

# The University of Texas Southwestern Medical School

## Professionalism Policy

### *Constitution of the ad hoc committee:*

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### *Constitution of the ad hoc committee for review and revision in 2018*

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### **Background**

*Professionalism is the basis of medicine's contract with society. It demands placing the interests of patients above those of the physician, setting and maintaining standards of competence and integrity, and providing expert advice to society on matters of health.*

*(Charter on Medical Professionalism- ABIM)*

### **Professionalism is a core competency in medical education.**

- LCME Standards 3.5, 7.5, 7.6, 7.7, 7.8, 7.9
- ACGME Outcome Project includes Professionalism as a core competency in which residents must demonstrate a commitment to carrying out professional responsibilities and adhere to ethical principles.
- UT Southwestern Educational Objectives of the Medical School are aligned with the LCME Standards and the ACGME competencies, and include “Ethical roles and responsibilities of the physician to society” (2.2), “Interactions with Professionals” (5.1), “Responsibility to Patients and Society” (5.4-5.12), and “Life-long learning” (5.13-5.14).
- Unprofessional behaviors in medical school particularly related to irresponsibility and diminished capacity for self-improvement predict future disciplinary action by state medical boards. (*Papadakis et al N Engl J Med.* 2005)

### **It is critical that professional behaviors and responsibilities expected of future physicians be;**

- Clearly articulated
  - The Policy describes fundamental principles and a set of professional responsibilities from the Charter of Medical Professionalism- *Ann Intern Med.* 2002.
  - The Policy describes a Medical Student Code of Professional Conduct which will be distributed annually to and signed by all students on admission.
  - All Physicianship Evaluation Forms describing expected behaviors will be readily available to students and mirror those evaluated on clerkship evaluation forms.
  - Faculty development will proceed to assure that all course and clerkship directors are familiar with the policy and can inform participating faculty.
- Explicitly taught both in the formal and informal curriculum
  - Professionalism is both formally and informally taught in the Academic Colleges during several small group activities and ethics discussions.
  - Professionalism is both formally and informally taught in the clinical clerkships through discussions and role modeling by our clinical faculty and house staff.
    - The informal curriculum is addressed and discussed with students by their College Mentor through the submission of reflection papers during the clerkships.
- Assessed early and monitored throughout medical school with feedback and guidance provided when necessary to avoid future unprofessional behavior especially as it relates to patient care.

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- The Policy includes a mechanism for early identification, counseling, and remediation of problematic behavior in the pre-clerkship curriculum and in relation to behaviors outside of the classroom but otherwise related to their role as a medical student at UT Southwestern.
  - Feedback is provided by the faculty or course director with suggestions on how to improve. If behavior is repeated or serious enough, then a Physicianship Evaluation Form is completed, reviewed with the student, and then sent to the Associate Dean for Student Affairs. The student then meets with the Associate Dean for counseling and remediation.
- The Policy also includes a mechanism to address and remediate problematic behavior in the clinical clerkships.
  - Students who do not demonstrate adequate professional and personal attributes (lowest 2 scores) on their final clerkship evaluation (Attached) in *Professional Attributes and Responsibilities, Self-Improvement and Adaptability, Relationships with Patients, or Interpersonal Relationships with other members of the Health Care Team* will be evaluated by the course or clerkship director who will complete a Physicianship Evaluation Form. The course/clerkship director will meet and provide feedback to the student making recommendations for improvement, as will the Associate Dean for Student Affairs.
- Clinical Course/Clerkship Directors are encouraged in a private forum to identify and review students who have had difficulty with professionalism to monitor and provide earlier recognition and intervention if continued behavior is noted. Individual faculty will not be notified to avoid undue bias.
- Students who receive one or more Physicianship Evaluation form(s) in the pre-clerkship years and none subsequently, or who receive no more than one Physicianship Evaluation form in the clinical years, thus having successfully addressed and remediated the problematic behavior, generally will not have a notation made in the Medical Student Performance Evaluation or be referred to the Student Promotions Committee. The Physicianship Evaluation form(s) will be held in the Office of Student Affairs and will not become part of the student's permanent file.
- If the professionalism deficiency is sufficiently serious or egregious, a single Physicianship Evaluation Form may result in referral to the Student Promotions Committee, which could lead to additional action, including but not limited to, a notation in the Medical Student Performance Evaluation, or Academic Warning, Probation, or Dismissal.
- In all cases, the Student Promotions Committee has complete discretion to determine what constitutes a sufficiently serious or egregious professionalism deficiency and to take appropriate action.
- Required to be demonstrated as an achieved competency to be eligible to receive the Medical Doctor degree.
  - The Policy includes a mechanism to formally address the inability of a student to achieve the competency of Professionalism.
  - In all cases, the Student Promotions Committee has complete discretion to determine what constitutes a professionalism deficiency and to take appropriate action.
    - If a student receives 2 or more Physicianship Evaluation Forms in the clinical years OR receives 2 or more Physicianship Evaluation Forms in the pre-clerkship years and then 1 in the clinical years, OR receives a Physicianship Evaluation Form at any time for a sufficiently serious or egregious professionalism deficiency:
      - The course/clerkship director has the ability to provide a failing grade for the course/clerkship based on lack of achievement of a core competency.
      - A notation will be made in the Medical Student Performance Evaluation
      - A referral will be made to the Student Promotions Committee for review with potential outcomes to include dismissal.
        - The procedure for appeals made by the SPC is described in EDU-402 Academic Decisions.

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The Professionalism Policy contains the following:

1. A description of Fundamental Principles and Professional Responsibilities based on the American Board of Internal Medicine's "Medical Professionalism in the New Millennium: A Physician Charter".
2. A Medical Student Code of Professional Conduct
3. Description of the Physicianship Evaluation Form for the Pre-Clerkship Curriculum
4. Description of the Physicianship Evaluation Form for the Clerkship and Post-Clerkship Curriculum
5. Description of the Institutional Physicianship Evaluation Form

*This policy is intended to address concerns related to unprofessional behavior. There may be instances where unprofessional behavior may also be subject to Regents' Rules, State or Federal law, or other institutional policies. This process does not preclude other actions/consequences, as appropriate.*

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### **Fundamental Principles**

- **Principle of primacy of patient welfare**  
This principle is based on a dedication to serving the interest of the patient. Market forces, societal pressures, and administrative exigencies must not compromise this principle.
- **Principle of patient autonomy**  
Physicians must have respect for patient autonomy. Patients' decisions about their care must be paramount, as long as those decisions are in keeping with ethical practice and do not lead to demands for inappropriate care.
- **Principle of social justice**  
The medical profession must promote justice in the health care system, including the fair distribution of health care resources. Physicians should work actively to eliminate discrimination in health care, whether based on race, gender, socioeconomic status, ethnicity, religion, or any other social category.

### **A Set of Professional Responsibilities**

- **Commitment to professional competence**  
Physicians must be committed to lifelong learning and be responsible for maintaining the medical knowledge and clinical and team skills necessary for the provision of quality care.
- **Commitment to honesty with patients**  
Physicians must ensure that patients are completely and honestly informed before the patient has consented to treatment and after treatment has occurred. Physicians should also acknowledge that in health care, medical errors that injure patients do sometimes occur. Whenever patients are injured as a consequence of medical care, patients should be informed promptly because failure to do so seriously compromises patient and societal trust. Reporting and analyzing medical mistakes provide the basis for appropriate prevention and improvement strategies and for appropriate compensation to injured parties.
- **Commitment to patient confidentiality**  
Earning the trust and confidence of patients requires that appropriate confidentiality safeguards be applied to disclosure of patient information.
- **Commitment to maintaining appropriate relations with patients**  
Given the inherent vulnerability and dependency of patients, certain relationships between physicians and patients must be avoided. In particular, physicians should never exploit patients for any sexual advantage, personal financial gain, or other private purpose.
- **Commitment to improving quality of care**  
Physicians must be dedicated to continuous improvement in the quality of health care.

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- **Commitment to improving access to care**  
Medical professionalism demands that the objective of all health care systems be the availability of a uniform and adequate standard of care. A commitment to equity entails the promotion of public health and preventive medicine, as well as public advocacy on the part of each physician, without concern for the self-interest of the physician or the profession.
- **Commitment to a just distribution of finite resources**  
While meeting the needs of individual patients, physicians are required to provide health care that is based on the wise and cost-effective management of limited clinical resources.
- **Commitment to scientific knowledge**  
Much of medicine's contract with society is based on the integrity and appropriate use of scientific knowledge and technology. Physicians have a duty to uphold scientific standards, to promote research, and to create new knowledge and ensure its appropriate use.
- **Commitment to maintaining trust by managing conflicts of interest**  
Medical professionals and their organizations have many opportunities to compromise their professional responsibilities by pursuing private gain or personal advantage. Such compromises are especially threatening in the pursuit of personal or organizational interactions with for-profit industries, including medical equipment manufacturers, insurance companies, and pharmaceutical firms.
- **Commitment to professional responsibilities**  
As members of a profession, physicians are expected to work collaboratively to maximize patient care, be respectful of one another, and participate in the processes of self-regulation, including remediation and discipline of members who have failed to meet professional standards.

Medical Professionalism in the New Millennium: A Physician Charter (Abstracted from *Annals of Internal Medicine* 2002; 136:243-246).

*Resources:*

- AAMC Medical Schools Objectives Project: <http://www.aamc.org/meded/msop/start.htm>
- ACGME Outcome Project: <http://www.acgme.org/outcome>
- LCME Accreditation Standards: <http://www.lcme.org/standard.htm>
- Early Detection and Evaluation of Professionalism Deficiencies in Medical Students: One School's Approach. *Papadakis et al. Acad Med* 2001;76:1100-6.
- Medical Professionalism: A Physician Charter. *Annals of Internal Medicine* 2002;136:243-6.
- Unprofessional Behavior in Medical School is Associated with Subsequent Disciplinary Action by a State Medical Board. *Papadakis et al Acad Med* 2004;79(3)244-9.
- Disciplinary Action by Medical Boards and Prior Behavior in Medical School. *Papadakis et al N Engl J Med.* 2005; 353(25):2673-82.
- Medical Student Professionalism: Are We Measuring the Right Behaviors? A Comparison of Professional Lapses by Student and Physicians. *Ainsworth MA, and Szauter KM. Acad Med.* 2006; 81(10).
- USCF School of Medicine- Professional Development and Physicianship Forms – [http://medschool.ucsf.edu/professional\\_development/professionalism/index.aspx](http://medschool.ucsf.edu/professional_development/professionalism/index.aspx), with permission.

## UT Southwestern Medical Student Code of Professional Conduct

As a student at the University of Texas Southwestern Medical School, I understand that it is a great privilege to study medicine. Over the course of my training, I will assume extraordinary responsibility for the health and well-being of others. This undertaking requires that I uphold the highest standards of ethical and compassionate behavior. Accordingly, I have adopted the following statement of principles to guide me throughout my academic, clinical, and research work. I will strive to uphold both the spirit and the letter of this code in my years at UT Southwestern and throughout my medical career.

### **HONESTY**

- I will maintain the highest standards of academic honesty.
- I will neither give nor receive aid in examinations or assignments unless the instructor expressly permits such cooperation.
- I will be truthful with patients and will report accurately all historical and physical findings, test results, and other information pertinent to the care of the patient.
- I will conduct research in an unbiased manner, report results truthfully, and credit ideas developed and work done by others.

### **RESPONSIBILITY**

- I will set patient care as the highest priority in the clinical setting.
- I will recognize my own limitations and will seek help when my level of experience or physical or mental health is inadequate to handle a situation on my own.
- I will conduct myself professionally — in my demeanor, use of language, and appearance — in the presence of patients, in the classroom, in health care settings, or in other domains (e.g. social media) in my role as a medical student.
- I will not use alcohol or drugs in any way that could interfere with my clinical responsibilities.
- I will not use my professional position to engage in romantic or sexual relationships with patients or members of their families.

### **CONFIDENTIALITY**

- I will regard confidentiality as a central obligation of patient care.
- I will limit discussions of patients to members of the health care team in settings removed from the public ear (e.g. not in elevators, hallways, cafeterias, social media, etc.).
- I will be truthful with patients and will report accurately all historical and physical findings, test results, and other information pertinent to the care of the patient according to the patient's wishes.

### **RESPECT FOR OTHERS**

- I will uphold a classroom atmosphere conducive to learning.
- I will treat patients and their families with respect and dignity both in their presence and in discussions with other members of the health care team.
- I will interact with patients in a way that ensures their privacy and respects their modesty.
- I will interact with all members of the health care team including peers in a considerate and cooperative manner.
- I will not tolerate discrimination on the basis of race, gender, religion, sexual orientation, age, disability, or socioeconomic status.
- I will judge my colleagues fairly and attempt to resolve conflicts in a manner that respects the dignity of every person involved.

### **EXPECTATIONS OF FACULTY, RESIDENTS, AND FELLOWS**

- I have the right to expect clear guidelines and request clarification regarding assignments and examinations, as well as to have testing environments that are conducive to academic honesty pursuant to student grievance procedures.
- I cannot be compelled to perform procedures or examinations which I feel are unethical or beyond the level of my training, and I have the right to raise such concerns pursuant to student grievance procedures.
- I have the right not to be harassed and not to be subjected to romantic or sexual overtures from those who are supervising my work and to utilize university policy to address any such concern or complaints.
- I have the right to be challenged to learn, but not to be abused or humiliated, and to raise concerns pursuant to student grievance procedures.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

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## **Description of the UT Southwestern Physicianship Evaluation Form for Pre-Clerkship Medical Students**

This Physicianship evaluation indicates that a student needs help developing professionalism skills. A faculty member and a course director who are concerned about a student's behavior will give feedback to the student and make suggestions for improvement. If the behavior is repeated or is initially serious enough, then a Physicianship Evaluation Form will be completed, reviewed with the student, and then forwarded to the Associate Dean for Student Affairs, MC 9006.

The following are examples of some behaviors that would warrant a Physicianship form: a student repeatedly does not show up for a patient-related activity, such as the weekly Colleges session, without appropriate communication with the mentor; a student is repeatedly tardy to small group meetings; a student fails to complete assignments; or a student demonstrates disruptive behavior in lecture. If a first or second-year student receives one or more professionalism evaluation forms, he/she meets with Associate Dean for Student Affairs for counseling and remediation. Reference to these sessions is not made in the Medical Student Performance Evaluation (MSPE). However, if a student receives two or more Physicianship evaluations in the Pre-Clerkship Period and receives a subsequent form in the Clerkship or Post Clerkship Periods, or if the unprofessional behavior is sufficiently serious or egregious, then student is referred to the Student Promotions Committee (SPC), and these evaluations and issues are mentioned in the MSPE (unless deemed otherwise by the SPC).

In all cases, the Student Promotions Committee has complete discretion to determine what constitutes a professionalism deficiency and to take appropriate action.

If you have any questions about the performance criteria, please contact Associate Dean for Student Affairs at (214) 648-2168.

**UT SOUTHWESTERN MEDICAL SCHOOL  
PHYSICIANSHIP EVALUATION FORM  
FOR PRE-CLERKSHIP STUDENTS**

\_\_\_\_\_  
Student Name (*type or print legibly*)

\_\_\_\_\_  
Student I.D. Number

\_\_\_\_\_  
Course Director

\_\_\_\_\_  
Course (*Dept. & Course No.*)

\_\_\_\_\_  
Course Director's Signature

\_\_\_\_\_  
Quarter / Year

Date this form was discussed with the student \_\_\_\_\_

The student has exhibited one or more of the following behaviors that need improvement to meet expected standards of professionalism.

**This student needs further education or assistance with the following: (check all that apply)**

**1. Reliability and responsibility**

- a. Fulfilling responsibilities in a reliable manner.
- b. Attendance on time at required activities.
- c. Learning how to complete assigned tasks.

**2. Self-improvement and adaptability**

- a. Accepting constructive feedback
- b. Recognizing limitations and seeking help
- c. Being respectful of colleagues and patients
- d. Incorporating feedback in order to make changes in behavior
- e. Adapting to change

**3. Relationships with students, faculty, staff and patients**

- a. Establishing rapport
- b. Being sensitive to the needs of patients
- c. Establishing and maintaining appropriate boundaries in work and learning situations
- d. Relating well to fellow students in a learning environment
- e. Relating well to staff in a learning environment
- f. Relating well to faculty in a learning environment

**4. Upholding the Medical Student Statement of Principles**

- a. Maintaining honesty
- b. Contributing to an atmosphere conducive to learning
- d. Respecting the diversity of race, gender, religion, sexual orientation, age, disability or socioeconomic status
- e. Resolving conflicts in a manner that respects the dignity of every person involved
- f. Using professional language and being mindful of the environment
- g. Protecting patient confidentiality
- h. Dressing in a professional manner

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## **Description of the UT Southwestern Physicianship Evaluation Form for Clinical Students (Clerkship and Post-Clerkship)**

Professionalism will be assessed in a standardized way on all clerkships and post-clerkship courses. Students who do not demonstrate adequate professional and personal attributes (e.g. all who receive ratings of 1 or 2 on their final evaluation in Professional Attributes and Responsibilities, Self-Improvement and Adaptability, Relationships with Patients, or Interpersonal Relationships with other members of the Health Care Team; or, at the discretion of the course or clerkship director, those who receive ratings between 2 and 3 in any of the above categories) or via feedback from the attending(s) or direct observation will be evaluated further by the clerkship director. If the concerns are found to have merit, the clerkship or course director will complete a "Physicianship Evaluation Form" to document the areas in which improvement is needed.

Timely feedback to students whenever information becomes available is a goal of this evaluation process. The clerkship director or faculty attending is encouraged to meet with a student who does not meet professionalism standards as soon as concerns are raised prior to the end of the rotation. The purpose of this meeting is to discuss ways in which performance can be improved, thus allowing the student adequate opportunity to make appropriate changes. Such feedback meetings during the clerkship with appropriate documentation, though strongly encouraged, are not required in order to submit a Physicianship Evaluation Form.

In most cases, a Physicianship Evaluation form should be completed prior to the submission of final grades to the Office of Enrollment Services. The clerkship or course director will meet with the student to review the form. To document this process, the student is invited to sign and date the form and may respond to the evaluation by providing additional information. The course/clerkship director then files the completed form with the Associate Dean for Student Affairs, who subsequently meets with and counsels the student on the behaviors of concern and works with the clerkship director to assist the student in the development of a remediation plan.

Students may also be given a non-passing grade in the clerkship for failing to demonstrate appropriate personal and professional attributes required for a physician.

If a student receives one Physicianship Evaluation form in the clinical years, it will generally not be referred to in the Medical Student Performance Evaluation (MSPE) or escalated to the Student Promotions Committee unless the behavior described is egregious. Reports of subsequent Physicianship Evaluations will be mentioned in the MSPE, along with any teaching plans that were developed to assist the student. Should a student receive a second Physicianship Evaluation form after the MSPE has been transmitted, the school will notify residency program directors of the ongoing concerns about performance in the domain of professionalism. Students who receive two or more Physicianship evaluations in the clinical years will be referred to the Student Promotions Committee (SPC) for review of the deficiencies. The SPC can recommend appropriate action, up to and including dismissal. Appeals of academic decision by the SPC may be made to the SPC, and subsequently to the Dean, in accordance with EDU-402 Academic Decisions.

In all cases, the Student Promotions Committee has complete discretion to determine what constitutes a professionalism deficiency and to take appropriate action.

**UT SOUTHWESTERN MEDICAL SCHOOL  
PHYSICIANSHIP EVALUATION FORM  
CLERKSHIP AND POST-CLERKSHIP**

\_\_\_\_\_  
Student Name (*type or print legibly*)

\_\_\_\_\_  
Student I.D. Number

\_\_\_\_\_  
Clerkship or Course Director

\_\_\_\_\_  
Course (*Dept. & Course No.*)

\_\_\_\_\_  
Clerkship or Site Director's Signature

\_\_\_\_\_  
Block / Year / Location

Date this form was discussed with the student \_\_\_\_\_

A student with a pattern of the following behavior has not sufficiently demonstrated professional and personal attributes for meeting the standards of professionalism inherent in being a physician:

**This student has not met the following core components of medical professionalism.**

*Check the appropriate categories. Comments are required.*

**1. Reliability and responsibility:**

- a. Fulfilling responsibilities to patients or to other health care professionals without the need for continual reminders.
  - b. The student can be relied upon to complete tasks.
  - c. The student attends all required activities and is punctual.
  - d. The student maintains the highest standards of academic honesty related to assignments, examinations, and in patient care duties and documentation. .
- \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**2. Effort toward self-improvement and adaptability:**

- a. The student is accepting of constructive feedback.
  - b. The student recognizes his/her own limitations and seeks help
  - c. The student incorporates feedback in order to make changes in behavior.
  - d. The student accepts blame for failure, or responsibility for errors.
  - e. The student is respectful of colleagues and patients during times of stress.
  - f. The student demonstrates adaptability to change.
- \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**3. Relationships with patients and families as well as members of the health care team:**

- a. The student establishes rapport with patients or families.
- b. The student is sensitive to the patient's or families' feelings, needs or wishes.
- c. The student establishes and maintains appropriate boundaries in work and learning situations with patients or members of their families.

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- d. The student demonstrates empathy.
  - e. The student demonstrates a personal commitment to honoring the wishes of the patients.
  - f. The student functions well within a health care team.
  - g. The student is sensitive to the needs, feelings, and wishes of the health care team members.
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**4. Upholding the Medical Student Statement of Principles**

- a. Maintaining honesty
  - b. Contributing to an atmosphere conducive to learning
  - c. Respecting the diversity of race, gender, religion, sexual orientation, age, disability or socioeconomic status
  - d. Resolving conflicts in a manner that respects the dignity of every person involved
  - e. Using professional language and being mindful of the environment
  - f. Protecting patient confidentiality
  - g. Dressing in a professional manner
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**5. Please comment on an appropriate plan of action to pursue when counseling the student.**

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**This section is to be completed by the student.**

**6. My comments are: (optional)**

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**7. I have read this evaluation and discussed it with the clerkship director.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

## **Description of the UT Southwestern Institutional Physicianship Evaluation Form**

Professionalism is a core competency for UT Southwestern medical students and is fundamental to the practice of medicine.

Students are expected to demonstrate adequate professional and personal attributes both within and outside the boundaries of a course or clerkship. If unprofessional behaviors are noted outside of course work or clinical experiences but in the context of their role as a medical student at UT Southwestern, students will be subject to receiving an Institutional Physicianship Form from the Associate Dean for Student Affairs, rather than course or clerkship directors. Therefore, this category of evaluation is called "Institutional Physicianship." The evaluation describes areas in which improvement in professional performance is needed, and is parallel to and includes the standard physicianship evaluation criteria: ability to meet professional responsibilities; ability to improve and adapt; and ability to establish adequate relationships with faculty and administrative personnel.

The following examples describe the kinds of behavior that would warrant an institutional professionalism evaluation: a student does not respond in a reasonable manner to multiple communications from the Offices of Enrollment Services/Medical Education, Student Affairs or his/her College mentor; a student does not meet the requirements that are in place to progress to clinical responsibility, including but not limited to receiving required immunizations, completed necessary training, and scheduling and completing USMLE Step 1 and Step 2 by the required dates; a student repeatedly and after feedback is disrespectful to staff.

Rapid, timely feedback to students is a primary goal of this evaluation process and will be prioritized whenever information becomes available. An institutional physicianship evaluation will be completed and submitted after attempts to give the student feedback about these issues have been unsuccessful. Such feedback, though strongly encouraged, is not required in order to submit an institutional physicianship evaluation. The Associate Dean for Student Affairs will meet with the student to discuss ways in which unprofessional behavior can be improved, thus allowing the student adequate opportunity to make appropriate changes. To document this process, the student will be invited to sign and date the form and may respond to the evaluation by providing additional information.

The academic consequence of receiving an institutional physicianship evaluation is generally the same as receiving a physicianship evaluation from a course or clerkship director. If a pre-clerkship student receives one or more physicianship evaluations, s/he meets with the Associate Dean for Student Affairs for counseling and remediation. Reference to these sessions is generally not made in the Medical Student Performance Evaluation (MSPE). However, if a student receives two or more physicianship evaluations in the pre-clinical years and subsequently receives one or more physicianship evaluations in the clerkship or post clerkship periods, or receives two or more physicianship evaluations in the clerkship or post clerkship periods, or if the behavior described is sufficiently serious or egregious, then issues concerning the student's professional behavior are mentioned in the MSPE. Should a student receive a second professionalism evaluation in the post clerkship period after the MSPE has been transmitted, the school will notify residency program directors of the ongoing concerns about performance in the domain of professionalism.

Students who receive two or more physicianship evaluations in the clinical years (or more than 1 physicianship evaluation in the pre-clerkship years and then an additional one in the clinical years) will be referred to the Student Promotions Committee (SPC) for review of the deficiencies and issues are mentioned in the MSPE as described above (unless deemed otherwise by the SPC). If you have questions about the institutional professionalism process or evaluation criteria, please contact Associate Dean for Student Affairs at (214) 648-2168.

**UT SOUTHWESTERN MEDICAL SCHOOL  
INSTITUTIONAL PHYSICIANSHIP EVALUATION**

\_\_\_\_\_  
Student name (*type or print legibly*)

\_\_\_\_\_  
Student I.D. Number

\_\_\_\_\_  
Signature of the Associate Dean

\_\_\_\_\_  
Date form completed

Date this form was discussed with the student \_\_\_\_\_

The institutional physicianship evaluation has been submitted on the student because s/he has demonstrated insufficient professional and personal attributes to meet the standards of professionalism inherent in being a physician:

**The student needs further education or assistance with the following:**

*Check the appropriate categories. Comments are required.*

**1. Reliability and professional responsibility:**

The student does not need continual reminders to fulfill responsibilities that are essential to being a medical student at UT Southwestern. These responsibilities include but are not limited to: responding in a reasonable manner to communications from the Offices of Medical Education or Student Affairs, Office of Enrollment Services, or the College mentor; completing the requirements necessary to progress to clinical responsibility, including completing required immunizations and scheduling and completing USMLE Step 1 and Step 2 by the required dates.

- a. Can be relied upon to communicate effectively and in a timely manner.
- b. Completes essential responsibilities in a timely manner.
- c. Learns how to complete assigned tasks.

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**2. Self-improvement and adaptability:**

- a. Accepting constructive feedback.
- b. Recognizing limitations and seeking help
- c. Incorporating feedback in order to make changes in behavior
- d. Accepting responsibility for failure or for errors.
- e. Being respectful during times of stress.
- f. Adapting to change

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