designated storage area.
- Hats and sunglasses are not permitted in the exam room.
- Neither water nor food may not be brought into the exam room unless the Accommodations Committee has approved a specific accommodation in advance.
- Electronic devices not required for the exam, including cell phones, recording/filming devices, calculators and watches, will not be allowed in the exam room.
- Books, reference materials, and any kind of paper will not be allowed in the exam room.
- Commencement of the exam will not be delayed due to a hardware or software problem with a laptop, nor will additional time be provided to complete an exam. A student experiencing a computer difficulty during the exam should notify a proctor for instructions.
- Students arriving after the exam start time will not be allowed into the venue without approval by the Associate Dean of Student Affairs or an authorized designee. Late-arriving students will not be allowed extra time to complete the exam. Students arriving more than 30 minutes late will not be allowed to test. Students are closely monitored during exams and can be cited for irregular behavior, which may result in disciplinary measures up to and including dismissal.

Internal Examinations

The following specific policies shall apply for internal examinations:

- Seats will be preassigned and posted outside the exam area at least 30 minutes prior to the exam.
- Only registered laptops and laptop chargers will be permitted in the exam venue. No cellphones, tablets or other electronic devices are allowed
- Prior to arriving at the exam site, each student should ensure (1) the student's laptop is operating properly and adequately charged, (2) the exam software application has been downloaded and is operating properly, (3) the exam has been downloaded, and (4) the student is familiar with use of the exam software. Temporary loaner laptops are available in advance of the exam if a student is experiencing technical issues with a personal laptop. Any attempt to disable or tamper with the exam software security features will be considered a violation of the student code of conduct.
- Arrive at the exam site at least 30 minutes prior to the exam start time and open the exam application to the password entry screen. The password will be supplied at the exam start time.

- One blank sheet of paper will be assigned to each student. The sheet will be signed and turned in at the completion of the exam. Failure to turn in the sheet may result in loss of points up to and including a zero for the examination.

Examination Review

After quizzes and internal examinations, the course director **may** conduct a review of the material on the exam. These reviews are at the discretion of the course director and may include a review of exam questions, concepts, or both. Course directors will schedule reviews during regularly scheduled classes. Students unable to attend a review may request an excused absence from the Associate Dean for Admissions and Student Affairs to be allowed a make-up review with the course director. Review opportunities are only available for up to 1 week after an exam. All Module exams in the spiral curriculum will be composed of questions from the NBME Custom Assessment Services (CAS). This helps prepare students for NBME and USMLE exams.

External Examinations – NBME Subject Exams

The following specific policies shall apply for standardized examinations:

- A university ID and government-issued ID are required for admission to the exam venue (Prometric Centers).
- For qualifying examination students only, snacks and/or beverages will be allowed in the designated storage area for personal belongings.
- Students should arrive at least 30 minutes prior to the exam start time to allow adequate time to prepare for the exam.
- Students with an excused absence from a scheduled exam will be allowed to register for an alternate exam time.
- Students should be respectful of other students and should remain silent during the exam, and they should enter and exit the exam venue as quietly as possible.
- Students may not use the washroom after entering the examination room until completion of the exam.

TMSU-SOM Course Grading
Please see Grading and Remediation Policy

DEAN'S LIST

During the medical program, there are two categories of Dean's List awarded each term based on a grade point average (GPA), excluding all Pass/Fail (P/F) grades. All Incomplete (I) grades must be completed before the honor is bestowed. Core clerkships will be evaluated together.

Trinity Medical Sciences University is committed to fostering a culture of academic and professional excellence. In recognition of exceptional student achievement, the University confers Dean's List honors at the end of each academic term. This distinction serves not only to commend individual performance, but also to encourage continued dedication to the rigorous standards of the medical profession.

The purpose of this policy is to formally define the criteria for inclusion on the Dean's List and Dean's List with Distinction, and to ensure consistent and equitable recognition of students who exemplify the highest standards of academic performance and professionalism.

To be eligible for either level of Dean's List recognition, students must:

- Be enrolled full-time in the medical program during the semester under review.
- Have no documented violations of the University's Professionalism Standards, including but not limited to academic integrity, conduct, and attendance requirements.
- Complete all required assessments and coursework for the semester within the designated timeframes.

Dean's List with Distinction (DLD)
This honor is awarded to students who meet the following criteria:

- Rank in the top 10th percentile of cumulative academic performance at the end of the semester, based on the weighted average of all graded assessments.
- Maintain a record free of professionalism concerns, including full compliance with the University's Attendance Policy.
- Any remediation removes a student from this award

This honor is awarded to clinical students who meet the following criteria:

- Those who achieve an overall grade of Honors (H) in all 6 core clerkships.
- Rank in the top 10th percentile of cumulative academic performance at the end of the six core clerkships
- Maintain a record free of professionalism concerns, including full compliance with the University's Attendance Policy.
- A High Pass (HP) or Pass (P) removes a student from this award.

Dean's List (DL)
This recognition is awarded to students who meet the following criteria:

- Rank in the top 25th percentile, but not within the top 10th percentile, of cumulative academic performance at the end of the semester.
- Maintain a record free of professionalism concerns, including full compliance with the University's Attendance Policy.
- Any remediation removes a student from this award.

This recognition is awarded to clinical students who meet the following criteria:

- Those who achieve an overall grade of 3 High Pass (HP) and 3 Honors (H) across all six core clerkships.
- Rank in the top 25th percentile, but not within the top 10th percentile, of cumulative academic performance at the end of the six core clerkships.
- Maintain a record free of professionalism concerns, including full compliance with the University's Attendance Policy.
- A Pass (P) removes a student from this award.

Eligible students will be notified in writing by the Office of the Dean at the beginning of the following semester. Dean's List recognition will also be noted in the student's academic file and may be included in official letters of recommendation or documentation for external academic or professional opportunities.

APPROVAL OF GRADES

All course grades are compiled by the Associate Dean of Assessment and Testing – Internal and the module director. The Associate Dean presents the grades to the Academic Progress Committee (APC) for approval. Following approval, they are published to the students and entered onto the student's transcript.

A student has the right to appeal a course grade to the APC on an individual basis within 2 weeks after the finalization of grades. After this 2-week period, grades may not be appealed. All courses must be successfully passed or remediated to progress in the curriculum. Final grades, but not interim grades, can be appealed as prescribed in the TSOM Academic Appeals Policy.

FAILED COURSE REMEDIATION

A failure of a course in Terms 1–4 of the spiral curriculum leads to repeating the entire course in the next semester at a rate of $16,000. A course is failed (depending on the course) if two of four modules are failed, three of five modules are failed, or an overall percentage of ≥70% in the course is not maintained, regardless of module performance.

INCOMPLETE GRADE

An Incomplete grade (I) signifies that not all required coursework was completed during the term of enrollment. The I grade is not calculated into the term GPA or the cumulative GPA at the time it is awarded. All required coursework must be completed prior to the established deadline for completing the missing work. If course requirements are not satisfied by the deadline, an I grade will be changed to an F.

ACADEMIC APPEAL

TMSU students have the right of academic appeal against the following decisions pertaining to their individual academic career:

1. Individual course grades (issued by the course directors or clinical faculty)
2. Decisions of the Academic Progress Committee (issued by the Chair, APC) regarding graduation, academic promotion, academic status, deceleration
3. Academic Progress Committee findings and determinations on noncognitive issues
4. Dismissal from TMSU, with exceptions to appeal availability noted
5. Academic decisions as described previously, issued by the Associate Dean of Student Affairs, and the Associate Dean of Clinical Sciences and Curriculum
6. TMSU-SBS and TMSU-SOM administrative decisions may have exceptions as noted

EXCLUSIONS FROM ACADEMIC APPEAL

1. Established TMSU policies cannot be appealed in general.
2. Financial issues and decisions cannot be appealed.

Any appeal must be filed in writing with the Dean within 14 calendar days (exclusion period) following notification of a decision affecting the student and/or issuance of a grade and/or other event. This appeal must follow the required appeal format provided within the notification. After expiration of the exclusion period, no appeals may be filed. The appeal must provide compelling and extenuating circumstances of why the academic standard was not met. It should be accompanied by any evidence substantiating the appeal and a plan that, if the appeal is granted, the appellant will be successful in future academic endeavors. The Dean will keep any sensitive personal or medical information contained in appeals letters confidential.

The right to appeal a final institutional decision is the purview of CAAM-HP.

CAAM-HP at CAAM-HP Secretariat
Suite #7 Pinnacle Point
53 Lady Musgrave Road
Kingston 10, Jamaica
875-927-4765

The purpose of publishing the commission's contact information is to enable interested parties (1) to learn about the accreditation status, (2) to file a third-party comment at the time of the institution's review, or (3) to file a complaint against the institution for alleged noncompliance with a standard or requirement.

CONFLICTS OF INTEREST

Conflicts of interest must be avoided. Students, faculty (including deans), and staff are recused from participation in deliberations or voting of the Academic Progress Committee (APC), ad hoc Disciplinary Review Committees, and student appeal bodies when an actual, potential, or perceived conflict of interest exists (e.g., serving as the student's advisor, having a personal relationship with the student, or other circumstances that could compromise objectivity).

WITHDRAWAL

A course withdrawal occurs when students are given permission to discontinue participation in one or more courses. Approval for withdrawal from a course must be granted by the Course Director and the Associate Dean of Student Affairs. Withdrawal will not affect students' GPAs but will affect students' academic progress.

Any student who withdraws from any course after the first exam will receive a W grade in any course where *either* the final exam has not yet been completed or the term is beyond the 1st business day of the 6th week, whichever occurs first. If the student has completed the final exam, the course may not be dropped, and the student's grade will stand on the academic record. The student will be responsible for all tuition and fees for the semester.

A student may withdraw from a course only one time without extenuating circumstances. Extenuating circumstances are those of a documented health issue or documented significant family issue. These must be approved by the Associate Dean of Student Affairs. Any student discontinuing a class previously withdrawn from will receive a grade of F in the course.

Any student taking a leave of absence (LOA) that starts after the 1st business day of the 6th week will receive a grade of W for all courses registered for that term.

GRADING SYSTEM FOR CLERKSHIPS

Third-year clerkships are graded Pass, High Pass, and Honors.

Students earn 1 credit hour per rotation week completed. During each 6- and 12-week clerkship, students will earn 6 and 12 credits, respectively.

Clerkship grades are composed of the following: NBME Shelf Exam (scaled score), case-based learning participation, clinical rotation, professionalism, case logs, and completion of faculty and rotation evaluations.

Part of Clerkship	Percentage of Grade	Relevant Remediation Information
NBME Clinical Subject Examination	60% (Scaled score → see below)	Must pass or remediation required (see grading policy)
CBL Participation	15% Preparation; Knowledge; Participation; Professional interaction	Completion of faculty and clerkship evaluation
Clinical rotation (evaluation(s))	15% (If multiple preceptors, average of score)	
Case/patient logs and/ or submit case based learning session that addresses that topic if not seen	5%	Must complete or lose 5% of final grade
Completion of faculty and clerkship evaluation	5%	Must complete or lose 5% of final grade
Total	100%	

GRADING SCALE FOR NBME SUBJECT EXAMS

Students scoring High Pass and Honors on an NBME subject exam will earn clerkship grades of High Pass and Honors if all other required components of the clerkship are completed on time and no deficiencies are noted on the preceptor evaluation. High Pass and Honors are only available for students who take the exam on the day scheduled.

NBME Clinical Subject Exam Grading		
	Percentile from NBME Clinical Subject Exam	Scaled % Score for Final Grade Calculation
Fail	≤2	60
Pass	3-30	75
High Pass	31-69	85
Honors	≥70	95

Please see the NBME Shelf failure policy section in this handbook. Starting January 2026, all NBME Subject Exams with have the 5th percentile as passing rather than the 3rd. This is being done to increase students preparedness and success on CBSE, CCSE and subsequently Step 1 and Step 2.

No student may take Step 2 CK until all clerkships are complete and CCSE is passed, including the submission of any and all assignments, evaluations, and passing shelf exam scores.

Transcript Grade		**GPA**
H	Honors	4.0
HP	High Pass	3.0
P	Pass	2.0
F	Failure	0.0

I	Incomplete	0.0

Students are not allowed to schedule breaks between clerkships to study for the shelf exam.

GRADING OF ELECTIVE CLERKSHIPS

Grading in electives is based upon faculty evaluations and follows the previous table: Honors (4.0), High Pass (3.0), Pass (2.0), Fail (0.0), and Incomplete (0.0).

United States Medical Licensing Examination (USMLE) Preparation and Testing

All TSOM students on the Traditional MD pathway are required to pass the USMLE Step 1 and Step 2 CK exams to obtain residencies or licensure in U.S. and Canada. For those students,

- **USMLE Step 1** must be passed before the student may advance to clinical rotations.
- **USMLE Step 2 CK** must be passed before advancing to elective rotations.

Students must be certified by TMSU/TSOM to register for the USMLE exams after passing CBSE and/or other qualifying exams.

A student may be restricted in the number of exam attempts based upon demonstrated progress. Trinity follows the NBME, USMLE and ECFMG policies with regard to timing and attempt limits.

Students are required to submit electronic copies of the score report to the Office of the Registrar and the Clerkship Office immediately upon receipt. All score reports, whether passing or failing, must be submitted. Failure to submit will lead to automatic referral to the APC for consideration of dismissal.

Trinity Clinical Skills Assessment – M4 Objective Structured Clinical Examination (OSCE)

All TSOM students are required to pass the Trinity Clinical Skills Assessment, also known as the M4 OSCE. Upon completion of core rotations, students are eligible to register for the M4 OSCE. This assessment serves in place of USMLE Step 2 CS and satisfies the graduation requirements for Trinity and the certification requirements for ECFMG.

Qualities of Graduates

Core Competencies (Medical Program Objectives)

Students are expected to meet the expectations of each core competency: medical knowledge, professionalism, patient care, communication skills, practiced-based learning, and systems-based learning. In addition to those areas, students are expected to attain an acceptable "level of entrustment" for the attributes. Core clerkships and elective clinical evaluations will measure these attributes.

Entrustable Professional Attributes

In 2012, the AAMC published a list of Entrustable Professional Activities (EPAs) that a graduate should demonstrate when entering a residency program. Concurrent to these pilots, schools recognized the need for students to demonstrate certain levels of entrustment between preclinical and clinical training to validate the clinical skills training in early experiences. TMSU/TSOM defined a subset of behaviors for students entering clerkships. Both the preclinical and clinical EPAs are assessed throughout the curriculum.

Preclinical EPAs – The minimum expectation is that students will be able to do the following at the beginning of clerkship training:

- Gather information from a medically stable patient with a common chief complaint.

- Integrate information gathered about a patient to construct a differential diagnosis and a preliminary plan.
- Communicate information relevant to patient care to other members of the healthcare team.
- Communicate information about patient care (diagnosis and care) with the patient in no physical or emotional distress.
- Provide the healthcare team with resources to improve individual patient care or collective patient care.

During clerkship training, students will develop additional EPAs to be ready for residency training:

- Gather a history and perform a physical exam.
- Prioritize a differential diagnosis following a clinical encounter.
- Recommend and interpret common diagnostic and screening tests.
- Enter and discuss orders and prescriptions.
- Document a clinical encounter in the patient record.
- Provide an oral presentation of a clinical encounter.
- Form clinical questions and retrieve evidence to advance patient care.
- Give or receive a patient handover to transition care responsibility.
- Collaborate as a member of an interprofessional team.
- Recognize a patient requiring urgent or emergent care and initiate evaluation and management.
- Obtain informed consent for tests and/or procedures.
- Perform general procedures of a physician.
- Identify systems failures and contribute to a culture of safety and improvement.

Graduation

The degree requirements for the MD degree from TMSU are set by the faculty with the concurrence of the Provost. The Registrar certifies that all degree requirements have been met for each graduating student. The faculty meet to review and approve each candidate for graduation. See Graduation Requirements.

Students should periodically review progress toward degree completion with the Office of the Registrar. Graduation timing is critical for the annual residency match cycle and failure to meet graduation requirement deadlines could impact readiness for residency start dates.

OFFICIAL DATE OF GRADUATION

The official date of graduation for each student will be based on the completion of all program requirements:

- Satisfactory completion of all courses and clerkships, including electives
- Satisfactory completion of required licensure exams if on the Traditional path
- Receipt of official licensure transcripts from ECFMG (request must be made by student if on the Traditional path)
- Fulfillment of all financial obligations to the school
- Review and approval by the faculty and Dean

The date of graduation will be assigned following approval by the faculty and will typically be the last business day of the month in which all graduation requirements are met. Diplomas will be submitted to ECFMG for authentication once all of the requirements are completed. Every effort will be made to accommodate students so they can begin their residencies in July.

A student is not considered a graduate until all required departments have successfully cleared the student.

Course Descriptions and Differences in Types of Curriculum

SPIRAL OR SPIRAL INTEGRATED - A spiral (aka spiral-integrated) curriculum revisits major organ systems more than once, with increasing complexity each time. In Terms 1–2, students first learn the normal structure, function, and foundational science of each system. In Terms 3–4, those same systems are revisited through abnormal function, disease mechanisms, diagnosis,

treatment, and clinical application. For example, cardiovascular content is first taught as normal cardiovascular structure and function, then later revisited as cardiovascular pathology, pharmacology, and clinical disease. This has been shown to be the most successful model and is what Trinity employs

INTEGRATED - An integrated curriculum organizes learning around organ systems or clinical themes rather than isolated disciplines. In this model, each major system is typically covered once during the preclinical curriculum. For example, cardiovascular content is taught in one cardiovascular block that integrates anatomy, physiology, pathology, pharmacology, microbiology, and clinical correlations.

TRADITIONAL - A traditional curriculum organizes learning by individual academic disciplines. In this model, students complete separate courses such as anatomy, physiology, microbiology, pathology, and pharmacology, usually with each discipline taught once during Terms 1–4.

Course Requirements for MD Degree Program (≥137 weeks / 137 total credits over ≥4 calendar years)
Terms 1–4 (Integrated Spiral Curriculum)

64 weeks / 64 credit hours
All courses in terms 1-8 are required for the Doctor of Medicine degree. The spiral integrated curriculum encompasses all of the traditional disciplines taught in the preclinical years. It is then applied during clinical clerkships. The traditional disciplines of anatomy, behavior science, biochemistry, genetics, histology, neuroscience, physiology, biostatistics, and epidemiology are integrated into a systems-based format for the first two terms. These first two terms cover functionally normal human systems. The traditional disciplines of behavior science, immunology, microbiology, neuroscience, pathology, and pharmacology are integrated into Terms 3 and 4. These two terms cover functionally abnormal human systems. The same systems are taught in Terms 1 and 2 as well as Terms 3 and 4. This repetition helps strengthen student understanding. Clinical skills are taught in an integrated manner throughout all 4 terms. Clinical application occurs during the core clerkships. Please see courses in Terms 1–4. Weekly quizzes and/or lab practical exams are formative in nature. End of module exams are summative and based on the USMLE Content Blueprint.

TERM 1 SPIRAL CURRICULUM

Term 1 is made up of five modules. The term begins with General Principles and then proceeds into Musculoskeletal and Skin followed by Blood and Cardiovascular, Respiratory, and ending with Biostatistics and Epidemiology. There are weekly quizzes or lab practical exams with a test at the end of each module. There are no midterms or finals. There are no NBME examinations at the end of Term 1. *16 weeks – 16 credit hours*

TERM 2 SPIRAL CURRICULUM

Term 2 is also made up of five modules. The term starts with GI & Hepatobiliary, followed by Renal & Urinary, Endocrine, Reproductive & Genetics, and ending with Neurobehavioral. There are weekly quizzes or lab practical exams with a test at the end of each module. There are no midterms or quizzes. There are NBME Basic Science Subject Examinations covering Biochemistry and Anatomy at the end of Term 2. *16 weeks – 16 credit hours*

TERM 3 SPIRAL CURRICULUM

Term 3 is also made up of five modules. The term again begins with General Principles, and then proceeds into Neurobehavioral; Neoplasms, Chemotherapy & Antimicrobials; followed by Blood & Immune, and ending the term with Musculoskeletal & Skin. There are weekly quizzes or lab practical exams with a test at the end of each module. There are no midterms or finals. There are NBME Basic Science Subject Examinations covering Neuroscience and Behavioral Science at the end of Term 3. *16 weeks – 16 credit hours*

TERM 4 SPIRAL CURRICULUM

Term 4 is made up of four modules. The term begins with Cardiovascular & Respiratory, followed by Endocrine & Reproductive, GI & Hepatobiliary, and ending the term Renal & Urinary. There are weekly quizzes or lab practical exams with a test at the end of each module. There are no midterms or finals. There are NBME Basic Science Subject Examinations

covering Pathology, Microbiology/Immunology, Pharmacology, and Physiology (Pathophysiology) at the end of Term 4. NBME Basic Science Subject Examinations are not included in course grades, but they must be passed before advancing. *16 weeks – 16 credit hours*

Clinical Clerkships
48 weeks / 48 credit hours

Students are eligible to enter clinical clerkships after passing the required exams. Students are required to take 48 weeks of Core Clinical Clerkships. The clerkships in medicine, surgery, pediatrics, family medicine, obstetrics and gynecology, and psychiatry are the basic areas of medical practice about which all physicians need to be knowledgeable. They are included in the curriculum of every medical school. Participation in these clerkships also provides students with an understanding of the most important specialties in medicine.

FMED 500 Family Medicine
In this clerkship, students are introduced to the principles and practice of family medicine. It is an opportunity to begin development of the knowledge, skills, and attitudes required to approach a problem in the primary care setting. Students will observe how family physicians provide for ongoing medical needs of their patients within the context of the family and community setting and participate in the care of patients. *6 weeks / 6 credit hours*

IMED 500 Internal Medicine
In this clerkship, students are introduced to the principles of caring for the medical patient. Students will begin to understand the general process of the application of medical therapy to patients in a wide variety of settings. The student participates as a member of the medical team and observes the role of the internist as a member of the multidisciplinary team providing patient care. *12 weeks / 12 credit hours*

OBGY 500 Obstetrics and Gynecology
During this clerkship, students are introduced to the principles of caring for the OB/GYN patient and participate in the various stages of evaluation and treatment of patients. Students will begin to understand the general process of the application of OB/GYN-specific therapies to patients in a wide variety of settings and participate as a member of a multidisciplinary team for patient care. *6 weeks / 6 credit hours*

PEDS 500 Pediatrics
In this clerkship, students acquire knowledge about the process of growth and development and about common diseases and conditions of childhood. Students work with children and families together to develop an understanding of the importance of preventive medicine and how social and environmental factors affect young people. *6 weeks / 6 credit hours*

PSYC 500 Psychiatry
In this clerkship, students learn through clinical involvement by working directly with patients and being part of the treatment team. Students develop professional rapport with patients, understand the presentation of psychiatric illness, assess patient histories and mental status, and develop biopsychosocial assessments and treatment plans. *6 weeks / 6 credit hours*

SURG 500 Surgery
In this clerkship, students are introduced to the principles of caring for the surgical patient. Students participate in the care of patients in the various stages of evaluation and treatment by surgeons. The student will begin to understand the general process of the application of surgical therapy to patients in a wide variety of settings as a member of the multidisciplinary team. *12 weeks / 12 credit hours*

Elective Clerkships
27 weeks / 27 hours
After the completion of core clerkships and passing Step 2 CK, an additional 27 weeks are spent in elective clerkships. The Associate Dean of Clinical Sciences and Curriculum will assist students in developing an Elective Plan that improves the student's chances for a residency in a specialty of their choice.
Each week of electives is 1 credit hour.

A few of the options are below:

ANES 600 Anesthesiology

The goal of this elective clerkship is to provide the students with an understanding of the basic management of the perioperative patient and the concurrent medical conditions in the intraoperative period. Students will become familiar with commonly used anesthetic agents and techniques and the risks and complications associated with each. The students will become familiar with principles and skills involved in airway management, intravenous line insertion, and the uses of invasive and noninvasive monitoring. *4 weeks / 4 credit hours*

ANES 601 Pain Management

The purpose of this elective is to prepare students to develop rational drug therapy plans for those with pain and other symptoms in patients with and without advanced illness, including those near end-of-life, as well as develop plans for monitoring pharmacologic and interventional therapies in these patients. *4 weeks / 4 credit hours*

EMED 600 Emergency Medicine

This Emergency Medicine elective provides senior medical students with hands-on clinical experience in the evaluation and management of acutely ill and injured patients. Students will work in high-acuity settings under the supervision of emergency medicine faculty and gain exposure to a broad range of undifferentiated presentations, including trauma, cardiac emergencies, respiratory distress, altered mental status, and infectious diseases. Emphasis is placed on rapid clinical assessment, development of prioritized differential diagnoses, procedural competence, interdisciplinary communication, and evidence-based decision making. More information can be obtained from the national M4 curriculum developed by the Clerkship Directors in Emergency Medicine (CDEM) and the Council of Emergency Medicine Residency Directors (CORD) *2–4 weeks / 2-4 credit hours*

FMED 600 General Family Medicine

This elective clerkship provides students with clinical exposure, occasions for observation, and training opportunities to further their understanding of family medicine. Students experience a wide variety of clinical experiences to better understand how context influences the diagnostic process and management decisions needed to address complexities, including patients with multiple concerns, various psychosocial issues, and different, sometimes conflicting behaviors that influence their health and health care. *2–4 weeks / 2-4 credit hours*

FMED 601 Rural Family Medicine

The elective is designed for students to train with physicians in rural and underserved areas geographically separate from a clinical campus. The focus is on general practice and provides a better understanding of what medical practice means to small communities. *2–4 weeks / 2-4 credit hours*

IDIS 600 Step 2 CK Preparation Independent Study 1

This course is designed to provide students with an opportunity for independent study in preparation for USMLE Step 2 CK. Review materials and study support are provided. The student is expected to sign up for and take their first attempt of Step 2 CK during this term. The course may be taken for up to *15 weeks*.

IDIS 601 Step 2 CK Preparation Independent Study 2

This course is designed to provide students with an additional opportunity for independent study in preparation for Step 2 CK after an initial failure. Review materials and study support are provided. The student is expected to sign up for and take their second attempt of Step 2 CK during this term. The course may be taken for up to *15 weeks*.

IDIS 602 and IDIS 603

Step 2 CK Preparation Independent Study 3 and 4 IDIS 602 is designed to provide students that require another opportunity for independent study in preparation for Step 2 CK after a second failure. Review materials and study support are provided. The student is expected to sign up for and take their third attempt of Step 2 CK during this term. The course may be taken for up to *15 weeks*.

IDIS 603 is for students who need an additional term(s) to either pass Step 2 CK or exhaust available attempts allowed by the USMLE. *15 weeks*

IMED 600 General Internal Medicine
This elective provides students with a continuation of training from the third year and allows more active participation in care and management of patients and engagement in greater responsibility of patient care. *4 weeks / 4 weeks*

IMED 601 Cardiology
This elective clerkship provides the students with clinical exposure, occasions for observation, and training opportunities to further their understanding of cardiology. Students focus on the basic care, treatment, and diagnosis of common cardiovascular illnesses in the adult patient to prepare for more advanced study of the discipline. Training emphasizes physician awareness, assessment, treatment, and acknowledgement of common cardiovascular conditions. *2–4 weeks / 2-4 credit hours*

IMED 602 Dermatology
This elective clerkship will introduce the students to clinical dermatology and the relationship of skin disease/changes to other medical conditions. *2–4 weeks / 2-4 credit hours*

IMED 603 Gastroenterology
In this elective clerkship, the student will learn the clinical approach to gastrointestinal and hepatobiliary diseases. The focus will be on solving clinical problems, differential diagnoses, pathophysiology, and management of patients. *2–4 weeks / 2-4 credit hours*

IMED 604 Hematology/Oncology
This elective is designed to provide students with a thorough exposure to hematology, emphasizing basic science and clinical aspects pertinent to understanding normal function, pathophysiological derangements resulting in disease, and appropriate diagnostic treatment protocols used in addressing diseased states. *2–4 weeks / 2-4 credit hours*

IMED 605 Critical Care Medicine
The purpose of this elective is to expose the student to the management of critically ill patients. The student will review relevant pathophysiology of presenting problems and therapies with an emphasis on diagnosis and management of the critically ill patient. *2–4 weeks / 2-4 credit hours*

IMED 606 Hospitalist Medicine
The purpose of this elective is to expose the students to being responsible for all aspects of inpatient care. Students will work one-on-one with a resident or attending hospitalist physician. *2–4 weeks / 2-4 credit hours*

IMED 607 Nephrology
Students in this elective are provided with a broad overview of nephrology, emphasizing the clinical approach to patients. Particular attention is given to differential diagnoses, appropriate use of diagnostic tests, interpretation of laboratory data, the proper use of medications in the patient with renal impairment, and renal replacement therapies. *2–4 weeks / 2-4 credit hours*

IMED 608 Neurology
In this elective, the student will familiarize themselves with the clinical presentations of common neurological disorders, develop appropriate differential diagnoses of common disorders, interpret laboratory results, and propose treatment and management plans for patients. Among the disorders students may experience are acute mental status changes, stroke, seizure disorders, headache, multiple sclerosis, movement disorders, diseases of muscles and nerves, and dementia. *2–4 weeks / 2-4 credit hours*

IMED 609 Oncology

The purpose of this elective clerkship is to provide students with an overview of medical oncology. The student will gain a fundamental understanding of the diagnostic and therapeutic approach to patients with cancer. *2–4 weeks / 2-4 credit hours*

IMED 610 Pulmonary Medicine
Students on this elective are provided with a broad experience in pulmonary medicine, underscoring the basic pathophysiology of diseases. The elective experience encompasses inpatient consultations, outpatients, and critical care assessment and management. *2–4 weeks / 2-4 credit hours*

IMED 611 Sleep Medicine
In this elective clerkship, students are introduced to a multidisciplinary understanding of the causes and treatment of sleep disorders by pulmonary, neurology, ENT, and dental specialists. *2–4 weeks / 2-4 credit hours*

IMED 612 Geriatric Medicine
This elective clerkship is designed to provide additional training in the principles of aging, approach to the older patient, and systems of care, along with syndromes, psychiatric considerations and diseases, and disorders of the geriatric patient. *2–4 weeks / 2-4 credit hours*

IMED 613 Endocrinology
Students in this elective in endocrinology and metabolism may be provided with inpatient consultation experience and/or outpatient endocrinology exposure. The focus will be on the pathogenesis and management of all endocrine hypothalamic, pituitary, adrenal, thyroid, parathyroid, pancreas, and gonadal diseases as well as syndromes of diabetes mellitus and hyperlipidemia. *2–4 weeks / 2-4 credit hours*

IMED 614 Infectious Disease
The purpose of this elective is to familiarize students with the evaluation, diagnosis, and treatment of patients with both common and unusual infectious diseases. *2–4 weeks / 2-4 credit hours*

IMED 615 Rheumatology
Students in this elective are provided with an opportunity to better understand clinical presentations of immunologically related diseases of joints, soft tissues, autoimmune disorders, and vasculitis. *2–4 weeks / 2-4 credit hours*

OBGY 600 General Obstetrics and Gynecology
Students in this elective clerkship are provided with advanced experience in obstetrics and gynecology. Their experiences will vary among sites but may include normal labor and delivery, high risk pregnancies, and routine prenatal care. Gynecology may include benign gynecology and/or gynecologic oncology. *2–4 weeks / 2-4 credit hours*

OBGY 601 General Gynecology
Students in this course are provided with clinical exposure, occasions for observation, and training opportunities to further their understanding of general gynecology. Students focus on the diagnosis, treatment, and management of common and uncommon gynecological conditions with a greater depth than the core clerkship rotation. During the clerkship, students will continue to improve their abilities to obtain, record, analyze, and communicate clinical information. *2–4 weeks / 2-4 credit hours*

OBGY 602 General Obstetrics
Students in this course are provided with clinical exposure, occasions for observation, and training opportunities to further their understanding of general obstetrics. Students focus on the diagnosis, treatment, and management of common and uncommon obstetrical conditions with a greater depth than the core clerkship rotation. During the clerkship, students will continue to improve their ability to obtain, record, analyze, and communicate clinical information. *2–4 weeks / 2-4 credit hours*

OBGY 603 Medical Genetics
Students in this elective are provided with an introduction to the field of clinical genetics. Students have the opportunity to learn about a range of genetic disorders, genetic diagnostics, and genetic counseling by participating in the evaluation of fetal development during pregnancy. *2–4 weeks / 2-4 credit hours*

OBGY 604 Reproductive Endocrinology
Students in this elective are provided with opportunities to observe and assist in the management of patients with complex problems related to reproductive endocrinology and infertility. These may include hormonal imbalances, menstrual disturbances, sexual development and function problems, infertility, pregnancy loss, and menopause. *2–4 weeks / 2-4 credit hours*

OBGY 605 Maternal Fetal Medicine
Students in this elective are provided with opportunities to observe and assist in the management of patients with complex problems related to maternal fetal medicine. These may include preterm labor with or without premature preterm rupture of membranes, multiple gestations, diabetes in pregnancy (pre-existing and gestational), hypertension in pregnancy (including chronic hypertension, gestational hypertension, mild or severe pre-eclampsia), advanced maternal age, and genetic conditions. *2–4 weeks / 2-4 credit hours*

OPHT 600 Ophthalmology
Students in this elective clerkship are provided with a comprehensive introduction to ophthalmology and how to recognize and manage common ocular diseases and emergencies. The students will gain information to manage routine ophthalmologic conditions in family medicine, internal medicine, and pediatric practice. *2–4 weeks / 2-4 credit hours*

PATH 600 General Pathology
Students in this elective clerkship are provided with exposure to commonly encountered cases. Students will develop a broad overview of the field and an understanding of the role of the pathologist in patient care. Students will gain a better understanding of common diagnostic tests used to assist in the identification of malignant, inflammatory, autoimmune, infectious, and other disease states. *2–4 weeks / 2-4 credit hours*

PATH 601 Forensic Pathology
Students in this elective are introduced to forensic pathology. The students will learn the differences between hospital and forensic autopsies, natural and non-natural causes of death, and types of wound presentations associated with non-natural causes of death. *2–4 weeks / 2-4 credit hours*

PEDS 600 General Pediatrics
Students in this elective clerkship are provided with additional clinical exposure, occasions for observation, and training opportunities to further their understanding of pediatric patients. The focus will be on inpatient and outpatient medical diagnoses, treatment plans, and management of infants and children. *2–4 weeks / 2-4 credit hours*

PEDS 601 Pediatric Emergency Medicine
Students in this elective will be exposed to a broad spectrum of pediatric disease and trauma in the Emergency Medicine service. The focus will be on the chief complaint while simultaneously assessing the entire child to differentiate between a "well child" and an "ill child." *2–4 weeks / 2-4 credit hours*

PEDS 602 Neonatology
The goals of this elective are to familiarize the student with normal and abnormal adaptation of the newborn, to recognize various clinical entities peculiar to newborns (hyaline membrane disease, congenital heart disease, meconium aspiration, syndromes, genetic diseases, etc.) and their management. *2–4 weeks / 2-4 credit hours*

PEDS 603 Developmental Pediatrics
The purpose of this elective is to reinforce previously learned skills and principles of treating children with developmental and behavioral problems. Students will receive additional training in a variety of medically directed diagnostic services for infants, children, and adolescents suspected of developmental and/or learning problems, including those at risk because of problems associated with birth. *2–4 weeks / 2-4 credit hours*

PEDS 604 Pediatric Endocrinology
Students in this elective will be provided with an overview in the diagnosis and management of pediatric endocrine disorders. Students will participate in clinical activities and attend clinical conferences. *2–4 weeks / 2-4 credit hours*

PEDS 605 Pediatric Cardiology
Students in this elective will be exposed to a variety of children with suspected or confirmed congenital or acquired heart disease. Emphasis will be on history-taking, physical examination, and interpretation of electrocardiograms and X-rays and may include students being exposed to echocardiography, cardiac catheterization, and electrophysiological studies. *4 weeks / 4 credit hours*

PEDS 606 Pediatric Neurology
Students in this elective are provided with opportunities to improve evaluation and management skills for neurological problems in infancy, childhood, and adolescents. *4 weeks / 4 credit hours*

PMNR 600 Physical Medicine and Rehabilitation
In this elective clerkship, the students are introduced to the needs of individuals with disabilities, which may include sports injuries, acute trauma injuries, and disease. The students will focus on diagnosing and treating disorders and diseases unique to the patients. Special emphasis is placed on attaining maximum functional independence for individuals. *2–4 weeks / 2-4 credit hours*

PSYC 600 General Psychiatry
In this elective students are provided with additional clinical exposure, observation, and training to further understand psychiatric patients. Focus will be on inpatient and outpatient diagnoses, treatment, and management. *2–4 weeks / 2-4 credit hours*

PSYC 601 Adult Psychiatry
In this elective clerkship, the student will be exposed to adult psychiatric conditions that demonstrate a wide range of disorders, including manifestations of "organic" brain disorders, psychoses, depressive illness, and personality disorders. The student may have experiences in both inpatient and outpatient settings and interact with other agencies within mental health. *2–4 weeks / 2-4 credit hours*

PSYC 602 Child and Adolescent Psychiatry
In this elective, students are introduced to commonly encountered psychiatric disorders of childhood. Students will gain additional experience interviewing children, adolescents, and families as well as the opportunity to enhance diagnostic skills for psychiatric illness in children and adolescents. *2–4 weeks / 2-4 credit hours*

PSYC 603 Addiction Medicine
The purpose of this elective is to provide an understanding of patients with substance abuse disorder across a diverse spectrum of drugs, stages of use, and presentations. *2–4 weeks / 2-4 credit hours*

PSYC 606 Tele-psychiatry
The purpose of this elective is to provide an understanding of the use of tele-psychiatry to meet patients' needs for accessible mental health services in a global setting. Students will travel to a global setting to do in-person mental health assessments and provide support for patients new to tele-psychiatry. The attending psychiatrist will be located outside the venue. *2–4 weeks / 2-4 credit hours*

RADI 600 Radiology
The purpose of this elective is to familiarize the student with the basic observation and language skills necessary for interpretation of imaging studies. The student will become familiar with appropriate methods for common medical conditions and with basic procedures and anatomy and indications for imaging studies. *2–4 weeks / 2-4 credit hours*

SURG 600 General Surgery
In this elective clerkship, students are provided with the opportunity to build upon skills developed in SURG 500 in Year 3. The students will be part of a multidisciplinary medical team caring for the surgical patients. The Focus will be on the importance of evaluation of potential surgical patients, appropriate referral to surgical specialists, and effective communication with both the patient and the specialist. *4–8 weeks*

SURG 601 Orthopedic Surgery
In this elective clerkship, students are provided with an understanding of common orthopedic disorders and injuries with regard to examination, diagnosis, and management. The students will integrate medical and surgical knowledge in the care of trauma victims and patients with musculoskeletal injuries. *2–4 weeks / 2-4 credit hours*

SURG 602 Urology
In this elective, students are provided with an introduction to the multidisciplinary management of benign and malignant disease of the urogenital system. *2–4 weeks / 2-4 credit hours*

SURG 603 Plastic and Reconstructive Surgery
In this elective, students are introduced to various aspects of plastic surgery, which may include trauma, congenital and traumatic defects of face and hand, breast reconstruction, burn reconstruction, and general aspects of wound healing and infection as they relate to the skin and open wounds. *2–4 weeks / 2-4 credit hours*

SURG 604 Trauma Surgery
Students in this elective are provided with an opportunity to be part of a trauma team. The students will be exposed to daily activities including rounds, on-calls, and educational conferences. *4 weeks / 4 credit hours*

SURG 605 Transplant Surgery
In this elective, the student will be provided with an overview of transplantation, transplant immunology, and organ donation. The students will function as part of an integrated team. *4 weeks / 4 credit hours*

SURG 606 Pediatric Surgery
In this elective, students will be provided with a better understanding of the current concepts of pediatric surgery as related to normal pediatric growth and development, pathophysiology, pediatric evaluation and assessment, diagnosis, and clinical management. *4 weeks / 4 weeks*

SUBINTERNSHIP OPPORTUNITIES

Some electives offer an opportunity to complete a sub-internship. These are designated on the transcript with an "s" following the course number. This is an acting internship, designed to allow students the opportunity to actively participate in the management of patients with common clinical presentations encountered in the practice of medicine. Students typically will have the opportunity to experience a broad range of illness severity. Students will have the opportunity to improve their basic clinical skills, learn new procedures and examination techniques, and assess the effectiveness of their clinical interventions.

The student will have increasing responsibility for the care of patients during the course of this elective opportunity. Student progress will be assessed in the areas of entrustable professional activities.

Minimal expectations for a sub-internship elective are the following:

- Participate in an inpatient rotation that gives the sub-intern primary responsibility for providing care
- Develop, consolidate, and refine the knowledge and skills acquired during core clerkships
- Ensure increased responsibility in the evaluation and management of acutely ill, hospitalized patients in directly supervised patient-care settings
- Promote development of effective interprofessional teamwork and communication skills

The sub-internship must contain rigorous expectations that define the following:

- Level of supervision
- Duty-hour regulations and clinical workload (typical of an intern)
- Care transitions and cross-coverage responsibilities
- Access to EHRs
- Opportunities for evidence-based, high-value care practice

Other Electives
Electives in Medical Education and Medical Research are available for interested students. *2–4 weeks*

RESEARCH METHODS / BIOETHICS

Mandatory - This is taught at the very beginning of Term 1 and then another version taught at the end of the Review Course. This is required before any research is done by a student. Covers topics from study design, research ethics, institutional review boards and related topics. In term 5 a review of biostats and epidemiology is also done.
Bioethics is taught also during the NeuroBehavioral section of BSCM in Term 2 and 3.

DIVERSITY AND INCLUSION IN MEDICINE AND HEALTHCARE

Mandatory – Watch multiple videos and read articles covering these important topics. Then write a self-reflection essay covering what you have learned and how you will apply the information in your

Explanation of Weeks of Instruction versus Credit Hours

Policy Statement

The Caribbean Accreditation Authority for Education in Medicine and Other Health Professions (CAAM-HP) accredits the Doctor of Medicine (M.D.) program and defines the program length in terms of weeks of instruction. CAAM-HP, in parallel to the Liaison Committee on Medical Education (LCME), requires that a program of medical education leading to the M.D. degree must include at least 130 weeks of instruction over 4 calendar years. The Trinity School of Medicine program length is 137 weeks, exceeding the CAAM-HP minimum requirement. TSOM defines program length based on CAAM-HP requirements and calculates equivalency to semester credit hours across didactics, clinical rotations, and electives. TSOM also utilizes information from the Office of the Provost to meet the Higher Learning Commission (HLC) and the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) requirements and federal rules regarding credit hour definition.

- The number of semester credit hours assigned to a course quantitatively reflects the modes of instruction and the amount of time spent in each class. The TSOM curriculum is a full-time, four-year program consisting of approximately 137 weeks of contiguous instruction across two curricular phases (pre-clinical and clinical (core clerkships and electives)
- The number of credit hours assigned reflects the amount of work represented in intended learning outcomes, including time in class and outside work
- Year 1,2 courses (Term 1,2,3,4) courses contact hours include but are not limited to lectures, laboratory, Introduction to Community and Clinical medicine times, small group discussions, case-based learning activities. Average contact time per week is approximately 18-22 hours. Additionally, students complete up to 3 hours out-of-class time per hour of contact instruction
- In the clinical experiences of Terms 5, 6, 7, 8, 9, 10, actual contact time is often greater. Because the educational approach is fundamentally different, with less emphasis on formal didactic instruction and study and greater emphasis on experiential learning and patient care, the number of contact hours needed to meet the equation is increased to between 30 to no more than 80 hours per week. This range is translated to equal one (1) credit hour per week. (i.e., Internal Medicine is 12 weeks = 12 credits)
- TSOM offers some synchronous and non-synchronous online electives that vary in length from two weeks to 4 weeks. One (1) credit hour is equivalent to approximately 30-40 hours of work /week (i.e., 1 week credit hour per week).

EXAMPLE
In sum, the credit-hour equivalency for the MD degree program is as follows:
Terms 1, 2, 3, 4 = 64 credit hours
Terms 5, 6 = 12 credit hours (not counted toward degree)
Year 3 = 48 full-time weeks (48 credit hours)
Year 4 = 27 full-time weeks (27 credit hours)
130 weeks of education is needed to graduate-HP. 137 weeks per Trinity. (no specific number of credits)

Reason for Policy

To define credit hours for medical school in light of CAAM-HP requirements and LCME precedence

Forms and related Documents / Appendices

CAAM-HP Standards for Accreditation of Medical Education Programmes - August 2024
ED-8: Educational Programme Duration

A medical education programme includes at least 130 weeks of instruction delivered over at least four (4) calendar years.

Grading and Remediation Policies

Grading Policy and NBME Examination Policies

Policy Statement

To clarify the grading practices for terms 1-4, 7-8, 9-10 and to specify the expectations and requirements for student NBME examinations at Trinity School of Medicine. Terms 5 and 6 have separate grading practices except where relevant including CBSE and USMLE.

Purpose

To use psychometric principles to establish transparent and fair grading practices for the preclinical and clinical terms at Trinity School of Medicine / Trinity Medical Sciences University, aligned with the system-based integrated spiral curriculum. To ensure alignment in scoring NBMEs within and separate from courses, this policy takes precedence over all previous policies.

Definitions

ADCSC - Associate Dean of Clinical Sciences and Curriculum
APC - Academic Progress Committee
BSCM or IBSCM - Integrated Basic Science and Clinical Medicine (I-IV)
CBSE – Comprehensive Basic Sciences Examination
ICCM - Introduction to Community and Clinical Medicine
Module director - faculty appointed to oversee module (content, testing, blueprinting)
NBME - National Board of Medical Examiners
NRMP - National Residency Matching Program
USMLE - United States Medical Licensing Examination
QE - Qualifying examination

Common Rules of Grading

- Courses may have tests, quizzes, and other assignments of varying weights toward a final grade. Final grades are based on weighted scores (ie, if a test is 70% of the course it will be 70% of the grade. In such cases, final grades are calculated by the Associate Dean of Internal Testing. No final grades are determined by professors.
- All final grades are recorded on the student's academic record and reported on the transcript.
- If a student does not resolve an Incomplete with satisfactory completion of all components of a course or clerkship within the allocated time frame, the Incomplete will be replaced with a grade of Fail (F).
- Grades of Fail (F) will remain on the student's transcript and become part of the student's permanent record.
- Students are allowed to repeat a failing course one time. Withdrawal from a previously failed course, or failing a repeated course, will result in dismissal.
- Failing an NBME may result in a delay in graduation and increased tuition
- Failing a QE may result in a delay in graduation and increased tuition
- Failing USMLE Step 1 and/or USMLE Step 2 may result in a delay in graduation and increased tuition and delaying NRMP (Match)
- Grading specifics
    - <69.5% (rounded to one decimal point) is a Fail (ie, 69.47% at one decimal is 69.5% which is a pass; 69.44% at one decimal place is 69.4% which is a fail). Similar rounding rules exist for Pass-High Pass and High-Pass-Honors
    - 70-79% is a Pass
    - 80-89% is a High Pass
    - ≥90% is an Honors
    - Curve for all preclinical classes. Curves will only be used when needed as determined by the Associate Dean and Administration. Curves are either used for module tests or for the entire course, not for both.
        - Standardized curve used by Associate Dean of Testing - Internal Exams
        - The grading adjustment/curve used is a linear scaling with proportional adjustments (Glob Acad and Scien J Multi Stud (GASJMS), 2025; 3(7): 1-6.)
            - The minimum score is set to 60 with the maximum score set to 100

    - There is not a set mean, median, or mode
- No curves are used in clinical courses. NBME clinical subject exams (Shelf exams) are converted to a scaled score based upon the percentile scored against the most recent NBME multi-year pooled data for that subject. (See below)

-
- NBME for preclinical courses and/or subjects

	Percentile from NBME	Grade
Fail	≤2	Fail
Pass	3-99	Pass

- Clinical clerkship grading

Rotation Component	% of Grade	Requirement
NBME Shelf Exam	60%	Must pass or remediation is required
CBL participation	15% Preparation; Knowledge; Participation; Professional interaction	Must pass or remediation is required
Clinical Rotation	15% (If multiple preceptors, average of score)	Must pass or remediation is required
Case logs and/ or submit case based learning session that addresses that topic	5%	Must complete or lose 5% of final grade
Completion of faculty and clerkship evaluation	5%	Must complete or lose 5% of final grade
Total	100%	

- NBME Grading for clerkships

	NBME Grading policy	
	Percentile from NBME	Scaled % Score for Final Grade Calculation
Failure	≤2	60
Pass	3-30	75
High Pass	31-69	85
Honors	≥70	95

Policy

I. Terms 1-4 Structure
   A. Integrated Basic Science and Clinical Medical (IBSCM or BSCM) will be made up of 4 terms.
      1. Terms 1 and 2 are built upon learning normal human systems
         a. Anatomy, physiology, biochemistry, molecular biology, embryology, genetics, neuroscience, behavioral science, ICCM I & II, epidemiology & biostatistics

b. Each quiz and module test will be blueprinted by the module director
c. Term 1 modules: General principles, Musculoskeletal and Skin, Blood and cardiovascular system, Respiratory system
    1. Biostats and epidemiology - counts toward overall percentage required to pass but not as part of the 3 of 4 term 1 modules required to pass. Failing Biostats could result in failing the entire term even if 3 of 4 other modules are passed.
d. Term 2 modules: Gastrointestinal and Hepatobiliary system; Renal and urinary system; Endocrine system; Reproductive system and genetics; Neurobehavioral system

2. Terms 3 and 4 will focus upon abnormal human systems
    . Microbiology, immunology, pharmacology, pathology, neuroscience, behavioral science, ICCM III & IV
    a. Each quiz and module test will be blueprinted by the module director
    b. Term 3: General principle; Neoplasms, chemotherapy and antimicrobials; Blood and Immune system; Skin and Musculoskeletal system; Neurobehavioral system
    c. Term 4: Cardiovascular and respiratory system, Endocrine and reproductive systems; Gastrointestinal and hepatobiliary systems; Renal and urinary systems
        1. Biostats and epidemiology - counts toward overall percentage required to pass but not as part of the 3 of 4 modules in term 3 or 4 required to pass. Failing Biostats could result in failing the entire term even if 3 of 4 other modules are passed.
3. Each term will consist of 4-5 modules
    a. Each module will consist of 1-3 quizzes and 1 module exam
        1. A one-week module may not have a quiz and an exam (ie, Biostatistics in Term 1 and 4)
        2. Anatomy and or pathology practical exams(s) may replace or be in addition to other quizzes.
            a. All quizzes (including lab practical exams) will constitute 20% of module grade
4. Each module will be graded as follows:
    a. 70% of grade is from module test (except Biostats)
        1. Each module test will be composed of 70 NBME-type multiple choice questions from NBME question bank and will last 105 minutes
        2. When choosing questions for the module test, each professor will also form a remediation exam of the same length and similar scope.
    b. 20% of grade from quizzes (unless there are no quizzes)
        1. Each quiz will be composed of 20 NBME-type multiple choice questions (MSQ) from NBME question bank or questions professors have written and submitted to the module director and Associate Dean of Assessment and Testing - Internal Exams for review. Quizzes will last 30 minutes. A quiz must be entirely NBME questions or entirely professor written questions.
        2. No questions will be used that have not been vetted (for scientific accuracy, clarity, fairness and grammar) by either the designated individual(s) or NBME. Only MCQs will be used for quizzes and exams (not including practical exams).
        3. All quizzes (including lab practical exams) will constitute 20% of module grade
    c. 10% of grade from ICCM
        1. The director of ICCM will be in charge of what assessments are used to encompass the ICCM portion. These assessments may include but are not limited to patient management problems, modified essay questions , checklists, OSCEs, student projects, constructed response questions , multiple choice questions, and critical reading papers with responses.
        2. No multiple choice questions will be used that have not been vetted (for scientific accuracy, clarity, fairness and grammar) by either the designated individual(s) or NBME
    d. Professionalism
        1. Professionalism is a core competency in medicine. Please see the professional policies and the syllabus for each module.
        2. Lack of professionalism may (see syllabus and policies) result in grade decreases and/or warnings, citations in permanent records
5. To pass any term of BSCM, a student must pass 3 of 4 modules with a minimum of 70% average in the modules to pass (see above) (or 3 of 5, if 5 modules in term). Please see section on Biostats above (See 1.a.iii.1)
    a. Even if a student passes 3 of 5 or 3 of 4 modules, they must have a minimum overall grade percentage of $\geq$70% to pass the course for the term.

b. If a student fails ≥2 of 4 or ≥3 of 5 modules in a term, they fail the term.
c. If a student passes the required number of modules, but has an overall percentage of <69.45%, they fail the term.

6. Remediation for module examinations
   a. A remediation exam of similar length and blueprinted content will be given at the end of the term or in the first week of the following term
   b. Any student who fails a module (<69.5%) will have one opportunity to remediate the module test. The overall score for the module must be greater than 69.5% to pass the module. There is no remediation for the quizzes. Any remediation for the ICCM portion of the module is at the discretion of the director of ICCM.
      1. A student must pass 3 of 4 (or 3 of 5) modules each term to progress to the next term in BSCM or after Term 4 to progress to the Review Course. If a student cannot pass the required number of modules, the student must repeat the term. To progress to another term, all given NBME exams must be passed also)
      2. Each remediation module test will be composed of NBME-type multiple choice questions from NBME question bank (different questions than used on initial module exam). Remediation exams will follow the same design as initial module exams.
      3. If a remediation examination is taken, the score on the remediation exam will be used to replace the exam score on the module (remediation exam just replaces the module exam, not the entire score). Passing the remediation exam alone does not guarantee passing the module. The total score on the module (quizzes, ICCM portion and module test or remediation test) must be ≥70%.
7. NBME Examinations as part of BSCM (but not part of grading)
   a. NBME Exams are required for the following preclinical subjects in BSCM:
      1. Term 2: Anatomy, Biochemistry
      2. Term 3: Behavioral Science, Neuroscience
      3. Term 4: Pharmacology, Pathology, Microbiology, Physiology
      4. Passing an NBME subject exam in BSCM is based on scoring 3rd percentile or higher with the baseline for comparison not being the current exam but the most recent grouped multi-year data from NBME on Equated Percent Correct (EPC) Summary Statistics.
   b. Term 2
      1. Must pass all end of Term 2 NBME exams to progress on to term 3
      2. Remediation of NBME exams will be arranged by Associate Dean of Assessment and Testing - External Exams
      3. Will have one chance at remediation for each failed NBME. If all NBME are now passed, the student progresses to the next term.
      4. If a student cannot pass requisite NBME exams after remediation, the student must be enrolled in independent study for one term. If the student passes sufficient NBME after one more attempt (3rd try of any specific NBME), the student progresses to the next term. If a student fails and does not pass all subjects after having 3 tries in any subject, the student will be referred to the Academic Progress Committee (APC) for possible dismissal.
         a. If a student has to take module remediation exams, and pass a sufficient number to qualify for taking NBME exams, they may take the relevant NBME examinations. If they cannot pass the NBME examination, the student must be enrolled in independent study for one term. They will have two chances to take the remediation exam for relevant NBME (total of 3 chances).
      5. A student taking a remediation term has no remediation for module quizzes or module exams. In remediation, there is no remediation for a failed NBME.
      6. Any student has only 3 chances to pass any NBME subject examination.
   c. Term 3
      1. Must pass all end of Term 3 NBME exams to progress on to term 4
      2. Remediation of NBME exams will be arranged by Associate Dean of Testing and Assessment - External Exams
      3. Will have one chance at remediation for each failed NBME. If all NBME are now passed, the student progresses to the next term.

4. If a student cannot pass requisite NBME exams after remediation, the student must be enrolled in independent study for one term. If the student passes sufficient NBME after one more attempt (3rd try of any specific NBME), the student progresses to the next term. If a student fails and does not pass all subjects after having 3 tries in any subject, the student will be referred to the APC for possible dismissal.
    a. If a student has to take module remediation exams, and pass a sufficient number to qualify for taking NBME exams, they may take the relevant NBME examinations. If they cannot pass the NBME examination, the student must be enrolled in independent study for one term. They will have two chances to take the remediation exam for relevant NBME (total of 3 chances).
5. A student taking a remediation term has no remediation for module quizzes or module exams. In remediation, there is no remediation for a failed NBME.
6. Any student has only 3 chances to pass any NBME subject examination.

d. Term 4

1. Must pass all Term 4 NBME exams to progress to term 5
2. Remediation of NBME exams will be arranged by Associate Dean of Testing and Assessment - External Exams
3. Will have one chance at remediation for each failed NBME. If all Term 4 NBME are now passed, the student progresses to the next term.
4. If a student cannot pass requisite NBME exams after remediation, the student must be enrolled in independent study for one term. If the student passes sufficient NBME after one more attempt (3rd try of any specific NBME), the student progresses to the next term. If a student fails and does not pass all subjects after having 3 tries in any subject, the student will be referred to the Academic Progress Committee (APC) for possible dismissal.
    . If a student has to take module remediation exams, and pass a sufficient number to qualify for taking NBME exams, they may take the relevant NBME examinations. If they cannot pass the NBME examination, the student must be enrolled in independent study for one term. They will have two chances to take the remediation exam for relevant NBME (total of 3 chances).
5. A student taking a remediation term has no remediation for module quizzes or module exams. In remediation, there is no remediation for a failed NBME.
6. Any student has only 3 chances to pass any NBME subject examination.

II. NBME Comprehensive Basic Science Exam (CBSE)

A. The student must make a score on the NBME Comprehensive Basic Sciences Exam (CBSE) or other qualifying examination that is equal to or greater than the current score noted to be equivalent to a passing score on the USMLE Step 1.

1. Current passing on CBSE is $\geq$57; Kaplan Institutional $\geq$64 to be able to graduate
2. Current score to sit for Step 1 on CBSE is $\geq$67; Kaplan Institutional $\geq$74 to be able to sit for Step 1
3. Students should take and pass the qualifying exam during the CLMD 406 – Integrated Systems Review course. Students will be granted two attempts to pass the qualifying exam in CLMD 406. If the passing score is not achieved, the student will be enrolled in CLMD 407 – Integrated Systems Review 2 which is a remediation course. If the student passes a qualifying test they should take USMLE Step 1 as soon as possible after passing CBSE and definitely within 20 working days. Failure to do so will result in having to retake a QE and passing it to be allowed to sit for Step1.
4. A student may take the qualifying examination two times within the CLMD 407 course if they did not pass their first attempt. If the passing score is not achieved, the student will be enrolled in CLMD 408 – Integrated Systems Review 3 which is a remediation course. Students will be granted one final attempt to pass the qualifying exam in CLMD 408. If the student passes CBSE or QE, they should take USMLE Step 1 as soon as possible after passing CBSE or other QE and definitely within 20 working days. Failure to do so will result in having to retake a QE and passing it to be allowed to sit for Step1.
5. A student is allowed to take the CBSE or QE up to five (5) times total. This is the total number of times regardless of length of time between takes. Students who do not achieve a passing score on a qualifying exam will be sent to APC for discussion on options including dismissal. If the student passes CBSE or QE, they should

take USMLE Step 1 as soon as possible after passing CBSE or other QE and definitely within 20 working days. Failure to do so will result in having to retake a QE and passing it to be allowed to sit for Step1.

6. Enrolled students must take at least two QE per term (unless they have only one remaining) or will be referred to APC for possible dismissal.
7. If someone fails to show for a QE for which they are registered, this will be considered an attempt unless the student has prior approval
8. To request a delay in a QE, you must request approval from the Associate Dean of Clinical Sciences and Curriculum at least 14 days in advance of the date of the QE.
9. If a student takes a USMLE exam without having a passing QE score that is with 20 business days, they will at least get a professionalism warning but may also be referred to the DRC for sanction including possible dismissal.

CBSE schedule is below: You must take 5 QEs within 3 terms

CLMD 406	**CLMD 407 (Remediation 1)**	**CLMD 408 (Remediation 2)**
CBSSA/Kaplan Diagnostic	QE 3	QE 5
Qualifying Exam (QE) 1	QE 4	–
QE 2	–	–

III. Clinical Clerkship Structure

A. Clerkship Structure: The clerkship is structured upon the principle that learning is a process which can be accomplished only by active participation by the student. The role of the faculty preceptor is to provide guidance, stimulation, support and example. The rotation is structured into 5 main components: case-based learning (CBL), completion of case logs, clinical rotation, completion of evaluations, NBME exam.

B. All core clerkship NBMEs must be taken at Trinity. NBMEs taken outside Trinity are not accepted for the core clerkships.

C. If a student fails a shelf exam, the highest achievable grade is a pass in the entire course

D. If a student fails to show for a shelf exam for which they are registered, it will be considered a failure of a shelf exam unless prior approval is given

E. A shelf exam must be taken as scheduled at the end of a clinical clerkship, failure to attend will be considered a failure of the shelf exam.

F. The following items relate to a failure on the first attempt of the NBME Shelf Exam:
   1. A repeat exam must be taken before electives can begin. It may be taken as early as 6 weeks after failure but must be taken before electives begin.
   2. The student, Associate Dean of Clinical Sciences and Curriculum (ADCSC) and Associate Dean of Assessment and Testing (ADAT) determine an appropriate date for the retake. The final decision for the retake exam rests with the Associate Deans. Clerkship coordinator will coordinate scheduling of the exam in consultation with the Associate Deans.
   3. Once the date of the retake exam has been finalized, any request by the student to reschedule the exam must be made, in writing, to the ADCSC no fewer than 14 calendar days before the scheduled retake. Approval of the request is at the discretion of the ADCSC.

G. The follow items relate to a failure on the second attempt of the same NBME Shelf Exam:
   1. Any student who fails the retake exam will receive a grade of"Fail" for the clerkship and must repeat the clerkship.-The students must follow a prescribed plan of study during the repeat clerkship, designed in collaboration with the ADCSC.
   2. The need for a student to repeat a clerkship may affect their graduation date.
   3. A third failure on a single subject clinical examination will lead to a recommendation for dismissal.
   4. If 3 different shelf subject exams are failed, the student will be recommended for dismissal.
   5. If a student fails 3 different shelf exams, they should contact the clerkship coordinator and be removed immediately from the current rotation.

H. The following items relate to a second separate NBME Shelf failure before the first has been remediated:

1. If a second separate NBME Shelf is failed before an earlier shelf has been remediated, the student is removed from clinical rotations and is given 6 weeks to pass both exams.
2. The student, ADCSC and ADAT and Testing will determine an appropriate date for the retakes. The final decision for the retake exams rests with the Associate Deans. Clerkship coordinator will coordinate scheduling of the exams in consultation with the Associate Deans.

I. The following items relate to a third separate NBME Shelf failure despite remediation:
1. Any student who fails a third separate NBME Shelf Exam (even if remediated) will be considered for dismissal by the APC since they are failing to progress.
2. Any student who does not show for and take a scheduled shelf exam and has not communicated this with the Associate Deans and/or exam proctors within the allotted 14 days will receive a failing grade for that shelf exam. The student will be required to remediate this shelf exam in 6 weeks. If the student fails to show and does not communicate for a second attempt, the student will receive a second failure and will be required to repeat the entire rotation.
3. Students may not exceed the six-year maximum time allotment for the completion of the Doctor of Medicine (MD) degree. Tuition will be affected if repeat clerkships are required to pass clerkships or electives.

IV. Compliance and Monitoring
A. Transparency of grading and fairness of grading will be maintained by having the specific module director and the Associate Dean of Assessment and Testing - Internal overseeing final grades. This allows individual faculty members to focus on teaching and enhancing student success.
B. Faculty adherence to this policy will be monitored through regular administrative checks and student feedback.

Academic Integrity Policy

Policy Statement

The University affirms that honesty and integrity are essential to its academic mission and professional values. Academic integrity protects the fairness of evaluation, the validity of degrees, and the reputation of the institution. These standards are not only academic expectations but also professional obligations, as our graduates will enter fields in which their decisions may carry life-and-death consequences.

Students are therefore required to conduct themselves with the highest levels of honesty in all academic activities. Any act of academic misconduct will be treated with the utmost seriousness, and penalties may include dismissal from Trinity Medical Sciences University.

Reason for Policy

The University holds Integrity, Honesty, and Competence among its core values. Academic misconduct undermines these values, erodes the ethical foundation of the medical profession, and threatens the credibility of the educational process. Academic dishonesty of any kind is unacceptable and will not be excused or tolerated.

Definitions

Academic Integrity – The commitment to truth, fairness, and accountability in all academic work. Students must ensure that all submissions for evaluation reflect their own independent effort unless collaboration is explicitly permitted by the instructor.

Cheating – Includes but is not limited to:

- Possessing, using, or exchanging unauthorized information during preparation for or completion of an assignment, lab, or examination.
- Copying from another student's work or allowing one's own work to be copied.
- Giving or receiving unauthorized assistance on any academic task.
- Using unauthorized devices, notes, or materials during examinations or assessments.
- Attempting to disable, deceive, or circumvent remote or in-person proctoring systems.
- Soliciting or offering bribes to obtain examination information.
- Substituting for another person during an examination or signing in for another student.
- Any deliberate act to gain an unfair academic advantage.

Artificial Intelligence (AI) Use – Unless expressly authorized by the instructor, the use of AI tools (including but not limited to large language models, generative text, code, or image platforms) to complete assignments, worksheets, laboratory exercises, written reports, or assessments is strictly prohibited. Submission of AI-generated content as one's own work constitutes academic misconduct (this includes information for MSPE such as noteworthy characteristics). Students remain fully responsible for the originality, accuracy, and integrity of all submitted work.

Plagiarism – The failure to acknowledge the source of ideas, words, data, images, or intellectual property used in academic work. Work submitted for credit must be the student's own unless properly cited and referenced.
Fraudulent Research Activity – The fabrication, falsification, or omission of research data; failure to obtain required institutional approvals; or violation of established research protocols.
Collusion – Unauthorized collaboration with another individual in the preparation or completion of academic work. Both provider and recipient of such assistance are in violation unless collaboration was expressly approved by the instructor.
False Statements – Deliberate misrepresentation of facts to avoid negative academic consequences, including false claims of illness, falsified attendance, or misrepresentation of academic work.

Prohibited Conduct

In addition to the above, all forms of academic dishonesty—whether specifically listed or not—are prohibited. Instructors may identify additional course-specific expectations in syllabi or written instructions.

Institutional Practices to Uphold Integrity

- Alternate seating and proctoring during examinations.
- Randomization of exam questions and answer choices.
- Secure, password-protected examination access with strict time limits.
- Required affirmation of honesty statements at the beginning of assessments.
- Remote and in-person proctoring with monitoring technology

Responsibilities

Faculty Responsibilities:

- To promote academic honesty through clear communication of course-specific rules.
- To establish appropriate oversight for assignments, exams, and labs.
- To document and report suspected violations in accordance with university procedures.

Student Responsibilities:

- To adhere to this policy in all academic activities.
- To clarify with instructors any uncertainties regarding expectations.
- To monitor their Trinity University email for official communication regarding suspected violations.
- To report suspicious activity seen by them

Reporting and Adjudication of Suspected Misconduct

- Suspected violations during remote or in-person examinations will be reviewed by faculty and the Associate Dean of Student Affairs.
- All suspected cases will undergo a documented review process, with students notified in writing of allegations, evidence, and potential sanctions.
- Students have the right to appeal decisions through established grievance procedures.

Sanctions for Academic Misconduct

- **First Violation:** Written warning in the student record; grade penalty up to a zero for the assignment or exam.
- **Second Violation:** Formal letter of violation and automatic zero on the assignment or exam.
- **Third Violation:** Removal from the course with a failing grade.
- **Fourth Violation:** Referral to the Academic Progress Committee with recommendation for dismissal.

Severe Infractions (e.g., using unauthorized devices during exams, deliberate falsification of research, or submission of AI-generated work in violation of policy) may result in immediate referral to the Disciplinary Review Committee and sanctions up to and including dismissal, even for a first offense.

Conclusion

Academic honesty is foundational to the University's mission and to the medical profession. Students who violate this policy compromise not only their own integrity but also the trust placed in them as future physicians. The University will hold all members of its community accountable to the highest academic and ethical standards.

Forms and Related Documents / Appendices

CAAM-HP Standards for Accreditation of Medical Education Programmes - August 2024

MS-6: Personal Attributes of Accepted Applicants

A medical school selects applicants for admission who possess the intelligence, integrity, and personal and emotional characteristics necessary for them to become competent empathetic physicians.

Attendance Policy

Purpose:

To ensure medical students have timely access to healthcare resources while maintaining the integrity of their education, this policy defines the attendance requirements and procedures for notifying the administration of excused absences.

Rationale:

Attending medical school classes has been shown in numerous studies to correlate with higher passing scores, better grades, and improved performance on standardized exams. One study did show a higher pass rate with eliminating required attendance; however, it also noted that the increased pass rate stemmed from a smaller, higher-achieving group taking the exam after increased number of students failed out due to non-attendance.

Definitions

ICCM: Introduction to Community and Clinical Medicine
CBL: Case-Based Learning
PBL: Problem-Based Learning
TBL: Team-Based Learning
APC: Academic Progress Committee (standing)
DRC: Disciplinary Review Committee (ad hoc)

Policy:

General Attendance Requirements:

- Attendance is mandatory in all required courses at Trinity and in clinical core rotations and electives.
- All assessments, labs, Introduction to Clinical Medicine (ICCM), Case-Based Learning (CBLs), Problem-Based Learning (PBLs), Team-Based Learning (TBLs), and other active learning sessions have mandatory attendance.
- In lectures, attendance is mandatory but grades will not be penalized unless attendance falls below 70% for the module or course.
- During core and elective clerkships, attendance is mandatory for all activities, which are considered active learning sessions. Per the clerkship policy, missing more than 3 days for any reason will require make up of this missed time.
- If students are found to be cheating on attendance, this will be a professionalism violation.

Procedure for Reporting Excused Absences:

- If a student must miss a required session (including assessments, labs, ICCM, CBLs, PBLs, TBLs, clerkships, electives), a note from a licensed medical provider explaining the reason for the absence must be submitted.
- The note should be turned into the Office of Student Affairs or the Clerkship Office prior to or within 24 hours of the missed session.
- Exceptions to this procedure will be at the discretion of the Associate Dean of Student Affairs or the Associate Dean of Clinical Sciences and Curriculum.

Learning sessions:

- Attendance in learning sessions (lectures, labs, CBL, PBLs, TBLs, etc.) is mandatory.
- Students will not be penalized for missing learning sessions unless attendance is below 70% for the module.
- To avoid the absence counting against the 70% requirement, students must submit a medical note prior to or within 24 hours to the Office of Student Affairs.
- Exceptions will be at the discretion of the Associate Dean of Student Affairs and the Extenuating Circumstances Policy.

Academic evaluations:

- Attendance at academic evaluations (tests, quizzes, exams, lab practical exams, etc.) is mandatory
- Failure to attend will result in the use of a different evaluation than the one missed (ie, different quiz or exam).
- Exceptions will be at the discretion of the Associate Dean of Student Affairs.

Excused Absences:

- The Associate Dean of Admissions and Student Affairs may excuse students in terms 1-4 for appropriate reasons.
- The Associate Dean of Clinical Sciences and Curriculum may excuse students in terms 5-10 for appropriate reasons.
- Excused absences require a note from a licensed medical provider and must be submitted prior to or within 24 hours of the missed session.

Attendance is an aspect of professionalism (see professionalism section at the end of each syllabus)

- If attendance in lectures is 70% or higher, there is no change in grade

- If attendance in lectures falls in the range 60-69%, the student loses 5% of the final module grade (i.e., a module grade of 73% falls to 68% (failing))
- If attendance in lectures falls in the range 50-59%, the student loses 10% of the final module grade (i.e., a module grade of 83% falls to 73% (High Pass becomes Pass))
- If attendance in lectures falls to <50%, the student will be referred to APC for decision on dismissal versus referral to an ad hoc Disciplinary Review Committee

Compliance:
Compliance with this policy is essential for maintaining academic standards and ensuring students receive the full benefit of their medical education. Non-compliance may result in academic penalties and affect the student's ability to progress in their program.

Attendance Policy for Clinical Years

Policy Statement
Attendance on clinical rotations is critical for the instruction of medical students in years 3 and 4 of medical school. Patient care teams are responsible to each other in order to provide quality care and a healthy learning environment. Being absent or late, even for good reasons, may adversely affect the team. To that end, Trinity allows no more than three (3) missed days other than official holidays during any rotation, core or elective, including both on-campus and off-campus rotations. Trinity allows zero (0) missed case-based learning sessions.

Reason for Policy
This policy provides clarity for students seeking instruction on allowable absences during their clinical years.

Process & Procedures
Holidays – Students are to adhere to the holidays taken by the office in which they are assigned to rotate at that time.

Excused and Unexcused Absences – A student may miss no more than three (3) days of any rotation in total, regardless of reason. Students in their M4 electives may find some time off is needed to attend residency interviews. Students should make every effort to leave as late as possible and return as early as possible when interviewing to minimize time lost from elective clerkships.

Personal Reasons (including religious holidays) – Students must notify the Office of Clerkships via email at sshamaly@tmsu.edu.vc as early as possible before the start of the required clinical course regarding any scheduled absence. Students should expect that they will need to make up missed time. This includes (but is not limited to) any absences for religious holidays, academic events, and civic responsibilities. Students are responsible for communicating an excused or unexcused absence to their preceptor. Although each preceptor has the discretion to allow or disallow such absences, based on the impact to the educational experience, the general rule is that any days over three (3) taken off should be made up.
Since most family events (weddings, reunions, etc.) are planned for weekends, most of these events could be attended with minimum time lost from the required clinical courses with advanced planning.

Weather-related absences – Students who miss clinical days due to adverse weather conditions should plan to make up those missed days prior to the end of the rotation.

Case-based learning (CBL) sessions - Since case-based learning sessions may be attended via google meet or other platform, *no absences* are allowed. Educational sessions take priority over clinics, rounds procedures, etc. This is all required to remain in compliance with CAAM-HP Standards for Accreditation (specifically educational program standards) ED-9, but also ED-3 and ED-7.
If one session is missed, the student must turn in the CBLs from the session that was missed via Canvas Learning Management Software (LMS). The student will be docked an initial 3% of final grade off for missing the session. The turned-in CBLs will be checked for accuracy, plagiarism and use of AI. If they are found to be plagiarized or completed with help of Artificial Intelligence (AI), the student will be referred to the appropriate policies in the student handbook. Via those policies, The Associate Dean of Clinical Sciences and Curriculum (ADCSC) has the discretion to determine appropriate punishment (ie, from removal of professionalism points (15% of total grade) up to and including failing the rotation for lack of professionalism because of plagiarism or use of AI). They will receive a recommendation for a warning for Lack of Professionalism.

If a second CBL session is missed the student is automatically removed from the rotation and receives an incomplete for the rotation even if the second session missed is the last CBL session. The student is required to meet with the ADCSC as soon as possible. They must explain their lack of professionalism in not attending required CBL. They will be recommended for a Formal Reprimand for Lack of Professionalism. They are not allowed to take the end of rotation NBME Clinical Subject (Shelf) exam. If a student takes it, it will not count. They will be required to repeat the entire rotation and attend all CBLS.

If a student misses two (2) CBLs on two (2) different rotations, they will be recommended to the APC for dismissal from the school for lack of professionalism. They may appeal the APC and Dean's dismissal decision if they have not previously used the Final Appeal policy.

Illness or Injury – Illnesses and/or injuries are handled on a case-by-case basis by the Office of Clerkships. In almost all cases, such events cannot be predicted in advance. When either occurs, the student's first responsibility is to their safety and the safety and well-being of those around them. Remediation plans will be made by the Office of Clerkships once the situation has stabilized. Students may need to file an application for a medical leave of absence and if so, will be guided as to the process for doing so.

Health Care Appointments – All health care appointments should be scheduled not to conflict with required clerkship activities whenever possible.

Remediation of Coursework – All students are required to make up any absences, even if they are excused. When it is not feasible to reproduce a clinical or simulated experience, the Office of Clerkships will approve an appropriate remediation. Note that if a significant component of the educational experience is missed for any reason, it is at the discretion of the Office of Clerkships to require remediation or reduce the student's grade.

Unexcused absences – Failure to notify the Office of Clerkships of absences in a timely manner or failure to remediate when remediation is offered, will result in possible grade reductions or failure of the clerkship. Students may also be presented to the Associate Dean of Student Affairs on charges of unprofessional behavior.

Recourse for Students – Any student who feels unfairly treated with regard to the attendance policy should discuss these issues with the Office of Clerkships. If a mutually agreeable decision is not reached, the student should contact the Office of Student Affairs if they wish to pursue the matter further.

Other Important Policies (more policies available in Canvas)

The policies listed here are important for students to know and understand. Other policies, including these listed here, are in Canvas > Student Resources.

Code of Professionalism Policy

Policy statement

The Code of Professionalism consists of three articles, the first of which expresses the commitment of the medical student body to certain values, virtues, and principles that are fundamental to professionalism in medicine: respect for the dignity of every individual, altruism, compassion, integrity, collegiality, responsibility and accountability, humility, trustworthiness, honesty, and excellence. The second article addresses the questions of what can and should be done when members of the school community fail to exemplify these values, virtues, and principles. The third article describes the process for investigating and resolving allegations of serious failures in Professionalism.

Reason for policy

To ensure that all students, administrators, and faculty understand the ideals central to the practice of medicine and the process and procedures for adjudicating violations.

Process & procedures

Code of Professionalism

The Code of Professionalism consists of three articles, the first of which expresses the commitment of the medical student body to certain values, virtues, and principles that are fundamental to professionalism in medicine: respect for the dignity of every individual, altruism, compassion, integrity, collegiality, responsibility and accountability, humility,

trustworthiness, honesty, and excellence. The second article addresses the questions of what can and should be done when members of the school community fail to exemplify these values, virtues, and principles. The third article describes the process for investigating and resolving allegations of serious failures in Professionalism.

Article I

With an understanding that the following ideals are central to the practice of medicine, we, as members of the community of TMSU, will strive to:

1. **Practice humility**. We acknowledge the limits of our science and our practice, as well as our personal limits in knowledge and skill.
2. **Seek excellence**. We will endeavor to improve our knowledge and skill, both within and beyond the learning environment.
3. **Be responsible and accountable**. We will be willing to accept and acknowledge our shortcomings, as well as our successes. We will also commit ourselves to responsibility and accountability for our own learning.
4. **Be worthy.** Fostering the trust of our patients, teachers, and fellow students.
5. **Be altruistic**. We will strive to place the interests and needs of others, especially the sick and the disadvantaged, above our own self-interest.
6. **Be compassionate**. We realize that the ability to share in the experiences of others–especially, the suffering of the sick–is critical to the work of healing.
7. **Act and speak with integrity**. We will seek to speak and to act in ways that testify to and support our values and principles.
8. **Be collaborative and collegial**. We realize that care for patients and ourselves demands the integration and coordination of the talents, knowledge, and skills of all members of the health care team.
9. **Respect the dignity and intrinsic value of every individual**. Regardless of race, ethnicity, national origin, age, gender, socioeconomic background, sexual orientation, religious belief or political affiliation we will strive to respect our teachers, fellow students, patients, and other members of the university community.
10. **Be honest**. We will speak and act truthfully.

Article II

Promoting and Defending Professionalism in Education

The obligation to exemplify these values, virtues and principles ultimately rests with each of us. When we reflect these values, virtues, and principles, we enrich and strengthen our medical community. Since professionalism in the practice of medicine depends upon self- and mutual regulation, we promise to support each other in meeting this obligation with the aim of creating and maintaining a community founded on this shared commitment.

Actions that promote our values, virtues and principles, should be recognized, encouraged and supported. Actions –both words and deeds–that undermine our virtues, values, and principles should also be addressed. The following options are available for discussing and addressing actions, especially of the latter type:

1. In many situations, a direct, honest, confidential, and informal approach is most appropriate. This informal approach is inspired by the conviction that being open and forthright bolsters our shared community. Both in recognizing acts that promote our shared virtues, values, and principles, and in honest discussions about acts that may undermine them, a direct and informal approach allows us to support and to encourage each other while strengthening our medical community.
2. Concerns may also be voiced to and explored with the Dean's Office.
   Serious violations of the stated virtues, values, and principles may require an alternate process.
   Because serious failures in respect and honesty including sexual harassment, bias, discrimination, abuse, and academic dishonesty pose substantial threats to professionalism and to the integrity of our community the following formal written process is available.

Article III

Process for Investigating and Resolving Allegations of Serious Failures in Respect and Honesty

The following written formal process, which will always be conducted with the utmost regard for confidentiality and for the rights of students, is to be followed during the investigation and resolution of allegations of a serious breach of this Code of Professionalism. Allegations of academic dishonesty, harassment, bias, discrimination, or abuse are considered serious threats to our stated virtues, values, and principles.

1. A formal allegation of a serious breach of this Code of Professionalism must be described in writing by the individual(s) making the allegation. This document should contain the relevant details of the alleged violation, including the specifics of where, when, and by whom such an alleged failure occurred. The name(s) of the individual(s) bringing the allegation must be included in the written account.
2. This written allegation must be submitted to the Associate Dean of Admissions and Student Affairs on St. Vincent within ten days of the "discovery" of the alleged violation if the alleged event occurred on St. Vincent. If the alleged event occurred in the US or in terms 5-10, the submission should be to the Associate Dean of Clinical Sciences and Curriculum. The Associate Dean will determine if the allegation is sufficiently egregious or is part of a history or pattern of behavior the formal allegation will be forwarded to the *ad hoc* Disciplinary Review Committee which will be duly constituted and will include faculty and peers. If the Dean finds that the written allegation does not warrant immediate action, a copy of the formal, written allegation and a copy of the response will be placed in confidential files created for all parties involved. The contents of the confidential files will be destroyed upon graduation of each of the students involved in an allegation.
3. To be given reasonable notice of the hearing before the Disciplinary Review Committee
4. To address the committee investigating the alleged incident
5. To have knowledge of the nature of the evidence to be used against him/her
6. To be accompanied by the faculty advisor of his/her choosing.
7. To receive a fair hearing
8. To have all proceedings undertaken with utmost confidentiality
9. If the committee unanimously finds that there is cause for further investigation, it will convene again at the earliest convenience. Otherwise, all relevant documents and materials will be placed in a confidential file. In the event of a split decision of the committee, a written minority and majority opinion will be placed in the confidential file. This file is to be destroyed upon graduation of the accused.
10. If an allegation is forwarded to the committee, it will review the written allegation and findings. If need for further investigation is warranted, the accused will be notified and is entitled to present a rebuttal or defense before the committee. The accused is entitled to receive a copy of the allegation(s) if it is found to warrant further investigation
11. If the committee finds that there is sufficient evidence to support the allegation, it may resolve the matter in one of several ways.
12. Issue an oral reprimand to the accused at the conclusion of the review;
13. Issue a written reprimand to the accused to be placed in his/her academic file. This reprimand may remain in the academic file or may be removed after the completion of some form of restitution or remediation;
14. Suspend the accused from TMSU for a specified period of time;
15. Expel the accused from TMSU.
16. Under certain circumstances the accused may invoke an appeals process. If the action leads to dismissal by the Disciplinary Review Committee, or denies permission to return from a leave of absence, the student may appeal this decision to the Dean. The Dean will:
    1. Affirm the decision of the Disciplinary Review Committee; or
    2. Reverse or modify the action of the Disciplinary Review Committee in a manner dealing more benignly with the student; or
    3. Remand the case to the Disciplinary Review Committee for additional consideration.
    4. In cases under a) and b) the decision is final and without further appeal.
17. It must be expressly understood and agreed that should any legal proceeding between TMSU and a student arise, then the local law of St. Vincent will be applied.

CAAM-HP Standard III. Educational Program

The CAAM-HP expects that doctors trained for functioning in CARICOM countries are able to function in the community as an isolated practitioner, as well as in the modern hospital or clinic setting internationally. The doctor for CARICOM countries should be a promoter of health for the individual as well as the community, and must have the clinical competencies to be able to diagnose and treat illness in resource constrained circumstances. They must be aware of modern techniques of diagnosis and care and how they may be accessed when not available in the setting in which they practice. The doctor must be au fait with international codes of conduct for health professionals and practice within the law and ethical code of conduct of the country or jurisdiction in which they practice. They should be an advocate for the patient, particularly those disadvantaged by age or economic circumstance, and do so irrespective of ethnic, racial, religious, political or other considerations.

A medical school must engage in ongoing planning and continuous quality improvement processes that establish short and long-term programmatic goals, result in the achievement of measurable outcomes that are used to improve programmatic quality and ensure effective monitoring of the medical education programme's compliance with accreditation standards.

ED-11 A medical school must ensure that the learning environment of its medical education programme is conducive to the ongoing development of explicit and appropriate professional behaviors in its medical students, faculty and staff at all locations and is one in which all individuals are treated with respect. The medical school and its clinical affiliates share the responsibility for periodic evaluation of the learning environment in order to identify positive and negative influences on the maintenance of professional standards, develop and conduct appropriate strategies to enhance positive and mitigate negative influences and identify and promptly correct violations of professional standards.

Professionalism Policy II

Policy statement

The Code of Professionalism consists of Core Values and Expectations and Behaviors. This policy expands upon the "Code of Professionalism Policy"

Reason for policy

To ensure that all students, administrators, and faculty understand the ideals central to the practice of medicine and the process and procedures for adjudicating violations.

Professionalism

At Trinity Medical Sciences University and Trinity School of Medicine, we are committed to fostering a culture of professionalism that is integral to the practice of medicine. Our professionalism policy outlines the standards, values, and behaviors that we expect from all members of our academic community, including students, faculty, staff, and administrators.

Core Values

Integrity: Uphold the highest standards of honesty and ethical behavior in all interactions, both within the medical school and in the broader community. Adhere to the principles of medical ethics, including respect for patient autonomy, beneficence, non-maleficence, and justice.

Respect: Treat every individual with dignity, regardless of their background, beliefs, or roles. Embrace diversity and inclusivity, fostering an environment that is free from discrimination, harassment, and bias.

Compassion: Demonstrate empathy and sensitivity towards patients, colleagues, and the community. Understand the emotional and psychological aspects of patient care and exhibit genuine concern for their well-being.

Expectations and Behaviors

Professional Appearance: Maintain a neat and appropriate appearance that reflects the high standards of the medical profession. Dress code guidelines should be followed within the campus and clinical settings.

Communication: Communicate effectively and respectfully with patients, families, colleagues, and staff. Uphold patient confidentiality and privacy at all times, both in and out of the medical setting.

Responsibility and Accountability: Take ownership of your education, actions, and decisions. Be punctual, prepared, and actively engage in learning experiences. Recognize and address errors or mistakes with transparency and a commitment to improvement.

Teamwork and Collaboration: Collaborate with others to provide optimal patient care and contribute positively to the learning environment. Respect the roles and contributions of various healthcare professionals.

Ethical Conduct: Abide by the highest ethical standards in all interactions. Avoid conflicts of interest, including relationships that may compromise objectivity or professionalism.

Social Media and Online Presence: Use social media responsibly, maintaining the privacy and dignity of patients, colleagues, faculty, staff and the institution. Do not share sensitive information or engage in unprofessional online behavior.

Professional Development: Commit to lifelong learning and professional growth. Stay current with medical knowledge, advancements, and best practices, and engage in continuous self-improvement.

Reporting and Enforcement: Any violations of the professionalism policy will be taken seriously. An established reporting mechanism ensures that concerns can be raised confidentially. The institution will follow a fair and transparent process to investigate reported incidents and address them appropriately, which may include counseling, education, or disciplinary actions.

The following written formal process, which will always be conducted with the utmost regard for confidentiality and for the rights of students, is to be followed during the investigation and resolution of allegations of a serious breach of this Code of Professionalism. Allegations of academic dishonesty, harassment, bias, discrimination, or abuse are considered serious threats to our stated virtues, values, and principles.

1. Incidences which rise to the level of requiring a warning, are separate from incidents described below in (2.)
    a. Incidences in which professionalism is breached but are not considered serious threats to Trinity's stated virtues, values, and principles may be addressed by the above mentioned Associate Deans or the Dean without calling a formal Disciplinary Review Committee. Incidents like this include but are not limited to class disruptions, consistently being late to class or clerkship activities, disrespecting peers or professors in public, etc.
    b. These incidents may lead to just a discussion or may lead to a professionalism warning being placed in the student's academic file. Warnings like this are a "placeholder" and are not part of the permanent record. Warnings are not placed in a student's MSPE and should not prohibit a student from other activities. Warnings are in contrast to a professionalism action or serious breach.
2. A formal allegation of a serious breach of this policy should be described in writing by the individual(s) making the allegation. This document should contain the relevant details of the alleged violation, including the specifics of where, when, and by whom such an alleged failure occurred. The name(s) of the individual(s) bringing the allegation must be included in the written account.
3. This written allegation must be submitted to the Associate Dean of Admissions and Student Affairs on St. Vincent (for terms 1-4) or the Associate Dean of Clinical Sciences and Curriculum (terms 5-10) within ten days of the "discovery" of the alleged violation. The individual(s) against whom the allegation is made will receive a copy of the written allegation and will also have the opportunity to respond in writing. The Associate Dean will meet with all of the parties involved. Upon deliberation if the Associate Dean finds that the allegation is sufficiently egregious or is part of a history or pattern of behavior the formal allegation will be forwarded to the Disciplinary Review Committee which will be duly constituted and will include faculty, peers, and an advocate for the accused, usually a faculty member or administrator. If the Dean finds that the written allegation does not warrant immediate action, a copy of the formal, written allegation and a copy of the response will be placed in confidential files created for all parties involved. Each party to an allegation will be informed of the Dean's decision within thirty days of the initial meeting. The contents of the confidential files will be destroyed upon graduation of each of the students involved in an allegation.
4. The accused is entitled to the following rights:
    1. To know who his/her accuser(s) are if this is outside peer review process
    2. As stated previously, the accused is to receive a copy of the written allegation
5. To be given reasonable notice of the hearing before the Disciplinary Review Committee
6. To address the committee investigating the alleged incident
7. To have prior knowledge of the nature of the evidence to be used against him/her

8. To be accompanied by the faculty advisor of his/her choosing.
9. To receive a fair hearing
10. To have all proceedings undertaken with utmost confidentiality
11. If the committee unanimously finds that there is cause for further investigation, it will convene again at the earliest convenience. Otherwise, all relevant documents and materials will be placed in a confidential file. In the event of a split decision of the committee, a written minority and majority opinion will be placed in the confidential file. This file is to be destroyed upon graduation of the accused.
12. If an allegation is forwarded to the committee, it will review the written allegation and findings. The accused is entitled to present a rebuttal or defense before the committee. The accused is granted the same rights afforded during the hearing. If the committee finds that there is sufficient evidence to support the allegation, it may resolve the matter in one of several ways.
13. Issue an oral reprimand to the accused at the conclusion of the review;
14. Issue a written reprimand to the accused to be placed in his/her academic file. This reprimand may remain in the academic file or may be removed after the completion of some form of restitution or remediation;
    1. Suspend the accused from TMSU for a specified period of time;
    2. Expel the accused from TMSU.
    3. Under certain circumstances the accused may invoke an appeals process. If the action leads to dismissal by the Disciplinary Review Committee, or denies permission to return from a leave of absence, the student may appeal this decision to the Dean. The Dean will: Affirm the decision of the Disciplinary Review Committee; or Reverse or modify the action of the Disciplinary Review Committee in a manner dealing more benignly with the student; or Remand the case to the Disciplinary Review Committee for additional consideration.
    4. In cases under 14.1) and 14.2) the decision is final and without further appeal.
    5. It must be expressly understood and agreed that should any legal proceeding between TMSU and a student arise, then the local law of the appropriate jurisdiction will be applied.

CAAM-HP Standard III. Educational Program

The CAAM-HP expects that doctors trained for functioning in CARICOM countries are able to function in the community as an isolated practitioner, as well as in the modern hospital or clinic setting internationally. The doctor for CARICOM countries should be a promoter of health for the individual as well as the community, and must have the clinical competencies to be able to diagnose and treat illness in resource constrained circumstances. They must be aware of modern techniques of diagnosis and care and how they may be accessed when not available in the setting in which they practice. The doctor must be au fait with international codes of conduct for health professionals and practice within the law and ethical code of conduct of the country or jurisdiction in which they practice. They should be an advocate for the patient, particularly those disadvantaged by age or economic circumstance, and do so irrespective of ethnic, racial, religious, political or other considerations.

A medical school must engage in ongoing planning and continuous quality improvement processes that establish short and long-term programmatic goals, result in the achievement of measurable outcomes that are used to improve programmatic quality and ensure effective monitoring of the medical education programme's compliance with accreditation standards.

ED-11 A medical school must ensure that the learning environment of its medical education programme is conducive to the ongoing development of explicit and appropriate professional behaviors in its medical students, faculty and staff at all locations and is one in which all individuals are treated with respect. The medical school and its clinical affiliates share the responsibility for periodic evaluation of the learning environment in order to identify positive and negative influences on the maintenance of professional standards, develop and conduct appropriate strategies to enhance positive and mitigate negative influences and identify and promptly correct violations of professional standards.

Student Grievance and Complaint Policies

Policy statement

Trinity Medical Sciences University (TMSU) and Trinity School of Medicine (TSOM) are committed to fostering an academic environment that upholds fairness, integrity, and respect for all members of the university community.

Students who believe they have a grievance are encouraged to seek informal resolution through appropriate channels before initiating the formal grievance procedure. If informal resolution is not feasible, students may pursue the formal grievance process outlined below.

Reason for policy

This policy ensures that student concerns are addressed promptly and resolved in a fair and just manner. The procedure provides a structured mechanism for students to present grievances to the administration while safeguarding them from any retaliatory actions when concerns are raised in good faith.

Definitions

- Trinity School of Medicine (TSOM) – An academic institution dedicated to medical education.
- Trinity Medical Sciences University (TMSU) – The broader institutional entity encompassing TSOM.
- Georgia Nonpublic Postsecondary Education Commission (GNPEC) – The regulatory body overseeing nonpublic postsecondary institutions in Georgia.
- Caribbean Accreditation Authority for Education in Medicine and other Health Professions (CAAM-HP) – The accreditation body for medical education programs in the Caribbean.
- Grievance – A formal complaint arising from an alleged unauthorized or unjustified act or decision by an individual (student, faculty, staff, or administrator) that adversely affects the status, rights, or privileges of a student. Grievances may include, but are not limited to:
  - Academic programs or courses
  - Discrimination
  - Student mistreatment
  - Harassment, including sexual misconduct
  - Mentorship concerns
  - Privacy of student educational or health records
  - Security and safety issues
  - Research-related grievances
  - Student health concerns
  - Violations of professionalism

Complaints regarding financial matters, housing, or other administrative concerns are governed by separate policies. Grievances must be submitted in writing to the Associate Dean for Student Affairs and Admissions (AsDSAA). The written statement should include:

- Date of the incident
- Location of the incident
- Individuals involved, including witnesses
- A summary of the incident
- Efforts made to resolve the matter informally
- The remedy sought
- Professional and academic misconduct includes, but is not limited to, misrepresentation of oneself in academic or professional settings, actions that hinder fair evaluation of another student, or knowingly allowing another student to use one's work as their own. Further professionalism concerns are addressed in related policies. Additionally, misconduct encompasses inappropriate behavior towards individuals or disruption of classroom or clinical activities, and students are subject to disciplinary action under professionalism policies at TMSU or affiliated institutions.

Grievance Process & procedures

1. Grievances against a Student
   - The grievance report will be reviewed by the AsDSAA, the Chief Justice of the relevant jurisdiction (St. Vincent and the Grenadines or the United States), and one additional faculty member or student selected by these individuals. The AsDSAA or designee will conduct an investigation, including meetings with the concerned parties.
   - All potential conflicts of interest must be revealed.
   - No conflicts of interest can be present.

- A student may not chair the committee

2. Grievances against Faculty, Staff, or Administrators
   - The AsDSAA will conduct an investigation, including meetings with the concerned parties, after forming a committee comprising the Chief Justice of the relevant jurisdiction and an additional faculty member or student. The Associate Dean for Student Affairs will refer the matter to the Dean, who will review findings and issue a final resolution, which may include disciplinary or remedial actions.
   - All potential conflicts of interest must be revealed.
   - No conflicts of interest can be present.
   - A student may not chair the committee

Process outline

- Grievance is filed within 10 days of the alleged event. Incident is submitted to either relevant Chief Justice (CJ) or Associate Dean of Student Affairs / Admissions (AsDSAA). The grievance cannot be anonymous, but the privacy and anonymity of the accuser with regard to the accused is respected as much as possible.
- Dean is notified
- Dean asks for formation of *ad hoc* DRC
- *ad hoc* DRC is formed and given the relevant policies, as well as the allegation and witness statements. Members choose the chair of the *ad hoc* committee. Members determine an amicable date for *ad hoc* DRC meeting #1
- During *ad hoc* DRC meeting #1 documents are reviewed for breach of professionalism, conduct or other policies. Recommendation is made to the Dean on whether or not further investigation is warranted.
- The accused is informed of the allegation and given five business days to respond to the allegation in writing to the chair of the DRC. The response is sent to the other members of the committee.
- Members determine an amicable date for *ad hoc* DRC meeting #2.
- During *ad hoc* DRC meeting #2, the committee meets with the accused who is given the option of making a presentation before the committee. The committee deliberates and then sends a recommendation to the Dean.
- Dean reviews the file and the DRC's recommendation. The Dean shares the final decision with DRC members.
- The complainant and the accused receive the determination of the Dean based on the DRC investigation and recommendation.

Student Appeal

Students with unresolved grievances may file a grievance report with the Georgia Nonpublic Postsecondary Education Commission (GNPEC) or CAAM-HP (see below). GNPEC requires that students utilize and complete their institution's grievance procedure in an attempt to resolve any complaint or concern before submitting a complaint to the Commission. If the institution's resolution is not satisfactory, a student may then appeal to the Commission, but it will not investigate a complaint unless the student has exhausted all available grievance procedures outlined by the institution.

Georgia Nonpublic Postsecondary Education Commission
2082 East Exchange Place
Tucker, GA 30084
Phone: (770) 414-3300
GNPEC Website URL: https://gnpec.georgia.gov/student-resources/complaints-against-institution

Or
The CAAM-HP Secretariat
Suites 5 & 6, Pinnacle Pointe
53 Lady Musgrave Road
Kingston 10, Jamaica
Tel: (876) 927-4765
E-mail: info@caam-hp.org

Disciplinary Review Committee (DRC)

The purpose of the TMSU *ad hoc* Disciplinary Review Committee is to hold a hearing for students who are found to be in violation of TMSU policies, and who are accused of professional or academic misconduct. The Associate Dean of Student Affairs oversees the DRC.
Note: This does not include issues regarding maintaining academic standards, such as GPA requirements or matriculation which remain the responsibility of faculty committees (APC and Admissions).
All students are expected to abide by the policies and procedures established by the University. Ignorance of established policies is not considered a valid reason for violation.

Communication Repository
All communication between the complainant and administration concerning student written complaints, whether a formal written complaint or a satisfaction complaint, will be archived by the AsDSAA. If any complaint contains information that requires additional confidentiality, the President may choose to keep it on file in the President's office with a note maintained in the AsDSAA's records. All complaint documentation will be maintained for 7 years after the final date of resolution. The student complaint log will include:
Date the complaint was sent to the AsDSAA
Date the AsDSAA acknowledges complaint receipt to the student
Name of the AsDSAA overseeing the complaint resolution Individuals assigned to investigate the complaint, if investigation was not overseen by the Associate Dean of Students/Admissions
Date of resolution communication
General resolution details and results of the investigation
Dates on which any follow-up communication was sent to the complainant. Documentation and links to where the complaint communication is maintained

Relevant Policies
CAAM-HP Standards for Accreditation of Medical Education Programmes - August 2024

MS-30: Student Mistreatment A medical school develops effective written policies that define mistreatment, has effective mechanisms in place for a prompt response to any complaints, and supports educational activities aimed at preventing mistreatment. Mechanisms for reporting mistreatment and other complaints are understood by medical students, including visiting medical students, and ensure that any violations can be registered and investigated without fear of retaliation.

MS-31: Student Complaints A medical school has written policy and procedures for addressing complaints from students related to areas covered by CAAM-HP standards and processes. The information provided by the medical school to students includes the school's policy and procedures for addressing student complaints, as well as contact information for the CAAM-HP secretariat to which students may submit complaints not resolved at the institutional level.

GNPEC
Standard 14: Complaint Policy
Statutory Authority: O.C.G.A. §§ 20-3-250.5(b)(2); 20-3-250.6(a)(14)

1. Complaint procedure must include the following:
    a. Steps for filing a complaint:
        i. Submission requirements
        ii. Institutional review process, including response times; and
        iii. Notification of right to appeal final institutional decision to GNPEC.
2. Complaint procedure must be provided as part of the catalog and enrollment agreement.
3. If the institution has a website, the current catalog with the complaint procedure must be posted.
4. For institutions with physical facilities for students, the complaint procedure must be posted prominently in a public place where students congregate (i.e., student breakroom).

Student Complaints regarding non-academic or non-professionalism issues

Objective of Policy

The student complaints policy provides guidance as to how the University defines written complaints, the structure for communication and resolution of complaints, and the systematic means for documenting complaints and resolutions. A good faith effort will be made by the institution to reach a resolution that is beneficial to those involved in a formal complaint.

Policy Definitions

Written Student Complaint: Any written complaint from a student to the Associate Dean of Students/of Admissions. Written student complaints may be received via email from the student's TMSU email address or via letter.

Formal student complaint: Any written student complaint that involves a payment or refund of a charge, student financial aid, scholarships/grants, student housing, facilities, or any other issues not involving academics or professionalism issue deemed by the AsDSAAto require additional investigation. Formal student complaints should contain the following elements: (a) Date and location where the incident occurred; (b) individuals involved, including witnesses; (c) summary of the incident; (d) efforts made to settle the matter informally[1]; and (e) remedy sought.

Satisfaction complaint: Any written student complaint that involves an individual's opinion, but does not provide enough information or is deemed by the AsDSAAto be at a severity level below meriting an in-depth investigation. Satisfaction complaints may evolve into a formal student complaint if the student wishes to continue the complaint after the initial attempt at resolution.
Resolution: the answer to or solution for the complaint. Resolution does not guarantee that the complainant receives the complainant's desired outcome. Some resolutions may involve referring students to other existing appeals processes, such as the process for appealing a grade or disciplinary sanctions.
Trinity School of Medicine (TSOM) – An academic institution dedicated to medical education.
Trinity Medical Sciences University (TMSU) – The broader institutional entity encompassing TSOM.
Georgia Nonpublic Postsecondary Education Commission (GNPEC) – The regulatory body overseeing nonpublic postsecondary institutions in Georgia.
Caribbean Accreditation Authority for Education in Medicine and other Health Professions (CAAM-HP) – The accreditation body for medical education programs in the Caribbean.

Associate Dean of Student Affairs / Admissions (AsDSAA) – the dean level individual to whom complaints are first directed

Procedures for Responding to Written Student Complaints

The student must submit an email or letter to the Associate Dean of Students/Admissions.

The ASDSAA will respond to the student within 5 business days for the purpose of acknowledging receipt.

The AsDSAA will coordinate an investigation of the complaint and develop a resolution. The complaint will be investigated, including the source, consideration of previous efforts to resolve the issue, and evaluation of any circumstances surrounding the event or person. Depending on the nature of the complaint, the AsDSAAmay, at this time, forward the complaint to another University administrator for investigation. The AsDSAAwill send an email to the student within 10 days after initially acknowledging receipt of the complaint for the purpose of providing a written statement of resolution or to inform the student of the progress related to reaching a resolution, as well as a date by which resolution will be reached.

For satisfaction complaints that require additional information from the complainant, the AsDSAA will send an email to the student within 10 days after initially acknowledging receipt of the complaint for the purpose of requesting additional information necessary for facilitating resolution. Within this 10-day time frame, the

[1] It is understood that, under some circumstances such as sexual harassment or intimidation, a student may wish to involve the University administration without first seeking informal resolution.

administrator will provide a written statement of resolution or will inform the student of the progress related to reaching a resolution, as well as a date by which resolution will be reached.

Student Appeal Process

Upon receiving the resolution response to the written student complaint, the student has the right to appeal to successive levels of administration. Each successive level will have 10 days to respond after the appeal is received. Depending on the nature of the complaint, the AsDSAA will advise the student of whether to appeal to the Provost/Dean or the Chief Administrative Officer. If the student is not satisfied by the Provost/Dean of Medicine's response or if the complaint was previously forwarded to the Provost/Dean of Medicine for resolution, the student may appeal using the Final Appeal's process. The Final Appeal Committee's decision is final.

If the student exhausts all internal complaint processes and appeals, a student may elect to appeal to the Georgia Nonpublic Postsecondary Education Commission (GNPEC). A complaint form is available on the GNPEC website: https://gnpec.georgia.gov/student-resources/complaints-against-institution. They may also be reached by phone at (770) 414-3300.

If a medical student exhausts all internal complaint processes and appeals, a student may elect to appeal to

The CAAM-HP Secretariat
Suites 5 & 6, Pinnacle Pointe
53 Lady Musgrave Road
Kingston 10, Jamaica
Tel: (876) 927-4765
E-mail: info@caam-hp.org

Communication Repository

All communication between the complainant and administration concerning student written complaints, whether a formal written complaint or a satisfaction complaint, will be archived by the Associate Dean of Students/Admissions. If any complaint contains information that requires additional confidentiality, the President may choose to keep it on file in the President's office with a note maintained in the Associate Dean of Students/Admission's records. All complaint documentation will be maintained for 7 years after the final date of resolution. The student complaint log will include:

Date the complaint was sent to the Associate Dean of Students/Admissions

- Date the AsDSAA acknowledges complaint receipt to the student
- Name of the AsDSAA overseeing the complaint resolution Individuals assigned to investigate the complaint, if investigation was not overseen by the Associate Dean of Students/Admissions
- Date of resolution communication
- General resolution details and results of the investigation
- Dates on which any follow-up communication was sent to the complainant Documentation and links to where the complaint communication is maintained

Student Health and Wellness

Reason for policy

Commitment to Wellness

Trinity Medical Sciences University (TMSU) is dedicated to supporting student wellness. Through leadership from the University administration and collaboration with student organizations, TMSU promotes self-care, resilience, and personal growth to nurture the health of body, mind, and spirit.

Policy statement

Emotional and Psychological Support

Recognizing the stressful nature of medical education, TMSU provides emotional support services:

- **St. Vincent:** All students have access—either in person or remotely—to Ms. La Ferne Fraser, Assistant Professor and Psycho-Educational Support, at laferne.fraser@tmsu.edu.vc. Additionally, students can access a private

psychiatric physician through the TMSU Health Clinic. Appointments are covered under the Student Health Plan; consult plan documents for details.

- **Clinical Clerkships:** Students may use mental health services through network providers in the Warner Robins area or other clerkship locations. Refer to insurance plan documents or contact the Clerkship Administrator for provider lists and coverage specifics. There is also 24 hour online mental health through Cigna .

Process & procedures

Costs

Costs acquired for all accidents, injuries, exposures to infectious agents or hazardous material are the responsibility of the student. Many of these costs are able to be covered by insurance once your deductible is met.

Health Clinic Services

For students in St. Vincent, the TMSU Health Clinic and faculty physicians offer limited care for minor illnesses and injuries, issuing referrals for serious or chronic conditions. The University provides transportation to local health facilities. Note that some medications may not be available in St. Vincent; students must arrange for adequate supplies to be sent if needed. The Student Health Plan includes medical evacuation coverage for emergencies untreatable in St. Vincent.

Accidents and Injuries

Students should seek immediate medical care for injuries occurring on or off campus:

- St. Vincent: Contact Security for transportation to a hospital or clinic.
- Clinical Clerkships: Use emergency facilities covered under the Student Health Plan in your area.

For Reportable Events, submit an accident/injury report to the Associate Dean of Student Affairs and Admissions within 24 hours. An investigation may follow to assess the need for disciplinary or corrective actions. Reportable Events include, but are not limited to:

- Injuries on University premises or related to University activities.
- Safety hazards.
- Damage to University property.
- Incidents involving law enforcement or causing significant concern to students.

Infectious Agents

Students must use universal precautions when exposed to blood or bodily fluids. If exposure occurs:

- Follow the facility's policy where the incident happened.
- Notify both the University and the facility immediately.
- Submit an incident report to the Associate Dean for Clinical Science and Curriculum or the Associate Dean of Student Affairs and Admissions or the Senior Associate Dean for Clinical Clerkships.
- Follow any specific facility policy
- Any cost incurred is the student's. It is not Trinity's or the health care institution's

Exposure Protocol

- Wash the affected area immediately (e.g., Hibiclens, Phisoderm, bleach solution, or soap and water) for at least two minutes, irrigate eyes with saline, or bleed puncture wounds.
- If in a hospital, report to the emergency room; if in a clinic or non-hospital setting, contact local emergency services for guidance.
- Remain calm (HIV conversion from known positive patients occurs in <3% of cases).
- Inform the patient's attending physician or nurse.
- Follow any specific facility policy

Forms and related documents / appendices

CAAM-HP Standards for Accreditation - August 2024

MS-17: Personal Counselling/Mental Health/Well-Being Programme

A medical school has in place an effective system of counselling services for its medical students that includes programmes to promote their well-being and to facilitate their adjustment to the physical and emotional demands of medical education.

MS-26: Learning Environment and Professional Standards

A medical school ensures that the learning environment of its medical education programme is conducive to the ongoing development of explicit and appropriate professional behaviours in its medical students, faculty, and support staff at all locations. The medical school and its clinical affiliates share the responsibility for periodic evaluation of the learning environment to identify positive and negative influences on the maintenance of professional standards, develop and conduct appropriate strategies to enhance positive and mitigate negative influences, and identify and promptly correct violations of professional standards.

Tobacco and Smoke Free Campus

Policy Statement

This policy reinforces TMSU's commitment to providing a safe, healthy, and collegial learning and working environment for all students, employees, and visitors. The purpose of this policy is to preserve and improve the health, comfort, and overall campus environment across all TMSU locations.

Accordingly, the use of tobacco products, smoking/vaping devices, and any drugs or intoxicating substances—whether legal or illegal in the applicable jurisdiction—is prohibited on or within any property owned, leased, rented, operated, controlled by, in the possession of, or otherwise used by TMSU or any of its affiliates. This prohibition applies to all methods of use, including (but not limited to) smoking, vaping, inhalation, ingestion (edibles), chewing, sniffing, injecting, or any other form of consumption.

This policy also prohibits the possession, distribution, sale, or transfer of prohibited substances on TMSU property or at TMSU-sponsored events, whether on-campus or off-campus.

Limited Exception: This policy does not prohibit the lawful use of prescription medications taken as prescribed by a licensed clinician, or approved over-the-counter medications used as directed. Use of prescription medication must not impair safety, job performance, learning, or professional behavior. Marijuana and its by-products or derivatives may not be used, even if prescribed, while enrolled at Trinity.

Reason for Policy

To specify expectations for maintaining a Tobacco, Smoke, and Drug-Free Campus and to protect the health and safety of the TMSU community.

Affected Stakeholders and Organization(s)

Students, Faculty, Staff, Contractors, and Guests

Definitions

Tobacco Products

"Tobacco Products" include, but are not limited to: cigarettes, cigars, pipes, clove cigarettes, loose tobacco, smokeless tobacco (chew, snuff, snus), and any other product containing tobacco intended for human consumption.

Smoking/Vaping Devices

"Smoking/Vaping Devices" include, but are not limited to: electronic cigarettes (e-cigarettes), vape pens, mods, JUUL-type devices, heated tobacco products, hookahs, waterpipes, and any device used to aerosolize or combust a substance for inhalation—whether the substance contains nicotine, tobacco, cannabis, THC, oils, or any other compound.

Drugs / Intoxicating Substances (Regardless of Legal Status)

"Drugs / Intoxicating Substances" include **any substance** (natural or synthetic) that is used to alter mood, perception, cognition, behavior, or physical function, **whether legal or illegal in the jurisdiction**, including but not limited to:

- nicotine in any form (if not already covered above)
- cannabis/marijuana and cannabis-derived products (including THC, concentrates, oils, edibles)
- controlled substances and illicit drugs (e.g., cocaine, heroin, methamphetamine, MDMA, etc.)
- misuse of prescription medications (e.g., opioids, benzodiazepines, stimulants)
- inhalants or "legal highs," synthetic cannabinoids, or similar substances
  any substance used in a manner not intended by the manufacturer or not directed by a licensed clinician

Enforcement for students

Enforcement for students comes under Trinity's professionalism policies and drug policies. This may or may not result in a Disciplinary Review Committee being convened. Penalties may include dismissal.

Extenuating Circumstances Policy

Policy Statement

Trinity School of Medicine is committed to maintaining academic integrity while ensuring that students are not unfairly disadvantaged by circumstances beyond their control. This policy provides a structured framework for students facing serious, unforeseen, and unavoidable events that may impact their academic performance. The institution encourages resilience and professionalism, expecting students to navigate routine life challenges without compromising their studies. However, in exceptional cases, appropriate accommodations will be considered to uphold academic standards while supporting student success.

Purpose

This policy establishes a fair, transparent, and consistent process for students experiencing extenuating circumstances that may affect their academic progress, clinical responsibilities, or ability to meet deadlines.

Definitions

Extenuating circumstances are *exceptional, unforeseen, and unavoidable* events that significantly impair a student's ability to meet academic or clinical requirements. These circumstances must be:

- Beyond the student's control
- Unpredictable or unavoidable
- Directly impacting academic performance or attendance

Possible (but not guaranteed) extenuating circumstances include, but are not limited to:

- Severe illness or injury requiring medical attention/hospitalization
- Death or critical illness of an immediate family member
- Natural disaster directly involving student
- Mental health crises requiring professional intervention
- Victim of a crime, accident, or natural disaster
- Legal obligations (e.g., court proceedings, immigration matters)

Exclusions

The following situations do not qualify as extenuating circumstances:

- Poor time management or workload stress
- Minor illnesses (e.g., colds, seasonal allergies, headaches) without medical documentation explaining increased severity. For example, seasonal allergies (J30.9) do not classify as extenuating circumstances but an anaphylactic reaction (Z87.892) or Stevens-Johnson syndrome (L51.2) would be classified as a severe illness or injury requiring medical attention
- Non-emergency travel plans or personal commitments
- Having issues studying/not feeling ready for an exam
- Technical failures (unless institutionally verified)

Reporting and Documentation Requirements

Students must notify the Office of Student Affairs as soon as possible when an extenuating circumstance arises. Requests must be submitted within five (5) business days of the event unless the student is incapacitated. Required documentation may include:

- Medical certificates or hospital records
- Death certificates or obituary notices
- Police reports (if applicable)
- Court or legal documents
- Letters from licensed mental health professionals

All submissions will be handled with confidentiality and discretion.

Possible Adjustments

Adjustments will be determined on a case-by-case basis, considering the nature and severity of the circumstances. Possible adjustments may include:

- Exam deferral or rescheduling
- Assignment extensions

- Temporary academic leave
- Clinical rotation modifications
- Alternative assessment arrangements

Accommodations will be reviewed and approved by the Associate Dean of Student Affairs and, if necessary, an ad hoc Extenuating Circumstances Review Committee (ECRC).

Appeals Process

If a student's request is denied, they may submit a written appeal to the Dean within five (5) business days of receiving the decision. The appeal must include additional supporting evidence or justification for reconsideration.

Final Decision and Accountability

Decisions regarding extenuating circumstances are final and will be communicated in writing to the student. Any misrepresentation or abuse of this policy may result in disciplinary action under the institution's Academic Integrity and Professionalism Policies.

CAAM-HP Standard III. Educational Program

The CAAM-HP expects that doctors trained for functioning in CARICOM countries are able to function in the community as an isolated practitioner, as well as in the modern hospital or clinic setting internationally. The doctor for CARICOM countries should be a promoter of health for the individual as well as the community, and must have the clinical competencies to be able to diagnose and treat illness in resource constrained circumstances. They must be aware of modern techniques of diagnosis and care and how they may be accessed when not available in the setting in which they practice. The doctor must be au fait with international codes of conduct for health professionals and practice within the law and ethical code of conduct of the country or jurisdiction in which they practice. They should be an advocate for the patient, particularly those disadvantaged by age or economic circumstance, and do so irrespective of ethnic, racial, religious, political or other considerations.

A medical school must engage in ongoing planning and continuous quality improvement processes that establish short and long-term programmatic goals, result in the achievement of measurable outcomes that are used to improve programmatic quality and ensure effective monitoring of the medical education programme's compliance with accreditation standards.

ED-11 A medical school must ensure that the learning environment of its medical education programme is conducive to the ongoing development of explicit and appropriate professional behaviors in its medical students, faculty and staff at all locations and is one in which all individuals are treated with respect. The medical school and its clinical affiliates share the responsibility for periodic evaluation of the learning environment in order to identify positive and negative influences on the maintenance of professional standards, develop and conduct appropriate strategies to enhance positive and mitigate negative influences and identify and promptly correct violations of professional standards.

Quality Assurance Policy

Policy Statement

Trinity Medical Sciences University (TMSU) is committed to maintaining the highest academic standards for all awards conferred in its name and ensuring that the quality of learning experiences enables students to meet those standards. The University upholds these responsibilities through a comprehensive framework of policies and procedures designed to safeguard academic standards and enhance the quality of its educational offerings. These policies align with key external accreditation and quality assurance bodies, including the Caribbean Accreditation Authority for Education in Medicine and Other Health Professions (CAAM-HP), the National Accreditation Board (NAB) of St. Vincent and the Grenadines, the Liaison Committee on Medical Education (LCME) of the Association of American Medical Colleges (AAMC), the Educational Commission for Foreign Medical Graduates (ECFMG), the National Committee on Foreign Medical Education and Accreditation (NCFMEA), the World Federation for Medical Education (WFME), and the Georgia Nonpublic Postsecondary Education Commission (GNPEC). By adhering to these rigorous standards, the University ensures compliance with global best practices in medical education.

Reason for Policy

The Assurance of Academic Quality and Standards Policy is designed to facilitate continuous improvement across all academic programs and units through structured internal evaluations and external peer reviews. The primary objectives of the academic quality assurance process are to:

- Evaluate and uphold academic quality, resource utilization, and adaptability;
- Standardize the process of assessing academic units and programs;
- Document and communicate the outcomes of academic quality assurance efforts;
- Serve as a mechanism for reflective analysis and institutional enhancement.

The assurance of academic quality at TMSU is guided by the following principles:

- The University community collectively assumes responsibility for maintaining and improving the quality of academic programs and student learning experiences.
- Evaluations of academic programs are conducted by qualified academic and professional peers.
- Academic quality is determined through a comprehensive collection of evidence rather than reliance on a single metric.

A program review is also a tool for critical reflection and change.

Definitions

Academic quality assurance is a collection of systematic evaluation processes to monitor and review performance, identify quality outcomes, and recommend improvement of the academic units and programs of the Trinity Medical Sciences University.

Processes & Procedures

The assurance of academic quality at TMSU is guided by the following principles:

- The University community collectively assumes responsibility for maintaining and improving the quality of academic programs and student learning experiences.
- Evaluations of academic programs are conducted by qualified academic and professional peers.
- Academic quality is determined through a comprehensive collection of evidence rather than reliance on a single metric.

The process of Academic Quality Assurance can entail both internal review and preparation for external review when appropriate.

Full Academic Program Review

Academic programs undergo systematic review at least once every seven years, or as necessary. The *ad hoc* Academic Quality Assurance Committee, in consultation with deans and senior administrators, establishes the schedule for program reviews. In exceptional cases, reviews may be conducted outside the established cycle if deemed necessary.

A program review includes both quantitative and qualitative analyses:

- **Quantitative analysis:** Compilation and evaluation of numerical data relevant to the program, reported in the self-study report.
- **Qualitative analysis:** Conducted through a self-study by program representatives and an external review by academic peers to validate findings.

The review process ensures accountability, transparency, and continuous improvement. Program reviews are expected to be completed within one calendar year, except in cases where external review bodies such as CAAM-HP require additional time.

Internal quality assurance entails the periodic monitoring of specific academic areas on a rotational basis, typically over a two-year cycle. These evaluations, integral to the strategic planning process of the Office of the Provost, may encompass curricular, administrative, or resource-related aspects. The objectives of internal quality assurance include:

- Assessing and documenting the quality of academic programs and support services
- Evaluating effectiveness and identifying best practices
- Implementing improvements to optimize performance
- Strengthening institutional accountability and governance

Student Engagement within the Academic Quality Assurance Process

TMSU actively engages students in quality assurance processes through structured mechanisms, including collaboration with the Student Government Association (SGA). Student involvement occurs at multiple levels:

- Proactive engagement in the development of academic programs, policies, and procedures through consultations and review of materials;
- Concurrent participation in decision-making bodies such as the Curriculum, Library and Learning Resources, Research, and Information Technology Committees, as well as ad hoc panels related to student conduct and academic review;
- Reactive feedback collection through surveys and formal program committees, including course evaluations, clinical preceptor and rotation evaluations, and the external Graduation Questionnaire (GQ).

Strategic University Review and Evaluation (SURE)

The Strategic University Review and Evaluation (SURE) process is an annual institutional review aimed at fostering continuous improvement and strategic planning. The objectives of SURE include:

- Ensuring sustained enhancement of academic quality and student experiences
- Developing actionable plans for implementation and monitoring throughout the academic year
- Reviewing institutional diversity and inclusion efforts
- Facilitating faculty reflection on operational and academic achievements.

The SURE process, overseen by the Office of the Provost, evaluates key reports, including but not limited to:

- Annual Faculty Evaluation Reports
- Research Annual Review and Summary
- Faculty Promotions Report
- Annual Admissions Report
- Annual Curriculum Committee Summary
- Annual Student and Faculty Handbooks and Catalogs
- Annual Policy Change Summary

Reports undergo review during the September term, and finalized action plans are submitted for Executive Committee review in November, with implementation scheduled for the following academic year. A comprehensive review of findings and action plans occurs in December, ensuring timely dissemination and execution of academic policies and procedures.

The Assurance of Academic Quality and Standards Policy reflects TMSU's unwavering commitment to academic excellence, continuous improvement, and institutional accountability. Through systematic evaluations, evidence-based decision-making, and stakeholder engagement, the University ensures the highest standards in medical education, aligning with both national and international accreditation benchmarks.

Strategic Planning, Governance, and Continuous Quality Improvement Committee

Reason for policy

The Strategic Planning, Governance, and Continuous Quality Improvement Committee (the "Committee") is established to ensure the medical school:

1. Engages in ongoing strategic planning and continuous quality improvement (CQI) that sets short- and long-term programmatic goals, defines measurable outcomes, and uses results to improve program quality; and
2. Maintains and disseminates bylaws and policy documents that clearly describe the responsibilities and privileges of administrative officers, faculty, students, and committees, and supports consistent governance practices in alignment with CAAM-HP accreditation expectations.

Policy statement

Authority and Reporting

The Committee is an official standing committee of the medical school and reports to the Dean and the appropriate institutional governance body responsible for academic oversight (e.g., Curriculum Committee and/or Executive/Academic Leadership Council, as applicable). Committee recommendations are advisory unless otherwise delegated through institutional governance documents.

Membership

- The Committee will include:
- Provost of the University
- Dean of the Medical School (Chair or Co-Chair, as designated by the Dean)

- All Associate Deans of the Medical School
- Director of Academic Operations
- Chair of the Faculty Affairs and Development Committee
- One (1) to Two (2) Medical Students, appointed through the student governance process or by the Dean of Student Affairs (as applicable). Term of student members: one year, renewable once, unless otherwise determined by institutional policy.

Voting

- Voting members: Dean, all Associate Deans, Director of Academic Operations, Chair of the Faculty Affairs and Development Committee.
- Student members: participate fully in discussion and CQI activities and may vote on non-personnel, non-confidential matters unless restricted by institutional policy or applicable law.
- Quorum: A quorum consists of a majority of faculty members present at the meeting. For clarity, "faculty members" refers to the Committee's voting faculty/academic leadership members (Dean/Associate Deans and the Chair of Faculty Affairs and Development Committee).
- Decision-making: by simple majority of votes cast when quorum is met. The Chair votes in the event of a tie.

Meeting frequency

- The Committee will meet at least three (3) times per year, and more frequently as needed to support strategic planning cycles, CQI action plans, and accreditation-related monitoring.

Core Responsibilities

- The Committee is responsible for the following functions, aligned to IS-2 and IS-3 (and any other applicable CAAM-HP Standards)

  Strategic Planning (IS-2)
  - Develop, maintain, and periodically update the medical school's strategic plan, including defined priorities and timelines.
  - Establish short- and long-term programmatic goals and confirm alignment with the institution's mission and educational objectives.
  - Recommend resource-aligned initiatives that support achievement of strategic goals.

  Continuous Quality Improvement (IS-2)
  - Oversee a structured CQI process that includes:
    - Selection of measurable outcomes/metrics (e.g., student performance indicators, learning environment data, graduation outcomes, faculty development participation, student support indicators)
    - Routine monitoring of results and trend analysis
    - Documentation of CQI action plans, owners, timelines, and follow-up
  - Review major CQI findings and ensure closing-the-loop actions (implementation, reassessment, and documented improvement).

  Accreditation Compliance Monitoring (IS-2)
  - Monitor ongoing compliance with CAAM-HP accreditation standards, including identification of risks, gaps, and corrective actions.
  - Maintain an internal calendar of compliance activities (e.g., policy reviews, committee effectiveness checks, data cycles) and ensure responsible owners are assigned.

  Governance Documents, Policies, and Bylaws (IS-3)
  - Ensure the medical school maintains current bylaws and/or appropriate policy documents describing responsibilities and privileges of administrative officers, faculty, students, and committees.
  - Establish and oversee a systematic policy lifecycle: development, review, approval routing, version control, and archiving.
  - Ensure dissemination of current governance documents to relevant stakeholders (e.g., via official faculty and student portals/handbooks and institutional communications).

  Documentation and Records
  - Ensure agendas, materials, attendance, actions, votes (when applicable), and minutes are maintained for each meeting.
  - Ensure CQI documentation includes the "why," the "what," the "who," and the "did it work?" —so improvements are trackable over time.

Confidentiality

Members must maintain confidentiality regarding sensitive institutional information, individual student or personnel matters, and any protected data reviewed as part of CQI or governance functions.

Forms and related documents / appendices

CAAM-HP Standards for Accreditation - August 2024

IS-2: Strategic Planning and Continuous Quality Improvement

A medical school engages in ongoing strategic planning and continuous quality improvement processes that establish both short and long-term programmatic goals, establishes measurable outcomes that are used to improve programme quality, and effectively monitors the medical education programme's compliance with the accreditation standards of CAAM-HP.

IS-3: Policies and Bylaws

A medical school disseminates bylaws or appropriate policy documents that describe the responsibilities and privileges of its administrative officers, faculty, students, and committees.

Infectious Agents / Blood-Borne Pathogens / Exposure Policy

Every year a small but significant number of students are accidentally exposed to a patient's body fluids through a needle puncture wound, surgical error, etc. There is a very specific protocol to follow in case this happens to you, to protect you medically and legally, to provide information, emotional support, and treatment if indicated. It can be very frightening to have an accidental exposure.

Trinity recommends that the following procedures be followed should such exposure occur. These guidelines are:

1. Wash area immediately (Hibiclens, Phisoderm, Bleach solution or soap and water) for at least two minutes or irrigate eyes with saline or water. Bleeding the area in the case of puncture wounds is advisable. Report immediately to the Emergency Room if the injury occurs while in the hospital setting. Appropriate treatment/management will be available at the Milton Cato Memorial Hospital and our affiliate hospitals.

2. Try to stay calm (remember, even exposures from known HIV positive patients are thought to cause conversion in < 0.3 percent of cases).

3. Discuss the situation with the patient's attending physician, chief resident, or intern. Have one of them ask the patient for permission (if required) to perform an HIV test, hepatitis B and C, and VDRL (or equivalent). Note: This is now done routinely by the ER or by protocol in most hospitals. Some states still require informed consent from the patient to run the HIV test.

4. In high-risk exposures, the CDC recommends prophylactic treatment with three antiretroviral medications, and to be effective, treatment should be started within one to two hours of an exposure. To assure rapid access for evaluation and potentially medication, students with at-risk exposures to blood-borne pathogens should report immediately to the Emergency Department at the Milton Cato Memorial Hospital while on St. Vincent or the emergency room at the assigned hospital or clinic while in clerkship rotations.

5. File an incident report with the Associate Dean of Clinical Sciences and Curriculum in the USA or the Health Services of the Trinity School of Medicine in Saint Vincent and the Grenadines. Because prophylactic triple-drug therapy is very expensive, all students should make certain that their insurance policy is up to date and have coverage for such an incident.

Prevention

Be sure that you are up to date with your OSHA (US Department of Labor: Occupational Safety and Health Administration) Training and Certification process at Trinity School of Medicine.

1. OASHA requires your teachers and/or hospitals/clinic to provide instruction on prevention of exposure. However, you need to ensure you are current with best practices and standards for prevention of exposure. Your teachers (faculty, residents, interns, nurses) must instruct you on proper blood drawing techniques, disposal of needles and instruments, etc. Do not attempt to do a procedure that you do not feel comfortable performing.

2. Hepatitis Vaccine: Be sure you have had a full series (three injections) and a blood test afterward to document immunity.

3. As a medical student and essentially health care worker, opportunity for exposure to various diseases and other maladies is much greater than normal. Treat all patients with dignity but also act in a careful and prudent manner to protect yourself. Accidental exposure is one of the most distressing occupational hazards of your profession. Ensure you are properly attired

as necessary with gloves, masks, shields or other garments and never assume or rush to a situation without appropriate deliberation.

Hospital protocols

1. If there any conflicts with above recommendations, the student should follow the policies of the hospital or clinic in which the exposure occurred.

Costs

1. Any costs incurred are the responsibility of the student and not Trinity

Sexual Harrassment

All members of the Trinity community must be allowed to work and study in an environment free from any form of sexual harassment.

For the purpose of this policy, sexual harassment is defined as unwelcome sexual advances, request for sexual favors or other verbal, written and electronic communications or physical conduct of a sexual nature from any person when:

1. A sexual favor or request is made explicitly;
2. A sexual request is part of a condition of an individual's status in a course, program or activity, or of academic achievement;
3. A sexual request and subsequent submission to or rejection of such request by an individual is used as a basis of employment or academic decisions affecting such individuals;
4. Such conduct or request has the purpose or effect of unreasonably interfering with an individual's work or academic performance or of creating an intimidating, hostile, or offensive environment for work or learning.

In determining whether alleged conduct constitutes sexual harassment, the record, as a whole will be considered, as well as the totality of the circumstances, such as the nature of the alleged conduct and the context in which the alleged conduct occurred.

Trinity Drug and Alcohol Policy

It is the policy of Trinity to maintain an environment free of illicit drugs and alcohol abuse and to comply with all laws and regulations that prohibit or otherwise control the manufacture, sale, distribution, use, and possession of illicit drugs and alcohol. Trinity will not shield from action by civil authorities any employee, student, or faculty member involved in the provision, merchandising, possession, or consumption of illegal drugs or alcohol. Please see full policies in Canvas > Student Resources to understand the policies and consequences.

Contact Information

All students must maintain an accurate record of their permanent address, emergency, and immigration information, including citizenship and passport or immigration number, with the Registrar's office. The permanent address on file with Trinity is the only place to which Trinity will send ALL correspondence when students are not on campus. A change of address during a term, between terms, or while taking clinical clerkships must be filed in writing with the Office of the Registrar. It is especially important for students on clinical clerkships to notify the Office of the Registrar of any change of permanent address during clinical rotations.

TELEPHONE

Students must maintain (with the Office of Registrar) current phone numbers where they can be reached both when School is in session and during holidays. These numbers should include next of kin.

EMAIL

In the absence of a Trinity assigned email address, Trinity will utilize the personal address provided by the student. When the student has been assigned a Trinity email address, it will become the official address to which communications will be sent. This will be used for communication and for video conference meetings.

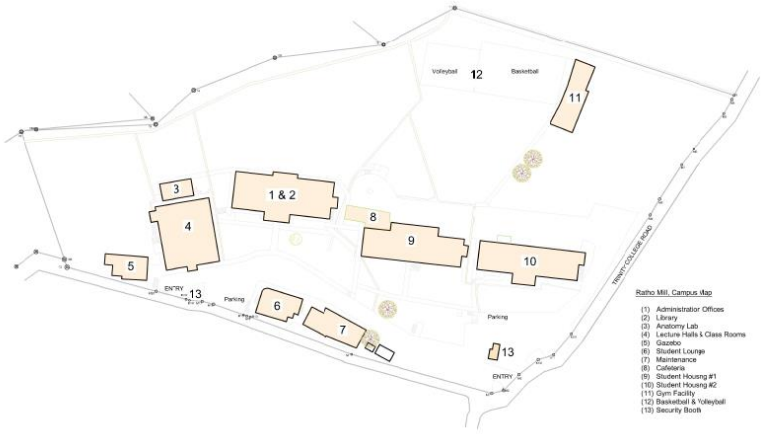
Since email is the primary vehicle for communication, it is imperative that the student review their email account frequently to ensure for the most current and timely communications. **All students are required to check their Trinity email at least daily.** Any information disseminated via email using the student's personal email or the Trinity provided address will be considered delivered regardless of the time of the student's review of their email account. **Students should check email at least daily.** Students are required to respond to any official correspondence within 24 hours.

MAILING ADDRESS

Students must maintain (with the Office of Registrar) current mailing addresses where they can be reached both when School is in session and during holidays. These mailing addresses should include next of kin.

Facilities and Equipment

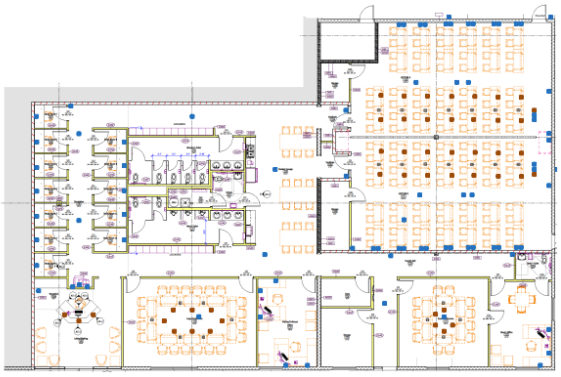
Trinity School of Medicine's preclinical years are conducted in St. Vincent and the Grenadines at the Ratho Mill Campus (see diagram below).



Other student housing is located nearby at the Canash Beach Apartments. Transportation is provided by the school. All campus sites have broad-band Wi-Fi access in St. Vincent and in Warner Robins, Georgia. The Anatomy Lab (3) is currently in the process of being updated and expanded into a state-of-the-art facility with 2 Anatomage tables (https://anatomage.com/) and freezers for new male and female cadavers every term. This will be finished in Summer 2025 and be officially open Fall Term 2025.

The Trinity Medical Education Center (MEC)(see below) was opened in 2019. It is used for lectures, group studying, individual studying and case-based learning. It is also houses the Dean/Provost Office (John P Geisler, MD, MSPharm); Associate Dean of Clinical Sciences and Curriculum Office (Kelly J Manahan, MD, MBA) and the Office of the Registrar. Trinity's President (Dean Sippel, MBA) also has an Office in the MEC. However, Mr. Sippel is more commonly present at the Administrative Offices outside of Atlanta, Georgia.

Medical Education Center – Warner Robins, Georgia, USA



Computer Requirements

Trinity Medical Sciences University (TMSU) uses a Computer-Based Testing (CBT) model for all testing and assessments. In general, TMSU will provide devices and technology environment for you take these tests and assessments. However, when this service is not provided, you would need to have a compatible device to take these assessment activities. Also, we want to ensure that you have a reliable and stable primary computer (Laptop) for the entire length of your program here at TMSU. Hence, following is a set of guidelines set as requirements to ensure you have an adequate personal computer device.

Many of our students use multiple devices of different types, platforms, and form factors to meet their needs. The Trinity Student Network (TSN) supports almost all of these types of devices. However, to take your CBT exams, you must have at least one device that meets the following minimum requirements:

For PC Devices:

- Operating System: 64-bit Versions of Windows 10 22H2, Windows 11 24H2 or higher.
- Only genuine U.S. English, French, Portuguese, Swedish, and British versions of Windows
- Operating Systems are supported.
- CPU Processor: Intel i5 Processor or greater.
- RAM: 8GB or greater.
- Hard Drive: 10 GB or higher available (Free) space.
- For onsite support and to back up the answer files to a USB drive, a working USB port is
- required. (Newer devices may require an adaptor).
- Wi-Fi connectivity for download, registration, exam download, upload, and some exam features.
- Screen Resolution must be 1024x768 or higher.
- Adobe Reader (Version 9, 11, or DC) is required for exams containing PDF attachments.
- Administrator-level account permissions.

For Mac Computers

- Supported Operating Systems: macOS 13 (Ventura) or higher.
- Only genuine versions of Mac Operating Systems are supported.
- CPU: Intel i5 or M-series chips.
- RAM: 8GB or greater
- Hard Drive: 10 GB or higher available (Free) space
- For onsite support and to back up the answer files to a USB drive, a working USB port is
- required. (Newer devices may require an adapter).
- Server version of Mac OS X is not supported
- Wi-Fi connectivity for download, registration, exam download, upload, and some exam features.
- Administrator-level account permissions

Note:

- Microsoft Surface Pro that meets the requirements above is the only support Tablet for CBT
- Virtualization Operating Systems (such as VMWare, Parallels, Virtual Box, etc.) are not supported

Mobile Phone Requirements

All students enrolled in the Doctor of Medicine program are required to have a functional mobile phone—cellular or Wi-Fi based—that meets the following criteria:

Geographic Functionality: The phone must be operable in all locations where the student is engaged in academic activities, including but not limited to the United States, St. Vincent and the Grenadines, and Jamaica (for students participating in the Global MD Pathway).

Communication Applications: The phone should support and maintain active access to the WhatsApp® application (or similar communication apps) for communication with peers and administrative groups.

Email Access: The phone must be capable of receiving institutional email reliably to ensure timely receipt of official correspondence, academic notices, and administrative communications. A student's Trinity email must be checked at least daily. Compliance with this policy is essential for maintaining effective communication and participation in all program activities. Email is Trinity's form of official communication.

Access to Resources / Electronic Resources on Leave of Absence

During an LOA, the student will have access to their Trinity email account as well as the HelpDesk and Student Resources in Canvas. However, the student will not have access to meetings with academic leadership, faculty, SGA, SGA activities or the school psychologist until they return from an LOA.
Please see Canvas > Student Resources for the entire policy

Access to Resources / Electronic resources if dismissed

Email: A dismissed student's institutional email access will remain active until the conclusion of any timely submitted appeal process or for fourteen (14) calendar days following the date the dismissal notice is issued, whichever period is longer.

- If no appeal is submitted, email access will terminate fourteen (14) calendar days after the dismissal notice is issued.
- If an appeal is submitted and denied in fewer than fourteen (14) calendar days, email access will remain active for the full fourteen (14) calendar day period.
- If an appeal remains under review beyond fourteen (14) calendar days, email access will terminate upon final resolution of the appeal unless student re-enrolls.

Learning Management System (LMS) Access (including Canvas): Access to the Learning Management System (e.g., Canvas or equivalent platform) will remain active under the same timeline as institutional email access.
However, LMS access during this period is limited to:

- Viewing prior course materials
- Downloading personal academic content
- Accessing grade reports

A dismissed student may not submit new coursework, participate in active courses, access examination content, or engage in academic activities during this period.
Upon expiration of the applicable timeframe described above, LMS access will be fully deactivated.

Electronic Records and Institutional Systems: Access to internal administrative systems—including student information systems, financial portals, clinical scheduling platforms, library subscriptions, and any institution-licensed software—will be discontinued immediately upon issuance of the dismissal notice.
Continued access to these systems is not required for appeal review and is restricted to protect institutional security and compliance obligations.
Official academic records, billing statements, and other educational documents will remain available through formal request procedures as outlined below.

Transcript Requests and Educational Records: Dismissed students retain the right to request official and unofficial transcripts in accordance with institutional policy and applicable law.
Transcript requests must be submitted through the institution's standard transcript request process. Processing times, applicable fees, and financial clearance requirements remain in effect.
The filing of an appeal does not delay transcript processing unless the student specifically requests that transcript issuance be held pending the outcome of the appeal.

Badge and Physical Access: Institutional identification badge access, campus entry credentials, and clinical site access privileges are revoked immediately upon issuance of the dismissal notice.

Please see Canvas > Student Resources for the entire policy

Guests in St. Vincent Housing

TMSU students may host a guest in student housing for up to seven days at no charge. A $50 fee will be charged to the student account for guests hosted by a student in TMSU housing for more than seven days and up to 21 days. Guests staying more than 21 days will be charged $100 per month. *This went into effect September 1, 2025.*

Student Agreements

All medical students must abide by the academic standards, policies, and procedures as outlined in the Trinity Handbook. This includes that students agree to follow the code of professionalism as a member of TSOM. All medical students must comply with the rules and regulations of the University and SOM as published in official publications and as amended or revised during the student's continued enrollment.

Students must agree to use the systems and software required by the University and the SOM for testing, evaluation, and communication.

Students must also agree to be photographed and recorded. Many of the clinical and professional skills assessments require that faculty and students view recordings of their assessments together.

Student releases

Students must release certain information, including specific protected health information (PHI), to Trinity Medical Sciences University (TMSU) and allow the Trinity School of Medicine (TSOM) to provide this information to facilities and to any outside institution that requests verification of immunization status prior to participation in any required, elective, or voluntary clinical experience related to medical training at TSOM.

All students are required to provide complete disclosure of academic records from all previously attended institutions. This includes, but is not limited to, academic transcripts, grade reports, documentation of any disciplinary or professional actions, and records indicating failure of any licensing examinations. Omission or failure to disclose such information to Trinity Medical Sciences University / Trinity School of Medicine constitutes a breach of professional integrity and may lead to disciplinary sanctions, up to and including dismissal from the institution.

Students must allow the TSOM to release information to other departments of the University, such as Finance, to verify or certify services, scholarship eligibility, or other items necessary for the continuation of enrollment and to meet all state and federal health and safety requirements.

Because passing NBME exams is a requirement for promotion and graduation from TSOM, students must agree to release their any and all tests from NBME. If a student takes USMLE Step 1 or USMLE Step 2 CK, the student agrees to release the scores to TSOM.

If a student should refuse to provide or revoke any of these agreements or releases, the student should understand that such action might affect the student's ability to meet the requirements for the degree and eligibility to graduate. If a student who has taken USMLE Step 1 and USMLE Step 2 should refuses to provide scores or revokes any of these agreements or releases, the student may no longer be eligible to participate in the national residency match or graduate from Trinity.

These agreements and releases must be signed by the student upon matriculation and will remain in effect throughout the student's enrollment or until such time as agreement is revoked, in writing, by the student. If revoked, the student becomes ineligible for graduating from Trinity and the national residency match.

Disclosures

Trinity Medical Sciences University and Trinity School of Medicine is fully compliant with the relevant accrediting and certifying agencies including: GNPEC, NAB and CAAM-HP. We are also fully in compliance World Directory of Medical Schools (WDMS), World Federation for Medical Education (WFME), the Foundation for the Advancement of International Medical Education and Research (FAIMER); and the U.S. Educational Commission on Foreign Medical Graduates (ECFMG).

International (non-US citizens or green card holders)

Entry into St. Vincent & the Grenadines

Most students will not need to obtain a visa in advance to enter St. Vincent and the Grenadines. Instead, students typically receive a temporary visa from a customs officer upon arrival at Argyle International Airport (SVD). Trinity has established an arrangement with Immigration Services of the Government of St. Vincent to extend student visas as a group. Students will be asked to provide their passports to the Student Services office, which will submit them to Immigration Services for processing.

Once completed, students will be notified to collect their passports on campus. Please refrain from contacting Immigration Services directly, as this could delay the process. St. Vincent maintains a list of countries whose citizens must obtain a visa before entry. At the time of publication, these countries include: Afghanistan, Cameroon, China, Dominican Republic, Haiti, Iran, Iraq, Lebanon, Nigeria, and Syria. Students from these countries should contact Student Services for assistance with the visa application process. Please note that processing times may take several weeks or even months. To help avoid delays, do not submit your application directly to Immigration Services.

Entry into the United States

All non-U.S. citizens or green card holders, including Canadian citizens, must obtain the appropriate visa to enter the U.S. for pre-clinical or clinical programs. Trinity does not sponsor visas. Visas are the responsibility of the individual. The B-1 visa is the correct visa for participating in clinical clerkship activities. Students from Visa Waiver Program countries should not use the Electronic System for Travel Authorization (ESTA) for clerkships. The U.S. Foreign Affairs Manual (9 FAM §402.2-5(E)(3)) establishes the use of the B-1 visa for "Elective Clerkships," which includes Trinity's the Review Course pre-clinical activities, Step 1 Prep and medical clerkships. It is important to understand that B-1/B-2 visas are individual applications and do not have sponsors. A visa may be valid for a few months or several years, and only determines your eligibility to seek entry into the U.S. It does not guarantee admission. Upon arrival, students are usually issued a digital I-94 record with a date by which they must depart the U.S. Students are responsible for ensuring their passport, visa, and I-94 remain valid. Overstaying beyond the allowed date is a serious violation that can lead to multi-year bans on re-entering the U.S. Upon request, Trinity will provide letters of support and necessary documentation for visa interviews and border crossings for students in pre-clinical and clinical clerkships.

School of Biomedical Sciences (SBS) (undergraduate studies)

The Trinity School of Biomedical Sciences premedical pathway is designed to provide both undergraduates and post-baccalaureate students a path to completing the requirements necessary for entry into medical school. The pathway advances students' knowledge of careers in a broad range of subjects and helps to strengthen their application to medical school. The premedical pathway is designed to work with undergraduate students who need to complete the necessary required courses for entry into Trinity School of Medicine, or to assist students who have already achieved an undergraduate degree at an accredited U.S. university by allowing them to take or retake required courses to demonstrate mastery of the material and strengthen their application to medical school. The SBS is not a degree granting program. Students DO NOT obtain an undergraduate degree, but they do obtain an MD if they successfully meet the requirements for graduation from Trinity School of Medicine (TSOM).

How many undergraduate credit hours are required to enter Trinity School of Medicine

60 credit hours either obtained from the SBS or from outside Trinity are required to enter TSOM and seek a Doctor of Medicine degree.

The specific curriculum of a student will depend upon the prior courses taken and the courses needed to fulfill the requirements to enter the Doctor of Medicine program. All prerequisites MUST be met and passed with a C or better to matriculate into TSOM. AP credits and CLEP may be used for these prerequisites (AP of $\geq$3, CLEP $\geq$50 per 3 semester hour class)

Students wishing to continue into the Doctor of Medicine program must have completed all prerequisite courses required by the School of Medicine. Promotion into the MD Program is not guaranteed. Students must perform at a level indicative of potential success in the MD Program.

Educational Workload

Students may take up to 18 credit hours per semester to make normal academic progress. Students seeking to enroll in more than 18 credit hours must have the approval of the Dean / Provost. This will in general, not be granted. If a student comes in needing all 60 credit hours, this will be done in 4 terms. The schedule is below.

Prerequisite Courses

Engl 101	English Composition I	3 credit hours
Engl 102	English Composition II	3 credit hours
Bios 101	General Biology I	3 credit hours
Bios 102	General Biology II	3 credit hours
Chem 101	General Chemistry I	3 credit hours
Chem 102	General Chemistry II	3 credit hours
Phyc 201	General Physics I	3 credit hours
Bios 209	Intro to Psychology/ Behavioral Science	3 credit hours
Math 201	College level mathematics I or Biostats	3 credit hours

60 Credit Premed Schedule							
TERM 1		**TERM 2**		**TERM 3**		**TERM 4**	
English I*	ENGL 101	English II*	ENGL 102	Organic Chemistry I	CHEM 210	Organic Chemistry II	CHEM 211
Biology I*	BIOS 101	BIOLOGY II*	BIOS 102	Introduction to Physiology	BIOS 210	Introduction to Microbiology	BIOS 201
General Chemistry I*	CHEM 101	General Chemistry II*	CHEM 102	Introduction to Anatomy	BIOS 205	Introduction to Pharmacology	BIOS 327
Introduction to Psychology*	BIOS 209	General Physics I*	PHYC 201	Medical Terminology	BIOS 152	Medical Informatics	BIOS 151
College Math I*	MATH 201	Introduction to Biostatistics	MATH 220	Introduction to Biochemistry	CHEM 220	Introduction to Genetics	BIOS 226
*Courses that are required prerequisites to enter Trinity School of Medicine for Doctor of Medicine Degree							

SBS Course Descriptions

BIOS 101 General Biology I

Prerequisites: None

General Biology I provides a foundational introduction to the structure, function, and molecular dynamics of living systems, with emphasis on human relevance and biomedical application. The course covers fundamental biological principles, including cell theory, biomolecular structure and function, membrane dynamics, cellular metabolism, energy transfer, and the mechanisms of gene expression and regulation. Additional topics include molecular genetics, cell division, and introductory principles of biotechnology.3 credits

BIOS 102 General Biology II

Prerequisites: BIOS 101

General Biology II advances the study of biological systems at the organismal and ecological levels. This course emphasizes evolutionary theory, comparative anatomy and physiology, and the diversity of life across major taxonomic groups. Core content includes plant and animal physiology, reproduction and development, population biology, and ecological interactions within ecosystems. Clinical correlations are integrated to contextualize content within human health and disease. 3 credits

BIOS 151 Medical Informatics

Prerequisites: None

This course provides a combination of computer science, systems, and communications to address computer literacy needed to effectively collect, manipulate, collaborate and publish health science information. 3 Credits

BIOS 152 Medical Terminology

Prerequisites: None

This course provides the necessary framework to learn the basic rules and elements of medical terms. The course will focus on how to break down medical terms into their components: prefix, suffix and root. By learning the individual parts of medical terms, students will be able to understand their origins, definitions and abbreviations in addition to pronunciation and spelling.3 Credits

BIOS 201 Introduction to Microbiology

Prerequisites: BIOS 101, BIOS 102

This course provides basic concepts of microbiology with emphasis on microbial pathogenesis and immunity. Topics include the chemical and physical nature of human microbial pathogens, aspects of medical microbiology, identification and control of pathogens, development and spread of antibiotic resistance, disease transmission and host resistance. The course also illustrates the general principles and techniques of laboratory diagnosis of infectious diseases. 3 credits

BIOS 205 Introduction to Human Anatomy

Prerequisites: BIOS 101, BIOS 102

This course is designed to provide students with an understanding of the structure, function and regulation of the organ systems of the body and physiological integration of the systems to maintain homeostasis. Course content includes study of the musculoskeletal, circulatory, respiratory, digestive, urinary, immune, reproductive, and endocrine systems. The course covers the anatomical terminology to describe the basic structures of the human body. 3 credits

BIOS 209 Introduction to Human Psychology / Behavioral Sciences

Prerequisites: None

Introduction to Psychology introduces the foundational theories that guide modern psychology and provides students with a conceptual framework for understanding the day-to-day applications of these principles. The course content includes the biology of behavior, learning, memory, cognition, motivation, emotion, personality, abnormal behavior and its therapies, social behavior and individual differences. 3 credits

BIOS 210 Introduction to Physiology

Prerequisites: BIOS 101, BIOS 102, CHEM 101, CHEM 102

Introduction to Physiology provides students with an understanding of the function and regulation of the organ systems of the body and physiological integration of the systems to maintain homeostasis. Students receive a quantitative and integrated concept of sub-cellular, cellular and organ systems. 3 credits

BIOS 226 Introduction to Genetics

Prerequisites: BIOS 101, BIOS 201, CHEM 101, CHEM 201
Introduction to Genetics familiarizes the student with the basic concepts of inheritance, populations, mutations, techniques used to assess each of these, and their relation to molecular biology. 3 credits

BIOS 327 Introduction to Pharmacology

Prerequisites: BIOS 101, BIOS 102
Introduction to Pharmacology is designed to provide an overview of pharmacologic principles with an emphasis on therapeutic drug classification. For each therapeutic drug classification, basic mechanisms of drug actions, side effects, routes of administration, and common indications will be reviewed. Students will become familiar with common abbreviations and vocabulary terms related to drug therapy. The course will prepare students to recognize major drugs. 3 credits

CHEM 101 General Chemistry I

Prerequisites: None
General Chemistry I introduces the fundamental principles of chemistry with a focus on atomic and molecular structure, chemical bonding, stoichiometry, thermochemistry, and the periodic properties of elements. Emphasis is placed on the quantitative and conceptual frameworks that underpin reactivity, chemical equilibrium, and molecular interactions. Clinical and biomedical applications are introduced to contextualize foundational concepts within human physiology, pharmacology, and diagnostic sciences. 3 credits

CHEM 102 General Chemistry II

Prerequisites: CHEM 101
General Chemistry II continues the comprehensive study of chemical systems with a focus on intermolecular forces, solutions, reaction kinetics, chemical equilibria, acid-base chemistry, thermodynamics, and electrochemistry. This course explores the principles governing reaction mechanisms, energy transformations, and dynamic systems, with applied relevance to clinical diagnostics, biochemical processes, and pharmaceutical chemistry. 3 credits

CHEM 210 Organic Chemistry I

Prerequisites: CHEM 101, CHEM 102
Organic Chemistry I covers basic principles of structure and nomenclature of organic compounds, both aliphatic and aromatic. It emphasizes the principles of chemical reactions of organic compounds and the synthesis or degradation of bio-molecules in human metabolism. Saturated hydrocarbons, unsaturated hydrocarbons, synthesis, properties and reactions of alcohols, identification of functional groups, hybridization of hydrocarbons, stereochemistry cis-trans isomerism and addition reactions are covered. 3 credits

CHEM 211 Organic Chemistry II

Prerequisites: CHEM 101, CHEM 102, CHEM 210
Organic Chemistry II is a further study of the chemistry of carbon compounds from a functional group perspective. The course covers structure and nomenclature of specific organic compounds like thiols, aldehydes, ketones, amines, esters, carboxylic acids, carboxylic acids derivatives, benzene, phenol, Hofmann elimination reaction, Sn1, Sn2, E1 and E2 reactions. Emphasis is given on reactions, preparations, uses, and simple mechanisms and their biological application. 3 credits

CHEM 220 Introduction to Biochemistry

Prerequisites: CHEM 101, CHEM 102
This course provides students with a basic understanding of the biomolecules involved in the molecular architecture of eukaryotic cells and organelles. The course also describes the structural and functional properties of different biomolecules (carbohydrates, proteins, and lipids), the principles of bioenergetics, concepts of enzymology, and nutritional biochemistry. 3 credits

ENGL 101 English Composition I

Prerequisites: None

English Composition I is designed for students needing to improve their proficiency in comprehension and expression of the English language used in the U.S. It provides an understanding of effective communication through writing and speaking methods. 3 credits

ENGL 102 English Composition II

Prerequisites: ENGL 101

English Composition II extends the skills of communication and critical thinking through additional analysis of reading and writing tasks to support skills development. 3 credits

MATH 201 Mathematics I

Prerequisites: None

Mathematics I provides the foundation for calculus. Trigonometry, exponential, logarithmic and polynomial functions are taught along with the concepts of limits and continuity. This course will include critical thinking and decision-making. 3 credits

MATH 220 Biostatistics

Prerequisites: MATH 201

Mathematics I provides the foundation for calculus. Trigonometry, exponential, logarithmic and polynomial functions are taught along with the concepts of limits and continuity. This course will include critical thinking and decision-making. 3 credits

PHYC 201 Physics I

Prerequisites: MATH 201

Physics I is a conceptual study of units and dimensions of physical quantities, vectors and kinematics, laws of motion and their applications, work and energy, properties of matter, sound, light and optics, gravitational motion, fluid mechanics and thermal physics. Students review the experimental methods associated with the basic laws of mechanics, vibration, circular motion, fluids, heat and thermal properties of materials. 3 credits