



**SCHOOL OF
OSTEOPATHIC
MEDICINE**

University of Medicine & Dentistry of New Jersey

DRAFT 6 (Final)

August 10, 2009

SOM STUDENT HONOR CODE OF PROFESSIONAL CONDUCT

PREAMBLE

We, the students of UMDNJ-School of Osteopathic Medicine, subscribe to the high standards of conduct that have evolved over the years within the osteopathic medical profession. UMDNJ-SOM students join the faculty and administration in accepting personal and collective responsibility for maintaining standards of professionalism, including honesty, integrity, respect, and accountability, which are essential attributes to becoming a physician. Abiding by these principles begins on the first day of medical training.

The following code provides specific guidelines that all students are expected to review and to abide by. Students will be required to sign an agreement acknowledging that they have read and understood the following Code of Professional Conduct. This Code of Professional Conduct will be used by school administrators when evaluating a student's performance or any deviations from expected behavior.

GENERAL PRINCIPLES

- Each student must demonstrate integrity and honesty in all academic and professional matters.
- Each student must be aware of and abide by all applicable federal, state, and local civil and criminal laws and regulations.
- Each student must be aware of and abide by all University and School policies, rules, procedures and standards, both general and academic.
- Each student must truthfully represent his/her work and the work of others.
- Each student must demonstrate respect in all interactions with faculty, staff, students, patients and other members of the health care team.
- Each student must demonstrate respect for property at all times.
- Each student must take responsibility to assess his/her own actions and the actions of others and report violations of this Honor Code to a member of the SOM Honor Council or the Assistant Dean for Student Affairs.
- In a situation where it is unclear whether an individual's conduct is unprofessional, it is a student's responsibility to seek clarification from a member of the SOM Honor Council or the Assistant Dean for Student Affairs.

I. EXAMPLES OF VIOLATIONS OF ACADEMIC INTEGRITY

CHEATING occurs when an individual misrepresents his/her mastery of the subject matter or assists another to do the same. Instances of cheating include, but are not limited to:

1. Copying another's work and submitting it as one's own on an examination, paper or other assignment;
2. Allowing another to copy one's work;
3. Using unauthorized materials during an examination or evaluation such as a textbook, notes, or any electronic devices.
4. Collaborating with another individual by giving or receiving unauthorized information during an examination or evaluation.
5. Reproducing or distributing unauthorized information about an examination or evaluation.
6. Changing, altering, or falsifying a graded examination, completed evaluation, grade report form or transcript.
7. Taking an exam for another or allowing another to take an exam for oneself.

PLAGIARISM is an act whereby an individual represents someone else's words, ideas, or data, whether oral, in print or in electronic form as his/her own work. This includes internet and web-based resources. Examples include, but are not limited to:

1. Using the exact words of another source without quotations and appropriate referencing;
2. Using the ideas, opinions, data or theories of another without a reference, even if completely paraphrased;
3. Using charts, diagrams, and/or any image from another source without revision, permission from the author and/or appropriate referencing;

FABRICATION/FALSIFICATION is the deliberate use of false information or withholding of information with the intent to deceive. Examples include, but are not limited to:

1. Using information from a source other than the one referenced;
2. Listing of references in a bibliography that were not used in a paper;
3. Falsifying or withholding data in experiments, research projects, notes, reports, or other academic exercises;
4. Falsifying or withholding data in patient charts, notes or records;
5. Submitting papers, reports or projects prepared in whole or part by another;
6. Falsifying records for the purposes of personal gain.

II. EXAMPLES OF UNPROFESSIONAL BEHAVIOR include, but are not limited to:

1. Failing to address respectfully the faculty, staff, and peers in both the academic and clinical settings.
2. Behaving or speaking in a manner which could be interpreted as demeaning or disrespectful regarding a patient.
3. Failure to adhere to HIPAA or FERPA policies.
4. Disruptive behavior which includes, but is not limited to, using foul language, yelling, mock fighting, threatening behavior or other forms of intimidation, public displays of affection, or other inappropriate actions.
5. Failing to attend required student/intern teaching sessions, i.e. morning report, grand rounds, and lectures without direct permission.
6. Failure to adhere to required rotation schedules, including assigned daily hours and after hour call responsibilities unless specifically excused.
7. Failure to adhere to dress code and standards set forth by the school and its clinical affiliates.

III. OTHER ACTS OF MISCONDUCT include, but are not limited to:

1. Forging an instructor's signature or initials on examinations, evaluations, lab reports or other academic materials, and forgery, alteration, or misuse of School documents, records or identification.
2. Misrepresenting a clinical rotation in scheduling elective or selective rotations.
3. Unauthorized entry, or assisting another in unauthorized entry, into a University building, office or confidential computer file for any purpose;
4. Obtaining, distributing, accepting or reviewing examinations, lab reports or other confidential academic materials without prior and explicit consent of the instructor;
5. Submitting written or computer work to fulfill requirements of more than one course without the prior and explicit permission of both instructors.
6. Impeding the progress of another by sabotaging their work (written or computer data, laboratory experiments, etc.), deliberately providing false or misleading information, or withholding or hiding information, books or journals;
7. Obstruction or disruption of teaching, research, administration, procedures, or other School activities;
8. Theft, damage, or the threat of damage to another person's property;
9. Any action that harms, threatens bodily harm or presents an imminent danger to another person;
10. Possession or use of firearms, explosives, dangerous weapons on university property in violation of federal, state or local law or university regulations.

11. Use, possession, prescription, or distribution of drugs not pursuant to the laws of the state or federal statutes;
12. Violations of any established UMDNJ policies or regulations

IV. PATIENT CARE

Students shall also adhere to the following Code of Ethics of the American Osteopathic Association. The American Osteopathic Association has formulated this Code to guide its member physicians in their professional lives. The standards presented are designed to address the osteopathic physician's ethical and professional responsibilities to patients, to society, to the AOA, to others involved in healthcare and to self.

Further, the American Osteopathic Association has adopted the position that physicians should play a major role in the development and instruction of medical ethics.

CODE OF ETHICS OF THE AMERICAN OSTEOPATHIC ASSOCIATION

Section 1. The physician shall keep in confidence whatever she/he may learn about a patient in the discharge of professional duties. The physician shall divulge information only when required by law or when authorized by the patient.

Section 2. The physician shall give a candid account of the patient's condition to the patient or to those responsible for the patient's care.

Section 3. A physician-patient relationship must be founded on mutual trust, cooperation, and respect. The patient, therefore, must have complete freedom to choose her/his physician. The physician must have complete freedom to choose patients whom she/he will serve. However, the physician should not refuse to accept patients because of the patient's race, creed, color, sex, national origin or handicap. In emergencies, a physician should make her/his services available.

Section 4. A physician is never justified in abandoning a patient. The physician shall give due notice to a patient or to those responsible for the patient's care when she/he withdraws from the case so that another physician may be engaged.

Section 5. A physician shall practice in accordance with the body of systematized and scientific knowledge related to the healing arts. A physician shall maintain competence in such systematized and scientific knowledge through study and clinical applications.

Section 6. The osteopathic medical profession has an obligation to society to maintain its high standards and, therefore, to continuously regulate itself. A substantial part of such regulation is due to the efforts and influence of the recognized local, state and national associations representing the osteopathic medical profession. A physician should maintain membership in and actively support such associations and abide by their rules and regulations.

Section 7. Under the law a physician may advertise, but no physician shall advertise or solicit patients directly or indirectly through the use of matters or activities, which are false or misleading.

Section 8. A physician shall not hold forth or indicate possession of any degree recognized as the basis for licensure to practice the healing arts unless he is actually licensed on the basis of that degree in the state in which she/he practices. A physician shall designate her/his osteopathic school of practice in all professional uses of her/his name. Indications of specialty practice, membership in professional societies, and related matters shall be governed by rules promulgated by the American Osteopathic Association.

Section 9. A physician should not hesitate to seek consultation whenever she/he believes it advisable for the care of the patient.

Section 10. In any dispute between or among physicians involving ethical or organizational matters, the matter in controversy should first be referred to the appropriate arbitrating bodies of the profession.

Section 11. In any dispute between or among physicians regarding the diagnosis and treatment of a patient, the attending physician has the responsibility for final decisions, consistent with any applicable osteopathic hospital rules or regulations.

Section 12. Any fee charged by a physician shall compensate the physician for services actually rendered. There shall be no division of professional fees for referrals of patients.

Section 13. A physician shall respect the law. When necessary a physician shall attempt to help to formulate the law by all proper means in order to improve patient care and public health.

Section 14. In addition to adhering to the foregoing ethical standards, a physician shall recognize a responsibility to participate in community activities and services.

Section 15. It is considered sexual misconduct for a physician to have sexual contact with any current patient whom the physician has interviewed and/or upon whom a medical or surgical procedure has been performed.

Section 16. Sexual harassment by a physician is considered unethical. Sexual harassment is defined as physical or verbal intimation of a sexual nature involving a colleague or subordinate in the workplace or academic setting, when such conduct creates an unreasonable, intimidating, hostile or offensive workplace or academic setting.

Section 17. From time to time, industry may provide some AOA members with gifts as an inducement to use their products or services. Members who use these products and services as a result of these gifts, rather than simply for the betterment of their patients and the improvement of the care rendered in their practices, shall be considered to have acted in an unethical manner.

Section 18. A physician shall not intentionally misrepresent himself/herself or his/her research work in any way.

Section 19. When participating in research, a physician shall follow the current laws, regulations and standards of the United States or, if the research is conducted outside the United States, the laws, regulations and standards applicable to research in the nation where the research is conducted. This standard shall apply for physician involvement in research at any level and degree of responsibility, including, but not limited to, research, design, funding, participation either as examining and/or treating provider, supervision of other staff in their research, analysis of data and publication of results in any form for any purpose.