

## Appendix A

### Guidelines for Medical Schools Regarding Academic Transcripts

An academic transcript is a certified document intended for use by parties outside the educational institution and is an unabridged summary of the student's academic history at that institution. It is distinguished from the larger body of information that may be contained in the student's educational or academic record. The educational or academic record is an internal document that also reflects the student's unabridged academic history at the institution but that may contain additional data useful internally yet not needed externally.

1. Medical schools are encouraged to follow the recommendations of the American Association of Collegiate Registrars and Admissions Officers (AACRAO) as published in *Academic Record and Transcript Guide*. Where the medical school is part of a university, schools are encouraged to consult with the university registrar to ensure that the medical school transcript is in compliance with university requirements.
2. The academic transcript should reflect the total, unabridged academic history of the student at the institution. All courses should be recorded in the academic period in which the course was taken and graded.
3. Essential elements of an academic transcript include: name of institution, location of institution, name of student, terms of attendance, withdrawal date, course identification number and title, credit hours for each course, unit of credit, grade in each course, summary of transfer credit accepted and the name of the institution from which the credit is accepted, any instances of academic suspension or dismissal and the date, title of degree awarded, date degree is conferred, program studied (i.e., medicine), date of issuance of the transcript, and date of last entry to the transcript. Name changes should be recorded on transcripts only while the individual is enrolled and the name can be changed concurrently in the AAMC database.
4. Each student should have a unique identification number that is recorded on the transcript.
5. The following items are not recommended for inclusion on the academic transcript (although the institution may wish to retain some of these items in the educational or academic record): student's address, place of birth, gender, ethnicity, marital status, religious preference, disability, and INS status; secondary school data; prior postsecondary school data; academic probation; class rank.
6. Medical schools should record on a transcript only that academic information under the purview of the school's faculty of medicine. Consequently, United States Medical Licensing Examination (USMLE) results and election to Alpha Omega Alpha (AOA)

should not be included on the transcript. However, honors awarded by the school's faculty, either in course or at graduation, may be included on the transcript.

7. It is essential that the transcript include notation of any academic suspension or dismissal since this is an academic action that interrupts the student's continued enrollment. Similarly, a suspension for academic misconduct (e.g.; plagiarism) should be included on the transcript. While an institution may want to include academic probation in the educational database, it is not desirable to include this status on an academic transcript since the definition of academic probation varies from school to school. Thus, the item serves no useful purpose on an academic transcript which, by definition, is intended for use outside the school. In any event, if academic probation is included on the transcript, it is vital that this term be clearly defined in the transcript legend or key.

8. Where a student is dismissed, the transcript should record the initial date of dismissal. If there is a subsequent appeal, the result of this appeal and the date of this decision should be recorded, as well. If the student is permitted to continue in the curriculum pending the outcome of an appeal, this should be noted on the transcript with a footnote.

9. In the case of a student who is a candidate for two degrees (e.g., M.D./Ph.D.), courses which are given combined or dual credit toward both degrees should be so noted.

10. The transcript should include the title and number for each course taken by the student and should show the academic period in which the course is taken. Both required and elective courses should be courses that have been developed and approved by faculty following the school's procedures for approval of courses. All courses, including elective courses, should have an identification number, title, and course description and appear in the school's bulletin or elective handbook, or both. In the case when a student is currently enrolled, courses that the student is taking are listed with an indication that these courses are in progress.

11. The transcript should include a legend that explains the grading system, symbols, inclusive dates for grading systems where changes have occurred, honors, unit of credit, notation of courses in progress. If the school requires a passing score on USMLE for promotion and/or graduation, this policy should be included in the transcript legend. Additionally, the legend should include the accreditation status of the school, Family Educational Rights and Privacy Act (FERPA) disclaimer, and an explanation of how the authenticity of the transcript can be determined.

12. Issuing official academic transcripts is a central and unique function of the registrar's Office. Transcripts should be issued only upon written request of the student/alumnus/a who has properly identified himself/herself with an ID card, driver's license, or signature on a request form or letter. Telephone and e-mail requests for transcripts should not be accepted because security and authenticity cannot be ensured.

- a. A transcript is issued only at the written request of the student or alumnus/a or a specified third party whom the student or alumnus/a has authorized, in writing, to obtain a transcript for a specific stated purpose. The request must be signed and dated; the third party must be specified and the release must state that the school may release the student's/alumnus' transcript for that purpose.
  - b. A transcript ceases to be an "official" transcript if it is copied or faxed. An original transcript must not be transferred to a third party since doing so violates FERPA.
  - c. The registrar's office must maintain a Transcript Transmittal Record for each student/alumnus. This record must show the date and party to whom a transcript is sent and the purpose for which the transcript is issued. Transcripts issued to the student or alumnus/ should say "Issued to the Student" rather than "Unofficial Transcript" since the latter could be altered easily.
  - d. If the school has a policy that requires withholding transcripts for default on student loans or other reasons, that policy should be stated clearly in both the bulletin and the student handbook. Transcript holds for financial reasons should be limited to charges that relate directly to the education that is reported on the student's/alumnus' academic transcript.
  - e. If there is an institutional charge for issuing a transcript, this fee should be modest.
  - f. Faxing a transcript should be avoided unless there is an urgency that requires immediate transfer of a transcript. If a transcript is faxed, it is important that proper procedures for the transcript request be used (#12.a.) --- a properly signed fax request may be accepted. Additionally, a transcript that is faxed should be considered "unofficial" and used only until an original can be sent. A cover memorandum should describe the document as confidential information intended for the exclusive use of the addressee.
13. Where a transcript is to be transmitted electronically (e.g., ERAS, SPEEDE), it is recommended that the system used require that the sending and receiving stations be authenticated.
14. Schools are encouraged to take a number of steps to protect the institution from fraudulent transcripts. The use of special paper, multicolored pens for the registrar's signature, metered postage rather than postage stamps, and inclusion of a physical description of the transcript in the transcript key are helpful ways to improve security. Additionally, it is recommended that the transcript include an institutional statement regarding the school's plans to pursue vigorously all allegations of security breaches with respect to transcripts.

15. The educational record database and academic transcripts should be stored in a secure, fireproof location. Access to the database and to the area where documents and equipment (records, stationery, and the school seal and signature equipment) are stored should be limited to authorized personnel only.

16. A medical school should have a disaster plan for the secure storage and recovery of educational records and academic transcripts that may be damaged or destroyed in the event of a catastrophic disaster. Normally, this entails the identification of a remote location where duplicate records are maintained. It is important for the school to develop an appropriate protocol for the regular duplication and transfer of records to the remote location.

## Appendix B

### Reaffirming Institutional Standards of Behavior in the Learning Environment

The medical learning environment is expected to facilitate students' acquisition of the professional and collegial attitudes necessary for effective, caring, and compassionate health care. The development and nurturing of these attitudes is enhanced and, indeed, based on the presence of mutual respect between teacher and learner. Characteristic of this respect is the expectation that all participants in the educational program assume their responsibilities in a manner that enriches the quality of the learning process.

While these goals are primary to a school's educational mission, it must be acknowledged that the social and behavioral diversity of students, faculty, residents, and staff, combined with the intensity of the interactions between them, will, from time to time, lead to alleged, perceived or real incidents of inappropriate behavior or mistreatment of individuals. Examples of mistreatment include sexual harassment; discrimination or harassment based on race, religion, ethnicity, gender, sexual orientation, physical handicap or age; humiliation, psychological or physical punishment and the use of grading and other forms of assessment in a punitive manner. The occurrence, either intentional or unintentional, of such incidents results in a disruption of the spirit of learning and a breach in the integrity and trust between teacher and learner.

The diversity represented by the many participants in the learning process requires the medical school to reaffirm, on a periodic and regular basis, its expectations of faculty, students, residents and staff. The setting forth of the institution's standards of behavior should be undertaken in a manner that encourages the exchange of ideas among all who participate in the learning process. This process of codifying acceptable behavior should encourage recognition of the nuances of interpersonal behavior such that individuals are sensitive to the interpretation of their actions. Clear examples of appropriate and inappropriate behavior, particularly in regard to the interaction between teacher and learner, should be delineated and disseminated to faculty, students, residents, and staff. The establishment of standards of behavior should reinforce the institution's commitment to the tenets of acceptable professional behavior and the assurance of dignity in the learning environment.

In addition to the establishment of standards of behavior, medical schools also should establish mechanisms and institutional procedures for dealing with behavior that is not in keeping with institutional expectations. These procedures should include:

- (1) a nonthreatening and easily accessible mechanism for the submission and processing of reports or allegations;
- (2) a means of determining if further investigations is warranted;
- (3) equitable methods of investigating and adjudicating complaints;

(4) guarantees of rights of due process; and

(5) appropriate protection of complainant and accused.

The school should have a specific written policy for the provision of confidential counseling to students, faculty, residents, and staff. Schools should develop mechanisms that will serve to ensure the observance of the institution's standards of acceptable behavior.

## Appendix C

### Guidelines for Medical Schools Regarding Visiting Medical Students from Other LCME Medical Schools

***(Please note that the AAMC's Visiting Student Application Service began its pilot year in 2008. This system is designed to streamline the application process, but requirements below are still applicable.)***

**Introduction:** During the fourth year of medical school, it is common for U.S. medical students to seek elective rotations at other medical schools, usually in the United States but sometimes abroad. Some U.S. medical schools receive medical students from overseas as visiting medical students. Increasingly, the complexity of procedures and paperwork that is entailed has risen significantly and has added an extra burden of responsibility on staff members. Questions have arisen regarding appropriate fees, medical liability and medical malpractice coverage, health insurance, immunization requirements, scheduling, performance evaluation, housing and failure to register and/or appear at an assigned rotation.

No medical school is required to receive visiting students. Each school must establish its own policies and procedures. In establishing these, each school must determine its limits in receiving visiting students, both with respect to insuring quality education for its students and appropriate care of patients. These guidelines are designed to assist schools in streamlining the process for the benefit of both students and schools. The term *home school* is used to denote the school where the medical student is expected to receive the M.D. degree. The term *host school* is used to denote the medical school where the student is taking an elective as a visiting student.

- 1. Application for Visiting Electives:** Each host school is encouraged to establish centralized procedures for visiting students to that school. Documentation, at minimum, should include: biographical information, verification of completion of core clerkships, a statement from the home school supporting the student's request, health insurance information, medical liability and/or malpractice insurance, immunization information and the evaluation form from the home. Information should be provided regarding the host school's technical standards and the procedures for requesting accommodation. Host schools should have well-publicized schedules for notification of decisions regarding applications for electives. Host schools are encouraged to publish elective information on a Web site. Once a host school has accepted a student for an elective, the host school should have a procedure consistent with university policy, which assures that the presence of the visiting student during the specified time period is recorded.
- 2. Faculty Authority:** Typically, a visiting student will complete core clerkships at his/her home school prior to taking a visiting elective and meet any other requirements the home school may have. The home school has the authority to determine the criteria on which credit is awarded.

3. **Fees:** Usually, a visiting U.S. medical student continues to pay tuition at his/her home school while on a visiting elective. Fees established by host schools for visiting students, if any, should be minimal. The fee should be refundable only in the event that the elective requested by the student is not available. All “no-shows” should be nonrefundable. Fees and refund policies should be well publicized.
4. **Health Insurance:** A host school should ascertain that any visiting student coming for a visiting rotation is covered by health insurance. If the student is not covered by his/her home school, the host school should not receive the student unless a short-term package of health insurance is available. It is recommended that the host school's application form for visiting students request information and documentation on this topic.
5. **Medical Liability and/or Medical Malpractice:** A host school should ascertain that any visiting student coming to the school for a visiting rotation is covered for medical liability and/or malpractice. Some host schools may incorporate the visiting student into the host school's or medical center's group medical malpractice coverage. The host school is expected to document the coverage prior to receiving the student for an elective rotation. It is recommended that the host school's application form for visiting students request information and documentation on this topic.
6. **Immunization:** Immunization requirements for visiting students should be the same as those for students at the school the visiting student will be joining. Immunization requirements should be well publicized in the elective catalog of the school. It is recommended that a standard form documenting the individual's immunization record be included as part of the application and registration process for a visiting elective.
7. **Performance Evaluation:** The home school is responsible for determining what credit will be awarded. Each home school should describe in advance its evaluation requirements. It is recommended that any evaluation form that will need to be completed for the home school be submitted with any application form that the host school requires.

While the home school may require a particular form, it is the responsibility of the host school to evaluate the student using the same performance standards as are used for all students at the host school, including academic and clinical performance, ethical and professional behavior.

Completed evaluations should be transmitted to the home school's designated authority by the host school's designated authority.

8. **Housing:** A visiting student is responsible for securing his/her own housing during the elective. Host schools may facilitate the process by providing information to incoming visiting students regarding housing options in the area.
9. **Registration:** Each visiting student should be required to report and sign in at the host school on arrival for a visiting elective and should not begin the rotation until the sign-in is

complete. A visiting student should be considered to be under the aegis of the host school. The student record and transcript at the home school should document this attendance.

When a visiting student fails to appear for a scheduled visiting rotation, it is recommended that the host school notify the student's home school.

**10. Elective Catalog:** A medical school should publish annually, in print and/or on the Web, a complete list of all elective rotations, procedures for applying, prerequisites, requirements for health insurance, medical malpractice insurance, immunizations and contact names/fax and e-mail addresses.

**11. Student Status:** Once a visiting student has started an elective, that individual should have access to those student services at the home school that are important to the educational purpose of the elective, such as the library and computing center.

## Appendix D

### **American Association of Collegiate Registrars and Admissions Officers (AACRAO)**

The American Association of Collegiate Registrars and Admissions Officers (AACRAO) is a nonprofit, voluntary, professional association of more than 9,000 higher education admissions and registration professionals who represent approximately 2,300 institutions, in more than 35 countries.

The mission of AACRAO is to provide professional development, guidelines, and voluntary standards to be used by higher education officials regarding the best practices in records management, admissions, enrollment management, administrative information technology, and student services. It also provides a forum for discussion regarding policy initiation and development, interpretation, and implementation at the institutional level and in the global educational community.

The AACRAO Web site ([www.aacrao.org](http://www.aacrao.org)) contains valuable information for student records administrators, as well as access to publications of interest on various topics, including FERPA, fraudulent academic credentials, grading practices, technology, and legal issues.

## Appendix E

### *A Year in the Life of A registrar*

#### **Annual Academic Calendar of Events and Related Functions for registrar**

*(Timing of some functions may depend on the school academic calendar. Therefore, this should be used as a guide to develop your own functional calendar)*

#### **July**

1. Registration for new students (depending on your academic calendar)
2. Registration for M4 to include ERAS Orientation and graduation applications; cap and gown measurements
3. Registration for M3 (depending on your academic calendar) and other program students (if applicable)
4. Enrollment/waiver process for student insurance (new students only)
5. Build billing tables for upcoming academic year (if applicable)
6. E-mail to third-year course directors giving deadline for all remaining grades for third year
7. File purge and reorganization of files for new students and graduating students
8. Upcoming registration mailings and/or e-mail
9. Roll graduating student data to alumni database
10. Assist with planning orientation activities, including White Coat Ceremony

#### **August**

1. Registration for returning students (depending on academic calendar)
2. Registration for new and returning students (other programs – if applicable)
3. Complete class-level promotions in AAMC Student Record System (SRS)
4. Update enrollment tables
5. Post all remaining third-year grades
6. Run ERAS transcripts and scan into ERAS
7. Prepare files for MSPE letter creation
8. Criminal background check summary report for dean and student affairs dean

#### **September**

1. ERAS Kick-Off
  - a. transmit twice daily
  - b. scan documents as received
2. Student directory (compilation and distribution)
3. SSCR (Department of Education Data reporting – online – depending on your reporting schedule)
4. State legislature reports
5. Grades for promotions committees
6. Convocation – regalia may be needed

### **October**

1. Continue ERAS scanning and transmitting
2. Proof MSPE
3. Scan and transmit MSPE letters (ERAS will automatically release on November 1)
4. Grades for promotions and evaluation committee
5. IPEDs fall reporting
6. State and regional enrollment reports
7. Verify Matriculating Students Report (AAMC)

### **November**

1. Continue ERAS scanning and transmitting
2. Grades for promotions committees
3. AAMC and LCME Enrollment Reports
4. Clinical rotation scheduling (if applicable)

### **December**

1. Distribute grade rosters to all course directors
2. Post grades
3. Grades for promotions committees
4. Order any December diplomas
5. Continue ERAS scanning and transmitting
6. Prepare students for clinical scheduling (if applicable)

### **January**

1. Spring registration (if applicable)
2. First draft of academic calendars for next academic year
3. Begin process of updating elective catalog
4. Grades for promotions committees
5. Continue ERAS scanning and transmitting
6. State accreditation body enrollment report
7. Review claims and utilization reports for student health insurance, solicit quote for premium for next year, review coverage and benefits and determine if there is a need to consider making a change.
8. Clinical scheduling for third- and fourth-year students (if applicable)

### **February**

1. Order student regalia and diplomas for commencement
2. E-mail to faculty for faculty commencement regalia orders
3. Grades for promotions committees
4. Finalize academic calendars
5. Finalize elective catalog
6. Update elective compendium on AAMC Web site
7. SSCR (Department of Education Data reporting – online – depending on your reporting schedule)
8. Update tuition and fee charges (all programs)
9. Update commencement guidebook
10. Clinical scheduling through VSAS begins (if applicable)

### **March**

1. Grades for promotions committee meetings
2. Assist with unmatched students in anticipation of MATCH Day
3. Prepare MATCH Day packets, which include:
  - a. Commencement Guidebook (update annually)
  - b. Copy of unofficial transcript
  - c. Cover memo
  - d. GQ information and token (M.D. only)
  - e. Match Results Release Form
4. Order faculty regalia for commencement
5. Collect criminal background check releases and conduct CBCs on rising fourth years.
6. Clinical scheduling through VSAS (if applicable)

### **April**

1. Aggressively track M4 grades.
2. Receive and verify accuracy of diplomas.
3. Monitor completion of Graduation Questionnaire (M.D. only)
4. Post grades
5. Grades for promotions committees
6. IPEDs spring reporting
7. Clinical scheduling through VSAS (if applicable)

### **May**

1. Distribute regalia orders for MSM faculty and students.
2. Prepare exit packets (unofficial and official copy of transcript, cover memo, certified and uncertified copies of diplomas)
3. Commencement and confer degrees in the system
4. Pre-registration packets for M1 & M2 (rising M2 & M3)
5. Criminal Background Checks for rising M3
6. Promotions committee meetings to clear students for graduation
7. Begin planning for orientation
8. Final mailing to new students (depending on their start date)

### **June**

1. Receive data and files on anticipated new students
2. Create new academic terms in database
3. Create new course sections in database
4. Create any new courses in database
5. Update class levels in database
6. Certify graduation roster in SRS and NBME
7. Build tuition and fee billing tables based on tuition and fee schedules
8. Load ERAS

9. SSCR (Department of Education data reporting – online – depending on your reporting schedule)
10. Continuing students' transcripts or system grade release to financial aid to verify satisfactory academic progress
11. Final mailing to new students (depending on their start date)
12. Student clinician ceremony
13. Purge records per the institution's purge policy

# Life of a Medical Student Record

