

# STUDENT HANDBOOK

Barry University School of Podiatric Medicine 320 NW 115<sup>th</sup> Street Miami Shores, FL 33168



## **Table of Contents**

Welcome Letter	4
I. Historical Overview of the Barry University School of Podiatric Medicine	5
II. Academic Calendar 2025-2024	5
III. Mission and Vision Statements	7
IV. Program Goals and Programmatic Outcomes	8
V. Accreditation Information	9
VI. Directory	10-15
VII. Academic Curriculum	16-19
A. Pre-Clinical Science Objectives	20
B. Clinical Objectives	20
C. Clinical Competencies	21-28
VIII. Academic Life	29
A. Registration	29
B. Attendance	30-31
C. Examination Procedures and Protocols	31-32
D. Accessibility Services	32-33
E. Student Conduct	33-43
F. Academic Advisement	43-44
G. Syllabi	44
H. Grading Scale and Calculation of Grades	44-45
I. Transcripts	45
J. Incomplete Grades	45
K. Make-up Exam Policy	46
L. Reporting and Recording of Grades	47



	M. Family Educational Rights and Privacy Act (FERPA)	47
	N. Academic Standing	48-50
	O. Withdrawal	51
	P. Graduation Requirements	54-55
	Q. Students Complaints and Grievances.	55-57
	R. Student Government GPA Requirement	57
IX. Fin	nancial Aid Policies	58
X. Tui	tion, Fee Schedule and Refund Policy	59-62
	A. Tuition and Fee Schedule	60-61
	B. Refund Policy	61-62
XI. He	ealth, Safety, and Security	63-70
	A. Health	63
	B. Student Health Insurance	63-69
	C. Campus Safety	69-70



Dear Class of 2029,

It is with great pride and excitement that I welcome you to Barry University School of Podiatric Medicine. Being selected for this program is a significant achievement, and your dedication, academic strength, and passion for healthcare have distinguished you from a highly qualified group of applicants. You are now part of a vibrant and diverse learning community, and we are honored to accompany you on this next chapter of your professional journey.

As a proud alumna of this very program, I know firsthand the transformative experience that awaits you. Like you, I once sat where you are now filled with excitement, anticipation, and a desire to make a meaningful impact through medicine. It is a true honor to now welcome you to the institution that helped shape my own journey.

You are entering a supportive, inclusive, and dynamic environment where excellence in education, hospital-based clinical training, and research is not only expected; it is deeply nurtured. The next four years will challenge you intellectually, emotionally, and professionally, but they will also empower you with the skills and confidence to succeed in any path you choose.

Our exceptional faculty and staff are here to mentor and support you every step of the way. We encourage open communication and collaboration, and we are committed to being accessible and engaged in your success, both in and outside the classroom and clinic.

At Barry, we don't just teach medicine; we cultivate leaders with compassion, integrity, and purpose. Whether your future leads you into private practice, research, teaching, or public service, know that you are joining a legacy of graduates who make a difference in the world every day.

Congratulations once again on joining the Class of 2029. I look forward to seeing your growth and celebrating your accomplishments, both now and in the years to come.

With sincere enthusiasm and support,

Jacqueline M. Brill, DPM

Class of 1995 Interim Dean



## I. Historical Overview of the Barry University School of Podiatric Medicine

In 1985, Barry University created the School of Podiatric Medicine (BUSPM) as its first venture into professional medical education. In 1997, the Physician Assistant program was established to extend Barry University's role in the education of healthcare providers, and the name of the school was changed to the School of Graduate Medical Sciences to provide the infrastructure necessary to coordinate the academic activities in Podiatric Medicine and Physician Assistant studies into a cohesive unit. The Professional Master of Public Health, a collaborative program of the Schools of Graduate Medical Sciences and Natural and Health Sciences, was established in 2002. The School of Graduate Medical Sciences was renamed the School of Podiatric Medicine in 2008 at which time the Professional Master of Public Health program was moved to the College of Nursing and Health Sciences. In 2017, the Physician Assistant program was moved to the College of Nursing and Health Sciences and the School of Podiatric Medicine is a now stand-alone program.

#### II. Academic Calendar 2025-2026

FALL 2025	
New student orientation	Wed., August 20 – Thur., August 21
Classes begin	Mon., August 25
3 <sup>rd</sup> year clinical orientation	Wed., August 27 – Fri., August 29
Rite of Passage	Fri., August 29
Labor Day (no classes)	Mon., September 1
Junior clinical rotation begins	Wed., September 3
APMLE Part I Retake	Tues., October 7
	(Registration ends Sep. 16)
Last day to withdraw with a "W"	Fri., November 7
Fall OSCE	Fri., November 14
Thanksgiving Holiday (no classes)	Wed., November 26 – Fri., November 28
Classes end	Fri., December 5
Final exam week	Mon., December 8 - Fri., December 12
Clinical Rotations End	Fri., December 19
Christmas Break	Wed., December 24– Thur., January 1, 2026
SPRING 2026	
Classes begin	Mon., January 5
APMLE Part II	Mon, January 5-7, 2026
	Registration begins September 8, 2025



Centralized Residency Interview Program	Thur., January 8 to Tues., January 13,
(CRIP)	2026
Martin Luther King, Jr. Day (no classes)	Mon., January 19
Science and Management Symposium	Wed., January 28 - Sun., February 1, 2026
(SAM), Orlando	
APMLE Part II Retake	February 11-13, 2026
	Registration TBD
Spring Break (no classes)	Mon., March 9 – Fri., March 13
Senior Match	Friday, March 20, 2026
Last day to withdraw with a "W"	TBD
Junior Class Objective Structured Clinical	Friday, March 6
Examination (OSCE)	
Easter Holiday (no classes)	Thurs., April 2 – Sun., April 25
Classes End	April 17
Final exam week	Mon., April 20 through Fri., April 24
Commencement	TBD
APMLE Part II Retake	April 1-3, 2026
	Registration TBD



#### III. Mission and Vision Statements

## **Barry University Mission Statement**

Barry University is a Catholic institution of higher education founded in 1940 by the Adrian Dominican Sisters. Grounded in the liberal arts tradition, Barry University is a scholarly community committed to the highest academic standards in undergraduate, graduate, and professional education.

In the Catholic intellectual tradition, integration of study, reflection and action inform the intellectual life. Faithful to this tradition, a Barry education and University experience foster individual and communal transformation where learning leads to knowledge and truth, reflection leads to informed action, and a commitment to social justice leads to collaborative service.

Barry University provides opportunities for affirming our Catholic identity, Dominican heritage, and collegiate traditions. Catholic beliefs and values are enriched by ecumenical and interfaith dialog.

Through worship and ritual, we celebrate our religious identity while remaining a University community where all are welcome.

## Barry University School of Podiatric Medicine Mission Statement

The mission of the Doctor of Podiatric Medicine program is to graduate skilled podiatric physicians qualified to enter residency training. This is accomplished by excellence in podiatric medical education, fostering life-long learning, expressing a commitment to social justice by serving the local and global community through quality patient care, and encouraging research and medical innovation that promotes the common good.

#### Barry University School of Podiatric Medicine Vision Statement

The vision of the Doctor of Podiatric Medicine program is to train the next generation of highly qualified podiatric physicians to be leaders in the profession.



## IV. Program Goals and Programmatic Outcomes

**Program Goal 1:** Graduate highly educated, competent, professional doctors of podiatric medicine

Programmatic Outcome - 100% pass rate on NBPME Parts I and II

Programmatic Outcome - 100% score on clinical evaluations

Programmatic Outcome - 100% OSCE pass rate

**Program Goal 2**: Implementation of strategic marketing initiatives to recruit a diversified and qualified student body

Programmatic Outcome - Increase visibility of podiatric medicine

Programmatic Outcome - Annual enrollment of 67 new students

**Program Goal 3**: Improve student retention by implementing a collaborative environment that supports academic success.

Programmatic Outcome - 90% of students achieve academic excellence

Programmatic Outcome - 90% of students confirm supportive environment and mentorship

**Program Goal 4**: Develop an Engaged Network of Graduates in Collaboration with the Office of Institutional Advancement (OIA).

Programmatic Outcome - Increase alumni engagement through mentoring, adjunct teaching, and donor participation.

**Program Goal 5**: Integrate emerging technologies into the podiatric medical curriculum to enhance instructional quality, clinical decision-making, and evidence-based care.

Programmatic Outcome - Establish surgical and anatomy simulation labs

Programmatic Outcome - To improve AI literacy across faculty and students



#### V. Accreditation Information

Barry University is accredited by the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) to award baccalaureate, masters, specialist, and doctoral degrees. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097 or call 404-679-4500 for questions about the status of the University.

The School of Podiatric Medicine is accredited by the Council on Podiatric Medical Education (CPME). Accreditation is an indication of public approbation, attesting to the quality of the podiatric medical education program and the continued commitment of the institution to support the educational program. The Council is recognized as the professional institutional accrediting agency for podiatric medical education by the U. S. Department of Education and by the Council for Higher Education Accreditation. For further information, please contact the Council on Podiatric Medical Education at the following address: Council on Podiatric Medical Education, 9312 Old Georgetown Road, Bethesda, MD 20814; (301) 571-9200.



## VI. Directory

## Barry University School of Podiatric Medicine Faculty and Staff Roster

	Name	Position	Telephone	Email	Role
1	Ahmed, Rishad, DPM	Podiatric Medicine Clinician - Tamarac	954-721- 4806	rahmed@barry.edu	Clinician
55	Vacant	Coordinator of Clerkships and Graduate Placement	305-899- 3254		Staff
2	Azari, Hassan, MSc., PhD.	Associate Professor of Anatomy; Director of Anatomy Lab	305-899- 7894	hazari@barry.edu	Pre-Clinical Faculty
3	Becker, Steven, Ph.D	Clinics Administrator	305-981- 5149	sbecker@barry.edu	Administrato r - Staff
4	Brill, Jacqueline, DPM	Interim Dean; Professor of Podiatric Surgery; Residency Director at Jackson North	305-981- 1193	jbrill@barry.edu	Clinical Faculty
5	Butler, Essence	Front Desk Assistant at Tamarac	954-721- 4806	esbutler@barry.edu	Clinical Staff
6	Chbib, Christiane, Pharm. D, Ph.D	Adjunct Faculty, Pharmacology	786-219- 7928	cchbib@barry.edu	Adjunct
7	Constant, Sarmul	Front Desk Assistant at Jackson North	305-981- 1193	sconstant@barry.e du	Clinical Staff
8	Cuffy, Cherison, DPM	Associate Professor of Podiatric Medicine; Director of Clinical Research	305-899- 3692	ccuffy@barry.edu	Clinical Faculty
9	Evans, Michelle	Administrative Assistant III,	305-899- 3261	mevans@barry.edu	Staff



_	T	Γ	ı	1	Τ
		Pre-Clinical			
		Sciences			
10	Farias Martinez, Angie	Medical	305-859-	afariasmartinez@ba	Clinical Staff
		Assistant at	7777	rry.edu	
		HCA Florida			
		Mercy Hospital			
11	Fernandez, Antonio, MD	Professor of	305-899-	anfernandez@barry	Pre-Clinical
		Pre-Clinical	3128	.edu	Faculty
		Sciences			
12	Fletcher, Dave, DMin	Director of	305-899-	dfletcher@barry.ed	Administrato
	, ,	Admissions	3123	u	r - Staff
13	Francillon, Daofca, DPM	1st Year	305-859-	dfrancillon@barry.e	Resident
		Resident at	7777	du	
		HCA Florida			
		Mercy Hospital			
14	Freer, Scott, Ph.D., ATC,	Adjunct	786-684-	sfreer@barry.edu	Adjunct
	LAT, NASM-PES/CES	Faculty,	7232		
		Physical			
		Medicine			
15	Herring, Hannah, DPM	Chief Resident;	305-859-	hherring@barry.ed	Resident
		3rd Year	7777	u	
		Resident at			
		HCA Florida			
		Mercy Hospital			
16	Hill, Shanika, DPM	Associate Dean	305-899-	shill@barry.edu	Clinical
		of Clinical	3972	·	Faculty
		Education;			
		Assistant			
		Professor of			
		Podiatric			
		Medicine			
17	John Baptiste, Shernell	Clinical	954-721-	sjohnbaptiste@barr	Clinical Staff
		Research	4806	y.edu	
		Assistant			
18	Kassis, Jean-Jacques, DPM	Adjunct	305-785-	jkassis@barry.edu	Adjunct
		Faculty,	1204	Drjjkassis@gmail.co	
		Community		m	
		Medicine &			
		Peripheral			
		Vascular			
		Disease			
19	Latif-Jangda, Zaib, DPM	3rd Year	305-859-	zlatifjangda@barry.	Resident
		Resident at	7777	edu	
		HCA Florida			
		Mercy Hospital			
	I	,	I	1	I



20	1	A .12 1	205 622		A 12
20	Lazovic, Gavrilo, MD	Adjunct Assistant Professor, Emergency and Traumatology	305-609- 4219	glazovic@barry.edu glazovic@gmail.co m	Adjunct
21	Lazzaro, LuAnn	Medical Assistant at Tamarac	954-721- 4806	llazzaro@barry.edu	Clinical Staff
22	Lee, Rebecca, DNP, CRNA	Adjunct Faculty (POD), Anesthesiology ; Associate Professor of Anesthesiology and Program Director	305-899- 3230	rmlee@barry.edu	Adjunct
23	Lindor, Sherline, BA	Clinical Coordinator; Assistant to the Associate Dean of Clinical Education	305-899- 3241	slindor@barry.edu	Staff
24	Losito, James, DPM	Professor of Podiatric Biomechanics and Orthopedics; Sports Medicine Fellowship Director	305-899- 3245	jlosito@barry.edu	Clinical Faculty
25	Louissaint, Edwin, DPM	1st Year Resident at HCA Florida Mercy Hospital	305-859- 7777	elouissaint@barry.e du	Resident
26	Montoya, Maria, PhD, MPH, CPH, PMP	Adjunct Faculty, Research Methodology, Epidemiology & Statistics   Library Research Paper	305-899- 3249	mamontoya@barry .edu	Adjunct



27	Murillo, Jenny	Assistant to	305-899-	jmurillo@barry.edu	Staff
28	Nelson, John, DPM	Adjunct Faculty, Clinical Pharmacology & Intro. to Patient Care	3255 305-899- 3249	jnelson@barry.edu	Adjunct
29	Nguyen, Alexander, DPM	Fellow, Sports Medicine	305-859- 7777	anguyen@barry.ed u	Resident
30	Nieves, Yesenia	Office Manager, HCA Florida Mercy Hospital	305-859- 7777	ynieves@barry.edu	Clinical Staff
31	Pedrianes, Vanessa, BsIT, MAA	Director of Operations; Residency Coordinator for HCA Florida Mercy Hospital	305-899- 3250	vpedrianes@barry. edu	Administrato r - Staff
32	Perez, Liset, DPM	3rd Year Resident at HCA Florida Mercy Hospital	305-859- 7777	Lperez@barry.edu	Resident
33	Perez, Stefanie, DPM	2nd Year Resident at HCA Florida Mercy Hospital	305-859- 7777	sperez@barry.edu	Resident
34	Petusevsky, Howard, DPM	Assistant Professor of Podiatric Medicine	954-721- 4806	hpetusevsky@barry .edu	Clinical Faculty
35	Rampersad, Sandra, MBA	Director of Continuing Education; Residency Coordinator for HCA Florida Mercy Hospital;Coord inator, Sports Medicine Fellowship	305-899- 3266	srampersad@barry. edu	Administrato r - Staff
36	Ramsey Irizarry, Charity, DPA, PA-C, DFAAPA	Adjunct Faculty, Physical Diagnosis	954-415- 5574	cramseyirizarry@ba rry.edu	Adjunct



37	Reece, Adam, DPM	2nd Year	305-859-	areece@barry.edu	Resident
	Reces, Adding Drive	Resident at	7777	arecoe@sarry.eau	resident
		HCA Florida			
		Mercy Hospital			
38	Rodriguez, Ianka, CGPA, Office		305-981-	irodriguez@barry.e	Clinical Staff
	CDKA, MHSA, MPH, DHL,	Manager,	1193	du	
	Ph.D	Jackson North			
39	Rodriguez, Jessica, DPM	2nd Year	305-859-	jesrodriguez@barry	Resident
		Resident at	7777	.edu	
		HCA Florida			
	D 1: 1: DD14	Mercy Hospital	205 000	1 1: 01	
40	Rodriguez, Luis, DPM	Associate	305-899-	larodriguez@barry.	Clinical
		Professor of	3244	edu	Faculty
		Podiatry;			
		Residency Director at			
		HCA Florida			
		Mercy			
		Hospital;			
		Yucatan			
		Project			
		Director			
41	Rosario Aloma, Enrique,	Interim	305-899-	erosarioaloma@bar	Clinical
	DPM	Associate	3684 ;	ry.edu	Faculty
		Academic	305-981-		
		Dean;	1193		
		Assistant			
		Professor of			
		Podiatric			
42	Ruiz, Isabel	Medicine Coordinator,	305-899-	iruiz@barry.edu	Staff
42	Nuiz, isabei	Admissions	3252	iruiz@barry.euu	Stair
43	Santorsola, Clarina	Credentialing	-	CSantorsola@barry.	Clinical Staff
10	Samor Sola, Clarina	Coordinator		edu	Cirrical Starr
44	Shaw, Graham, PhD, MBA	Professor of	305-899-	gshaw@barry.edu	Pre-Clinical
		Biomedical	3264	,	Faculty
		Sciences			
45	Snyder, Philip, JD	Adjunct	-	psnyder@barry.edu	Adjunct
		Faculty, Risk			
		Management			
46	Stewart, Daniel, DPM	Assistant	305-859-	dstewart@barry.ed	Clinical
		Professor of	7777	u	Faculty
		Podiatric			
		Medicine;			
		Assistant			
		Director,			
		Sports			



		Medicine			
		Fellowship			
		•	205 600		A 11 .
47	Suarez, Edward, Psy.D.,	Adjunct	305-609-	esuarez@barry.edu	Adjunct
	LMHC, MBA	Faculty,	7059		
		Medical			
		Psychiatry and			
		Biomedical			
		Ethics			
48	Swartz, Maria	Clinical	954-721-	mswartz@barry.ed	Clinical Staff
		Research	4806	u	
		Coordinator			
49	Sy, Edgar, DPM	Assistant	305-899-	esy@barry.edu	Clinical
		Professor of	3243		Faculty
		Surgery;			
		Interim			
		Assistant			
		Residency			
		Director at			
		Jackson North			
50	Thompson, Joan	Office	954-721-	jthompson@barry.e	Clinical Staff
		Manager,	4806	du	
		Tamarac Clinic			
51	Trana, Jasmine, B.S.	Assistant to	305-899-	jtrana@barry.edu	Staff
		Associate	5490		
		Academic			
		Dean;			
		ExamSoft			
		Coordinator			
52	Wallace, Ja'mese, DPM	1st Year	305-859-	jwallace@barry.edu	Resident
		Resident at	7777		
		HCA Florida			
		Mercy Hospital			
53	Wang, Ling, MD	Associate	305-899-	lwang@barry.edu	Pre-Clinical
		Professor of	4794		Faculty
		Anatomy			
54	VACANT	Front Desk	305-859-	-	Clinical Staff
		Assistant at	7777		
		HCA Florida			
		Mercy Hospital			



#### VII. Academic Curriculum

The curriculum of the School of Podiatric Medicine leading to the D.P.M. degree normally takes four years to complete. The first two years mostly involve didactic pre-clinical science courses (many with laboratories, see course list below). The third and fourth years involve primarily, but not exclusively, clinical didactic courses and clinical rotations through several local hospitals and the Barry University clinics. All courses in the curriculum, unless noted as electives, are required; course substitutions are not allowed.

Students must complete all requirements for the D.P.M. degree within six years of initial matriculation into any podiatric medicine program. All courses must be completed prior to graduation. Podiatric medical students may be required by the Dean or Associate Academic Dean to take a reduced number of courses (due to withdrawals, course failures in their first or second year, or other extenuating circumstances), which will extend the duration of the program beyond four years.

The following curriculum is continuously reviewed and is therefore subject to change.



## DOCTOR OF PODIATRIC MEDICINE D.P.M. CURRICULUM

Fall	FIRST YE	EAR		Semester Hours
1'411	SPM	526	Introduction to Patient Care	2
	SPM	527	Biochemistry I	3
	SPM	536	Research Methodology, Epidemiology & Statistics	3
	SPM	550	Histology and Cell Biology w/lab	4
	SPM	590	Gross Anatomy w/lab	7
Spring				
Spring	SPM	528	Biochemistry II/Nutrition	3
	SPM	5 <b>4</b> 7	Neuroanatomy w/lab	3
	SPM	595A	Physiology I	4
	SPM	625A	Applied Lower Extremity Anatomy I w/lab	$\overline{4}$
	*SPM	665	Independent Study	1-3
	*SPM	675	Research	1-12
*Elective			ing any second-year semester)	
	SECOND	YEAR		Semester Hours
Summer				
	SPM	595B	Physiology w/lab	2
	SPM	610	Clinical Neurology	3
	SPM	623	Medical Microbiology I	2
	SPM	627	Introduction to Functional Orthopedics	3
	*SPM	665	Independent Study	1-3
	*SPM	675	Research	1-12
*Elective	(May be ta	aken duri	ing any second-year semester)	
Fall				
	SPM	600	Pathology I	4
	SPM	620	Pharmacology	3
	SPM	624	Medical Microbiology II	4
	SPM	632	Podiatric Medicine I	2
	SPM	649	General Radiology	3
	SPM	717	Biomechanics of Foot Function w/Lab	3
Spring				
	SPM	601	Pathology II	2
	SPM	605	Physical Diagnosis w/Lab	3
	SPM	621	Clinical Pharmacology	3
	SPM	640	Surgical Principles	3
	SPM	651	Internal Medicine I	2
	SPM	709	Podiatric Medicine II	2
	SPM	709L	Podiatric Medicine II Lab	1
	SPM	711	Podiatric Radiology	2
	SPM	711L	Radiology Lab	1



C	THIRD Y	EAR		Semester Hours
Summer	SPM	625B	Applied Lower Extremity Anatomy II w/lab	2
	SPM	705	Emergency & Traumatology I	2
	SPM	706	Emergency & Traumatology II	3
	SPM	753	Internal Medicine II	2
	*SPM	819	Communication Skills	1
	*SPM	765	Independent Study	1-3
	*SPM	775	Research	1-12
*Elective			ng any third-year semester)	1 12
Licetive	(iviay be ta	Keri dari	ing any time year semester)	
Fall				
	SPM	644	Dermatology	2
	SPM	652	Peripheral Vascular Disease	2
	SPM	703	Anesthesiology	1
	SPM	710	Podiatric Medicine III	2
	SPM	712	Clinical Orientation and Skills Workshop	1
	SPM	713	Podiatric Surgery I	4
	SPM	719	Pod Clinical I	7
	SPM	738	Podopediatrics	2
Spring				
-18	SPM	549	Medical Psychiatry	1
	SPM	553	Biomedical Ethics	1
	SPM	700	Physical Medicine	1
	SPM	707	Emergency & Traumatology III	2
	SPM	714	Podiatric Surgery II	4
	SPM	720	Pod Clinical II	7
	SPM	721	Podiatric Medicine IV	2
	SPM	813	Risk Management	1
	SPM	826	Sports Medicine	2
	SPM	831	Community and Minority Medicine	1
	SPM	CMP2	Objective Structured Clinical Examination	0
C	FOURTH	YEAR		Semester Hours
Summer	SPM	820	Clinical Potation	4
		820	Clinical Rotation	4
	SPM SPM	832 833	Podiatric Clerkship Program I Podiatric Clerkship Program II	$rac{4}{4}$
			1 0	
	*SPM *SPM	838 865	Podiatric Clerkship Program VII	4 1-3
			Independent Study Research	
*Elective	*SPM	875 kon duri		1-12
*Elective	(iviay be ta	ken auri	ng any fourth-year semester)	
Fall	op. s	00.6	D. W. J. G. J. M. D	
	SPM	834	Podiatric Clerkship Program III	4
	SPM	835	Podiatric Clerkship Program IV	4
	SPM	836	Podiatric Clerkship Program V	4
	SPM	837	Podiatric Clerkship Program VI	4



## Spring

SPM	802	Podiatric Medicine Seminar	1
SPM	806	Library Research Paper	1
SPM	809	Senior Clinical Rotations	7
SPM	815	Orthopedic Seminar	1
SPM	823	Surgical Seminar	1
SPM	825	Practice Management	1



## A. Pre-Clinical Sciences Objectives

Upon completion of the pre-clinical sciences preclinical curriculum, students will be able to:

- Describe the normal structure and function of the human body and its components;
- 2) Evaluate the contribution of molecular, biochemical and cellular mechanisms to homeostasis;
- 3) State units of measurement appropriate to a medical or scientific parameter;
- 4) Analyze altered structure and function of the body in disease conditions;
- 5) Interpret and analyze scientific data;
- 6) Articulate, using specific examples, various disease etiologies and suggest appropriate current treatment modalities;
- 7) Retrieve and present medical and scientific information in various forms;
- 8) Utilize a wide variety of pre-clinical resources to solve clinical problems;
- 9) Be eligible for the National Board of Podiatric Medical Examiners' Part I examination;
- 10) Integrate pre-clinical science knowledge into clinical applications;
- 11) Identify test values outside the normal range and suggest a diagnosis, given a patient chart;
- 12) Demonstrate moral and ethical behavior in and out of the classroom.

#### B. Clinical Program Objectives

Upon completion of the clinical sciences curriculum, students will:

- 1) Perform a complete medical history and lower extremity physical exam;
- 2) Differentiate between normal and abnormal findings;
- 3) Analyze and interpret all blood and diagnostic laboratory studies;
- 4) Recognize and differentiate signs and symptoms of systemic disease that manifest in the lower extremity;
- 5) Perform a biomechanical examination and gait analysis, recognizing pathology;
- 6) Assess and evaluate foot and ankle radiographs and other imaging studies and recognize pathology;
- 7) Order appropriate diagnostic tests;
- 8) Create a differential diagnosis with a treatment plan;
- 9) Provide appropriate perioperative podiatric care;



- 10) Demonstrate proficiency in palliative foot care including strapping, padding, injections, paring of lesions, and casting;
- 11) Demonstrate proficiency in basic podiatric surgical principles, including soft tissue and osseous procedures;
- 12) Apply knowledge of pharmacology and therapeutics in prescription writing;
- 13) Generate appropriate charting, whether electronic or paper;
- 14) Practice effectively as part of the medical team providing total healthcare to the patient.

## C. Clinical Competencies

The following competencies are mandated by the Council on Podiatric Medical Education (CPME), and demonstration of the following is a requirement for graduation as a podiatric physician:

## **History and Physical Examination)**

- Demonstrates proficiency in performing a complete medical history. (3a)
- Demonstrates proficiency in performing a complete full-body physical examination. (3a)
- Demonstrates proficiency in performing a complete lower extremity examination. (2a)
- Demonstrates proficiency in recognizing an abnormal medical history and physical findings and formulate a differential diagnosis. (3b)
- Demonstrates ability to formulate a treatment plan. (2d)

#### **Biomechanical Musculoskeletal Problems**

- Demonstrates knowledge of the biomechanics and kinesiology of gait. (2b)
- Demonstrates ability to recognize a pathologic gait and correlate this to the underlying musculoskeletal or neurological condition. (2b, f)
- Demonstrates knowledge of the principles of orthotic management. (2b)
- Demonstrates knowledge of shoe modifications and therapy. (2b)
- Demonstrates ability to perform a complete biomechanical examination. (2f)
- Demonstrates knowledge of a pediatric lower-extremity biomechanical examination. (2b)
- Demonstrates ability to cast for orthotics via neutral suspension technique. (2f)
- Demonstrates knowledge of how to cast orthotics via semi-weight bearing technique. (2f)



- Demonstrates understanding of the various types of orthoses used to treat common podiatric disorders such as heel stabilizers, AFOs, derotational gait plates, etc. (2f)
- Demonstrates ability to assess a treatment plan and revise as necessary. (2f)

## **The Lower Extremity Vascular Examination**

- Demonstrates ability to assess the vascular status of the patient. (2a, b)
- Demonstrates knowledge of lower extremity vascular anatomy, including arterial, superficial/deep venous, and lymphatic systems. (2a, b)
- Demonstrates ability to perform and interpret ABI and Doppler examinations. (2b)
- Demonstrates knowledge and ability to recognize venous insufficiency and formulate plan of management. (2d)
- Demonstrates knowledge of the signs and symptoms of DVT, methods of diagnosis, and treatment options. (2b)
- Demonstrates knowledge of the signs and symptoms of chronic occlusive arterial disease, methods of diagnosis, and treatment options. (2d)

## The Lower Extremity Neurological Examination

- Demonstrates knowledge and ability to perform a complete neurological examination. (2a)
- Demonstrates knowledge of common upper motor neuron lesions and their resultant effects on the lower extremity. (2b)
- Demonstrates knowledge of common lower motor neuron lesions and their resultant effects on the lower extremity. (2b)
- Demonstrates knowledge of the lower extremity nerve roots, tracts, and dermatomes and evaluation of neurological deficit. (2b)
- Demonstrates knowledge of neurological tests such as distal latency, NCV, and EMG, including indications and significance of each. (2b)

#### The Lower Extremity Dermatological Examination

- Demonstrates knowledge and ability to recognize primary and secondary skin lesions. (2c)
- Demonstrates knowledge, ability to recognize, and formulate a treatment plan for disorders of the nail such as onychocryptosis, mycosis, subungual hematoma, etc. (2d)
- Demonstrates knowledge, ability to recognize, and formulate a treatment plan for the various dermatophyte, molds, and yeast infections of the foot and leg. (2d)



- Demonstrates knowledge, ability to recognize, and formulate a treatment plan for the common inflammatory dermatoses of the foot and leg. (2d)
- Demonstrates knowledge and ability to recognize cutaneous neoplasms. (2c)
- Demonstrates knowledge, ability to recognize, and formulate a treatment plan for bacterial or viral infections of the skin of the foot and leg. (2d)
- Demonstrates knowledge, ability to recognize, and formulate a treatment plan for biomechanically induced hyperkeratotic lesions on the foot. (2d)
- Demonstrates knowledge of the various biopsy techniques and advantages of each.
- Demonstrates ability to perform a skin biopsy. (2e)
- Demonstrates knowledge and ability to perform KOH, PAS, and various fungal culture media for the identification of cutaneous fungi. (2f)

## **Diagnosis Lab**

- Demonstrates knowledge of the indications, normal values, and significance of urinalysis. (2b)
- Demonstrates knowledge of the indications, normal values, and significance of abnormal whole blood studies such as the CBC, diff, sed rate, etc. (2b)
- Demonstrates knowledge of the indications, normal values, and significance of abnormal results on serum such as the BUN, Creatinine, Alk Phos, Glucose, Bilirubin, etc. (2b)
- Demonstrates knowledge of the indications, normal values, and significance of abnormal PT, PTT, and INR. (2b)
- Demonstrates ability to perform venipuncture. (2e)
- Demonstrates understanding of the technique for a joint aspirate. (2e)

#### Radiology

- Demonstrates knowledge of normal anatomy of the foot and ankle. (1a)
- Demonstrates knowledge of normal and abnormal biomechanical anatomy. (2c)
- Demonstrates skill in drawing and interpretation of biomechanical angles. (2f)
- Demonstrates knowledge of various X-ray projections, techniques, and patient positioning to identify podiatric pathology. (2f)
- Demonstrates knowledge of proper radiograph developing technique. (2f)
- Demonstrates knowledge of X-ray physics and radiation safety. (2e)
- Demonstrates knowledge of the indications, advantages, and evaluation of an MRI of the foot and ankle. (2b)
- Demonstrates knowledge of the indications, advantages, and evaluation of a CT of the foot and ankle. (2b)



• Demonstrates understanding of special radiographic studies such as scintigraphy, angiography, and venograms including indications, interpretation, and value. (2b)

#### **Local Anesthesia**

- Demonstrates knowledge of sterile technique and Universal Precautions. (2f)
- Demonstrates knowledge of pharmacology of local anesthetics and the physiology of how local anesthetics work. (1c)
- Demonstrates knowledge of anatomy and skill in administering digital and Mayotype blocks. (2e)
- Demonstrates knowledge of anatomy and skill in administering tibial, common peroneal, deep peroneal, saphenous, and sural nerve blocks. (2e)
- Demonstrates knowledge of how to handle an anesthetic emergency. (3e)

## **Pharmacology**

- Demonstrates knowledge of pharmacology and appropriate formulary for commonly prescribed oral drugs for podiatric conditions. (1c)
- Demonstrates knowledge of potential drug interactions of commonly prescribed oral drugs. (1c)
- Demonstrates knowledge of pharmacology and appropriate formulary for commonly prescribed topical drugs for podiatric conditions. (1c)
- Demonstrates knowledge of pharmacology and appropriate formulary for commonly prescribed parenteral drugs for podiatric conditions. (1c)
- Demonstrates skills necessary for Rx writing. (2e)
- Demonstrates knowledge of regulatory agency regulations regarding Rx writing.
   (7e)
- Demonstrates communication skills in discussing Rx therapy with a patient and awareness of abuse and misuse of Rx. (5a)

#### **Peri-operative Management**

- Demonstrates knowledge of appropriate pre-operative tests for foot surgery. (2b)
- Demonstrates knowledge of anesthesia risk, ASA classification, and recognizes potential problems. (2b)
- Demonstrates ability to recognize psychosocial factors that may influence a poor surgical outcome. (6a)
- Demonstrates ability to appropriately give a complete, informed, pre-operative consent to a patient. (5a)
- Demonstrates knowledge of ambulation assistive devices and which is indicated for the various foot surgical procedures. (2f)



- Demonstrates knowledge of appropriate technique of suture removal. (2f)
- Demonstrates ability to apply a post-operative bandage utilizing aseptic technique. (2f)

## **Palliative Care**

- Demonstrates ability to perform palliative nail debridement. (2e, f)
- Demonstrates ability to perform palliative removal of an ingrown nail. (2e, f)
- Demonstrates ability to perform a permanent correction of an ingrown nail. (2e, f)
- Demonstrates knowledge and ability to inform a patient of the various methods to treat onychomycosis. (2d)
- Demonstrates ability to perform palliative removal of hyperkeratotic tissue. (2e, f)
- Demonstrates ability to perform palliative padding techniques to off-load pressure sensitive areas of the foot. (2e, f)
- Demonstrates ability to educate the patient as to the etiology and proposed treatment options for musculoskeletal and biomechanically-induced hyperkeratotic lesions. (2d)

#### **Wound Care**

- Demonstrates knowledge of the principles of wound healing. (2c)
- Demonstrates an understanding of physiology, cytokines, growth factors, and the wound bed involved in wound healing. (2c)
- Demonstrates knowledge of the relationship of systemic disease to wounds and wound healing. (2c)
- Demonstrates knowledge of wound classification. (2c)
- Demonstrates knowledge of the etiology of lower extremity ulceration and the ability to formulate a treatment plan. (2d)
- Demonstrates understanding of delayed wound healing in chronic wounds. (2g)
- Demonstrates knowledge of the various therapeutic modalities to enhance wound healing. (2e)

#### **Infection Management**

- Demonstrates knowledge of microbiology and commonly occurring flora associated with puncture wounds, pyodermas, abscesses, necrotizing fasciitis, and osteomyelitis. (1d)
- Demonstrates knowledge of the common signs and symptoms of infection. (2d)
- Demonstrates knowledge of the basic principles of infection management. (2c)
- Demonstrates knowledge of the full scope of antibiotics available, empirical therapy, toxicity, and appropriate management. (1c)



- Demonstrates knowledge of imaging techniques used in the evaluation of osteomyelitis. (2b)
- Demonstrates knowledge and ability to perform superficial I & D. (2e)
- Demonstrates understanding of the principles of I & D of a deep surgical wound, lavage, drainage techniques, and dressings. (2e)

## Musculoskeletal Management

- Demonstrates knowledge of the signs and symptoms, diagnostic tests, and management of DJD and RA. (2b)
- Demonstrates knowledge of the signs and symptoms, diagnostic tests, and management of gout. (2b)
- Demonstrates knowledge of the signs and symptoms, diagnosis, and management of seronegative spondyloarthropathies. (2b)
- Demonstrates knowledge of the signs and symptoms, diagnosis, and management of overuse syndromes. (2d)
- Demonstrates knowledge and principles of management of contusions, strains, sprains, tendonitis, capsulitis, and myositis. (2f)
- Demonstrates knowledge of the signs and symptoms, diagnosis, and management of heel-spur syndrome. (2d)
- Demonstrates ability to perform injections. (2f)

#### Trauma

- Demonstrates knowledge of the principles of fracture management. (2d)
- Demonstrates knowledge of the principles of primary wound closure. (2e)
- Demonstrates ability to suture a laceration. (2f)
- Demonstrates knowledge of immobilization techniques and ability to apply a BK cast. (2f)
- Demonstrates knowledge of immobilization techniques and the ability to apply a Jones compression splint. (2f)
- Demonstrates knowledge of the signs and symptoms, diagnosis, classification and management of ankle sprains. (2d)

#### **Neurological Disorders**

- Demonstrates knowledge of the evaluation of sensory, motor, and autonomic neuropathy. (2a)
- Demonstrates knowledge of the various causes of peripheral neuropathy. (2c)



- Demonstrates ability to formulate a plan for the management of peripheral neuropathy. (2d)
- Demonstrates knowledge of signs and symptoms of a peripheral neuroma. (2c)
- Demonstrates knowledge of the diagnostic criteria, and both surgical and nonsurgical management of a neuroma. (2d)
- Demonstrates knowledge of signs and symptoms of a peripheral compression neuropathy. (2c)
- Demonstrates knowledge of the diagnostic criteria, and both surgical and nonsurgical management of a compression neuropathy. (2d)
- Demonstrates understanding of the effect of disorders of the CNS that affect the foot and leg. (2c)
- Demonstrates understanding of when and how to make the appropriate referral involving neurological disease. (5c, d)

## **General Medicine**

- Demonstrates knowledge of causes, classification, and pharmacological management of hypertension. (3b)
- Demonstrates knowledge of the causes of hypertension, the classification of, and pharmacological management of ASHD and heart failure. (2c)
- Demonstrates knowledge of the causes of edema of the foot and leg, and how to formulate a plan for evaluation and management. (2d)
- Demonstrates knowledge of the causes, classifications, and pharmacological management of diabetes. (2c)
- Demonstrates knowledge of, and ability to recognize the multi-system manifestations of diabetes. (2c)
- Demonstrates knowledge of thyroid dysfunction and manifestations in the foot and leg. (2c)
- Demonstrates understanding of causes of dyspnea and pulmonary disease, and when to make the appropriate referral. (5c, d)
- Demonstrates knowledge to create a differential diagnosis and plan of management for hematological abnormalities. (2d)

## **Psychosocial**

- Demonstrates ability to evaluate the patient's social environment and the impact on the patient's prognosis. (6a)
- Demonstrates knowledge of common psychiatric and/or personality disorders and their effect on the patient's prognosis. (6a)



- Demonstrates knowledge of and management of abuse (physical, substance, etc.). (4f)
- Demonstrates knowledge of the various social and support services to senior citizens in need. (6a)
- Demonstrates knowledge of when to make the appropriate referral. (5c, d)

## **Peer Review and Quality Assurance**

- Demonstrates knowledge of governmental statutes, institutional policy and regulations. (7e)
- Demonstrates ability to maintain appropriate, complete and accurate medical records. (4c)
- Demonstrates knowledge of patient confidentiality and HIPAA regulations. (7f)
- Demonstrates knowledge of criteria and methodology of QA evaluations, statistics and outcomes of patient care records. (6b)

## **Practice and Office Management**

- Demonstrates knowledge and ability to correlate diagnostic and procedural codes.
   (7b)
- Demonstrates knowledge of the principles of office operation, including education of office staff, employer-employee relations, and business essentials. (7e)
- Demonstrates knowledge of OSHA business safety requirements for office personnel. (7e)
- Demonstrates computer literacy for immediate media searches and business-related services. (8b)



#### VIII. Academic Life

## A. Registration

Registration for subsequent semester courses is done online via Student Self-Service. All students must complete appropriate registration processes during times designated by the School of Podiatric Medicine. Dates and times for registration will be communicated to the students by the office of the Associate Academic Dean. Faculty advisors will approve all registrations. Completed registrations will be processed by the Office of the Registrar. To successfully register, students must ensure that all potential holds (financial and health) are resolved.

Registration in any and all elective courses must be approved by the Associate Academic Dean, or the Associate Dean of Clinical Education before the registration can proceed to the Cashier/Business Office and the Office of the Registrar. Prior to seeking approval of the Associate Academic Dean, or the Associate Dean of Clinical Education, students registering for Research or Independent Studies courses must secure a faculty sponsor who will be responsible for evaluating their performance in the course. Students registering for Research must also submit a sponsor-approved research proposal to the Associate Academic Dean or Associate Dean of Clinical Education.

Students who fail to complete registration requirements, including appropriate financial arrangements with the Cashier/Business Office, within ten working days of the first day of class of any semester will <u>not</u> be permitted to attend classes, laboratories, or clinical rotations/programs, take examinations or participate in any other activities of the school. The School of Podiatric Medicine will notify the Financial Aid Office, which will subsequently notify scholarship programs, banks providing government-subsidized loans, etc., when students cease to be appropriately registered.



## B. Attendance

Attendance at all classes is highly recommended for all School of Podiatric Medicine courses. An instructor may, at his/her discretion, include attendance as part of the grade that a student earns, or reduce a grade for absences while enrolled in a course. Students are responsible for all material and assignments covered in every course and all examinations, including unannounced quizzes.

Attendance at scheduled examinations is mandatory. Examinations may be given outside of normal class hours due to space or time limitations. Only under extraordinary circumstances will examinations be rescheduled; any rescheduling will require the approval of the Associate Academic Dean and the course instructor. A copy of the unanimous consent of the students in the course at that time that is change is proposed will also be required. Missed examinations, quizzes, and other evaluations will be graded 0 percent unless the absence is excused. Acceptance of excuses for all absences, and the administration of make-up evaluations (including scheduling and format) are solely at the discretion of the instructor.

Attendance is mandatory for stated clinic hours when applicable. No student will be permitted to leave the clinic or hospital early or arrive late. Attendance at all clinical rotations is mandatory, and all excused absences must be made up (see *Clinical Rotation Training Manual*). Requests for absences from a clinical rotation must be presented at least two weeks prior to the requested dates of the absence. Last-minute requests will likely not be honored. Students may be required to repeat one or more entire rotations as a result of excessive absences.

#### i. Reporting Absences

In the case of prolonged absence from classes, it is the student's responsibility to inform his/her advisor of the absence and indicate the expected return to class. Upon return the student should provide the appropriate documentation justifying his/her absence. For prolonged medical absences, a doctor's note indicating the student's fitness to return to class should be submitted to the Dean of Students.

#### ii. Late Arrival of Instructor



Barry University's School of Podiatric Medicine does not have a policy regarding early classroom departures based on faculty late arrivals. However, reasonable guidelines do exist. Instructors will occasionally experience unavoidable delays just as students do. Whenever possible, the faculty member will notify school staff of their estimated arrival time and subsequent expectations of the waiting students, and this message will be relayed to the students waiting in class. If no such message is relayed by faculty, the students are left to their own discretion. Any loss of class time due to the late arrival of the instructor will be compensated by extending the lesson during the same semester.

#### C. Examination Procedures and Protocols

## i. American Podiatric Medical Licensing Examination (APMLE)

All first- and second-year course work must be successfully completed before taking Part I of the APMLE series and before entering the third-year clinical rotations. Any student who fails Part I of the APMLE series before the beginning of the senior year will be dismissed from the School of Podiatric Medicine and Barry University.

#### ii. Objective Structured Clinical Examination

All students must complete a Practical Clinical skills examination in the first term (Fall) of the third year and must successfully complete the Objective Structured Clinical Examination during the last (Spring) term of the third year. The content of the examination will include patient encounters consisting of an oral and practical History and Physical as well as a written SOAP note. Oral clinic case questions may also be part of this examination. Students must successfully complete the Objective clinical competency examination to graduate. Students who successfully complete the examination will receive a grade of "credit" (CR) in course SPM CMP2. Students who fail the examination will receive a grade of "no credit" (NC) and will receive remedial instruction until competency has been demonstrated.



#### iii. General Examinations

The type, content and frequency of examinations will be determined prior to the beginning of each course by the faculty member directing the course. This information will be presented in writing in the course syllabus to the students at the beginning of the course. In keeping with the policy of academic freedom, each faculty member reserves the right to determine the percentage of the final grade associated with attendance, dress, attitude, professional behavior, examinations, quizzes, laboratory assignments, and other criteria of evaluation. These requirements must be specified in the course syllabus; however, the course instructor may administer additional evaluations at his or her discretion. The course instructor ultimately determines the final grade in a course. A test may be administered outside the examination period scheduled only when extenuating circumstances warrant it and at the discretion of the faculty member. The student must make every possible effort to notify the instructor prior to an examination for permission to reschedule the test. Noncompliance with this policy will result in a failing grade being assigned to the examination.

For clinical rotation exams, refer to the Clinical Rotation Training Manual.

#### D. Accessibility Services

The primary purpose of the Office of Accessibility Services (OAS) is to provide academic accommodations to those students with documented disabilities. In addition, the office provides leadership and guidance to the campus community to enhance understanding and support of the OAS while ensuring compliance with legal requirements for equal access. The office supports the caring environment of Barry University through its one-on-one relationships with students and strives to provide a holistic educational experience that prepares each student to be united and equal with the non-disabled population, while assuring their human and legal rights. For more information, please contact the OAS at Landon Student Union 102,



Voice/TDD: 305 899-3488, Fax: 305 899-3056

Email: accessibilityservices@barry.edu

Web Page <a href="http://www.barry.edu/accessibility-services/">http://www.barry.edu/accessibility-services/</a>

## E. Student Conduct

## i. Academic Integrity and Behavior

The School of Podiatric Medicine strives to inculcate academic integrity and ethical professional behavior in its students. Cheating and plagiarism are not tolerated in the School of Podiatric Medicine. Refer to the Policies and Procedures section of this Graduate Catalog and the Barry University Student Handbook for definitions of cheating and plagiarism. A student who gives or receives information or assistance during a testing session will automatically fail and earn 0 percent as an exam or quiz grade. The same consequence will apply to any proven case of plagiarism. Accusations of cheating or plagiarism will be adjudicated by the Honor Code Committee (see Student Honor Code of Conduct). Following this adjudication, the individual(s) will be referred to the Dean for appropriate disciplinary action and the incident will be documented in the student's file. Any student who is referred to the Dean for violation of the cheating and plagiarism policies on two occasions will be dismissed from the University. For a detailed description of what constitutes plagiarism students can consult any number of online resources and hardcopy texts. One such text is Writing papers in the biological sciences (4th ed) by Victoria E. McMillan, Bedford/St. Martin's Publishing, New York, (2006).

ii Criminal Background Checks and Drug Screening

It is the intent of the School of Podiatric Medicine to maintain a healthy and drug-free learning environment and workplace. Consequently, prior to matriculation into the School of Podiatric



Medicine, all applicants are required to undergo a criminal background check (including a fingerprint check) and a drug screening. All fees assessed due to the background check will be the responsibility of the student. If the background check reveals a criminal conviction or a plea of no contest, the offer of a place to the applicant may be withdrawn. Clinical rotation sites can also require a criminal background check and may refuse to accept students with documented criminal histories. If a criminal conviction, or a plea of no contest, occurs after matriculation into the program, the student may be dismissed from the program.

The School of Podiatric Medicine will dismiss students who either fail a drug screening prior to, or after, matriculating into the program or who refuse to submit to a drug screening. The School of Podiatric Medicine will also withdraw the offer of a place to applicants who either refuse to submit to a drug screening or fail a drug screening.

There are 3 mandatory criminal background checks and drug screenings performed throughout the four years: 1) prior to matriculation, 2) summer of the 3<sup>rd</sup> year, and 3) spring of the 3rd year.

Many clerkships and clinical rotation sites also require additional criminal background checks and drug screening of students prior to entering as needed.

#### iii COVID-19 vaccination

Barry University strongly encourages COVID-19 vaccinations for all faculty, students, and staff. However, all hospitals and clinical rotations have very strict policies requiring mandatory vaccinations for student learners. To provide all students with their required clinic and hospital rotations and to maintain strict adherence to hospital policy, for all clinical students (3rd and 4th year only) the Barry University School of Podiatric Medicine COVID-19 policy is as follows:



- All 3rd year students are required to submit proof of COVID-19 vaccination which includes a booster shot to the clinical staff at the start of the 3rd year.
- A COVID-19 waiver is available for medical reasons only and is available to students unable to obtain the vaccine.
   Please note, that students may not be able to attend certain rotations or clerkships without proof of COVID-19 vaccination.

Questions or concerns should be forwarded to the office of the Associate Dean of Clinical Education.

## iv. Policy on Use of Drugs and Alcohol

The abuse of alcohol and the use of illegal drugs by members of the Barry University community are incompatible with the goals of the institution. The University does acknowledge the problem of substance abuse in our society and perceives this problem as a serious threat to employees and students. The University does hold its students and employees responsible for the consequences of their decisions to use or distribute illicit drugs or to serve or consume alcohol. It is the intent of the University to establish and maintain a drug-free workplace. It is the University's further intent to comply in every respect with the Drug-Free Schools and Communities Act Amendment of 1989 (Public Law 101-226) as presently constitutes to be amended in the future.

Barry University condemns the possession, use or distribution of illicit drugs and the abuse of alcohol and drugs/substances, whether prescriptive or non-prescriptive. Any student found to be in the possession of illicit drug or alcohol, or using, selling, trading, or offering for sale illicit drugs or alcohol on the University's property or as part of the University's activities will be dismissed as well as subject to applicable local, state, and federal laws.

As a condition of employment, or receiving federal funds, all employees and students must abide by the terms of this policy. Under Federal law, any employee working under, or student receiving funds from a Federal grant or contract, must report



his/her criminal drug statute conviction for a violation occurring in the University to the Administration not later than five (5) days after such conviction. If said employee/student is receiving Federal grant or contract funds, the University is required to give notice of the conviction to the contracting agency within ten (10) days after learning of it. Employees/students convicted must, under the terms of this policy, have sanctions imposed within thirty days of the date the University administration learns of the conviction.

For more information of the health risks associated with alcohol and drug use, please refer to the Barry University Student Handbook at

https://www.barry.edu/student-handbook/handbook/alcohol-and-drug-policy.html

#### v. Professional Conduct Code

Podiatric medical students must model the highest professional, moral, ethical and honorable behavior at all times whether in lecture rooms, laboratories, other campus facilities, or off campus.

Standards for conduct are delineated in the Barry University Student Handbook, BUSPM Student Handbook, Clinical Rotation Training Manual, course syllabi and other documents that may be distributed by faculty and staff.

A Professional Deficiency protocol exists that permits the recording and reporting of conduct that contravenes the above to the Dean of the School of Podiatric Medicine. The reporting may be done by any Barry University faculty, staff and service personnel on campus or in a clinical setting. Disruptive behavior such as violence, shouting, profanity and other behavior that is disrespectful of the rights and sensitivities of the campus faculty, staff, service personnel or public falls under this protocol. The disruptive use of cell phones and similar electronic devices during lectures, laboratory sessions, examinations and other University events is disruptive and may be grounds for reporting a professional deficiency.



Such activities should be conducted with consideration for the rights and sensitivities of others. Students who are repeatedly non-compliant with these standards will be referred to the Dean or Associate Dean of Clinical Education or Associate Academic Dean for disciplinary action that will result in dismissal from Barry University.

#### vi. Student Honor Code of Conduct

Students in the School of Podiatric Medicine are entering a profession that prides itself on maintaining high standards of honor, trust, and professional conduct. It is expected that during their education at Barry University, podiatric medical students will conduct themselves in a manner becoming a podiatric physician. The School of Podiatric Medicine has developed an Honor Code to ensure that all students are familiar with, and committed to, the highest principles of conduct from the start of their podiatric medical education. Students are required to affirm their compliance with these principles upon initial enrollment in the School of Podiatric Medicine with the following pledge:

I agree to abide by the Honor Code of the School of Podiatric Medicine. I agree that I will conduct myself in an honest and ethical manner during all activities during the course of my enrollment, including, but not limited to, my academic work, as well as my interactions with fellow students, faculty and staff.

The Honor Code of Barry University's School of Podiatric Medicine will be enforced by the Honor Code Committee. This committee is made up entirely of students, with one non-voting faculty advisor. All students will receive the Honor Code document at New Student Orientation and will be held responsible for its contents.

For more information, please refer to the Barry University Student Handbook at <a href="https://www.barry.edu/student-handbook/">https://www.barry.edu/student-handbook/</a>

vii. Policy and Procedures on Sexual Harassment

Barry University is committed to providing the best possible setting from carrying out its educational mission. An essential component



of this environment is an atmosphere in which all members of the University community have an equal opportunity to work, to learn, and to develop. Member of the University community, guests, and visitors have the right to be free from all form of gender and sexbased discrimination, examples of which can include acts of sexual violence, sexual harassment, domestic violence, dating violence, and stalking. All members of the University community are expected to conduct themselves in a manner that does not infringe upon the rights of others. Barry University has a zero-tolerance policy for gender-based discrimination, harassment, and violence.

When an allegation of misconduct is brought to the attention of the Dean of Students and a responding party is found to have violated this policy, serious sanctions will be used to reasonably ensure that such actions are never repeated. This policy has been developed to reaffirm these principles and to provide recourse for those individuals whose rights have been violated. Any attempt to violate any portion of this policy is considered sufficient for having committed the violation itself. The use of alcohol and/or other drugs will not be accepted as a defense or mitigating factor to a violation of this policy.

The University shall enforce this policy through the means of the student conduct system and through enforcement of the Student Code of Conduct. Sexual offenses are considered major violations of the Student Code of Conduct, and students found responsible are subject to sanctions up to an including expulsion from the University.

This policy applies regardless of the complainant's or respondent's race, creed, color, ethnicity, national origin, ancestry, religion, gender sexual orientation, gender identity, genetic information, familial status, marital status, pregnancy, age, disability status or veteran status. Also, prohibitions against discrimination and harassment do not extend to statements or written materials that are germane to the classroom or academic course of study, unless the materials themselves are used as inappropriate content.



# A. <u>Expectations of Students with Respect to Physical Sexual</u> Misconduct

The expectation of our university community regarding sexual misconduct can be summarized as follows: for individuals to engage in sexual activity of any type with each other, there must be clear, knowing and voluntary consent prior to and during sexual activity. Consent is sexual permission. Consent can be given by word or action, but non-verbal consent is not as clear as talking about what you want sexually and what you don't. Consent to some form of sexual activity cannot be automatically taken as consent to any other form of sexual activity. Silence without actions demonstrating permission cannot be assumed to show consent.

Additionally, there is a difference between seduction and coercion. Coercing someone into sexual activity violates this policy in the same way as physically forcing someone into sex.

For more information, please refer to the Barry University Student Handbook at

https://www.barry.edu/student-handbook/handbook/sexual-offense-policy.html

# B. <u>Expectations of Students with Respect to Consensual Relationships</u>

There are inherent risks in any romantic or sexual relationship between individuals in unequal positions (such as between faculty and student and staff and student). These relationships may be less consensual than perceived by the individual whose position confers power. For the personal protection of faculty/staff and student of BUSPM relationships in which power differential are inherent (faculty-student, staff-student, administrator-student) are inappropriate.



For more information, please refer to the Barry University Student Handbook at

https://www.barry.edu/student-handbook/handbook/sexual-offense-policy.html

#### viii. Dress Code

Barry University School of Podiatric Medicine students are representatives of Barry University and must act accordingly. Consequently, students are expected to dress professionally and conservatively. Each student is responsible for presenting a personal appearance that recognizes the need for good grooming and neatness in order to avoid distracting others and to comply with safety standards. This policy applies to both the 1st, 2nd 3rd and 4th year students in the classroom setting; however, in lieu of business or clinical attire, all students are allowed to wear BUSPM scrubs to class.

Business and/or clinical attire:

#### Basic elements of dress for men:

- Khaki, cotton, denim, corduroy pants or slacks
- Dress shirts, polo shirts, knit shirts, sweaters, turtlenecks, short or long-sleeved sport shirts, or vests
- Ties are "optional"
- Closed-toed shoes, loafers or leather dress shoes
- BUSPM scrubs

# Basic elements of dress for women:

- Cotton or corduroy skirts or dresses that are (at least) knee length
- Khaki, denim, cotton, corduroy pants, culottes or slacks
- Tailored or dress shirts, polo shirts, blouses, shirts with collars, turtlenecks, vests, sweater and knit tops
- Ties are "optional"
- Closed-toed leather loafers, pumps, heels, or flats
- BUSPM scrubs



# The following items are NOT to be worn:

- Tank tops, spaghetti strap tops, sleeveless shirts or blouses that are low-cut
- T-shirts with questionable or offensive terms, pictures, cartoons, or slogans
- Clothing items that expose your midriff or upper thighs (Legs should be completely covered to the knee for women).
  - No Shorts or Rompers
  - o No clothing items may be sheer or see-through
- Clothing items that have rips, tears or frayed edges, i.e. ripped or torn jeans
- Gym attire: basketball shorts or yoga pants, compression garments
- Leggings or stretch pants
- Hats are not appropriate in class. Only head coverings that are required for religious purposes, or to honor cultural traditions, are allowed.

Perfume, cologne, and aftershave lotion should be used in moderation, as some individuals may be sensitive to strong fragrances.

Jewelry should be minimal and understated.

Exposed piercings on the ears and nose as well as any exposed tattoos should be tasteful and professional.

Any clothing, jewelry, or tattoo(s) that conveys a negative statement toward a race, gender, sexual orientation, age, religion, disability, or is otherwise considered harassing or offensive is prohibited.

Where possible, and if appropriate, reasonable accommodation may be made for a person with a disability or a particular religious requirement.

#### Labs

Barry University School of Podiatric Medicine scrubs and lab coats are mandatory for all lab courses.

#### Clinical Classes

Third- and fourth-year students in clinical rotations and while in class on campus are expected to look like professionals. This means maintaining a personal standard of grooming and appearance, which is well received by the public. When a patient is being treated, it is the responsibility of any physician to make every effort to place that patient



at ease, by whatever means possible. This includes courtesy, patience, attentiveness, and appearance. The podiatric medical students shall dress in attire that would be expected of a physician. Therefore, from the beginning of the third-year courses, the dress code is absolute.

For more information, please refer to the Clinical Training Manual.

## **To Clinical Rotations:**

All first, third and fourth-year students shall wear clean and pressed white lab coats (clinician-style coat that was awarded at the Rite of Passage), with the School of Podiatric Medicine-embroidered emblem sewn on the left shoulder. This coat should fit well, be clean, and be relatively free of stains or spots. All students shall wear the Barry University identification card clipped to the left lapel, or onto the left-upper pocket of the lab coat.

## **To Class and Clinical Rotations:**

Male students should wear dress shirts and ties. The shirt may be long- or short-sleeved, should be of a solid color, or may have a light print or lines. Sharp, contrasting prints and loud colors should be avoided. Dress trousers should conservatively match the shirt and have a crease. Jean-type pants with patch pockets sewn on the outside of the pants are inappropriate for clinical rotations. Jeans are not to be worn in <u>any</u> classroom or clinical rotation. It is expected that a podiatrist wear respectable, good fitting, polished leather shoes in class and on clinical services. Athletic shoes may be acceptable if they are good looking, color-coordinated, and look new.

Female students should wear a professional dress, dress suit or business-type blouse and professional dress slacks. Culottes are appropriate, so long as they look professional. Skirts should be knee-length.

#### **To Hospital Rotations:**

BUSPM surgical scrubs and pressed white coats may be worn to all hospital-based rotations at the discretion of the Clinical Instructor, i.e., Emergency Medicine, Anesthesia, General Surgery, Resident Rotation, and Interventional Radiology. Some hospital-based rotations have clinical hours; therefore, clinical attire is required.

Male and female students should keep their hair well-groomed. Mustaches or beards should be neatly trimmed. Body piercings are not acceptable, and large or overlong



jewelry that may interfere with clinical practice should be limited. **No open-toed shoes** are authorized in either the clinical or the hospital-based rotation sites.

Any student who is removed from class, clinic or hospital rotation due to unprofessional attire, physical appearance, or behavior will receive an unexcused absence for the day and possibly, depending upon the infraction, fail the rotation and be placed on probation from clinics.

Disregarding or failing to comply with this standard of dress code will lead to disciplinary action, including failure of the program. Any student who is removed from class, clinic or hospital rotation due to unprofessional attire, physical appearance may be asked to leave the class, clinic or hospital rotation. These absences will be unexcused and may lead to failure of course and/or clinical work. Consequently, they may affect the student's good standing in the program.

#### ix. ID cards

Students are expected to always carry the Barry University student identification card, in class, clinics and during all activities when representing the BUSPM program. The card is to be used only by the student whose name and picture appear on the card. Misuse of the identification card will result in disciplinary action. Any lost ID cards must be replaced promptly. Note that the Office of Public Safety assesses a \$15 fee for replacement ID cards.

#### F. Academic Advisement

Every student matriculating into the Podiatric Medicine program at BUSPM is assigned an academic advisor. Full-time faculty members assume academic advising responsibilities. Advising assignments may be changed depending on student's year, at the request of the student or advisor. In the advising process, BUSPM students must:

- Be aware of the educational objectives of the institution and adhere to them;
- Comprehend the institution's criteria for evaluating student progress in academic programs;



- Comply with the institution's standards for academic success and continuance in programs for graduation. The institution is under no obligation to grant a degree or keep the student enrolled in the program if he/she fails to maintain satisfactory academic progress;
- Understand and complete all degree requirements for graduation; and
- Make his/her own academic decisions after consultation with the advisor.
   The advisor's role is to advise the student. However, the final decision is ultimately the responsibility of the student.

# G. Syllabi

Course syllabi provide the student with an outline of the course, course learning objectives and expected outcomes, a list of required materials such as texts, reading materials, instruments and supplies, method of evaluation (grading rubrics), class meeting schedule, topics to be covered per class, exam schedule and required assignments, as well as the contact information of the course instructor.

The conditions for successful completion of any course are contained within the course syllabus. It is the student's responsibility to comply with all requirements contained within the course syllabus.

# H. Grading Scale and Calculation of Grades

The official grading policy of BUSPM (exclusive of Clerkship) is as follows:

A 90%-100%

B 80%-89.99%

C 70%-79.99%

F below 70%

Additionally, all students in academic programs in excess of four years will be graded as follows:

A 90%-100%

B 80%-89.99%

C 70%-79.99%

F below 70%

Clinical rotations for all students will be graded according to the following scale:



A 3.5 and above

B 2.5 to 3.4

C 1.0 to 2.4

F below 1

Clerkships are graded by either pass/fail and student receive a grade of *credit* (CR) or *no credit* (NC), please refer to the Clinical Training Manual for more information.

The School of Podiatric Medicine does not use *plus* or *minus* letter grades. The grade/honor point associated with each of the letter grades is noted in the Barry University Graduate Catalog, section on "Academic Information" (https://www.barry.edu/registrar/catalog-archives.html). A grade of *credit* (CR) or *no credit* (NC) may be assigned to a course if specified in the course syllabus and approved by the Associate Academic Dean. In such cases, the requirements for achieving a CR grade will be stated in the syllabus.

## I. <u>Transcripts</u>

Official transcripts are prepared by the Office of the Registrar. To request an official transcript, students may order transcripts online at an additional cost at parchment.com/u/registration/33498/registration. Transcripts cannot be processed or released if there are outstanding financial obligations to Barry. Students should note that transcript requests take 3-5 business days to be processed after approval by the Cashier/Business Office.

Transcript requests from anyone other than the student are not honored. Copies of student transcripts are never released without written authorization from the student or, in the case of a governmental investigative agency, without a court order or subpoena. The Office of the Registrar will inform students should this occur. For additional details see "Academic Information" in this catalog

http://www.barry.edu/registrar/catalog-archives.html

## J. <u>Incomplete Grades</u>

A grade of *Incomplete* "I" indicates a failure to complete required work within the semester and implies the instructor's consent that the student may make up work



that is deficient. The Associate Academic Dean must be informed in writing by the instructor when an "I" grade is issued. If a student has an "I" grade that, may be rectified by a comprehensive remediation examination. This examination must be completed by the end of by the end of Wednesday of the first week of the following semester. An "I" grade earned for any other reasons must be satisfied by completion of the required coursework before the end of the next semester.

The approval of the Associate Academic Dean is required for the activities that will take longer than the first week of the next semester to complete. When the work is completed to the satisfaction of the instructor, the "I" grade will be changed to a letter grade. The instructor will forward a completed Grade Adjustment form for the grade change to the Associate Academic Dean for signature and then to the Registrar. Students, under special extenuating circumstances, (e.g., illness, leave of absence, etc.) will be temporarily granted an "I" grade in a course which they will need to resolve as above.

Laboratory examinations to complete missed work may be administered at a later time at the discretion of the faculty (with approval of the Associate Academic Dean or Associate Dean of Clinical Education), based upon availability of necessary laboratory materials. A grade not reported as completed within the time required by the school becomes an "F". Failure in any course in which an *Incomplete* was issued will (1) reflect in a grade of "F" for the semester in which the course originally took place, and (2) result in academic probation or suspension retroactive to the beginning of the semester in which the course was taken. If the "I" grade is not satisfactorily resolved, this may result in the failure to meet published prerequisites for another course. Therefore, a course schedule adjustment (drop) will be necessary. This may extend the academic program beyond four years.

# K. Make-up Exam Policy

Makeup examinations for excused absences will be given only during the first week after the end of the semester, at a time specified by the Associate Academic Dean. If more than one student needs to sit a makeup examination, the examination(s) will be administered simultaneously. There are no makeup examinations for unexcused absences. Students with an unexcused absence from



any examination will earn a zero grade for it. An excused absence is one for which there is valid official documentary evidence to support the absence.

## L. Reporting and Recording of Grades

Students may view final grades online via their Student Planning Portal account at the end of each term. Any error in grading, the omission of a course, etc. should be reported to the Office of the Registrar within two weeks following the end of the term. The Office of the Registrar does not record percentage scores for any course or test; it does, however, permanently record the letter grade earned by the student in every course he/she takes while in the School of Podiatric Medicine. Individual instructors must be contacted to obtain percentage scores earned in any particular course

# M. Family Educational Rights and Privacy Act (FERPA)

The following is a brief description of FERPA as provided by the Federal government:

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) is a Federal law that protects the privacy of students' education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education.

FERPA gives parents certain rights with respect to their children's education records. These rights transfer to the student when he or she reaches the age of 18 or attends a school beyond the high-school level. Schools are not required to provide copies of records unless, for reasons such as great distance, it is impossible for parents or eligible students to review the records. Schools may charge a fee for copies.

For more detailed information, and for information regarding disciplinary records and disclosing records in the event of a health or safety emergency, please see the Barry University Student Handbook at <a href="https://www.barry.edu/student-handbook/handbook/ferpa.html">https://www.barry.edu/student-handbook/handbook/ferpa.html</a>



# N. Academic Good Standing

# i. Good Standing

For a BUSPM student to be considered in good standing academically, he/she must maintain both a semester average and a cumulative GPA of at least 2.00, have no unresolved "F" grades, and have no outstanding financial obligations to the School of Podiatric Medicine or to Barry University.

Failed courses must be remediated as per the Remediation Policy (see below). If the student fails to successfully remediate a course, the course must be repeated in its entirety. The final transcript of a student must have no "F" grades. Unsatisfactory resolution of an "F" grade in a repeated course or withdrawal from any course that is repeated will lead to automatic dismissal from the Podiatric Medicine program. Repeated courses will usually result in extending a student's education beyond four years.

All coursework must be completed within six years from the time of first matriculation into the program. In order to graduate with a degree of Doctor of Podiatric Medicine, all candidates must have passed both Part I and Part II of the APMLE series and will have authorized the release of test results to the School of Podiatric Medicine.

## ii. Academic Disciplinary Actions

## Remediation Policy

All students who earn a final grade of "F" in a course will be required to take a Comprehensive Remediation Examination in the failed course. This remediation examination shall be administered on a set date in the first week of the semester immediately following the one in which the "F" grade was earned. Students must score a minimum of 70% to pass the Comprehensive Remediation Examination and the highest grade that can be recorded is a "C". This grade shall replace the previously earned "F" grade on their



transcript. Students who fail to achieve a minimum score of 70% in this exam shall retain the previously earned grade on their transcript and shall be subject to the consequences as presently described in the Graduate Catalog. (http://www.barry.edu/registrar/catalog-archives.html) This remediation option is only permitted for one course per semester and can be utilized for a maximum of three courses in the Program. Students cannot remediate any course more than once. If such a student fails to earn a minimum score of 70% then they shall be subject to the Academic Disciplinary Actions previously **described** in the Graduate Catalog.

#### Probation

A podiatric medical student will be placed on academic **probation** if he/she:

- 1. Earns a cumulative or semester GPA less than 2.0 but at least 1.0; **or**
- 2. Earns one "F" grade in any semester; or

Students who are not in good standing will be periodically reviewed by the FSEC to determine eligibility to remain in the program. The Dean, Associate Academic Dean or the Associate Dean of Clinical Education may require a student on probation to register for a limited course load, resulting in extending a student's education beyond four years.

Probation will be lifted after completion of the next semester of active registration if the student earns a cumulative GPA of 2.00 or higher with no new "F" grades. However, a student will not be in good standing until he/she has no unresolved "F" grades on his/her most current transcript.

Any student on probation or with unresolved grade deficiencies as previously stated will not proceed into the clinical rotations of the third year. If a student is repeating a course, a minimum of "C" grade must be earned in the repeated course. An "F" grade in, or withdrawal from, any course that is repeated will lead to dismissal from the University.



# Suspension

A podiatric medical student will be suspended if he/she:

- 1. Earns a GPA of less than 1.00 in any semester; **or**
- 2. Qualifies for academic probation for two consecutive semesters; **or**
- 3. Earns more than one "F" grades in any semester, regardless of GPA; **or**
- 4. Earns an F grade in any semester of extended academic coursework; **or**
- 5. Fails Gross Anatomy (SPM 590); or
- 6. Fails the AMPLE part I examination after two attempts

A student who has been suspended for academic reasons may petition for readmission. A suspended student is ineligible to take classes with degree-seeking status in the School of Podiatric Medicine for at least two semesters following suspension. The suspended student must petition the Dean for readmission at least four months before the beginning of the semester in which the student intends to resume course work. The Dean will present the student's petition for readmission to the FSEC. The decision of the FSEC is final. The Office of the Registrar must have approval of the Dean of the School of Podiatric Medicine to readmit a student following suspension.

## **Academic Dismissal**

# A podiatric medical student will be **dismissed from the program** if

#### he/she:

- Earns three "F" grades in any semester, regardless of GPA;
   or
- 2. Fails the APMLE Part I examination after three attempts; **or**
- 3. Suspended from the program twice; or
- 4. Fails a repeated course; or
- 5. Withdraws from a repeated course.



## O. Withdrawal

#### i. Course Withdrawal

Students should realize that the podiatric medical curriculum is intense, structured, and allows only minor modifications to be made. Addition of elective courses requires permission of the Associate Academic Dean or the Associate Dean of Clinical Education. A period of registration adjustment (i.e. add-drop) is provided to students during the first week of each semester. During this time, students may change their schedules with the written approval of their advisor, and the Associate Academic Dean or the Associate Dean of Clinical Education.

Withdrawal from a course may severely limit the number of courses a student may take in future semesters as many courses require perquisite. Withdrawal from a course is only permitted if one or more of its prerequisites are not satisfied. In such cases, the adjustment results in a removal of registration from the affected course and is done within the first two weeks of the semester. The only other mechanism for withdrawal from a course is if the student withdraws from the Program (see *Withdrawal from the Program* below). Withdrawal from a course for poor academic performance is not permitted.

A student who fails a prerequisite course will be withdrawn from subsequent courses that require its successful completion; this will be affected by administrative action shortly after the failure to successfully remediate the course (see *Remediation Policy* above). It will also extend a student's time in the Program. Advisor's and Dean's approvals and signatures are required in any case of schedule modification.

Students in extended programs are not permitted to drop or withdraw from courses once the courses have begun. Students who fail Gross Anatomy (SPM 590) will not be permitted to continue their studies until Gross Anatomy is passed. Students



must be enrolled in at least five credits of classes per semester to be considered full-time students in the podiatric program.

Students may not withdraw from clinical rotations, hospital rotations or clerkships due to failing or otherwise unsatisfactory grades. Refer to the *Clinical Rotation Training Manual* for further policies specific to clinical experiences.

## ii. Withdrawal from the Program

Withdrawal from the Program can be carried out at any time after consultation with the students' advisor and with the approval of the Associate Academic Dean.

Withdrawal from the Program is permitted only in the following cases:

- 1. Personal medical reasons;
- 2. Financial hardship;
- 3. Personal family hardship;
- 4. Student no longer wishes to continue training for the profession.

Withdrawal from a course for poor academic performance is not permitted. Students wishing to withdraw from the Program must complete a *Student Withdrawal Form* with the approval of their advisor, Associate Academic Dean, and the Dean. The date of withdrawal is the date on which the form is signed by the Dean. Students who withdraw from the Program on or before Friday of the tenth week of the fall and spring semesters (Friday of the seventh week in Summer Semester) will be receive a "W" grade for all incomplete courses; if the deadline falls on a University holiday, it will be extended to the next business day. Withdrawal after this date will result in students earning F grades for the uncompleted courses. These grades will be reflected on their transcript. It is the student's responsibility to initiate and complete the withdrawal process in a timely manner.

Students seeking to withdraw due to medical reasons should consult with their Academic Advisor and Associate Academic



Dean and the Office of the Dean of Students at Barry University, for the proper protocol for such withdrawals. Students who withdraw for aforementioned reasons #1-#3 are eligible to reapply for readmission to the Program. Students who withdraw for reason #4 will not be readmitted to the Program. To do so they must petition the Dean at least four months before the time of their return and provide documentary evidence to support their petition. In instances of return after withdrawing for medical reason, documentation from the treating physician indicating the readiness of the student to undertake the rigorous curriculum to be submitted to the Dean of Students at Barry University, for readmission to the University. Readmission to Barry University School of Podiatric Medicine is contingent upon this and requires the Dean of Students approval. The School of Podiatric Medicine makes no guarantees on the success of such petitions. Students who withdraw for reason #4 will not be readmitted to the Program.

# iii. Academic Programs in Excess of Four Years (Extended Programs)

Withdrawal and/or repeating of courses will usually result in extending a student's education beyond the minimum of 11 semesters. Students in extended programs will be assigned a special academic advisor. Students in academic programs in excess of four years generally take a reduced course load during the preclinical phase of their education, but they must enroll in at least 5 credits per semester to maintain full-time status for the purpose of financial aid eligibility. Overload course registrations are generally not allowed due to the intensity of the podiatric medical curriculum.

Students in extended programs are not eligible to withdraw from courses once the courses have begun. Should students earn an F grade, they will be dismissed (See statement in Academic Disciplinary Actions above).

Students may not earn a grade less than C in their first semester of



extended academic course work (i.e., the first semester in which they do not take all of the required courses); should such students earn a grade less than C, they will be suspended (See statement in Academic Disciplinary Actions above).

All first- and second-year course work must be completed within three years of matriculation. Pursuant to CPME accreditation requirements, no student may continue coursework beyond six years (17 semesters) of first matriculating into any podiatric medical program.

Students in extended programs will be billed for full tuition until they have paid for four complete years (11 semesters). Such students will be billed for one-half the annual tuition for each semester in excess of the eleven.

# P. Graduation Requirements

In order to graduate with a degree of Doctor of Podiatric Medicine, candidates must have:

- 1) Satisfactorily completed all pre-clinical science courses, clinical rotations and requirements, and externships/clerkship program requirements;
- 2) A GPA of 2.00 or greater with no outstanding F grades;
- 3) Satisfactorily passed the OSCE at the end of the third year of the curriculum;
- 4) Satisfactorily completed the Senior Exit Examination at the end of the fourth year of the curriculum;
- 5) Passed all parts of the APMLE series, and will have authorized the release of test results to the School of Podiatric Medicine;
- 6) Maintained acceptable professional standards (see *Professional Conduct Code*);
- 7) Fulfilled all responsibilities and financial obligations to Barry University and the School of Podiatric Medicine; and
- 8) Been recommended for graduation by the faculty to the Board of Trustees.



Recommendation for the D.P.M. degree is a discretionary right residing with the faculty/ administration but shall not be withheld arbitrarily. There is no contract, stated or implied, between the School of Podiatric Medicine and the students, guaranteeing that a degree will be conferred at any stated time, or at all. Diplomas are sent out 4-6 weeks after graduation date.

# Q. Student Complaints and Grievances

## i. Academic Appeals and Grievance

Students have the right to appeal any grade which they feel was inappropriately assigned. Students will be allowed a maximum of ten business days after the grade for a quiz or examination is made available to challenge that grade with the course instructor, unless otherwise specified in the course syllabus. If informal discussions with the faculty member do not resolve the appeal, the student must present, within fifteen business days of receipt of the grade in question, with supporting documentation, to the Associate Academic Dean of the School of Podiatric Medicine, who will convene an ad hoc Grade Appeals committee and will respond within 10 business days. If this response does not satisfy the student, the student may appeal in writing, within two business days, to the Dean of the School of Podiatric Medicine. The Dean will respond within five business days of receipt of the appeal. The decision of the Dean regarding the appeal is final. Students who do not challenge or appeal a particular grade within the appropriate time periods as described waive all future rights to appeal/challenge that grade. Nonacademic grievance and appeal procedures are outlined in the Barry University Student Handbook.

### ii. Professional Appeals and Grievance

Within their clinical rotations, students have the right to appeal a professional or behavioral sanction imposed by their Clinical Coordinator within two business days; the student may appeal to the Associate Dean of Clinical Education who will in turn respond within five business days, after consultation with the Dean. The decision of the Dean regarding the appeal is final. Students who do



not challenge or appeal a particular professional or behavioral sanction within the appropriate time periods as described waive all future rights to appeal/challenge of that sanction. Students suspended for professional or behavioral reasons are ineligible to reapply to the program.

#### iii. Non-Academic Grievance

The procedures for nonacademic grievances related to student conduct are outlined in the Barry University Student Handbook <a href="https://www.barry.edu/student-handbook/">https://www.barry.edu/student-handbook/</a>

# iv. Formal Student Complaint Policy

If a student wishes to file a formal complaint that is neither academic in nature nor related to student misconduct, the following procedure must be followed:

The student must submit in writing to the Office of the Associate Academic Dean a brief statement of the nature of the complaint and the resolution sought. The complaint statement must be signed by the student issuing the complaint and must include the appropriate contact information necessary for a response (a U.S. mailing address, email address and phone number); no anonymous complaints will be considered. The complaint should be submitted no more than 10 days from the event that forms the basis of the grievance.

The Associate Academic Dean will then meet with the student, along with the student's advisor, to discuss the complaint within 14 days of receipt of the written grievance. After this discussion, the Associate Academic Dean will submit in writing to the student the results of the discussion at the meeting and plans for further action, if any.

If the student is not satisfied with the response from the Associate Academic Dean, and wishes the grievance to be considered further, the student may appeal in writing to the Office of the Dean within 10 days of receipt of the Associate Academic Dean's response to



request a meeting with the Dean. A written response from the Dean indicating the result of this meeting will be forwarded to the student within 14 days after consideration of the grievance.

If the student is not satisfied with the response from the Dean, and wishes the grievance to be considered further, the student may appeal in writing to the Office of the Dean of Students within five days of receipt of the Dean's response. If the student is not satisfied with the response of the Dean of Students, the final appeal can be made to the Provost whose decision is final.

In the event that student is not satisfied with the corrective action taken by the offices above, the student may file a formal complaint with the accrediting agency, Council on Podiatric Medical Education (CPME), 9312 Old Georgetown Road, Bethesda, MD, 20814-1698; (301) 571-9200.

All records associated with student complaints will be maintained securely in the office of the Dean.

## R. Student Government GPA Requirements

Barry University School of Podiatric Medicine students who wish to represent their class as officers, representatives in the state level as the President or President-elect of the Florida Podiatric Medical Student Association, or be a nationally recognized delegate/alternate delegate of the American Podiatric Medical Student Association MUST currently have achieve a G.P.A of at least 3.0 to be eligible and must maintain a G.P.A. of at least 3.0 to continue in any of these positions. Notices of eligibility prior to all elections will be coordinated by the Office of the Associate Academic Dean. Failure to maintain a G.P.A. of at least 3.0 will lead to a forfeiture of position. Special elections will be held to fill the open position.



#### IX. Financial Aid Policies

At Barry University, the purpose of Student Account Services and the Office of Financial Aid is to act in partnership with students to provide the necessary guidance in financial planning related to enrollment. Information about loans, scholarships and other financial information is available through the Office of Financial Aid. Students bear the responsibility to seek out financial aid information. Students are encouraged to contact the Office of Financial Aid, at (305) 899-3673, or Student Account Services, at (305) 899-3585, for information and assistance. All students are assessed tuition and fees on a semester basis. All rates given are subject to change without notice. The following terms and conditions are financial requirements of the student's education related to this registration. Once the student formally registers for classes, he/she assumes the responsibility for understanding Barry University's official policies concerning schedule changes, satisfactory academic progress and the financial policies of the University as described in the Barry University Student Handbook <a href="https://www.barry.edu/student-handbook/">https://www.barry.edu/student-handbook/</a>

Registration constitutes a financial agreement between the student and the University. Tuition, fees and other charges incurred by the student, including but not limited to housing, meal plans, health insurance and bookstore charges ("Charges"), shall be added to the student's account. Any charges that are not covered by financial aid shall be the responsibility of the student and shall be paid within the term in which the charges incurred. Students assume responsibility for all costs incurred as a result of enrollment at Barry University. It is the student's responsibility to be aware of their account balance and financial aid information and maintain current valid postal address information at all times to ensure receipt of all University correspondence in a timely manner. Barry University recognizes the University email system as the primary electronic communication between the student and the University. Students are expected to check their email on a frequent and consistent basis in order to stay current with University-related communications. The University reserves the right to cancel registration of any student if a balance due from a previous term remains unpaid at the start of a subsequent term.

The University reserves the right to recover all costs related to the collection of delinquent accounts, including attorney fees.



# X. Tuition, Fee Schedule and Refund Policy

# A. Tuition and Fee Schedule

Tuition for the School of Podiatric Medicine is subject to annual review and revision.



FEES	1 <sup>st</sup> year	2 <sup>nd</sup> year	3 <sup>rd</sup> year	4 <sup>th</sup> year
Tuition	\$43,430	\$43,430	\$43,430	\$43,430
Student organizations and	\$10 - \$60 (est. per club	\$10-\$60 (est. per club	\$10 - \$60	\$10 - \$60 (est. per
club fees/dues (optional)	annually)	annually)	(est. per club	club annually)
			annually)	
American DataBank	\$30	\$30	\$30	\$30
Immunization Tracking				
Package	¢05.00			
Admissions Background Package	\$95.00			
Drug screening			\$35	\$35
FBI			\$30	\$30
				·
OIG, GSA, OFAC, SSN Trace			\$127	\$127
Clinical Rotation Tracking			\$10	\$10
Packet	A=0.44=	4	4	4
Occupational exposure	\$50 (\$25 per semester,	\$44	\$44	\$44
insurance	fall and spring only)	d 2002 ( )	62442 ( )	daaca ( )
Barry student health	\$2763	\$ 2963 (est.)	\$3113 (est.)	\$3263 (est.)
insurance Anatomy lab supplies	\$465 (est.) (scrubs 2	\$80 (scrubs 2 pairs)	\$80 (scrubs 2	\$80 (scrubs 2 pairs)
Anatomy lab supplies	pairs \$80, lab coat \$30,	\$80 (Scrubs 2 pairs)	pairs)	\$80 (Scrubs 2 pairs)
	gloves \$80, leg model		pairs	
	\$100, dissection kit with			
	instruments \$20,			
NA disalimeta was sute	anatomy atlas \$70)	¢1500/ast \		
Medical instruments	Ć425 /aa+ )	\$1500(est.)		
Required texts	\$425 (est.)	\$800 (est.)		
Supplemental study materials	\$800 (est.) (e.g. USMLE first aid	\$1900 (est.) (e.g. Principles and Practice		
materials	books, pocket podiatry	of Podiatric Medicine,		
	manual, , McMinn's Color	Handbook of Lower		
	Atlas of Foot & Ankle,	Extremity Infections, Bone		
	Atlas of Human Anatomy ,	and Joint Imaging,		
	Anatomy of the Lower Extremity)	Cutaneous Disorders of the Lower Extremities, foot		
	Extremity	model)		
Miscellaneous	\$15 ID replacement	,	\$60 (extra	
	fee		white coat)	
Externships, living expenses				\$44,000 (\$5500 per
for 6 to 8 months				month) (housing,
				food, transportation &
				airfare
Interview week in Chicago				\$1500 (est.)
Graduation application fee				\$250

National Boards	1st year	2nd year	3rd year	4th year
APMLE I-Written		\$925		
APMLE II-Written				\$925
APMLE II-CSPE				

National board exam fees are collected by the School of Podiatric Medicine from those students eligible to sit for the exams and are forwarded to the American Podiatric Medical Licensing Examiners with the exam applications. Students who fail an exam must retake that part at additional expense.

Residency applications	1st year	2nd year	3rd year	4th year
CASPR CRIP Application				\$350 - \$550 (based
				on how many



TOTAL DED VEAD	4 .	and	ord	ath
				_
				designated)
				residencies

TOTAL PER YEAR	1st year	2 <sup>nd</sup> year	3 <sup>rd</sup> year	4 <sup>th</sup> year
	\$67,5883 On campus	\$88,363 On campus	\$83,986	\$90,753
	\$88,783 Off campus	\$106,013 Off campus	\$101,086	\$117,351

# B. <u>Refund Policy</u>

# i. Total Withdrawal from the University

Students who register but do not attend classes, or who withdraw after attending classes for any reason, will not receive a refund unless they withdraw officially by submitting a written notice of withdrawal to the Office of the Associate Academic Dean of the School of Podiatric Medicine. The effective date of withdrawal will be the date on which the notice is received by the Associate Academic Dean, and the percentage of refund will be determined by this date.

Tuition, room and board fees will be refunded on this basis: If the student leaves within the first two weeks of the semester, 80% of the full semester charge is refunded; within the first three weeks, 60% is refunded; within the first four weeks, 40% is refunded; within the first five weeks, 20% is refunded. After the fifth week there is no refund.

Refundable credit must be claimed within one calendar year. For purposes of determining the percentage of refund, the first week of classes will be considered the start of the semester and upon which refunds will be based.

## ii. Withdrawal Policy for Individual Courses

Students who are withdrawn from any courses are not entitled to any refund.

#### iii. Medical Leave

Student who are placed on medical leave are not entitled to any claim or refund.

#### iv. Student Dismissal



A student dismissed for academic or disciplinary reasons at any time shall not be entitled to any claim or refund.

v. Special Course Fees Are Not Refundable

All fees, outside of tuition and room and board, are non-refundable.



# XI. Health, Safety and Security

## A. Health

Upon entry into the School of Podiatric Medicine, every student must upload the following documentation into American DataBank via the immunization tracking package within six months of matriculation:

- Statement of Good Health
- Flu shot
- Measles, Mumps and Rubella (MMR) vaccination, students must have two
  doses of MMR or a titer with a positive (immune) result. All titers must
  include a lab report.
- Tetanus/Diphtheria/Pertussis (TDAP): students must provide documentation of initial inoculation. After initial inoculation, students must receive the TD booster every ten (10) years.
- Hepatitis B vaccination series: students must have a Hep. B3 shot series or a titer with a positive (immune) result. All titers must include a lab report.
- Varicella (chickenpox) immunity by titer or evidence of vaccination
- PPD screening for tuberculosis or chest X-ray if PPD is positive (if PPD is positive, students must also submit a "symptom free statement" from their physician).
- Proof of health insurance coverage (picture of front/back of insurance card)
  effective in the State of Florida along with a waiver form submitted to the
  Student Health Services system.

Each student must update their PPD, influenza status and health insurance every 12 months, or more frequently if required by a clinical site to which the student is assigned.

### B. Student Health Insurance

Every student in a clinical program must secure and retain primary care health insurance coverage that meets the Barry University requirements. All full-time graduate students are required to be fully insured in the state of Florida. To assist with this process, all full-time graduate students will be front billed every semester for student health insurance through United Health Care Student Resources. If you have private insurance coverage that meets the waiver standards,



you may waive the student health insurance fee to have the semester amount credited back to your account.

Students MUST complete the insurance waiver prior to the first 30 days of the fall semester. The insurance cost is nonrefundable after the waiver period. Go <a href="https://www.barry.edu/media/p1ddybji/how-to-waive.pdf">https://www.barry.edu/media/p1ddybji/how-to-waive.pdf</a> for information on how to waive the Student Health Insurance and to upload your insurance card. This waiver will need to be completed with each subsequent semester you are registered.

# If you already have your own insurance:

ALL students with private insurance that meets the University requirement for coverage who wish to opt out of the Barry University sponsored Student Insurance plan, may complete the insurance waiver and provide proof of health insurance prior to the first 30 days of the semester. Once an approved waiver is submitted the student account will be credited for the cost of the Student Health Insurance Plan. You will be notified immediately following waiver submission if your waiver does not meet the University requirement. Proof of insurance (front and back of card( must also be uploaded via American DataBank website.

# Students may waive the student health insurance if:

- Your health insurance company must be licensed to do business in the State of Florida and coverage extends to the county where you are attending class.
- Coverage must remain in effect while enrolled for classes. (the premium must be paid in full for the semester in which you are enrolled).
- Full coverage with access to a general practitioner or specialist (Hospital Emergency Room/Urgent Care Center only coverage is not accepted).
- Inpatient hospital coverage for Medical and Mental Health issues.
- The insurance plan must pay for services directly to physicians and/or hospitals. (*reimbursable plans are not accepted*).
- Prescriptive Medication Coverage (Unlimited coverage with copayment)
- An individual deductible not to exceed \$2,500.00 per policy year (plans with a Health Savings Account (HSA) and/or a Federal Savings Account (FSA), are exempt from this requirement).
- Outpatient Mental Health and Substance Abuse coverage.

Note: International plans are not accepted. International students may not waive this coverage unless they have private health insurance coverage with a U.S. insurance plan (i.e., Aetna, Cigna, BCBS or United Healthcare). International students with US



plans must also have Medical Evacuation and Repatriation benefits included in their plan or purchase an additional supplemental plant that includes these benefits.

For More information regarding Waiver Requirements please go to <a href="https://www.barry.edu/media/p1ddybji/how-to-waive.pdf">https://www.barry.edu/media/p1ddybji/how-to-waive.pdf</a>.

# i. Accident or injury while on clinical rotation

Students are not considered to be employees of either the podiatry program or its training affiliates. **Therefore, there is no disability coverage under Workers' Compensation or otherwise.** Students are strongly encouraged to obtain their own disability insurance coverage.

However, as a benefit to our students, all students enrolled in the Podiatric Medicine program are automatically covered under the Student Accident Plan through Mutual of Omaha for the full academic year. The billing for this plan, \$22 per semester, will be done twice a year, once in the Fall Semester and once in the Spring Semester. This plan will provide coverage up to \$5,000 per injury at an off-campus provider. This plan cannot be waived. However, placement on this plan does not eliminate the requirement for students to maintain a personal primary insurance plan or to complete the waiver for primary insurance.

If students are injured during the clinical training phase the clinician and/or the site management should be notified. When the site is a clinical affiliate with a defined incident reporting procedure, the student is to complete that institution's policy. The information must be documented in the Barry University School of Podiatric Medicine Incident Report and forwarded to the Associate Dean of Clinical Education's office within 48 hours, unless circumstances warrant additional time. A legible copy of the incident report must be faxed or emailed to the program to the attention of the Associate Dean of Clinical Education. The form and instructions for it can be accessed through the student's Canvas account attached in the Clinical Training Manual. If the injury is of



a serious nature, the student should contact the clinical faculty/staff to immediately notify the program.

The student is required to complete and deliver an Accident Claim Form to Barry University Health Services Center within 48 hours of the incident. The student must keep copies of all documentation submitted.

The student is to see his/her personal healthcare provider for follow-up evaluation and management and is encouraged to request that a report regarding the student's ability to safely return to the clinical setting be sent to the Associate Dean of Clinical Education. Students needing a healthcare referral may contact Barry University Student Health Services. If the injury is urgent or emergent in nature, the student should seek care immediately at the nearest suitable facility.

ii Accidental exposure to infectious diseases and blood-borne pathogens

The risk of contracting communicable and infectious disorders is a reality of clinical medicine. Strict adherence to standard precautions can reduce but not completely eliminate the risk.

Students who accidentally sustain a cut, needle stick, mucous membrane splash, or other exposure involving the blood or body fluids of another person, or have other potentially infective exposures (e.g., tuberculosis, meningitis) while on rotation, must notify the attending clinician and the office of the Associate Dean of Clinical Education immediately. The Associate Dean of Clinical Education or another faculty member of the program must respond immediately. The student will be referred for medical evaluation, lab tests, and, if necessary, treatment. Depending on the mode(s) of potential transmission, a request for patient consent to testing may be made. Students should be aware that clinical sites do not accept liability for any illness or injury subsequent to such accidental exposures. If the student is in a hospital-based clinical program, the student will be sent to the emergency room for



evaluation and treatment. A Barry University Incident report form must be completed immediately by the student and the situation will be assessed.

#### It should be noted that:

Liver Function Test

Post-exposure testing will be given to both parties involved regarding transmission and protection. Consent will be obtained to draw blood for the following tests:

Hepatitis B antibodies (HBsAb) initially
Hepatitis C antibodies (HCsAb) initially
Hepatitis B antigen (HBsAg) at 12 we
HIV Panel initially

at 12 weeks initially, threemonths and sixmonths postexposure

## iii. Covid-19 concerns re: clinical rotations:

As students, you have chosen to dedicate yourself to the field of podiatric medicine. Podiatric Medicine requires face-to-face training for effective clinical instruction. All clinical rotations have resumed for the 2020-2021 calendar year. However, owing to the unique circumstances of the Covid-19 pandemic, there are certain considerations to student clinical rotations. We acknowledge the unique educational challenges associated with the COVID-19 pandemic for students in the Barry University School of Podiatric Medicine program. In consideration of the safety and welfare of all members of the Barry community, as well as our larger communities, we are providing this guidance to support safe clinical education experiences.

1. Student clinical rotations are completely voluntary. Students who wish to defer clinical training are asked to please contact the instructor (Introduction to Patient Care) or the Academic Dean of Clinical Education for 3<sup>rd</sup> or 4<sup>th</sup> year students.



- 2. Students who wish to continue their clinical rotations will be given detailed information regarding specific hospital/clinical policies and procedures regarding maintaining their safety. Students must adhere to all policies and procedures, including all personal protection equipment requirements which will be provided to you by the program.
- 3. There are no contact tracing requirements, however, students who experience COVID-19 symptoms, flu-like or cold symptoms, must report these symptoms to Student Health Services by calling 305-899-3750 or emailing:

  healthservices@barry.edu. See http://www.barry.edu/prepare/COVID-19/. Students with active symptoms or positive COVID-19 test results, must self-quarantine for at least 14 days following the start of the COVID-19 symptoms. At the start of the self-quarantine, students must also notify their instructor or the Associate Dean of Clinical Education so that virtual clinical instruction/simulation can begin so that there are no interruptions in your clinical education.
- 4. Students must provide proof of a negative test before they can resume clinical rotations. Testing is available through the student health services by calling 305-899-3750 or emailing: healthservices@barry.edu.
- 5. 3<sup>rd</sup> and 4<sup>th</sup> year, please see BUSPM Return to Clinic Student Letter which is available in the 2020-2021 Clinical Training Manual or on the main BUSPM website in the Office of Clinical Education in reference to temporary absences and any required make-up days based upon the self-quarantine.

The University and the Barry University School of Podiatric Medicine program are committed to providing you with a safe educational experience. However, a variety of personal and societal issues have arisen as the nation responds to the COVID-19 pandemic that affects your education. We recognize that many members of the Barry University community are confronting new challenges they did not previously face.



Your active participation in your educational program, particularly a +program in the healthcare profession, is at your discretion. If you need to stop progressing in your current program, faculty and staff are available to assist you in finding alternative educational experiences. However, cessation of clinical rotations will lead to extension of the program beyond four years based on CPME guidance. Additionally, students are expected to communicate with program administration, clinical coordinators and/or clinical instructors any concerns they have related to the ability to deliver safe and competent podiatric medical services at any of the clinical experience sites. The faculty, administration and I are here to support and assist you in resolving these concerns.

# C. Campus Safety

Location of the University Public Safety Office:

Landon 100 Student Union Center 11300 North Miami Ave. 305-899-3333 Investigation - Landon Student Union, 100 Kevin Curran, Director Public Safety and Emergency Management

Emergency Numbers:
Barry University Campus Security (305) 899-3333
Miami-Dade County Emergency 9-911
Miami Shores Police Department (305) 759-2468

The primary responsibility of the Public Safety Department is to help protect people and property. Crime prevention and awareness is not the sole responsibility of Public Safety. It is a joint venture with the community that it serves. The Public Safety Department provides security information, assistance, and service to aid campus occupants in the protection process.

No person or location is 100 percent safe. By utilizing stationary and patrolling officers, Public Safety observes and detects crimes and threats on the campus. The security personnel of the Public Safety Department patrol all parking areas and



provide roadside assistance such as unlocking vehicle doors and jumpstarting dead batteries. Additionally, Public Safety will escort individuals upon request.

The security personnel of the Public Safety Department are not police officers and are not empowered as such. Public Safety's function is primarily informational and advisory rather than regulatory. The primary protective means restricting campus access and use to only those authorized persons for reasonable and safe purposes. Public Safety and Maintenance coordinate the inspection and maintenance of locks, doors, windows, lights and alarms on campus.

Barry University Public Safety is online; refer to <a href="https://www.barry.edu/public-safety/">https://www.barry.edu/public-safety/</a> for more information.

